

002 PAR MO. DAY YR. 003 U.S. OBLIGATION SPAN 004 PROJECT TITLE
 AS OF: **2 30 69** FY **68** Thru FY **71** **Family Welfare Planning - Oral Contraceptives**
 005 COOPERATING COUNTRY - REGION - AID/W OFFICE **India NESASBN-25920** **3860332031002** **A.I.D. Reference Center Room 1656057**

006 FUNDING TABLE

AID DOLLAR FINANCING-OBLIGATIONS (\$000)	TOTAL	CONTRACT (NON-ADD)	PERSONNEL SERVICES			PARTICIPANTS		COMMODITIES		OTHER COSTS	
			AID	PASA	CONTRACT	DIR. PASA	CONTRACT	DIR. PASA	CONTRACT	DIR. PASA	CONTRACT
CUMULATIVE NET THRU ACTUAL YEAR (FY 1969)	274	40	27	-	40	-	-	207	-	-	-
PROPOSED OPERATIONAL YEAR (FY 1970)	71	21	-	-	21	-	-	50	-	-	-

CGC VALUE OF P.L. 480 COMMODITIES (\$000) → Thru Actual Year : Operational Year Program :

007 IMPLEMENTING AGENCY TABLE
 If contractors or participating agencies are employed, enter the name and contract or PASA number of each in appropriate spaces below; in the case of voluntary agencies, enter name and registration number from M.O. 1551.1, Attachment A. Enter the appropriate descriptive code in columns b and c, using the coding guide provided below.

TYPE CODE b	TYPE CODE c	a. IMPLEMENTING AGENCY	TYPE CODE		d. CONTRACT/PASA/VOLAG NO.	e. LEAVE BLANK FOR AID/W USE
			b.	c.		
1. U.S. CONTRACTOR 2. LOCAL CONTRACTOR 3. THIRD COUNTRY CONTRACTOR 4. PARTICIPATING AGENCY 5. VOLUNTARY AGENCY 6. OTHER:	0. PARTICIPATING AGENCY 1. UNIVERSITY 2. NON-PROFIT INSTITUTION 3. ARCHITECTURAL & ENGINEERING 4. CONSTRUCTION 5. OTHER COMMERCIAL 6. INDIVIDUAL 7. OTHER:	1. Dr. Benjamin Branch	1	6	AID/nesa-429	
		2.				
		3.				

PART I - PROJECT IMPACT

I-A. GENERAL NARRATIVE STATEMENT ON PROJECT EFFECTIVENESS, SIGNIFICANCE & EFFICIENCY.

This summary narrative should begin with a brief (one or two paragraph) statement of the principal events in the history of the project since the last PAR. Following this should come a concise narrative statement which evaluates the overall efficiency, effectiveness and significance of the project from the standpoint of:

- (1) overall performance and effectiveness of project implementation in achieving stated project targets;
- (2) the contribution to achievement of sector and goal plans;
- (3) anticipated results compared to costs, i.e., efficiency in resource utilization;
- (4) the continued relevance, importance and significance of the project to country development and/or the furtherance of U.S. objectives.

Include in the above outline, as necessary and appropriate, significant remedial actions undertaken or planned. The narrative can best be done after the rest of PART I is completed. It should integrate the partial analyses in I-B and I-C into an overall balanced appraisal of the project's impact. The narrative can refer to other sections of the PAR which are pertinent. If the evaluation in the previous PAR has not significantly changed, or if the project is too new to have achieved significant results, this Part should so state.

008 NARRATIVE FOR PART I-A (Continue on form AID 1020-25 I as necessary):

a/ Continuing project; requirement to be determined.

