

CONTRACTOR: John Snow, Inc. / MotherCare
CONTRACT #: HRN-C-00-98-00050-00
REPORTING PERIOD: January 1 - March 31, 1999

A. NARRATIVE

1. BACKGROUND

The MotherCare III Subproject will continue and complete selected portions of the MotherCare II Subproject, which promoted maternal and neonatal health and nutrition and the reduction of maternal and neonatal mortality. Long-term country programs, operations and applied research, policy formulation and information dissemination activities are to be continued for the purposes of scaling-up and sustainability. This Cost-Plus-Fixed-Fee completion contract totals \$4,800,000.00.

2. EXPECTED RESULTS

In accordance with the MotherCare III contract, MotherCare expects the following results by the end of the contract:

- Continued and completed work in long-term countries, divided as follows:
 - ▶ Three intensive long-term country programs continued and completed; Monitoring and evaluation systems instituted
 - ▶ Less intensive, long-term country programs or demonstration projects completed and results reported by MotherCare
- Applied research on key issues related to maternal health, nutrition and STD/RTIs completed and prepared for publication, primarily in peer-reviewed journals
- World-wide, policy-related operations continued; Commitment built through increased dialogue that stems from a) participation in workshops, meetings and seminars with ministry officials, international NGOs, multilateral agencies, development banks, international professional organizations; b) the production of documents that synthesize state-of-the-art understanding about priority programming in reproductive health for significant and sustainable impact
- Information dissemination efforts continued through presentations at international fora, informational seminars for USAID in Washington, D.C., knowledge sharing with USAID missions and partners in countries where MotherCare has long-term programs, dissemination of MotherCare publications, fulfillment of requests for information and the publication of the MotherCare Matters newsletter

3a. CURRENT CORE ACTIVITIES

3.a.1. LONG TERM COUNTRY PROGRAMS

Intensive Long-Term Country Activities

GUATEMALA:

I. ACHIEVEMENTS

a. Training

- Follow-up/reinforcement training was initiated in the health zones of San Marcos, Totonicapán, Sololá, Retalhuleu and Suchitepérez during this quarter. Doctors and nurses met once a month to discuss the cases with obstetric or perinatal complications. Obstetrician, Dr. Gonzalo Samayoa, facilitated these meetings in five hospitals and covered the topics of partogram, toxemia and hemorrhage. The rest of the topics should be completed by July, prior to the final evaluation of the training component.
- The design of the training evaluation was discussed with MotherCare's Training Advisor, Jeanne McDermott. It is scheduled to commence on July 21 in the hospitals of Totonicapán, Sololá, and San Marcos, with the hospital in Quiché used as a control. Dr. George Gilson, Susan Goldman and Alicia Ruano will supervise the evaluation along with the health zone coordinators.

b. Monitoring

- The health zones of Sololá, San Marcos, Quetzaltenango and Totonicapán continue with the collection of maternal/perinatal health information. Suchitepéquez and Retalhuleu also initiated the collection of information through the information registers. While during the last quarter several computer and program problems occurred, computers are currently being used in three of the areas.
- MotherCare/Guatemala presented their experiences on Birth Registers to an international audience during a meeting held by Measure II in Washington, DC.
- In Guatemala the monitoring data continues to be presented to the personnel in the hospitals during monthly meetings.
- A meeting with representatives of all of the participating hospitals is planned for May. This will provide attendees a chance to share and compare information and questions.

c. IEC

- Eight NGOs in Guatemala received, at their request, materials on group facilitation and two of these received technical assistance from MotherCare in the training of community facilitators
- The nursing schools in Guatemala requested and received 200 manuals on the facilitation of community groups and have initiated lessons in the methodology.

d. Anemia

- Monitoring of the districts for verification of the availability and distribution of iron to pregnant patients that attend health centers and posts in the target communities continued. While the health centers have iron supplements available and pregnant women are receiving them, the health posts

have more difficulty obtaining a supply of the pills from the health centers. Counseling was not evaluated during this period.

- The final evaluation survey of the anemia intervention is in the planning stages and is scheduled to take place in May and June. A total of 600 women will be interviewed including a control group that does not attend the available health services.

e. *Community Maternities*

- In Canatel, Quetzaltenango, the TBAs formed a committee to establish a community maternity in their town. MotherCare provided them with technical assistance on the establishment of the committee and helped them with a proposal to Social Services to obtain financial support for the infrastructure.
- MotherCare has been supporting the committee of Comitancillo, San Marcos in the establishment of a community maternity. It is expected, however, that retaining the financial support will take time.
- The community maternity in La Maquina, Retalhuleu is almost completed and MotherCare trained the personnel in its administration during the last quarter. They will begin to offer services in June.
- It is expected that the community maternity in Santa Clara, Sololà will be up and running in May with the trained, parochial sisters attending the births.
- The doctor of the district of Nahuala, Sololà refuses to allow the opening of the maternity in this area although the NGO Clínica Cristiana has offered to pay for all of the expenses. MotherCare will continue with meetings to look for solutions to his inquietudes.

f. *Other Activities*

- MotherCare/Guatemala collaborated with UNFPA in the use of tutorial training for nurses. This methodology was subsequently used in their maternal mortality training in the hospital in Quiché
- An agreement was signed to work collaboratively with the MNH project while MotherCare/Guatemala is finishing its work for MotherCare III and the MNH project is initiating its activities.
- The following reports were completed during this trimester:
 - Radio audience evaluation
 - Documentation of the training tutorial for hospital nurses in obstetric and perinatal complications.
 - Documentation of the training tutorial for hospital doctors in obstetric and perinatal complications
 - Draft version of the perinatal mortality investigation

BOLIVIA:

