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Trip Report

0-286

Travelers: Ms. Lynn Knauff, INTRAH Deputy Director
Ms. Maureen Brown, INTRAH Program Office

Country Visited: THE PHILIPPINES

Date of Trip: November 8 - 14, 1986

Purpose: To conduct an Annual Project Review of the Regional Institution Building and Training Project with the Institute of Maternal and Child Health.

DPE-3031-C-00-4077

Program for International Training in Health
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The University of North Carolina
Chapel Hill, North Carolina 27514 USA

TABLE OF CONTENTS

	<u>PAGE</u>
LIST OF ABBREVIATIONS	
EXECUTIVE SUMMARY	i
SCHEDULE OF ACTIVITIESiii
I. PURPOSE OF VISIT	1
II. ACCOMPLISHMENTS	1
III. BACKGROUND	2
IV. DESCRIPTION OF ACTIVITIES	2
V. FINDINGS/CONCLUSIONS/RECOMMENDATIONS	11

APPENDICES

- A. People Contacted/Met
- B. Telex Sent to Mr. Gary Cook, Asia/TR/PHN, from
USAID/The Philippines - Subject: Population:
Centrally-Funded Cooperating Agency Assisted Activities
(CFCAAA)

LIST OF ABBREVIATIONS

IMAP	Integrated Midwives Association of The Philippines
IMCH	Institute of Maternal and Child Health
MSSD	Ministry of Social Services Development
NFP	Natural Family Planning
NGO	Non-Government Organization
POPCOM	Commission on Population
TOT	Training of Trainers

EXECUTIVE SUMMARY

INTRAH Deputy Director Ms. Lynn Knauff and INTRAH Program Officer Ms. Maureen Brown visited the Philippines November 8-14, 1986, to conduct an annual project review of the Regional Institution Building and Training Project with the Institute of Maternal and Child Health (IMCH).

During the visit, INTRAH and IMCH conducted discussions with POPCOM on the subject of pilot project training for self-employed midwives and pharmacists, and also met with Minister Tavera on this subject. It was agreed that INTRAH could include training of these two groups in the INTRAH-IMCH subcontract if proposals were submitted to and approved by POPCOM. This was a reversal of an earlier POPCOM decision (see trip report #0-378).

Discussion was held with the Population Center Foundation on potential for collaboration with INTRAH on regional and inter-regional training.

Site visits were made to the Antipolo Training Center used by IMCH as the venue for INTRAH-assisted training and to clinical practicum sites in Cebu. A briefing and debriefing were held with USAID.

The IMCH-INTRAH collaboration is proceeding well, and INTRAH-sponsored staff development inputs have been applied particularly in training methodology, visual communication, and evaluation.

Major recommendations include need for expanding training capacity through advanced TOT of a portion of the current training group, amendment to and budgetary extension

of the current IMCH-INTRAH contract to include the workplan developed in Chapel Hill in June 1986, and assistance to IMCH in implementing training for the self-employed midwives, clinical preceptors, and pharmacists if the proposals are approved by POPCOM.

SCHEDULE OF ACTIVITIES

- Nov. 8 Arrived Manila at 3:00 p.m. from Bangkok.
- Nov. 9 Met with IMCH Staff:
- Dr. Perla Sanchez, Executive Director
- Ms. Asuncion Eduarte, Consultant for Training
- Dr. Chita Quitevis, Director of Clinical Services
- Ms. Miriam Grafilo, Director for Support Services
- Nov. 10 Field visit to IMCH Family Planning/Maternal and Child Health Training Clinics in Cebu City accompanied by Ms. Eduarte.

Departed Manila for Cebu at 6:30 a.m.

Returned to Manila at 7:00 p.m.
- Nov. 11 Briefing meeting with Mr. Edward Muniak, Population Officer, USAID/Philippines and Dr. Sanchez.

Met at IMCH with trainers:
- Dr. Perla Sanchez
- Ms. Miriam Grafilo
- Ms. Asuncion Eduarte
- Ms. Ligaya Dabatos
- Dr. Chita Quitevis
- Ms. Teresa Mende
- Ms. Rosalinda Mendoza
- Dr. Aida Segarra

Meeting at Ministry of Social Services Development with Minister Mita Pardo de Tavera and Ms. Rosita Villafranca, Assistant to the Minister
- Nov. 12 Met at Population Commission with:
- Dr. Ester Sy-Quimsiam, Executive Director (Acting)
- Mrs. Bethel Villarta, Senior Manager for Training
- Dr. Sanchez
- Ms. Eduarte

Observation visit to Antipolo Training Centre (Brown only).