MISSION DIRECTOR APPROVAL → SIGNATURE DATE

Unclassified

386-51-580-332.3

PART I-B - PROJECT EFFECTIVENESS

009

I-B-1 - OUTPUT REPORT AND FORECAST - (See detailed instructions)

1. CODE NO. AID/W USE ONLY	2. This section is designed to record progress toward the achievement of each project output target which was scheduled in the PIP, Part II. Where progress toward a target is significantly greater or less than scheduled, describe reason(s) beneath the target.	ACTUAL AND PLANNED OUTPUTS (ALL DATA CUMULATIVE)				6. PROJECTED TOTAL FOR PROJECT LIFE
		3 ACTUAL CUM. TO DATE	4. AS OF PRIOR December 31, 1969		5. PLANNED BY NEXT JUNE 30	
			a. PLANNED	b. ACTUAL		
	<p>1. Assist the GOI conduct an initial feasibility study among a representative sample of 100,000 women to determine the acceptance of oral contraception by Indian women as a supplement to other methods.</p> <p>The Pilot Project was completed in late 1969. Against the target of 100,000 women originally set by the GOI, only 20,000 participated. The results of the Pilot Project -- although not exciting -- were encouraging and support the expansion of the pill program. However, due primarily to the "cautious pill policy" of the GOI and the more recent adverse publicity-- especially in the Western press -- a mass pill program has not yet begun in India. There now are 300 centers distributing orals, but the GOI does not plan to open additional centers at this time, pending a policy decision on the pill program. Of the 1,000,000 cycles of oral contraceptives supplied by USAID, 300,000 cycles have been distributed so far leaving a balance of 700,000 cycles (500,000 cycles OVULEN and 200,000 OVRAL) in the warehouse. Recently the GOI Drug Controller ruled that pills with more than 50 mcg estrogen content should no longer be used for contraceptive purposes, thus making the entire stock of OVULEN obsolete. USAID responded negatively to a GOI request to replace these 100 mcg pills as there remains 200,000 cycles of OVRAL in stock with a</p>	300,000	400,000 (cycles of orals used)	200,000	500,000	500,000
		20,000 women	-	-	-	20,000 women

Unclassified

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386-51-580-332.2

PART I-B - PROJECT EFFECTIVENESS

I-B-1 - OUTPUT REPORT AND FORECAST - (See detailed instructions)

1. OBJECTIVE	2. This section is designed to record progress toward the achievement of each project output target which was scheduled in the PIP, Part II. Where progress toward a target is significantly greater or less than scheduled, describe reason(s) beneath the target.	3. ACTUAL AND PLANNED OUT			4. DATA CUMULATIVE	
		3. ACTUAL CUM. TO DATE	4. AS OF PRIOR JUNE 30		5. PLANNED BY NEXT JUNE 30	6. PROJECTED TOTAL FOR PROJECT LIFE
			a. PLANNED	b. ACTUAL		
	<p>diminishing low draw-down. (The GOI plans to distribute the entire OVULEN stock to the Obstetrics/Gynecology Departments for use in gynecological cases.)</p> <p>2. Assist the GOI to determine characteristics of women willing to accept and continue to practice oral contraception.</p> <p>We await the Ministry's acceptance and clearance of the pilot project results and inclusion of the use of orals as a method in all clinics. This does not seem likely in the near future for reasons stated above.</p> <p>3. Provide experienced advice to the Department of Family Planning and physicians and para-medicals in administrating a hormonal contraception program, including in-service training in the use and supervision of oral contraceptives, for approximately 500 medical and 1000 para-medical personnel serving in 500 centers.</p> <p>(This phase of the program has been concluded. However, additional personnel, both medical and para-medical, will need to be trained should the GOI decide to sanction and expand the pill program.)</p>					

300 centers
550 medicals
550 para-medicals

300 centers
550 medicals
550 para-medicals

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PART I-B - Continued

010

B.2 - OVERALL ACHIEVEMENT OF PROJECT TARGETS

Place an "X" within the bracket on the following seven-point scale that represents your judgment of the overall progress towards project target



PART I-C - PROJECT SIGNIFICANCE

011

C.1 - RELATION TO SECTOR AND PROGRAM GOALS (See detailed instructions M.O. 1026.1)

This section is designed to indicate the potential and actual impact of the project on relevant sector and program goals. List the goals in col. b and rate potential and actual project impact in cols. c and d.