I. ACHIEVEMENTS

a. *Educational Material*

- MotherCare Bolivia, reprinted and distributed a new lot of IEC material (20,000 recall calendars for pregnant women, 1,000 ferrous sulfate distribution promotional posters for health personnel and 500 monitoring guides to consolidate information regarding micro-nutrient supplementing by community health personnel).
- MotherCare also purchased and distributed 20,000 double lid jars to improve both presentation and conservation of the ferrous sulfate tablets in the health districts we support.
- Copies of the document “Lessons learned during the implementation of the social marketing strategy to improve coverage of ferrous sulfate supplementing tablets” were distributed among central level health personnel and among health personnel of the 9 SEEDS.
- Supervision visits were carried out at some health facilities in order to reinforce the technical aptitudes of both institutional and community health personnel. During the visits we also established the state of the implementation of the marketing strategy to improve the coverage of ferrous sulfate tablet supplementation.
- During these training supervision visits, the technical skills of newly incorporated health personnel on their annual social service duty, were reinforced. Communication between the different levels of health service delivery was improved and doubts regarding the objectives of the program were cleared. We also achieved higher levels of awareness regarding the issues of iron deficiency anemia among pregnant and post delivery women.
- Aptitudes and skills regarding the use of ferrous sulfate tablets and counseling materials by community level health personnel were reinforced.
- 1000 ferrous sulfate tablets delivery and counseling promotional posters were reprinted with new colors, and distributed among health personnel.
- An integrated Information Recollection Plan for monitoring and evaluation of the MC project was established. All the supervision, monitoring and evaluation instruments of this project component have been reviewed and have been incorporated in an integrated manner with the other program components.
- The contents of the first issue of MotherCare III’s municipal bulletin have been submitted for revision and will be published in the near future.
- A Sustainability Plan has been designed for the project component of Iron Deficiency Anemia among pregnant women.
- We have prepared the first draft of the anemia component cost study. This study represents the starting point for a cost effectiveness study to be carried out at the end of the program.

- Data has been gathered for the processing of the comparative coverage document at the National, Regional and District levels and by health facilities in MotherCare's area of influence.

b. *Program Coordination*

- MotherCare actively participated of all meetings held by the First Lady's Office regarding the implementation of the National Integrated Program for the Prevention of Nutritional Anemia. We have also participated in meetings held by the Department of Nutrition to evaluate last year's activities and to design a workplan for 1999 as part of the Micro-nutrient Malnutrition prevention program (iodine, vitamin A, iron and fluoride).
- Training Supervision Activities have been coordinated with the Department Health Units of Cochabamba and La Paz. In most cases Health District visits have been carried out by joint work teams.
- MotherCare participated in the meetings of the Safe Motherhood Service Subcommittee.
- MotherCare coordinated activities with the MOH's Health Reform Unit in order to implement the Mother/Child Package.
- We coordinated the Social Marketing project activities for the multi-vitamin supplementation for fertile aged women with PSI. This project will be implemented in the next months in Santa Cruz.

c. *Evaluation of Training Activities*

Revised tools based on those used in preliminary evaluations in 1998 by Gilson and Conover were prepared. Evaluation was coordinated by ACNM consultant Connie Conover and Miguel Ugalde.

A total of 28 evaluations were carried out (11 providers who did not receive MotherCare in-service training and 17 who received MotherCare in-service training) the second and third weeks of January in all the project's districts and in the Illampu control district.. Each evaluation contains the following documents:

- Knowledge test
- Level of confidence skills checklist
- Clinical skills evaluation
- Complication audit
- MotherCare course review interview

C. Conover and J. McDermott are preparing the final evaluation report.

d. *Incorporation of the Curricula for the Internship and the Fifth year of medical studies in the San Andres and San Simon Schools of Medicine*

In Cochabamba, MotherCare coordinated two meetings with the Departments of Maternal/Child Health and with the Internship Department represented by Dr. Max Sanchez and Dr. Angel Maida.

The agreements permit the joint preparation of a sustainability plan called “ Incorporation Plan”. This document will serve as the guideline for a joint workshop that will establish procedures to include the contents of the curricula in the School of Medicine’s fifth academic year and the Internship study plans and programs. Related study themes have been also incorporated to the Rotating Internship regulations. This document and the annual training plan will be the initial and official work instruments for related activities. MotherCare’s main duty is to facilitate the process. The MotherCare/Bolivia Project Director will personally take charge of this endeavor with a high degree of respect to autonomous activities. The workshop has been scheduled for April 18 in the city of Cochabamba.

Once the incorporation phase has been completed in Cochabamba, a similar process will be initiated with the La Paz University. Two coordination meetings with the head of the Mother/ Child Department, Dr. Gustavo Mendoza, have been held. Dr. Mendoza is interested in preparing a document similar than the one we have developed in Cochabamba. We have agreed to prepare the Incorporation Plan in the near future.

e. *Essential Drugs Manual*

The revision of the list of drugs employed in the mother-baby package has started. We have found some drugs are purchased by UNICEF but they are no longer in use. The revision utilizes materials produced by MotherCare (“A Reference for Care Givers”) sent to us by Jean McDermott, the National Norms, and rules of the basic health insurance plan. With these reference points, the basic document will be prepared. This document will follow the guidelines of Drugs for Action. It presently has a 40% advance and the first draft will be ready by the end of June.

f. *Training Supervision Manual*

The original proposal for this document responds to the need of a training instrument for “Training Supervisors”. Early in February, MotherCare presented the design and structure of this guidebook in a meeting with the MOH, USAID, JHPIEGO and Pathfinder. All institutions present agreed to support its development. They also agreed upon the need to decentralize supervision in the shortest possible time and to seek all options to carry out a training workshop for supervisors at both the national and regional levels.