SCHEDULE (cont.)

- Nov. 13 Met at IMCH with IMCH training staff.
- Met with Population Center Foundation
 Staff: Ms. Aurora Silayan-Go, Director,
 Programs Division, and Ms. Nora DeGuzmon,
 Training Division.
- Nov. 14 Debriefing meeting at USAID/Philippines with:
- Mr. William Johnson, Chief, Health/
 Population/Nutrition
 - Mr. Muniak
 - Ms. Enrica Aquino, Population Program
 Specialist
- Departed Manila for USA at 5:30 p.m.

I. PURPOSE OF VISIT

The purpose of the visit was to conduct an annual project review and planning visit with the staff of the Institute of Maternal and Child Health in regard to the Regional Institutional-Building and Training Project. Objectives of the visit included planning for future training activities, observation of the clinical training centres used for the training of inter-regional participants and to identify unmet training needs, constraints and project-related problems.

II. ACCOMPLISHMENTS

In collaboration with the IMCH Executive Director and training/evaluation staff, the INTRAH team:

- A. reviewed the training activities conducted in 1985-86 by IMCH and obtained feedback in regard to problems and constraints;
- B. visited IMCH clinical training clinics in Cebu City and the training centre in Antipolo;
- C. met with officials of the Population Commission and reached consensus regarding IMCH training proposals for rural-based midwives, private sector pharmacists and an expanded clinical preceptors program;
- D. assisted with the development of a proposal outline for the pilot training plan of rural-based self-employed midwives;
- E. met the Minister of Social Services Development to discuss a training approach for self-employed midwives;

- F. met with Population Center Foundation staff to discuss possible collaboration with INTRAH;
- G. briefed and debriefed USAID/Philippines.

III. BACKGROUND

INTRAH assistance to the IMCH is directed toward strengthening institutional capability to conduct regional and inter-regional FP/MCH training. INTRAH- assisted activities since inception of the project with IMCH are documented in Trip Reports 0-5; 0-43; 0-100; 0-101; 0-102; 0-156; 0-218; and 0-378.

In addition to review of regional and inter-regional training activities conducted during the past year, and following the visit of INTRAH Director, Dr. James Lea and INTRAH Assistant to the Director, Mr. Michael Dennis, in September 1986, emphasis of this visit focused on continuing dialogue with the POPCOM to clarify its position and requirements in regard to domestic FP/MCH training of private sector pharmacists and midwives (refer to Trip Report 0-378).

IV. DESCRIPTION OF ACTIVITIES

A. USAID

The INTRAH team met with Mr. Edward Muniak, Population Officer, on three occasions: twice accompanied by Dr. Perla Sanchez, but without her during the debriefing, which was attended by Mr. William Johnson, Chief, Health/Population/ Nutrition, and Ms. Enrica Aquino, Population Programme Specialist.

USAID's population program is not proceeding vigorously owing to: lack of sharp policy definition at the highest level of government; a social welfare emphasis given by the Ministry of Social Service and

Development; and, the rather tenuous position of the Population Commission, which is a result of the two preceding factors. Thus, USAID is not encouraged that future prospects for a vigorous program are in the offing. If POPCOM remains in the Ministry of Social Services Development, it will be a part of the Bureau for Women; if it goes to National Economic and Development Association (where, legally, it belongs), it will assume responsibilities that its current staff will not be competent to exercise. In either case change in the nature and direction of the population program can be expected, with consequences for USAID assistance.

Two matters were prominent in discussion with Mr. Muniak:

1. The team was told that \$150,000 had been earmarked for INTRAH via a cable sent to AID/W (Mr. Gary Cook, Asia/TR/PHN) on August 20. This was news to INTRAH and Dr. Sanchez. A copy of the cable was furnished by Mr. Muniak (see Appendix B) who requested that INTRAH and Ms. Betty Case and Ms. Marilyn Schmidt, Program Monitor, AID/ST/POP, work out the transfer into the INTRAH account. (It was learned after return to the U.S. that the funds had been put in INTRAH's account some time ago and had already been expended on the IMCH sub-contact with INTRAH.)
2. The issue of training for rural, self-employed midwives (see Lea/Dennis Trip Report #0-378) assumed an added dimension when Mr. Muniak stated his expectation that a training of trainers strategy would be employed. Neither IMCH nor INTRAH shared his enthusiasm for the following reasons: 1) without an institutional base, trainers would lack a training budget, management and back-up; 2) supervision of training would fall to IMCH, which could not be expected to perform the function--and would not be legitimized to do so--; 3) without data on numbers, locales, and probable training outcomes, the trainers would lack vital planning information; and 4) the trainers would be unlikely to take time off from their midwifery practice both to obtain and

conduct training unless they were sufficiently remunerated. Thus, the TOT strategy would be both expensive and difficult to manage and is unjustified until a pilot effort proves that the self-employed midwife will contribute to family planning after training.

During the debriefing, a plan for a pilot was described (see section C of this report). It, together with training for pharmacists and preceptors, was acceptable to USAID.

The next steps are for IMCH to develop three proposals and budgets by January 15, 1987 for review by USAID, INTRAH and POPCOM.

B. MEETING WITH MINISTER MITA PARDO DE TAVERA, MINISTRY OF SOCIAL SERVICES AND DEVELOPMENT

The Ministry of Social Services Development (MSSD) is, as will be recalled, the home of the Commission on Population (POPCOM). The INTRAH team together with Dr. Sanchez visited Minister Tavera for the purpose of discussing the impasse with POPCOM on the sponsorship of and implementing agency for the training of self-employed midwives (the matter is discussed in Trip Report #0-378).

The Minister, a physician, indicated that if POPCOM were to continue, it would stay in MSSD under a planned Bureau for Women. This proposal is waiting for the signature of President Corazon Aquino, but is expected to be acted on before the end of the year.

The Bureau for Women is expected to act on the Minister's idea that rural women are most responsive to their peers, rather than health and social service professionals. Thus, communication on primary health care, social services and family planning, particularly natural family planning, will emanate from rural women. The Minister appeared to invite INTRAH's participation in this generally-described approach.

With regard to the impasse, the Minister was not aware either of POPCOM's plan to foster training of rural midwives or of the POPCOM/IMAP/INTRAH discussions. Her assistant, Ms. Rosita Villafranca, is well-informed about the matter (she is an IMCH Board member), and, since she was present at the meeting, will undoubtedly fill out the brief review given by Dr. Sanchez if Minister Tavera requests more detailed information.

The meeting was unexpectedly long, cordial, and inconclusive with regard to the purpose. But, since Minister Tavera is a strong supporter of NGOs, having established one herself, and, if IMCH pursues the rural midwives' training project through a proposed NGO Council, it is likely to receive favorable consideration by the Minister. However, all approval processes will probably be in flux for some time; thus, INTRAH will need to keep apprised of new requirements and procedures, through USAID and IMCH.

C. THE POPULATION COMMISSION (POPCOM)

The INTRAH team accompanied by Dr. Sanchez met with Dr. Ester Sy-Quimsiam, Executive Director (Acting) and Mrs. Bethel Villarta, Senior Manager for Training. The former arrived one hour after the scheduled meeting time; however, useful discussion was held until she arrived.

The current position of POPCOM on training of self-employed midwives is that INTRAH and IMCH can train them in geographic areas where IMAP chapters are "not strong." In essence, POPCOM has reversed its earlier position, and will await a proposal from IMCH, which, if acceptable, will be funded from the USAID-earmarked funding for INTRAH.

Dr. Sy-Quimsiam suggested that the midwives be trained as service providers, working as satellites to existing accredited service institutions from whom they would receive payment for services. However, the source of budget for payment is not yet clear.

It was learned that IMAP has a new president, Ms. Cecile Santos, who is POPCOM Regional Program Officer in San Juan, an area in Metro-Manila.

POPCOM also approved INTRAH/IMCH training of pharmacists and clinical preceptors (in Regions VI, X and XII). POPCOM suggested that the pharmacists' training proposal contain both pre-service and in-service training components, the former directed towards piloting of a module or lesson plans on family planning in a college of pharmacy. The plan for and development of a module would be assisted by a working group composed of the Pharmacy Association, several deans, the Professional Regulatory Commission and the Ministry of Education, Culture and Sports.