a. CODE NO. (AID/W USE ONLY)	SCALE FOR COLUMN c: 3= Very Important; 2= Important; 1= Secondary Importance SCALE FOR COLUMN d: 3= Superior/Outstanding; 2= Adequate/Satisfactory/Good; 1= Unsatisfactory/Marginal	c. POTENTIAL IMPACT ON EACH GOAL IF PROJECT ACHIEVES TARGETS	d. ACTUAL IMPACT ON GOAL TO DATE RELATIVE TO PROGRESS EXPECTED AT THIS STAGE
	b. SECTOR AND PROGRAM GOALS (LIST ONLY THOSE ON WHICH THE PROJECT HAS A SIGNIFICANT EFFECT)		
	(1) Assist the GOI to create programs that will inform, educate and motivate 90 percent of India's reproductive age married population, currently estimated at 100 million couples, to become	2	1
	(2) family planning acceptors. Assist the GOI to train and equip the family planning personnel necessary to carry out these activities.	2	2
	(3) Assist the GOI to measure and appraise all phases of the family planning program, the declared ultimate goal of which is to reduce the country's	2	2
	(4) annual rate of population increase from an estimated 3.5 percent to 1.5% as soon as possible. Assist the GOI to provide family planning services - clinical and nonclinical - for these couples.	2	1

For goals where column c. is rated 3 or 2 and column d. is rated 1, explain in the space for narrative. The narrative should also indicate the extent to which the potential impacts rated 3 or 2 in column c. are dependent on factors external to the achievement of the project targets, i.e., is there a substantial risk of the anticipated impact being forestalled by factors not involved in the achievement of project targets. If possible and relevant, it also would be useful to mention in the narrative your reading of any current indicators that longer-term purposes, beyond scheduled project targets, are likely or unlikely to be achieved. Each explanatory note must be identified by the number of the entry (col. b) to which it pertains.

012 NARRATIVE FOR PART I-C.1 (Continue on form AID 1020-25 I):

The project is important to all the major family planning goals. The project's impact on the major goals - particularly supply of services - has been less than anticipated due to the lag in the implementation of the project.

Concerning factors external to the project which threaten its impact on the sector goals, there has been wide publicity given to data on pills as a possible cause of thrombo-phlebitis and carcinoma of the cervix. This has reinforced the already strong caution of Indian doctors toward pills, perhaps engendered by the lingering bad taste of the IUCD "setback".

In the face of sensational press stories, interpreted as documenting a condemnation of pills, it has been difficult for GOI officials, physicians and family planning workers, to accept the USAID medical educator's insistence and published opinions that recent charges represent no more than a step forward in the orderly progress of development of a new contraceptive

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PART I-C -- Continued

C.2 - GENERAL QUESTIONS

These questions concern developments since the prior PAR. For each question place "Y" for Yes, "N" for No, or "NA" for Not Applicable in the right hand column. For each question where "Y" is entered, explain briefly in the space below the table.	MARK IN THIS COL.
013 Have there been any significant, unusual or unanticipated results not covered so far in this PAR?	Y
014 Have means, conditions or activities other than project measures had a substantial effect on project output or accomplishments?	Y
015 Have any problems arisen as the result of advice or action or major contributions to the project by another donor?	N
016 If the answer to 014 or 015 is yes, or for any other reason, is the project now less necessary, unnecessary or subject to modification or earlier termination?	N
017 Have any important lessons, positive or negative, emerged which might have broad applicability?	Y
018 Has this project revealed any requirement for research or new technical aids on which AID/W should take the initiative?	Y
019 Do any aspects of the project lend themselves to publicity in newspapers, magazines, television or films in the United States?	N
020 Has there been a lack of effective cooperating country media coverage? (Make sure AID/W has copies of existing coverage.)	Y

021 NARRATIVE FOR PART I-C.2 Identify each explanatory note by the number of the entry to which it pertains. (Continue on form AID 1020-25 1 as necessary):