Early in December we presented a proposal on training supervision. Good receptivity was noted among the national authorities. The proposal has already been incorporated in the plans and programs of the Service Unit of the MOH under the guidance of Dr. Fernando Nunez, national head of Reproductive Health.

g. *Maternal and congenital syphilis:*

Negotiations with the MOH and PAHO were undertaken for the reprinting of the training manuals for the implementation of the maternal and congenital syphilis elimination plan. PAHO reprinted 400 copies of the manuals, the training guides and training modules. Manuals were revised by the MOH and by the National Institute of Laboratories before their reprint.

h. *Monitoring and Information System*

During February, a one-week long evaluation planning workshop took place. This was followed by a week of work with Mrs. Beatrice Selwyn from the University of Texas to define the time schedule and the information needs for the project evaluation.

We have established a plan to recollect information concerning peri-natal and maternal complications and other information from the National Health Information System SNIS, for our final evaluation.

i. *IEC*

Please refer to the Appendix 1 for report on IEC.

II. OTHER ACTIVITIES

- Technical assistance was provided to the MOH's National Program for Control of Micronutrient Malnutrition. We have also assisted the new staff who is responsible for the program in the Department Health Units of La Paz and Cochabamba.
- The "Serum Prevalence and Risk Factors for Chlamydia Infection in Bolivia" research proposal was prepared and sent to Frontiers.
- Presentation and oral exposition in the World Epidemiology Congress in Thailand, INCLEN, of the BASICS/MotherCare research project "Peri-natal Mortality Risk Factors in the Woman's Hospital. February, 1999.
- Participation in the Workshop on the use of Birth Registers as a Data Source for Maternal and Perinatal Health Care- Measure Evaluation, Macro International Inc. Arlington Virginia, March 2-6, 1999.

III. MOTHERCARE/WASHINGTON ASSISTANCE

- a. We received the visit of Eva Weisman, with whom we revised the cost study of the anemia prevention component.
- b. We also received assistance from Jim Travitt, Health Policy consultant, who helped us review information regarding costs of the MotherCare program.
- c. Eva Selwing helped us establish the methodology to be used for the MotherCare program evaluation.
- d. Meetings were held with the MOH's STD/AIDS Department during the initial implementation activities of the National Plan for the Basic Health Insurance. Under the new MOH structure, this Department now belongs to the Direction of Mother Child Services. It includes all components of STD control in maternity health centers.

IV. PROBLEMS

- a. The Bolivian Basic Health Insurance program has not yet begun and all activities for congenital syphilis control and prevention have been included in this program's agenda and strategy.
- b. We have received an official notice by the MOH stating that no training, teaching or other educational activities are to take place until April.

V. ACTIVITIES PLANED FOR THE FOLLOWING MONTHS

- a. Printing of the Municipal Bulletin, January - March 1999.
- b. Collection of information required for the evaluation of the health services of the Health districts supported by MotherCare.
- c. Joint training of epidemiologists and maternal health services personnel regarding the Reproductive and Sexual health outline.
- d. Production of the final document of the research activity " Peri-natal Mortality Risk Factors in the La Paz Woman's Hospital, Bolivia, BASICS - MotherCare".
- e. Follow up and monitoring activities will be completed for the implementation of the community strategy of ferrous sulfate tablet distribution in the seven health districts that receive MotherCare's assistance.
- f. Community health personnel will receive training reinforcement regarding iron deficiency anemia and the management of iron tablets.
- g. Other components of the MotherCare project will receive support during the anemia prevention Monitoring and supervision activities, in an integrated fashion.
- h. Supervision field trips to the project's work areas. These activities will begin during the second week of April, with the collection of monitoring information. This has been planned as a team work activity by MotherCare Bolivia.
- i. Institutional Strengthening of 2 Training Centers. *Purchase of support Equipment and Supplies for La Paz and Cochabamba.* This budget will be executed through the Sustainability Plan, once incorporation objectives are reached with the two Schools of Medicine.

INDONESIA:

I. ACHIEVEMENTS

a. Peer Review/Continuing Education/Fund Raising Program

Peer Review (PR) and Continuing Education (CE) activities were developed collaboratively with IBI (Indonesia Midwifery Association). The purpose of these activities was to complement the Life Saving Skills Training. The trained Bidans and Bidan di Desas are expected to do these

activities among their own peers using checklists to assess and maintain their skills after the training. The identified areas which need to be strengthened are followed-up by a CE plan. These activities were supported by a Fund Raising (FR) Program. MotherCare has provided initial funds to start the FR program. These activities are still being actively conducted in the 3 MotherCare districts during the months of February and March 1999, and, at this stage, the 3 districts have been able to use their own money to support the PR/CE activities. The topics that will be discussed during new CE include: management of Pre/Eclampsia and high risk detection.

b. Information, Education and Communication

- **IPCC Skills Observation/Evaluation**

The IPCC training to increase Bidan di Desa's (BdD) ability to communicate with community members and improve their integration into the village of their responsibility, was conducted in April/May 1997 for 555 Bidan di Desa. Observation/evaluation were conducted in August and September 1997, and followed by observations of 10 Bidan di Desa (BdD) in the control non-MotherCare district (Tapin) in late December 1997, and the second evaluation for the trained BdDs in October, 1998. During the month of January/February 1999 the data was analyzed. The evaluation included exit interviews of clients and observations of IPCC trained and non-trained midwives. The results were analyzed using a scoring method to measure midwives' skills in the area of welcoming, active listening and responding to questions, general attitude and counseling. The results showed that there is a significant difference between IPCC trained and non-trained midwives in the above area. Some midwives feel that they are more sensitive to their clients and better in responding to clients' questions.

- **Adding a guideline/usage into the IPCC Module**

To complement the IPCC training for BdD, an IPCC module for trainers and trainees was developed prior to the training in April-May 1997. After a more careful review of the module, it was concluded that a guideline on how to use the module was needed, so that it could be used by the MOH or other organization without intensive training. In September 1998, the MotherCare team worked with the PATH team, to develop the guidelines and integrate them into the module. Agoes Setiaji, MotherCare IEC specialist, continued the process in November- December, 1998 and January 1999. By the end of January 1999 the revised IPC/C module was available (Bahasa Indonesia version).