Dr. Sanchez agreed to prepare three proposals--one each for training midwives, pharmacists and clinical preceptors--and submit them to POPCOM for review, a process taking up to three weeks. It was noted that family planning through private sector effort is a major emphasis of the government, which is to be fostered by POPCOM through expansion of private sector involvement and development of latent NGO capability.

- D. INSTITUTE OF MATERNAL AND CHILD HEALTH (IMCH):
Several working meetings were held at IMCH with Dr. Perla Sanchez, Executive Director, and the training/evaluation staff during which the INTRAH team was

briefed on the training activities and outcomes of the inter-regional training program, the pilot training of private sector pharmacists and the training needs assessment conducted for nurses and midwives. Reports of these activities are on file at INTRAH.

A one-day site visit was made to Cebu City (Region VII) to observe four of the IMCH clinical FP training clinics. IMCH has a total of 185 FP/MCH clinics scattered throughout the country (plus 74 NGO clinics) of which 18 are located in Cebu province; six of these are designated as clinical training sites for inter-regional participant training.

The INTRAH team observed the Lahug Maternity House; Medical and Family Planning Clinic; the Camputhaw Family Planning Clinic and Day Care Centre; the Community MCH Clinic and the Sugbuanon Bank Family Planning Clinic. All were small, simple, clean and adequately staffed and equipped. A full-time nurse/midwife and full or part-time physician were in place. Each had a new FP acceptor target set at between 18 - 22 acceptors per month, which was being achieved. Continuing user caseloads averaged between 110 - 537 per month (all methods); popularity of methods appeared to be the IUD, sterilization, oral contraceptives and Depo-Provera in that order. On the whole, these clinics are good examples of functional and effective FP clinics to serve as models for inter-regional clinical trainees and for them to obtain supervised clinical practicum. An observation visit was made by Ms. Brown to the IMCH Antipolo Training Centre House and the Antipolo Puericulture and Family Planning Centre.

Following the INTRAH team's discussions with USAID and POPCOM (reported in A and C above), the INTRAH team worked with the Executive Director and trainers of IMCH to develop a training plan proposal outline for midwives to be submitted to POPCOM, USAID and INTRAH by January 15, 1987. Essentially, two pilot training models will be applied with the purpose of establishing the effectiveness of self-employed midwives as FP communicators/motivators/referral agents and as FP service providers, before engaging in large scale training of this group of approximately 38,000 members.

The overall objective of the training is to increase the number of FP acceptors by x % in each area six months following the midwives training. Training will be conducted in two to three regional areas and a maximum of 50 midwives will be trained (15-25 per group). Baseline data for each area will be obtained before the training commences. The pilot models are as follows:

MODEL	REGION	SERVICE SITUATION	TRAINING
I	VI (Negros del Norte and Occidental)	Area with low utilization of IMCH FP clinical services	Train for information, education, motivation and referral (6-day training)
II	XI or IV (Mindoro Occidental)	Area with low number of FP clinics	Train for provision of FP including IUD insertion (12 or 21-day training)

Proposal details were also discussed for the following training activities. It was agreed that these would be

prepared by IMCH for submission to POPCOM, USAID and INTRAH (by January 30, 1987, for the midwives, pharmacists and new preceptors training.)

1. Pharmacists: I Training of private sector group. Maximum number of participants: 100.
II Integration of FP into the pre-service (basic) curriculum of one college of pharmacy as a pilot. Maximum number of participants: To be decided.
2. Preceptors: Basic training for new IMCH preceptors. Maximum number of participants: 16 from all areas.
3. Preceptors: Refresher training for IMCH preceptors. Maximum number of participants: 26.
4. Inter-regional Training: Clinical training for 1987 and 1988. Maximum number of participants: 16 per group. (Already budgeted)
5. Evaluation Follow-on: IMCH trainers and provincial supervisors. Maximum number: 15 participants (already budgeted)

Assurances were given by Mrs. Bethel Villarta of POPCOM that approvals would be given for the pharmacists, midwives and expanded preceptor training if proposals were submitted.

Other unmet IMCH staff training needs identified by trainers include:

- 1) Project development for mid-level managers to include eight area supervisors and division directors.
- 2) Trainers up-date on NFP.
- 3) Workshop on development of information dissemination
- 4) Advanced TOT for a portion of the current clinical training group.

