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EVALUATION REPORT: FPMD ASSISTANCE TO ASHONPLAFA, HONDURAS

AUGUST 1995

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FAMILY PLANNING MANAGEMENT DEVELOPMENT

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ACRONYMS

ASHONPLAFA	Asociación Hondureño de Planificación Familiar (Honduran Family Planning Association)
CBD	Community-Based Distribution
FPMD	Family Planning Management Development
IE&C	Information, Education and Communication
IPPF/WHR	International Planned Parenthood Federation/Western Hemisphere Region
MIS	Management Information System
MSH	Management Sciences for Health
SAC	System for the Administration of Clinics
SWOT	Strengths, weaknesses, opportunities, and threats
TA	Technical Assistance
USAID	United States Agency for International Development

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I. EXECUTIVE SUMMARY

Since its founding in 1961, the *Asociación Hondureño de Planificación Familiar* (ASHONPLAFA) has been the major provider of family planning services in Honduras. ASHONPLAFA now has six regional centers, three satellite clinics, and 1900 community distribution posts. The organization offers a full range of family planning services through clinic-based, community-based distribution (CBD), and social marketing programs. It has an extensive Information, Education, and Communication (IE&C) department that includes community education and promotion, mass media campaigns, Family Life Education curricula development and teacher training.

The Family Planning Management Development (FPMD) project of Management Sciences for Health (MSH) has worked with ASHONPLAFA to: establish management systems and attitudes in the central office which allow for the decentralization of management control to the regional level; and to strengthen the management skills and tools of the Regional Directors. Toward this end, FPMD has focused on the areas of: Strategic Planning, Personnel Management, Decentralization, Management Information Systems (MIS), and Accounting.

The results of FPMD assistance are summarized as follows:

Strategic Planning

Throughout ASHONPLAFA, staff report that they have a greater sense of organizational direction and unity. Managers report that the strategic planning workshop helped them to *think* strategically and that this skill is useful in many of their activities. The strategic plan contains many highly specific 5-year goals for each area of the organization, from finance to marketing, to clinical services. Although some goals have been deemed unrealistic and others simply a restatement of goals established before the strategic planning exercise, most employees agree that the exercise helped the organization to synthesize disparate planning activities and create a single vision for the direction of ASHONPLAFA.

Personnel Management

Few management activities have as pervasive an affect on an organization as personnel management. Creating an environment in which staff perform at their best and work with each other in a coordinated fashion is the foundation of any strong organization. Staff at ASHONPLAFA report that FPMD has helped them to move toward such an environment. There is improved communication between supervisors and staff about expected performance, and salary adjustments are based on performance evaluations. As a result of The Performance Management Workshop—held in March 1995—*most*, but not *all* managers throughout the organization now set clear objectives for their staff and conduct personnel evaluations based on those objectives.

Decentralization

Since the 1980s, it has become clear that the continued growth and sustainability of ASHONPLAFA is dependent on the ability of the regional centers to market their services, and to manage a growing volume of clients, while controlling their costs. This requires strong management capacity in the centers, and a commitment from the central office to decentralize an appropriate amount of management control to the regional level.

Throughout ASHONPLAFA, staff believe that FPMD has been very helpful at bringing clarity to the purpose and process of decentralization. FPMD helped the organization to define the objectives of decentralization and decide what would and would not be delegated and helped ASHONPLAFA to set up management systems which allow the central office to relinquish some control to the regions. Although much more work is needed in this area, Regional Directors are consulted more than before about planning decisions and types of program data to be collected. Further, in the interest of increasing client satisfaction and volume, Regional Directors have been given more autonomy in the areas of marketing and promotion, service hours, and client surveys.

Organizational Structure

When FPMD began working with ASHONPLAFA in 1993, there was no clear link between the strategic objectives of the institution and the evolving organizational structure. FPMD's work in strategic planning and personnel management has helped ASHONPLAFA to develop the ability to change its organizational structure to better meet organizational goals and objectives. For example, ASHONPLAFA is now considering an organizational structure which would consolidate the production of statistical reports into a single department to avoid duplication of effort and to ensure that the information gets to the decision makers in a timely manner.