- **IEC Materials' Monitoring**

The second monitoring of the printed anemia IEC materials and the radio spots was conducted among Bidan di Desa, Bidan Puskesmas, and women in the community, in late September 1998. The data was been entered and cleaned in November-December, 1998. The analysis started in February/March 1999.

(Note: the first monitoring was done in December 1997 and several conclusions were made, and reported in the previous quarterly report)

- **Development of IEC Booklet : "Promoting Behavior Change Among Providers and Community to Support Safe Motherhood: An Integrated Approach to IEC. A Guide for Program Planners"**.

This booklet was developed so that MotherCare experience and lessons could be shared with other institutions/organizations. The booklet was developed before the end of the project and further revised in November-December, 1998. During the period of January and February 1999, MotherCare staff worked with the printing company on the overall layout of the booklet. In March 1999, the booklet was printed.

c. *Anemia Control Program for Newlywed Women (Marriage Registration Study)*

MotherCare and MOH initiated an innovative intervention strategy, using an IEC approach, to control anemia in newlywed women in collaboration with the Ministry of Religious Affairs. The project was launched at the end of July 1998. Following a baseline in July-August 1998, two monitoring and evaluations of the cohort were conducted in August-September 1998 and December 1998 to check iron consumption and hemoglobin levels one month and three-four months after the introduction of iron tablet.

During the month of January/February 1999, the data was entered and cleaned. In March 1998, most of the analysis was completed. The results showed a 30% decrease of anemia prevalence from 23.8 % to 14.0%. The majority of the newlywed women consumed an average of 30 tablets. A draft paper is available.

d. *Monitoring of Private Iron Pills Distribution/Supply:*

A monitoring of the private sector's iron pill distribution/supply was conducted in January 1999, by interviewing provincial drug distributors and district IBI (Indonesia Midwifery Association) members. The results showed a steady increase in the supply of the iron pills in the 3 MC districts. By January 1999, as many as 18,049 sachets (30 iron pills/sachet) were supplied to the 3 MC districts. The distribution and supplies is now occurring in other provinces, mostly Java.

e. *Bidan di Desa Survey:*

During the IPC/C training for Bidan di Desas in April 1997, a survey of Bidan di Desa was conducted. The purpose is to get information about the profile of Bidan di Desas, including when they started working as BdD in their village, the status within the MOH system, the services they are providing (e.g. number of deliveries), etc. By the end of the MotherCare project, another survey is considered necessary to capture any changes. For the second survey, other variables were also added, including information about Peer Review/Continuing Education for the trained BdDs, iron pill distribution/supply, involvement of BdDs in MPA activities, IEC Media, and the Social Safety Net Program implementation (MOH/ADB /World Bank project). The modification and finalization of the questionnaires was completed in February/March 1999. The survey is planned for April.

f. *Ongoing Activities:*

- **Data collection, Entry, Cleaning and Analysis of the following information :**

Hospital Register:

Hospital/Delivery Register was developed during MotherCare II to gather information related to MotherCare interventions, including percent of women estimated to have direct obstetric complications who are treated at hospitals (**Met Need**); Case Fatality Rate (**CFR**), Obstetric Complications, etc. Data collection, entry and cleaning is conducted every month, from 6 Hospitals (one provincial Hospitals and 5 district Hospitals of the three MC districts) and 1 Puskesmas (HSS district). Data analysis is conducted every 3 months.

Status: By March 1999, data from the months of January and February 1999, was entered in the computer.

Bidan di Desa Registers:

BdD registers were developed during MotherCare II to gather information, including post-partum visits by LSS trained Midwife (only in HSS district) and average number of iron tablets consumed by post-partum women. Data collection, entry, cleaning and analysis is conducted every 3 months.

Status: Data from the period of October - December 1998 was entered in February 1999.

MOH statistics from 3 MotherCare districts (HSS, Banjar and Barito Kuala):

To gather information on percent of births attended by trained health providers; percent of pregnant women going for first ANC visit (**K1**); percent of pregnant women making at least 4 ANC visits (**K4**); percent of pregnant women receiving or buying iron tablets (**Fe-1**); percent of pregnant women receiving or buying 90 iron tablets (**Fe-3**). Data collection, cleaning and analysis is conducted every 3 months

Status: By March 1999, data on K1, K4 and births by trained attendant up until February 1999 was collected. Unfortunately, data on Fe-1 and Fe-3 for the same period of time is not yet available. MotherCare staff is planning to do a follow-up by visiting each district in May 1999.

MOH statistics from 6 non-MotherCare districts and 1 Municipal (Banjarmasin) :

To gather the same information as above, MotherCare staff coordinate with MOH staff at provincial and district health office. Data collection, cleaning and analysis is conducted every 3-6 months

Status: The same as above (number 3).

- **Maternal and Perinatal Audit:**

Continuation of MPA activities after MotherCare Project.

The 3 MotherCare districts are continuing the MPA activities, with MOH funding. The implementation of the MPA meeting is still using the same pattern developed by MOH and MotherCare. In February and March 1999, HSS and Banjar districts conducted MPA meetings.

Finalization and printing of MPA guideline.