E. POPULATION CENTER FOUNDATION

The INTRAH team met with Ms. Sileyán-Go, Ms. Nora de Guzman and Ms. Aida Sayson to discuss potential INTRAH-PCF collaboration and possible partnership with INTRAH-assisted efforts in Thailand and with IMCH. It was suggested that Ms. de Guzman attend the Asia TAC meeting to be conducted by INTRAH in Bangkok, March 16-20, 1987. The group also discussed an impending meeting of NGOs and possible strategies for organizing the NGOs points of view and recommendations with regard to their strengthened participation in the national program.

VI. FINDINGS/CONCLUSIONS

RECOMMENDATIONS

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| <p>1. Mr. Muniak understood that a TOT for midwives strategy would be employed for the large scale training of self-employed rural midwives. Because of the absence of an institutional base, a planning and supervision mechanism and financial incentives for the midwife trainer, INTRAH and IMCH recommended that before major inputs have been made into training large numbers, IMCH should pilot two smaller groups for training to assess the effectiveness and willingness of rural midwives as FP motivators and service providers. This was accepted by Mr. Muniak.</p> <p>2. The future role and organizational location of POPCOM is uncertain. It was reported that POPCOM may be placed in the Bureau of Women under the Ministry of Social Services Development and its present mandate considerably reduced. A decision is expected by the end of this year.</p> <p>3. POPCOM reversed its earlier decision in regard to the training of rural-based self-employed midwives and stated it will now approve an INTRAH-IMCH proposal, if such training is given to midwives in areas where the IMAF membership is "not strong".</p> <p>4. POPCOM also approved the continuation of INTRAH-IMCH training for in-service</p> | <p>1. IMCH should prepare in detail a proposal to train up to 50 rural-based self-employed mid-wives in a pilot project to assess their effectiveness as FP motivators- and service providers and submit to USAID/Philippines for review and approval before submitting to POPCOM.</p> <p>2. Insofar as POPCOM is the approval body for INTRAH-IMCH training activities in the Philippines, INTRAH should follow up, with USAID/Philippines and IMCH, the outcome of the GOP decision regarding POPCOM's future.</p> <p>3. IMCH should prepare the midwives proposal for Regions VI, XI or IV and submit to POPCOM by January 15, 1987.</p> <p>4. IMCH should prepare two proposals for the pharmacists training: one to continue the training of up to 100 private sector pharmacists and the other to develop an FP module with representatives of the Phar-</p> |
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private sector pharmacists and would approve a proposal for training of more clinical preceptors. POPCOM also suggested that IMCH should develop a proposal for integrating FP into the basic curricula of pre-service pharmacists. INTRAH and IMCH responded it would do so but on a pilot basis for one college of pharmacy (to be identified).

5. The IMCH training workplan activities are progressing on schedule as planned; technical and financial reports are being submitted in a timely manner. No major project-related problems were identified.

A field site visit was made to four of the IMCH clinical FP training clinics in Cebu City. All were observed to be effective, functioning FP centres appropriate for clinical practicum for inter-regional participants.

6. The Asia Technical Advisory Committee meeting and proposed Advanced Training of Trainers workshop were discussed with Dr. Sanchez. Ms. Eduarte was designated by Dr. Sanchez to attend the A/TAC. Ms. Nora DeGuzman, Training Chief, Population Foundation Centre, was identified as the second participant to attend the TAC planned for 16 - 20 March, 1987, in Bangkok.

macy Association, Deans of Pharmacy colleges and others for integration into the basic curricula of pharmacists. These should be submitted to POPCOM by January 30, 1987.

5. IMCH should also prepare a detailed proposal for the training of up to 16 new clinical preceptors and refresher training of IMCH preceptors. These should be submitted to POPCOM by January 30, 1987.

6. INTRAH should follow up these nominations with invitation letters and other TAC information by 15 December, 1986.

7. Other unmet training needs identified by IMCH staff included the need for preceptor refresher, project development workshop for area supervisors and division director, a trainers up-date on NFP, a workshop on information dissemination, and expanded trainer capability.
7. IMCH should develop proposals for these training needs and submit to INTRAH for consideration.