MIS

The production of statistical reports at ASHONPLAFA is haphazard and disorganized. Central level administrators request reports from the regions, superseding formal channels. Consequently information feeds to different offices of the central office in a chaotic manner. FPMD has worked with ASHONPLAFA to standardize reports, and has encouraged the organization not to rely on a system of generating reports based on random requests. In addition, FPMD has developed a plan for technical assistance in the area of MIS, which will be implemented contingent upon FPMD II.

Accounting

The new chart of accounts developed by FPMD has made the accounting system more versatile in the type of reports it can generate and allows for comparisons among centers.

The accounting system is now able to provide cost center comparison data to managers. This information may help managers improve operating efficiency at less efficient centers.

II. INTRODUCTION

ASHONPLAFA is the principal provider of family planning services in Honduras with six regional centers, three satellite clinics, and 1900 community distribution posts. The organization offers a full range of family planning services through clinic-based, community-based distribution (CBD), and social marketing programs. It has an extensive Information, Education, and Communication (IE&C) department that includes community education and promotion, mass media campaigns, Family Life Education curricula development and teacher training.

During the 1980s, ASHONPLAFA underwent a period of unprecedented growth financed mostly by USAID. The newly created regional centers were able to provide services throughout the country, far beyond what could have been accomplished by the central office in Tegucigalpa. Since that time, it has become clear that the continued growth and sustainability of ASHONPLAFA is dependent on the ability of the regional centers to market their services, and to manage a growing volume of clients while controlling their costs. Finally, ASHONPLAFA must generate increased revenues and reduce its dependence on waning donor support. This requires strong management capacity in the centers, and a commitment from the central office to decentralize an appropriate amount of management control to the regional level. FPMD has endeavored to accomplish both of these tasks: to establish management systems and attitudes in the central office which allow for the decentralization of management control to the regional level; and to strengthen the management skills and tools of the Regional Directors.

Toward this end, FPMD has worked in the areas of: Strategic Planning, Personnel Management Decentralization, MIS, Accounting and Personnel Management.

III. RESULTS

A. Strategic Planning

Background

When FPMD began working with ASHONPLAFA, there were disparate planning activities throughout the organization and no unified vision of the future of ASHONPLAFA. The strategic planning process was not tied to operational planning nor to the evolving organizational structure. The concept of strategic *thinking* was new in the organization, and few people considered financial self-sustainability as a strategic objective.

FPMD Intervention

In May 1991, FPMD began working in the area of strategic planning with ASHONPLAFA. FPMD assisted the organization with revising its mission statement and completing a SWOT analysis (strengths, weaknesses, opportunities, and threats). Four strategic goals were developed and the organizational chart was revised.

The strategic planning workshop held in May 1994 built on the earlier work by bringing together people from all levels of the organization for three days and helping them to arrive at a consensus regarding the future of the organization. Participants worked in teams and discussed issues such as the ASHONPLAFA's mission, the SWOT analysis, and strategic objectives. FPMD assisted the organization revise its mission statement and complete an institutional and departmental analysis.

A five-year strategic planning document was drafted at the workshop but not completed. After the consultant left the country, updated versions of the draft were sent back and forth until the process was complete and the document was finalized.

Results

Throughout ASHONPLAFA, staff report that as a result of FPMD assistance, they have a greater sense of organizational direction and unity. Managers report that FPMD has taught them to *think* strategically and that this new way of thinking has affected many of their activities. Several managers report that they regularly use the "SWOT" approach for developing plans. Further, the work in strategic planning has helped ASHONPLAFA to focus on achieving self-sustainability through marketing and diversifying its services.

The strategic planning document contains many highly specific 5-year goals for each area of the organization, from finance to marketing, to clinical services. Although some goals have been deemed unrealistic and others simply a restatement of goals established before the strategic planning exercise, most employees agree that the exercise helped the organization to synthesize disparate planning activities and create a single vision for the direction of ASHONPLAFA.