During the MotherCare II Project, the MPA activities were initiated and additional guidelines to the existing MOH guidelines were developed and modification of maternal, perinatal and summary forms was conducted. The modification of MOH guidelines and forms was accepted by MOH South Kalimantan and currently is being used for MPA activities in South Kalimantan. This process of finalization continued in January/February 1999 and the printed MPA guideline was produced in February 1999.

g. Other Activities:

Endang Achadi, as a team member of the Maternal and Neonatal Health Program of MNH Project . The team is lead by JHPIEGO team, and consists of USAID, experts from the University of Indonesia, POGI (Indonesia Obs/Gyn Organization), IBI (Indonesia Midwifery Association), and Academy of Nutrition, Jakarta. The team is requested to develop Crisis Response Strategies for MNH Program for the USAID/Mission and MOH Strategies for MNH Program.

h. Admin/Finance:

As of March 31, 1999, the position of monitoring and evaluation coordinator is still vacant. The specific skills and capability required (familiar with maternal health issues, MOH system and monitoring/ evaluation issues) for this position makes it difficult to find the right person. For the time being, Gunawan, MotherCare PIO, is taking the responsibilities in this area.

i. International Presentation:

Gunawan Supratikto, MotherCare/Indonesia Project Implementation Officer, presented at the Workshop on the Use of Birth Registers as a Data Source for Maternal and Perinatal Health Care, in Washington DC. The paper was entitled: "Standardizing Birth Registers in South Kalimantan, Indonesia."

j. Other meetings, not mentioned in the above section

- Endang Achadi, monthly meetings with Ms. Lana Dakan, MNH team leader, and Dr. Sri Durjati, MCH Program Manager, USAID
- Gunawan Supratikto: routine meetings (as needed) with the provincial/district health office, and meetings with BPS (Provincial Bureau of Statistics) for post-survey plan.

Less-Intensive Long-Term Country Activities

Completion reports have been received from Egypt, Eritrea, Guinea, Honduras, Malawi and Pakistan. Reports from Benin and the LAC Initiative are forthcoming.

3.a.2. APPLIED AND OPERATIONS RESEARCH

Thailand

An explanation of the methodology of the applied research project in Thailand, "A Randomized Controlled Trial for the Evaluation of a New Antenatal Care Model" by P. Lumbiganon, N. Winiyakul, K. Chaisiri, and C. Chongsomchai was published in *Paediatric and Perinatal Epidemiology* in October 1998, Vol 12, Suppl. 2.

Ghana

"Training Non-Physician Providers to Improve Post-Abortion Care" project with Ipas and Deborah Billings is complete. Several papers from the research have been submitted for publication. One article was published in *Midwifery Today* in Spring 1998, issue number 45.

Indonesia

"An Impact Evaluation of Low-Dose vitamin A Supplementation on Maternal and Neonatal Infections and Prematurity" by Gadjah Mada University, and Michael Dibley is forthcoming

Peru

"Effect of educational intervention to improve dietary intake in adolescents and women with community kitchens in Lima, Peru" and "Study on the impact of iron supplementation of indices for school performance in adolescent girls." by the Institute de Investigacion Nutricional and Hilary Creed-Kanashiro are on file and will be published.

Uganda

“Access to Reproductive Services: Participatory Research with Adolescents for Control of STDs” by the Pacific Institute for Women’s Health by Lisa Bohmer is complete and will be submitted for publication.

Uganda

“STD Control for Maternal and Infant Health” by The Johns Hopkins University and Ron Gray will be completed shortly and submitted for publication.

3.a.3. WORLD WIDE POLICY

- January Jeanne McDermott traveled to Kenya with the RPM/MSH team for the Dissemination Workshop of the field test of the Cost Estimate Strategy in Kenya
- January 26-28 Marge Koblinsky attended the UNICEF meeting in Mexico City to present at the International workshop on Women Friendly Health Services. Her talk was entitled “Building Quality Care Through a Training and Continuing Education System for Midwives
- February 3 Marge Koblinsky spoke at a meeting for AED’s Change Project on “Behaviors that Matter for Safe Motherhood
- March Jeanne McDermott co-presented at a meeting at USAID/Washington with Tomoko Fujisaki from RPM/MSH on the Dissemination Workshop of the field test of the Cost Estimate Strategy in Kenya
- March 18 Jeanne McDermott presented “Making Motherhood Safe: an Integrated Approach to Improving Maternal Health Care in South Kalimantan, Indonesia” during the 17th MotherCare Seminar Series at USAID

3.a.4. INFORMATION DISSEMINATION

Aside from the aforementioned presentations, MotherCare conducted several other information dissemination activities.

- The MotherCare publications list was updated to include the following publications:

IEC (Information, Education, Communication) Materials from MotherCare Safe Motherhood Program in Pakistan.

- A) Posters available in English for Eclampsia, Postpartum Hemorrhage, Antepartum Hemorrhage, Care of Pregnant Women, Obstructed Labor, and Puerperal Sepsis (English)
 - B) Safe Motherhood pamphlet (English)
 - C) Ante-natal Checkup Card (English)
- Aga Khan University, MotherCare. Arlington, VA: MotherCare/Johns Snow, Inc., 1998.

Clinical Screening May be a Cost-Effective Way to Screen for Severe Anemia

Dusch, Erin, Rae Galloway, Endang Achadi, Idurs Jus'at, Chakunja Sibale, Ciro Franco, Simon Cousens, and Linda Morison. *Clinical Screening May be a Cost-Effective Way to Screen for Severe Anemia*. Forthcoming in Food and Nutrition Bulletin. 1998.

Bangladesh Maternal Health Assessment, October 1997

Ministry of Health and Family Welfare, MotherCare, World Bank, et al. Bangladesh Maternal Health Assessment, October, 1997. Arlington, VA: MotherCare/John Snow, Inc., 1998.

Maternal and Neonatal Health in Indonesia: Baseline Findings from a Community Survey, 1996

Marshall, Tom, Endang Achadi, Ali Zazri, et al. Maternal and Neonatal Health in Indonesia: Baseline Findings from a Community Survey, 1996. Arlington, VA: MotherCare/John Snow, Inc., 1998.