- 013-014 - The adverse publicity in the press and medical circles has made the already conservative GOI official approach to orals even more rigid.
- 017 - Commodities must be ordered in a phased manner related to the various stages of project implementation. This will permit cancellation of part of the order if the project does not progress satisfactorily or project data shows reduced need for commodities. This is true especially of pilot demonstration activities such as the orals project.
- 018 - A coordinated central "one-roof" international Research Center in Human Reproduction is a very serious need.
- 020 - There is a reluctance on the part of the GOI (for reasons unknown) to publicize the study. Thus a broad spectrum of women are not aware of the availability of pills. This contrasts with the frequent publicity given to problems of orals.
- 013 - Pilot study results were extraordinarily positive, showing excellent acceptance and virtual 100% effectiveness of orals. Most impressive is the 64% 1 year continuation rate in this somewhat urban-weighted sample. This compares favorably with any known similar report published elsewhere.

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PART II - IMPLEMENTATION REPORT

II-A - STATUS OF SCHEDULE

022 A-1 - INDIVIDUAL ACTIONS (See detailed instructions M.O. 1026.1). This is a listing of major actions or steps which were scheduled for physical start or continuing implementation in the reporting period as reflected in the Project Implementation Plan, Part I.

(a)		(b) STATUS - PLACE AN "X" IN ONE COLUMN		
PIP ITEM NO.	MAJOR ACTIONS OR STEPS; CAUSES AND RESULTS OF DELAYS; REMEDIAL STEPS	(1) BEHIND SCHEDULE	(2) ON SCHEDULE	(3) AHEAD OF SCHEDULE
	<p>The pilot study has been completed. We now await GOI decision on expansion of the pill program.</p>			

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PART II - Continued

023

II-A.2 - OVERALL TIMELINESS

In general, project implementation is (place an "X" in one block):

BLOCK (c): If marked, place an "X" in any of the blocks one thru eight that apply. This is limited to key aspects of implementation, e.g., timely delivery of commodities, return of participants to assume their project responsibilities, cooperating country funding, arrival of technicians.

(a) On schedule	
(b) Ahead of schedule	
(c) Behind schedule	X
(1) AID/W Program Approval	
(2) Implementing Agency (Contractor/Participating Agency/Voluntary Agency)	
(3) Technicians	
(4) Participants	
(5) Commodities (non-FFF)	
(6) Cooperating Country	X
(7) Commodities (FFF)	
(8) Other (specify): see 009	X

II-B - RESOURCE INPUTS

This section appraises the effectiveness of U.S. resource inputs. There follow illustrative lists of factors, grouped under Implementing Agency, Participant Training and Commodities, that might influence the effectiveness of each of these types of project resources. In the blocks after only those factors which significantly affect project accomplishments, write the letter P if effect is positive or satisfactory, or the letter N if effect is negative or less than satisfactory.

1. FACTORS-IMPLEMENTING AGENCY (Contract/Participating Agency/Voluntary Agency)

024 IF NO IMPLEMENTING AGENCY IN THIS PROJECT. PLACE AN "X" IN THIS BLOCK:	032 Quality, comprehensiveness and candor of required reports
	X 033 Promptness of required reports
025 Adequacy of technical knowledge	034 Adherence to work schedule
026 Understanding of project purposes	035 Working relations with Americans
027 Project planning and management	036 Working relations with cooperating country nationals
028 Ability to adapt technical knowledge to local situation	037 Adaptation to local working and living environment
029 Effective use of participant training element	038 Home office backstopping and substantive interest
030 Ability to train and utilize local staff	039 Timely recruiting of qualified technicians
031 Adherence to AID administrative and other requirements	040 Other (describe):

2. FACTORS-PARTICIPANT TRAINING

041 IF NO PARTICIPANT ELEMENT IN PROJECT. PLACE AN "X" IN THIS BLOCK:	TRAINING UTILIZATION AND FOLLOW UP
	X 052 Appropriateness of original selection
PREDEPARTURE	
042 English language ability	053 Relevance of training for present project purposes
043 Availability of host country funding	054 Appropriateness of post-training placement
044 Host country operational considerations (e.g., selection procedures)	055 Utility of training regardless of changes in project
045 Technical/professional qualifications	056 Ability to get meritorious ideas accepted by supervisors
046 Quality of technical orientation	057 Adequacy of performance
047 Quality of general orientation	058 Continuance on project
048 Participants' collaboration in planning content of program	059 Availability of necessary facilities and equipment
049 Collaboration by participants' supervisors in planning training	060 Mission or contractor follow-up activity
050 Participants' availability for training	061 Other (describe):
051 Other (describe):	