Some staff believe that it was helpful in the strategic plan to set goals slightly higher than those the organization can comfortably reach, so as to create incentives for improved productivity and efficiency. However, there is some concern at ASHONPLAFA that the strategic plan is not sufficiently tied to implementation plans and benchmarks which would measure progress towards those goals. Further, the one-year and three-year action plans are based only in part on the strategic plan, and the relationship among all of these planning documents is confusing to almost everyone interviewed.

Another concern is that the final strategic planning document has not been seen by many people in the organization, even many workshop participants. In addition, some workshop participants do not agree with the specific goals for their areas. These issues are due in part to the fact that the final document was completed after the consultant had left the country, and was no longer the result of a consensus building process.

ASHONPLAFA is now developing a strategy to get to the next level of its development and to expand its role at a national level. This strategy, to be developed with the assistance of POPTECH will serve as the basis for the new agreement with USAID. One staff member stated that the new agreement with USAID will serve as a "point of departure" for ASHONPLAFA. A crucial test of FPMD's impact is whether the strategic plan and the new "strategic thinking" will be used to develop the new agreement with the United States Agency for International Development (USAID).

B. Personnel Management

Background

Before FPMD intervention, personnel management—motivation, supervision, performance evaluation—were based on the personal inclination of the individual manager, with little guidance or support from the organization. Salary adjustments were not tied to performance.

FPMD Intervention

In the area of Personnel Management, FPMD held a workshop in "Organizational Change and Development" in February 1994 and a workshop in "Performance Management" in March 1995, in addition to ongoing technical assistance (TA) in Personnel Management. "Performance Management Workshop" included: human motivation and work, authority and control, delegation, management by objectives, the performance management cycle, developing and communicating objectives and performance expectations, monitoring performance, and providing feedback.

Results

Staff throughout ASHONPLAFA report that FPMD has helped them to create an environment in which staff perform at their best and work with each other in a coordinated fashion. There is improved communication between supervisors and staff about expected performance, and different departments have learned how to negotiate what they need from each other. Salary adjustments are based on performance evaluations. Many (but not all) managers throughout the organization now set clear objectives for their staff and conduct personnel evaluations based on those objectives.

Managers have learned how to direct and motivate their staff by establishing clear objectives and evaluating staff based on those objectives. Most managers

understand the need to monitor and document performance throughout a period, rather than only at the end of the period. In this way the evaluation is not disproportionately influenced by the most recent performance. Fair and accurate evaluations are particularly important now that salary adjustments are based on performance.

Prior to FPMD's workshop, another consulting company (KPMG) developed a manual for ASHONPLAFA describing standard procedures for performance evaluation and salary review. Although this manual was completed shortly before FPMD's workshop, it was not used as a tool for the workshop. Human resources stated that, whereas many employees do not take the time to read a manual, the workshop allowed all participants to have a consistent concept of performance management. Several staff reported that ASHONPLAFA did benefit from the complementary nature of these consulting activities, but not because the consulting firms made any attempt to collaborate.

Future Work

The behavioral changes initiated at the workshop, in terms of communication and feedback to staff, have not been uniformly sustained throughout the organization. Without follow-up to the workshop, some managers have reverted to their former styles of communication, which in some cases means that the manager provides negative feedback but withholds positive feedback. Although salary adjustments are now tied to performance, ASHONPLAFA has not truly implemented the practice of systematically evaluating staff based on performance objectives. Some staff have only a loose understanding of the objectives of their work. Further, there has been little attempt to link the performance objectives of the individual with the strategic goals of the institution.

Staff agree that it is important to follow-up on the performance management workshop because "people cannot change their personality in three days." Some believe that the workshop may have been more effective if it had been held one day per week for three weeks, rather than as a three-day event. This would have allowed participants to absorb what they were learning practice integrating what they had learned into their daily activities.

Several people at ASHONPLAFA stated that it would be useful to do the performance management workshop in the regions with lower level staff. In addition, the Human Resources department would like to implement a process in which performance evaluations are used to identify training needs.