Safe Motherhood Indicators--Lessons Learned in Measuring Progress

MotherCare, John Snow, Inc. Safe Motherhood Indicators--Lessons Learned in Measuring Progress. MotherCare Matters Vol 8, No. 1 (May 1999). Available in English, and Spanish.

Essential Obstetric Care and Subsets--Basic and Emergency Obstetric Care: What's the Difference

Marge Koblinsky. *Essential Obstetric Care and Subsets--Basic and Emergency Obstetric Care: What's the Difference*. MotherCare Policy Brief #1. Arlington, VA: John Snow, Inc., 1999.

Safe Motherhood Indicators--Measuring Progress

Marge Koblinsky. *Safe Motherhood Indicators--Measuring Progress*. MotherCare Policy Brief #2. Arlington, VA: John Snow, Inc., 1999.

- During this quarter MotherCare responded to over 50 requests for a total of approximately 300 documents. The majority of these were mailed to developing countries.
- Carla Chladek continued to update the MotherCare webpage at www.jsi.com/intl/mothercare.
- Marge Koblinsky completed the MotherCare Matters issue entitled *Safe Motherhood Indicators--Lessons Learned in Measuring Progress*. These will be mailed in May.
- Nazo Kureshy will complete the community diagnosis MotherCare Matters in July 99
- The MotherCare Matters on Scaling-up is still being reviewed.
- On February 2, Marge Koblinsky gave a presentation on "Organizing Delivery Care: Successful Model Programs" at the George Washington University International Health course.
- Marge Koblinsky spoke at a Johns Hopkins University Maternal Health class on "Organizing for Delivery Care: Successful Models" on January 6.

3b. CURRENT BUY-INS

No delivery orders are included in this contract.

3c. CURRENT SUBCONTRACTING ACTIVITIES

American College of Nurse Midwives (ACNM)

Jeanne McDermott continues to be seconded full-time as training adviser to MotherCare/DC.

Constance Conover served as consultant for the training evaluation in Bolivia in January.

Program for Appropriate Technology for Health (PATH)

Please see Appendix 1 for Veronica Kaune's report on IEC activities for Bolivia.

University of Indonesia

The activities performed by Endang Achadi, Project Director, MotherCare Indonesia and Idrus Ju'sat are included in the quarterly report for Indonesia.

Family Health International (FHI)

No activities conducted this quarter,

London School of Hygiene & Tropical Medicine (LSHTM)

Contract yet to be signed.

University of Texas Health Science Center

No activities conducted this quarter.

4. PERFORMANCE HIGHLIGHTS

Country Programs:

- Twenty-one of the seventy-seven contract deliverables have been completed. Please see attached Appendix 2.

- Evaluations for the activities in Bolivia, Guatemala and Indonesia are in the planning or implementation phases.

Applied and Operations Research:

- The majority of the reports are complete and await only publication.

World-wide Policy:

- Marge Koblinsky presented at the UNICEF conference in Mexico on Women Friendly Health Services

Information Dissemination:

- Over 300 documents were requested and mailed from the Washington, DC office.
- MotherCare Bolivia, as a part of its anemia prevention program distributed over 20,000 recall calendars, 1,000 distribution promotional posters, and 20,000 double lid jars to improve presentation and conservation of ferrous sulfate tablets.

5. STATEMENT OF WORK

There have been no changes which require a modification to the scope of work

B. ADMINISTRATIVE INFORMATION

See Appendix 3

APPENDIX 1

• IEC/C QUARTERLY REPORT

ACTIVITIES	ACCOMPLISHMENTS	PROBLEMS
1. General Coordination		
1 a. Coordinate and prepare documents of agreements with 18 Municipalities in our 5 districts regarding the IEC/C Strategy implementation (materials and radio campaign)	1. The Ministry of Health will implement the Safe Motherhood IEC/C Strategy (educational materials as well as the radio campaign) at a National level During this quarter, MotherCare presented to the MOH an implementation plan which included a list of the materials to be produced, the budget for 2000 health services and an implementation plan. (See Annex 1). Training will take place next quarter. 2. The work with the municipalities will start next quarter	None
2. IEC/C Strategy Implementation and Evaluation		
Implementation:		
2.1. Educational material		
2 1 a. Printing and distribution of the obstetrical and neonatal complications material	1. All educational material was printed	none
2 1. b Finalize educational material distribution	2. 60% of the MC assigned health services have received the educational material 3. 40% of the health services will receive the material during the next quarter	Due to the rainy season MotherCare II-Bolivia has not been able to access about 40% of the assigned health services. This is a problem due to the fact that many of those services wont have the materials to implement the IEC/C Strategy on time.
2 1. c Supervise and monitor educational material dissemination	- This activity is assigned for next the quarter	
2 1 d. Collect educational material dissemination quarterly reports from health services	- This activity is assigned for next the quarter	
2.2. Radio Campaign		
2.2.a. Continue to implement the Action Plan to distribute radio campaign into local radios and health services in assigned districts	- This activity has been already accomplished	
2 2 b. Disseminate Radio Soap Opera and Husband's spots in 4 national radios, local radios and health services	- - 350 packages have been distributed to 350 radios at a National Level	
2 2.c Recast Radio Soap Opera and Husband's Spots in La Paz and Cochabamba in Spanish, Aymara and Quechua twice during 1999, and once during 2000	- During this quarter MC coordinated with 2 radios in La Paz and four in Cochabamba to recast the radio soap opera during next quarter. Contracts have been prepared and are in the process of being signed	
2.2 d Conduct Radio Soap Opera and Husband's spots listeners' contests in radios	- This activity is assigned for next quarter	
2.2.e Supervise and monitor radio broadcasting in both cities	- This activity is assigned for next quarter	
2.3. Write a Final Report from the Formative Research, Strategy Design, Implementation and Evaluation for all components	- In process	
3. Community Involvement		
3.1. Announce, select and hire University Student's Internship	- 8 interns have been selected. Four are from the Catholic University and 4 from the UMSA	
3.2 Train university student's interns (safe motherhood topics, Radio Soap Opera and Husband's spots discussion groups manual)	- Training has started during this quarter and will be finalized by April 14, 1999	
3 3. Implement community involvement component	- This activity is assigned for next quarter	