APPENDIX A

PEOPLE CONTACTED/MET

USAID/Philippines

Mr. William JOHNSON, Chief, Health/Population/Nutrition
Mr. Edward MUNIAK, Population Officer
Ms. Enrica AQUINO, Population Programs Specialist

Institute of Maternal and Child Health (IMCH)

Dr. Perla SANCHEZ, Executive Director
Ms. Asuncion EDARTE, Consultant for Training
Dr. Chita QUITEVIS, Director of Clinical Services
Ms. Miriam GRAFILO, Director for Support Services
Mr. Ligaya DABATOS, Regional Preceptor
Dr. Aida SEGARRA, Medical Training Specialist
Ms. Teresa MENDE, Counselor/Field Preceptor

IMCH Preceptors - Cebu City

1. Teresa MENDE
2. Laura PAIRES
3. Ester RUBINGOUBING
4. Rosalinda MAINIT
5. Rosalinda BIOC
6. Merla SUICO
7. Josefina SUICO
8. Emergencia LUNAKANG
9. Evangelina TAPIA
10. Teresa RABLEDO
11. Dr. Julita BAJARAIN
12. Delilah CONEJOS
13. Gina DRIAS
14. Roquesa IQUILAR - AFS Reg. V

14

15. Chona PLARIZAN - AFS Reg. III Cebu
16. Marianata DONALDO
17. Marina TOLEDO

Ministry of Social Services Development (MSSD)

Minister Mita PARDO DE TAVERA

Ms. Rosita VILLAFRANCA, Assistant to the Minister

Population Commission (POPCOM)

Ms. Ester SY-QUINSIAM, Executive Director (Acting)

Mrs. Bethel VILLARTA, Senior Manager for Training

Population Center Foundation

Ms. Aurora SILEYAN-GO, Director, Programs Division

Ms. Nora DEGUZMAN, Training Division

Ms. Aida SAYSON, Program Division

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 PP RUEHC
 DE RUEHML #6707 232 **
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 FM AMEMBASSY MANILA
 TO SECSTATE WASHDC PRIORITY 1646
 BT
 UNCLAS MANILA 26707

CLASS: UNCLASSIFIED
 CHRG: AID P/PO/EP
 APPRV: OPEN:WUJCHEN
 DREFD: OPEN:EMUNIAK
 CLFAP: AID
 DISTR: OD PD (OPEN-2)
 CSF DC
 F/CG

AIDAC

ATTN: GAFY COOK, ASIA/TF/PHV

F.O. 12356: N/A

SUBJECT: POPULATION: CENTRALLY-FUNDED COOPERATING AGENCY ASSISTED ACTIVITIES (CFCAAA)

1. IN FY '86 MISSION TRANSFERRED POPULATION FUNDS FROM ITS OYB TO SGT/POP FOR US DOLS 2 MILLION TO BE UTILIZED BY SGT/POP CENTRALLY-FUNDED COOPERATING AGENCIES TO INITIATE ADDITIONAL PRIVATE SECTOR ACTIVITIES. THESE FUNDS HAVE NOW BEEN FULLY EARMARKED AS FOLLOWS:

C.A.	(DOLS 000)
AVSC	500
POPULATION COUNCIL	35
CASTERLINE	78.457
FHI	45
INTRAH	150
JHPITGO	514.543
JHU-PCS	577

2. IT IS OUR UNDERSTANDING THAT SOME POPULATION FUNDS ORIGINALLY PROGRAMMED FOR UNFPA MAY NOW BE AVAILABLE FOR UTILIZATION IN OTHER PROGRAMS. IF OUR INFORMATION IS ACCURATE AND IF '86 POPULATION FUNDS ARE AVAILABLE FOR QUICK PROGRAMMING, WE WISH TO TAKE THIS OPPORTUNITY TO FORMALLY REQUEST THAT US DOLS 2 MILLION BE ALLOTTED TO THE SGT/POP CENTRAL ACCOUNT ALONG THE SAME LINE AS THE PFIOP ARRANGEMENT, I.E., US DOLS 2 MILLION TO BE RESERVED BY SGT/POP AS A QUOTE LINE OF CREDIT UNQUOTE TO BE USED BY SGT/POP CENTRALLY-FUNDED AGENCIES TO INCREASE THEIR PARTICIPATION IN POPULATION ACTIVITIES IN THE PHILIPPINE PROGRAM.

3. WE ARE CURRENTLY IN THE PROCESS OF REVIEWING WITH VARIOUS COOPERATING AGENCIES, THEIR PROGRAM IN THE PHILIPPINES AND THE POTENTIAL FOR ADDITIONAL ACTIVITIES. THEREFORE, PLEASE ADVISE ASAP THE PROBABILITY OF MEETING THIS REQUEST. BOSWORTH

BT
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