C. Decentralization

Background

In the 1980s, ASHONPLAFA developed five regional centers throughout the country, in addition to its administrative and clinical center in Tegucigalpa. This

was done as part of a decentralization plan instigated by its donors. With financial assistance mostly provided by USAID, ASHONPLAFA underwent a period of unprecedented growth, becoming the largest provider of family planning services in Honduras. Since that time, it has become clear that the continued growth of the organization is dependent on the ability of the regional centers to market their services, and to manage a growing volume of clients, while controlling their costs. This requires strong management capacity in the centers and permission from the central office to make management decisions unencumbered by bureaucratic rules and regulations.

In practice, however, the shift of management control to the regional centers has been somewhat difficult. There has been a great deal of confusion in ASHONPLAFA about decentralization and what it really means on a day-to-day basis. The central office has been reluctant to relinquish control and the regional directors have been hesitant to make decisions independently. Several people at ASHONPLAFA have stated that "policy setting will remain the responsibility of the central office, but that the administration of those policies will be delegated to the regions." It is not clear what this means in practice.

The central office continues to control salaries, procedures, work regulations, selection of new staff, and, in particular, budget-setting. The regions send a proposed budget to Tegucigalpa and each line item must be authorized. The regions do not have the authority to move funds from one program to another without approval. Managers must spend a lot of time working through the system to get authorization for each purchase not included in the approved budget, even for very small expenditures such as roses to celebrate Mother's Day, or the repair of a vehicle. This requires a lot of time for staff in the regions as well as for staff in the central office, who must assess the request and grant the authorization.

The management styles and skills of regional directors varies with individuals. This has created some inequity between regional centers, as some managers have taken more control of their programs, while others have continued to depend on the central level for direction. It appears that the regional directors are unclear about what they are authorized to do and often hesitate for fear of reprisal from the central office. Further, regional directors and staff need management training.

FPMD Intervention

Throughout ASHONPLAFA, staff believe that FPMD has been very helpful at bringing clarity to the purpose and process of decentralization. FPMD helped the organization to define the objectives of decentralization and decide what would and would not be delegated. FPMD outlined clearly-defined steps which need to be taken and a time frame for implementing the steps. In addition, FPMD has helped ASHONPLAFA to set up management systems to allow the central office to relinquish some control to the regions. This includes management information

which documents how well the regions are doing in attracting clients and controlling costs.

Results

Although more work needs to be done in this area, Regional Directors are being consulted more than before for planning decisions and for identifying and solving problems. They have been afforded more room to make management decisions, particularly in the areas of marketing and promotion and service hours. However, decision making in the areas of finance and budgets still remains quite limited.

Future Work

In order for decentralization to proceed successfully, Regional Directors need further management training. Several staff suggested that it would be helpful to hold workshops in the centers, themselves, so that more of the regional staff could take part.

D. Management Information Systems (MIS)

Background

MIS has historically been one of the weakest systems at ASHONPLAFA. Data collection and statistical reports have been the responsibility of several departments, resulting in much confusion. Data from different sources sometimes contradict each other. The lack of reliable information has hampered the process of decentralization because there has been little empirical basis for regional decision making. Further, there have been insufficient performance indicators that would permit further delegation of program management. Even when data are accurate, they are rarely presented in a format which can easily be used for management decisions.

The recently installed "System for the Administration of Clinics" (SAC) developed by TecApro has improved the situation. It is generally agreed that SAC is an excellent system which can produce very useful, detailed reports, such as the number and types of contraceptives methods distributed in a given time frame, and the number and reason for discontinuance. Presentation of data in this type of useful format is new at ASHONPLAFA, and the organization is just beginning to appreciate how this information can be used to strengthen operations and marketing, and how it can support management at the regional level.

The internal auditing department reports that they regularly use information generated by the SAC system to identify and investigates problems. For example, when investigating a drop in referrals from a particular region, the auditing department found that the *promotora** for that region was limiting the areas in which she worked because of a misunderstanding with the regional director. The misunderstanding was corrected, additional *promotors* were hired, and the

*Community counselor responsible for promoting services in a particular region

problem was resolved. The auditing department monitors the mix of methods being distributed and if a particular method appears too low, the department will investigate how the *promotor* is distributing that method.