3.4. Supervise and monitor community involvement activities	- This activity is assigned for next quarter	
3.5. Write a Final Report	- by December 1999	
4. Equip X number of culturally appropriate Mother Friendly Health Services	- The 30 chosen health services as Mother Friendly Culturally Sensitive Centers have already received all the assigned equipment	
4.1 Plastic bags for placenta return; blankets to keep women warm, wood screens for undressing in privacy, husband's and TBA's delivery room outfits to participate in deliveries; and floor mattress to deliver in squatting position	Done. During supervision if needed more material will be distributed.	
4.2. Distribute material	Done. Same as above	
4.3. Supervise and monitor usage	- This activity will take place next quarter	
4.4. Write a Final Report	- by December 1999	
5. Interpersonal Communication and Counseling (IPC/C) Training		
5.1. IPC/C Health Providers Training		
Train Medical, nurse school teachers on IPC/C skills	- This activity will take place next quarter	
Write IPC/C Supervision Strategy (document and forms) for Health providers in 5 assigned districts	- 60% of the document has been written, it will be completed by next quarter	
Supervise health providers in IPC/C skills in 5 assigned districts (field supervision)	- This activity will take place next quarter	
5.2. IEC/C Strategy Evaluation		
5.2.a. Audience Study	Done	
	<ul style="list-style-type: none"> - Analysis of data was completed. However, due to Dr. Slewyn's visit we decided to analyze data using an analysis method called "Strength of associations". Therefore, during this quarter the analysis took place and was completed. Next quarter, the final report will be presented. - The results shown by the new analysis show stronger patterns of increased and improved knowledge, decision, access and intention to use Health services in case of obstetrical and neonatal complications 	- Overall, data has yielded interesting tendencies and patterns towards and increased and improved knowledge, decision, access and intention to use Health services in case of obstetrical and neonatal complications. However, no mayor statistical significance have been found. According to Dr. Slewyn, we will be able to obtain better results with the analysis she proposed
6. COMMITTEES		
6.1 IEC Reproductive Health Sub-Committee		
6.2. Research, Evaluation, Population Policy Reproductive Health Committee	<ul style="list-style-type: none"> - Attended all meetings - Was elected as President 	
6.3. Safe Motherhood National Technical Committee		There were no meetings during this quarter
6.4. Quality of Care Committee		There were no meetings during this quarter
7. LAC INITIATIVE	<ul style="list-style-type: none"> - Supervised consultant activities. One orientation meeting and one SACOA's IEC Strategy Development Workshop. - Coordinated the Monitoring Activities with Diagnosis - Coordinated MC Educational Material and Radio Campaign Validation in SACOA with Diagnosis 	SACOA has decided to developed other materials than the ones proposed by NC. They have decided that they do not want to validate the materials MC has strongly indicated that the validation is a must in the process.

8. MC FINAL REPORT VIDEO	- Coordinated the development of the script, its revision with MC staff. The filming schedule will be soon established	- This activity can not be completed until MC has the results of the final evaluation. However, it was agreed upon, to continue developing the video until this information is available by the end of the year. Therefore, the video will be presented at the end of the year.
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II. MotherCare III Contract Deliverables

Product No.	Country	Title	Responsible Staff	Date Expected	Status
1.	Bolivia	Completion reports of long term intensive country programs	Guillermo Seoane Colleen Conroy Leslie Elder Carla Chladek	4/01/99	Not started
2.	Guatemala	Completion reports of long term intensive country programs	Elizabeth Bocaletti Colleen Conroy Leslie Elder Carla Chladek	4/01/99	Not started
3.	Indonesia	Completion reports of long term intensive country programs	Endang Achadi Jeanne McDermott Leslie Elder Carla Chladek	4/01/99	Not started
4.	Bolivia	Country Workplan (annually)	Guillermo Seoane Colleen Conroy	4/01/99	Done
5.	Guatemala	Country Workplan (annually)	Elizabeth Bocaletti Colleen Conroy	4/01/99	Done
6.	Indonesia	Country Workplan (annually)	Endang Achadi Jeanne McDermott	4/01/99	Done
7.	US	Community Diagnosis Model Tool and Guide for Analysis—for programmers	Anjou Parekh	4/01/99	Done
8.	Bolivia	Final Community Diagnosis Report -- for general audience (Spanish)	Veronica Kaune Colleen Conroy	4/01/99	Done
9.	Indonesia	Final Community Diagnosis Report -- for general audience (English)	Lara Zizic Jeanne McDermott	4/01/99	Done
10.	Bolivia	Baseline -- maternal and neonatal health report--technical paper* <i>Final reports-post intervention evaluations—technical papers</i>	Guillermo Seoane Colleen Conroy Leslie Elder	12/01/99	Baseline survey-Done Post survey- Not started
11.	Indonesia	Final report of the baseline survey and post maternal and neonatal health survey report— <i>technical papers</i>	Jeanne McDermott Tom Marshall	3/31/00	Baseline survey-Done Post survey- Not started
12.	US	Prototype curriculum for postpartum and new born care (Healthy Mother/Healthy Newborn) for trainers	ACNM Jeanne McDermott	4/01/99	Done
13.	US	Final manual for policy-makers and trainers (Life Saving Skills Training Program Process)	Jeanne McDermott	4/01/99	Done
14.	Bolivia	Prototype registers/client records for maternal/newborn care at district level--for programmers	Guillermo Seoane Jeanne McDermott Patsy Bailey	4/01/99	Done
15.	Guatemala	Prototype registers/client records for maternal/newborn care at district level--for programmers	Elizabeth Bocaletti Patsy Bailey Jeanne McDermott	4/01/99	Done