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PART II-B - Continued

3. FACTORS-COMMODITIES

PLACE AN "X" IN APPROPRIATE BLOCK:	062 FFF	063 NON-FFF	064 NO COMMODITY ELEMENT			
					072 Control measures against damage and deterioration in shipment.	
065 Timeliness of AID/W program approval (i.e., PIO/C, Transfer Authorization).					P 073 Control measures against deterioration in storage.	P
066 Quality of commodities, adherence to specifications, marking.					P 074 Readiness and availability of facilities.	P
067 Timeliness in procurement or reconditioning.					075 Appropriateness of use of commodities.	P
068 Timeliness of shipment to port of entry.					076 Maintenance and spares support.	
069 Adequacy of port and inland storage facilities.					P 077 Adequacy of property records, accounting and controls.	P
070 Timeliness of shipment from port to site.					P 078 Other (Describe):	
071 Control measures against loss and theft.						

Indicate in a concise narrative statement (under the heading a. Overall Implementation Performance, below) your summary appraisal of the status of project implementation, covering both significant achievements and problem areas. This should include any comments about the adequacy of provision of direct hire technicians as well as an overall appraisal of the comments provided under the three headings (b, c & d) which follow. For projects which include a dollar input for generation of local currency to meet local cost requirements, indicate the status of that input (see Detailed Instructions).

Discuss separately (under separate headings b, c & d) the status of Implementing Agency Actions, Participants and Commodities. Where above listed factors are causing significant problems (marked N), describe briefly in the appropriate narrative section: (1) the cause and source of the problem, (2) the consequences of not correcting it, and (3) what corrective action has been taken, called for, or planned by the Mission. Identify each factor discussed by its number.

079 NARRATIVE FOR PART II-B: (After narrative section a. Overall Implementation Performance, below, follow, on form AID 1020-25 I as needed, with the following narrative section headings: b. Implementing Agency, c. Participants, d. Commodities. List all narrative section headings in order. For any headings which are not applicable, mark them as such and follow immediately below with the next narrative section heading.)

a. Overall Implementation Performance.

- a. Overall performance has been slower than expected, for reasons cited in prior year PAR.
- b. Implementing Agency: N.A.
- c. Participants: N.A.
- d. Note: Of the 1 million cycles of pills supplied by USAID, 50% have become obsolete with the GOI decision not to use pills with greater than 50 mcg estrogen for contraceptive purposes; however, that, in itself, is not relevant to the overall effectiveness of this pilot project.

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PART III - ROLE OF THE COOPERATING COUNTRY

The following list of illustrative items are to be considered by the evaluator. In the block after only those items which significantly affect project effectiveness, write the letter P if the effect of the item is positive or satisfactory, or the letter N if the effect of the item is negative or less than satisfactory.

SPECIFIC OPERATIONAL FACTORS:

080	Coordination and cooperation within and between ministries.	
081	Coordination and cooperation of LDC gov't. with public and private institutions and private enterprise.	N
082	Availability of reliable data for project planning, control and evaluation.	P
083	Competence and/or continuity in executive leadership of project.	P
084	Host country project funding.	N
085	Legislative changes relevant to project purposes.	
086	Existence and adequacy of a project-related LDC organization.	N
087	Resolution of procedural and bureaucratic problems.	N
088	Availability of LDC physical resource inputs and/or supporting services and facilities.	N
089	Maintenance of facilities and equipment.	P
090	Resolution of tribal, class or caste problems.	
091	Receptivity to change and innovation.	N
092	Political conditions specific to project.	N
093	Capacity to transform ideas into actions, i.e., ability to implement project plans.	N
094	Intent and/or capacity to sustain and expand the impact of the project after U.S. inputs are terminated.	Unknown
095	Extent of LDC efforts to widen the dissemination of project benefits and services.	"
096	Utilization of trained manpower (e.g., participants, counterpart technicians) in project operations.	P
097	Enforcement of relevant procedures (e.g., newly established tax collection and audit system).	N
098	Other:	
HOST COUNTRY COUNTERPART TECHNICIAN FACTORS:		
099	Level of technical education and/or technical experience.	P
100	Planning and management skills.	P
101	Amount of technician man years available.	N
102	Continuity of staff.	N
103	Willingness to work in rural areas.	P
104	Pay and allowances.	N
105	Other:	