In spite of the improvements provided by SAC, the production of reports at ASHONPLAFA remains haphazard and disorganized. Central level administrators request reports from the regions, superseding formal channels. Consequently, information feeds to different offices of the central office in a chaotic manner. Many reports are produced as a response to requests only, generally depending on the interests of the particular administrator making the request.

FPMD Intervention

FPMD has worked with ASHONPLAFA to standardize reports, and has encouraged the organization not to rely on a system of generating reports based on random requests. FPMD's work in strategic planning and personnel management has been particularly useful for assisting in the area of MIS. In collaboration with International Planned Parenthood Federation/Western Hemisphere Region (IPPF/WHR), FPMD conducted an assessment of MIS at ASHONPLAFA.

Results

As a result of FPMD's work in strategic planning and personnel management, ASHONPLAFA is now considering an organizational structure which would consolidate the production of statistical reports into a single department. This would avoid duplication of effort and ensure that the information gets to the decision makers in a timely manner.

Future Work

FPMD has developed a joint plan with IPPF/WHR for technical assistance in the area of MIS, which will be implemented contingent on FPMD II. Planned interventions focus on: 1) a detailed analysis of information systems including an information audit of the manual service delivery reporting systems; 2) improvements in the organization's ability to utilize information, including an "MIS Concepts" workshop, ongoing technical assistance and development of an Executive Information system which integrates key data from different sources; and 3) improvements and increased implementation of existing computerized information systems.

E. Organizational Structure

Background

When FPMD began working with ASHONPLAFA in 1993, there was no clear link between the strategic objectives of the institution and the evolving organizational structure.

FPMD Intervention

FPMD has helped ASHONPLAFA develop the ability to change its organizational structure to better meet organizational goals and objectives. In addition, FPMD

has taught ASHONPLAFA to assess systems, rather than blaming individuals when organizational goals are not being met.

The organizational development workshop was held in February 1994 during a period of institutional change. The workshop taught participants about different learning styles and different ways that individuals respond to change. This reportedly helped people respect each other and understand the organizational culture. Several managers stated that the workshop fostered communication between departments and taught individuals how to negotiate what they need from one another to meet the objectives of their jobs.

Results

ASHONPLAFA is now considering a modification of its structure which will: 1) improve the production and use of statistical reports and 2) strengthen the marketing function. Since 1993, statistics and marketing have been under the same division. Because of the many required reports for donors, that division has focused much of its efforts on generating reports and less effort on marketing. At the same time, much of the data required by the donor reports are also used by the internal auditing division. This created a lot of duplication of effort between these two divisions in generating reports, while the marketing function was not receiving enough attention.

Discussions are now underway to give responsibility for statistics and donor reports to the director of the auditing division under a new division called, Planning, Evaluation, and Research. This director is a trained demographer and indeed was responsible for evaluation, research, and statistics prior to the creation of the auditing department. This appears to be a good solution for rationalizing the production of statistical reports, and at the same time will allow for a more concerted effort in the area of marketing.

The ability to relate a management problem, such as the production of statistical reports, to the organizational structure—and to make the appropriate changes—is the type of skill that FPMD strives to establish through its work in strategic planning and personnel management. It is an important milestone in the development of ASHONPLAFA as an organization.

F. Finance and Accounting

Background

The financial management system at ASHONPLAFA functions fairly smoothly; the central office has a clear understanding of the organization's financial position. However, financial information is not used to assist managers in reducing costs and increasing revenues. Regional Directors do receive information regarding their respective expenditures; however, they are not provided with incentives to reduce costs and improve efficiency.

Financial information is used by the internal auditing department to identify problems. For example, a decrease in product sales for a particular region will be investigated.

FPMD Intervention

In August, 1994, FPMD conducted an assessment of ASHONPLAFA's information systems. It was found that the computerized "Integrated Administrative Information System" developed by TecApro had been installed and was functioning fairly smoothly. However, the system had a limited chart of accounts, which precluded the production of more detailed financial reports. FPMD worked with ASHONPLAFA to develop a new chart of accounts.

Results

ASHONPLAFA has an improved ability to use information for controlling and recovering costs, both centrally and at the regional level. The new chart of accounts has made the accounting system more versatile in the type of reports it can generate and allows for comparisons among centers. For example, the new system can analyze the income and costs associated with surgical procedures in each region. This information may help managers to improve operating efficiency at less efficient centers.

ASHONPLAFA has not only a new accounting system, but a new attitude about accounting. They no longer talk about "expenditures," but "costs." There is a greater appreciation throughout the organization that "costs" affect the sustainability of ASHONPLAFA. This change in attitude is more prevalent among administrative staff than clinical staff, however, it is beginning to permeate the organization.

Future Work

Even when an accounting system provides accurate and relevant data, there needs to be incentives to reduce costs and knowledge about how to do it. As noted earlier, these are areas in which ASHONPLAFA would benefit from further assistance.

IV. OTHER OBSERVATIONS AND SUGGESTIONS

A. Multiple Donors and Consultants

There are several donors and many consulting agencies working with ASHONPLAFA whose work is overlapping or even duplicative. For example, IPPF and USAID request similar, but not identical semi-annual reports from ASHONPLAFA. Their reporting periods do not overlap, so in effect, ASHONPLAFA must produce reports quarterly. It would be helpful to ASHONPLAFA if IPPF and USAID could agree upon a format and schedule for

the reports. In general, ASHONPLAFA would benefit from a more coordinated effort among the many organizations who are providing assistance.

B. Outreach and Marketing

ASHONPLAFA has two separate outreach and marketing functions. The department of Promotion, Education, and Training educates the community about family planning and refers clients to the clinics. The Sales department sells condoms and over-the-counter contraceptives in the community as well as commercially to pharmacies and businesses.

Because of these two separate functions, ASHONPLAFA has two divisions which employ staff in the field: *consejera comunitarias*, under the sales dept. and the *educadoras* under the Promotion, Education, and Training department. The *consejeras comunitarias* are lay individuals who sell condoms and spermicides in the community—often from their homes— and tell people about the services of the center. The *educadoras* are professionals who provide education and refer clients to the clinic. There are 6 educadoras in the region. There are 460 *consejaras comunitarias*.

There is little coordination between the two departments supervising these two types of workers in the community. The *consejeras comunitarias* bring in revenue through product sales. The *educadoras* bring in patients to the centers. These functions are seen as separate and distinct, in spite of the fact that they are often approaching the same clients.

ASHONPLAFA should consider consolidating these functions, or at least creating a management structure that would coordinate the activities of workers in the community.

V. CONCLUSION

FPMD has had its biggest impact on ASHONPLAFA in helping staff to think strategically about the future of the organization and to work more effectively with one another. FPMD has helped ASHONPLAFA establish institutional goals, identify and address internal and external obstacles to reaching those goals, and solve organizational problems through discussion and negotiation. ASHONPLAFA can now alter its organizational structure to meet its goals, and can monitor the performance of staff based on clearly articulated objectives. One senior manager stated that FPMD helped staff at ASHONPLAFA to "open their minds" to define priorities and solve problems. Another senior manager said that FPMD has affected the whole organization in a coordinated manner based on

ASHONPLAFA's institutional goals, in contrast with other consultants who tend to work on isolated aspects of the organization.

FPMD has been instrumental in helping ASHONPLAFA to move forward in decentralizing management authority. FPMD has assisted staff at ASHONPLAFA to clarify the purpose of decentralization and to recognize that the continued growth of the organization is, to some extent, dependent on the willingness of the central office to relinquish an appropriate amount of management control to the regions. Although more work needs to be done in this area, there is more agreement about what should and should not be decentralized and what systems and specific action steps need to be implemented for decentralization to be successful.

With regard to how FPMD might be more effective, there are several arguments for having a resident advisor. In several instances, ASHONPLAFA would have benefitted from ongoing technical assistance rather than short bursts of training. For example, several staff stated that the performance management workshop, although very useful, would have been more effective if it had been structured as a one-day per week training session, rather than a three-day workshop. This would allow participants to practice integrating what they learned into their daily activities. This type of training schedule might best be provided by a resident advisor.