In the space below for narrative provide a succinct discussion and overall appraisal of the quality of country performance related to this project, particularly over the past year. Consider important trends and prospects. See Detailed Instructions for an illustrative list of considerations to be covered.

For only those items marked N include brief statements covering the nature of the problem, its impact on the achievement of project targets (i.e., its importance) and the nature and cost of corrective action taken or planned. Identify each explanatory note.

106 NARRATIVE FOR PART III (Continue on form AID 1020-25 I):

The negative marks refer to the lack of an effective organization which can oversee and guide the states which are implementing the program. The project also has been hampered by: changes in state directors of the project, changes in doctors participating, and lack of local supervisors. In addition, the supporting staff at the center who are to do the analysis has been insufficient; sanctioning of additional positions has been slow and postings slower.

During the past year, the main program difficulty has been the unwillingness of Ministers and Secretaries to commit themselves to an effective program as they feel such commitment might place them in a vulnerable political position.

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PART IV - PROGRAMMING IMPLICATIONS

IV-A - EFFECT ON PURPOSE AND DESIGN

Indicate in a brief narrative whether the Mission experience to date with this project and/or changing country circumstances call for some adjustment in project purposes or design, and why, and the approximate cost implications. Cover any of the following considerations or others that may be relevant. (See Detailed Instructions for additional illustrative considerations.) Relevant experience or country situations that were described earlier can simply be referenced. The spelling out of specific changes should be left to the appropriate programming documents, but a brief indication of the type of change contemplated should be given here to clarify the need for change.

For example, changes might be indicated if they would:

1. better achieve program/project purposes;
2. address more critical or higher priority purposes within a goal plan;
3. produce desired results at less cost;
4. give more assurance of lasting institutional development upon U.S. withdrawal.

107 NARRATIVE FOR PART IV-A (Continue on form AID 1020-25 I):

1. Continuing, perhaps, increased pressure on decision-makers to approve orals in the GOI Family Planning Program.
3. Work with the GOI to influence oral contraceptive producers in India to reduce prices -- perhaps work towards tax exemption to reduce the costs of producing this drug.

The non-utilization of the 500,000 cycles OVULEN is not integrally related to the shortfall in goals, but is only incidentally unfortunate.

IV-B - PROPOSED ACTION

108 This project should be (Place an "X" in appropriate block(s)):

1. Continued as presently scheduled in PIP.	
2. Continued with minor changes in the PIP, made at Mission level (not requiring submission of an amended PIP to AID/W).	
3. Continued with significant changes in the PIP (but not sufficient to require a revised PROP). A formally revised PIP will follow.	
4. Extended beyond its present schedule to (Date): Mo. ___ Day ___ Yr. ___. Explain in narrative, PROP will follow.	
5. Substantively revised. PROP will follow.	
6. Evaluated in depth to determine its effectiveness, future scope, and duration.	
7. Discontinued earlier than presently scheduled. Date recommended for termination: Mo. ___ Day ___ Yr. ___	
8. Other. Explain in narrative.	X

109 NARRATIVE FOR PART IV-B:

USAID should continue to support the expanded pill program, if and when approved by the GOI. We are working closely with the Family Planning officials to approve orals for mass distribution in India, based on the recommendations of the Special Committee of the Indian Council of Medical Research and supported by the results of the pilot study.

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