Another argument for a resident advisor is that the strategic planning work could have had more of an effect on the organization if the consultant had stayed in the country until the strategic planning document was complete—and if he could have been present to link the strategic planning exercise to the development of the operational plans, known as the "Action Plans."

One concern about FPMD is that activities were initially delayed, particularly in the areas of Accounting and MIS. Now with FPMD ending, the technical assistance in these areas is somewhat rushed. Much of this work will be completed contingent on FPMD II.

As a final observation, ASHONPLAFA is the recipient of technical assistance from a plethora of agencies. The work of these agencies is at best complementary, at times overlapping, often duplicative, and at worst conflicting. There is a need for someone to coordinate this work, and the agencies, including FPMD, should make more of an effort to work in concert.

ANNEX 1

OBJECTIVES OF THE MANAGEMENT DEVELOPMENT PLAN

- Stronger, more decentralized organization; regional directors will have more authority and will use it to make programmatic decisions.

- Improved ability to use information for controlling costs and program planning, both centrally and at the regional level.

- Improved organizational effectiveness, measured by increases in CYP, new family planning users, and/or continuing users, and improved levels of efficiency.

- Use of more creative strategies (especially regionally) to raise local funds to support programmatic activities.

ANNEX 2

EVALUATION METHODOLOGY

The final evaluation of FPMD's work with ASHONPLAFA was based on data gathered through semi-structured interviews and a review of the documents listed in Annex 3. During the week of June 11-16, an FPMD staff member, who had not previously participated in FPMD work with ASHONPLAFA, conducted semi-structured interviews with 14 staff at ASHONPLAFA as well as a staff member at the USAID mission. The interviews took place at the central office of ASHONPLAFA, the USAID mission, and the regional center in San Pedro Sula.

The interviews focused on the workshops and technical assistance provided by FPMD in the areas of: Strategic Planning, Personnel Management, Decentralization, MIS, Organizational Structure, and Finance and Accounting. Interviewees were questioned about the impact of FPMD interventions on their own job activities and on the organization as a whole. Several questions focused on the operational goals outlined in the strategic plan, and whether there were ongoing activities to reach those goals.

Further information was gathered by reviewing trip reports and the strategic plan. Finally, several FPMD staff were questioned about their impressions of ASHONPLAFA and how the organization has changed as a result of FPMD interventions.

ANNEX 3

LIST OF PERSONS INTERVIEWED

ASHONPLAFA

Alejandro Flores Aguilar, Executive Director, ASHONPLAFA
Juana Martínez, Director, Division of Institutional Services
Nelli Fúnez, Director, Division of Regions
German Cerrato, Director, Division of Administration and Finance
Lenin Flores Anduray, Director, Division of Information and Marketing
Margarita Suazo, Director, Internal Auditing
María Roberto Bulnes, Director, Human Resources
Reina Galindo, Supervisor, Adolescent Program
Josí María Zelaya, Director, Internal Training
Donaldo Chuiz, Director, Accounting and Budget
Marco Antonio, Raudales, Director, Sales
Joaquín A. Núñez, Director, Medical Services
María de Jesús Alvarado, Regional Director, San Pedro Sula
Javier, Accounting, San Pedro Sula

USAID Mission

Lori Loux, USAID

ANNEX 4

LIST OF DOCUMENTS REVIEWED

Arias, María Eugenia, Nancy Murray, and Edgar Necochea. *Análisis e Identificación de Necesidades: Estructura y Sistemas Administrativos de ASHONPLAFA*. Family Planning Management Development, 1993. 19 pp.

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McMillan, Cecilia, and Maria Eugenia Arias. *Performance Management Workshop: ASHONPLAFA*. Family Planning Management Development, 1995. 5 pp.

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Villamil, Rodrigo Castro. *ASHONPLAFA: Codigo Contable*. Family Planning Management Development, 1994. 44 pp.