-Any individual stated in **Bold** type is considered to be the local point of contact for the stated item

-Not started: The item stated has not yet begun, but will begin shortly

-In progress: The item stated is still in draft form or is a continuous item (e.g. seminars, meetings, etc.) which will not be fully complete until number complete is equal to contract requirements

-Done: The item stated is in its final form and ready for distribution according to contract requirements

Table-1
Long-Term Country Programs

Product No.	Country	Title	Responsible Staff	Date Expected	Status
16.	Indonesia	Prototype registers/client records for maternal/newborn care at district level-for programmers	Endang Achadi Carine Ronsmans Jeanne McDermott	4/01/99	Done
17.	US	Anemia Prevention and control package—for programmers*	Leslie Elder	4/01/99	Not started
18.	Bolivia	Report of cost to municipalities of Safe Motherhood interventions-general audience	Guillermo Seoane Colleen Conroy Eva Weissman	4/01/99	Spanish Done
19.	Bolivia	Cost effectiveness analysis of <i>anemia interventions -- technical paper</i>	Eva Weissman Juan Carlos Leslie Elder	12/01/99	Not started
20.	Indonesia	Cost effectiveness studies of MotherCare interventions -- <i>technical paper</i>	Endang Achadi Jeanne McDermott Julia Fox-Rushby	12/01/99	Not started
21.	Bolivia	Final Country Report of results and lessons learned in MotherCare programs—to be prepared and submitted for scientific publication and for general audience	Guillermo Seoane Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott Carla Chladek	12/30/00	Not started
22.	Guatemala	Final Country Report of results and lessons learned in MotherCare programs—to be prepared and submitted for scientific publication and for general audience	Elizabeth Bocaletti Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott Patricia Daunas Carla Chaldak	12/30/00	Not started
23.	Indonesia	Final Country Report of results and lessons learned in MotherCare programs—to be prepared and submitted for scientific publication and for general audience	Endang Achadi Carine Ronsmans Marge Koblinsky Leslie Elder Jeanne McDermott Carla Chladek	3/30/00	Not started
24.	Egypt	Long-term, less-intensive country programs Completion Report	Ali Mageid Colleen Conroy	4/01/99	Done
25.	Pakistan	Long-term, less-intensive country programs Completion Report	Nazo Kureshy Carla Chladek	4/01/99	Done
26.	Honduras	Long-term, less-intensive country programs Completion Report	Leslie Elder Colleen Conroy	4/01/99	Done
27.	Benin	Long-term, less-intensive country programs Completion Report	Sourou Gbangbade Colleen Conroy Jeanne McDermott	4/01/99	In progress
28.	Eritrea	Long-term, less-intensive country programs Completion Report	Nueys Kidane Colleen Conroy	4/01/99	Done
29.	Guinea	Long-term, less-intensive country programs Completion Report	CPTFAFE -Kouyate Colleen Conroy	4/01/99	Done
30.	Malawi	Long-term, less-intensive country programs Completion Report	Dorothy Namate Leslie Elder	4/01/99	Done

**Table-1
Long-Term Country Programs**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
31.	LAC Initiative	Long-term, less-intensive country programs Completion Report	Gonzalo Fernandez Marco Casto Colleen Conroy	6/01/00	In progress
32.	Africa Initiative	Long-term, less-intensive country programs Completion Report	Joe Taylor, Pius Okong, Ann Phoya Jeanne McDermott Colleen Conroy	4/01/99	Done
33.	US	Final Reports of results from each targeted country program -- for general audience	Marge Koblinsky	9/30/00	In progress

**Table -2
Applied and Operations Research**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
34.	Thailand	Effect of a streamlined vs. traditional approach to antenatal care (technical paper)	Khon Kaen Univ., Thailand and WHO; Piskake Lumbiganon, Jeanne McDermott	10/1/99	In progress
35.	Ghana	Feasibility of provision of postabortion care by non-physician providers – to be prepared and submitted for scientific publication	IPAS Jeanne McDermott	10/1/99	Done
36.	Uganda	Effect of mass, population-based STD treatment of pregnant women on pregnancy outcomes	Ron Grey, JHU Jeanne McDermott	6/1/99	In progress
37.	Uganda	Adolescents' perceptions and practices concerning sexuality and health seeking behavior— to be prepared and submitted for scientific publication	Pacific Institute for Women's Health Marge Koblinsky	10/1/99	In progress
38.	Indonesia	Effect of low-dose Vitamin A supplementation for pregnant women on pregnancy outcome—to be prepared and submitted for scientific publication	Gadjah Mada Univ., Indonesia; PI: Michael Dibley Leslie Elder	10/1/99	In progress
39.	Peru	<i>Effect of educational intervention to improve dietary intake in adolescents and women with community kitchens in Lima, Peru—to be prepared and submitted for scientific publication*</i>	Instituto de Investigacion Nutricional (IIN) Peru, Leslie Elder	10/1/99	In progress
40.	Peru	<i>Effect of iron supplementation on anemia for adolescent girls Lima, Peru —Submitted for scientific publication*</i>	Instituto de Investigacion Nutricional (IIN) and JHU; PI: Leslie Elder	10/1/99	In progress
41.	Indonesia	Effect of TBA distribution of iron tablets on tablet consumption and hemoglobin levels –technical paper	Project Concern Intl, MC/Washington, Leslie Elder	10/1/99	In progress

**Table -2
Applied and Operations Research**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
42.	Pakistan	Unsafe abortion practices – to be prepared and submitted for scientific publication	Aga Khan Univ. (Fariyal Fikree & Sara Jamil) Nazo Kureshy	10/1/99	In progress
43.	Pakistan	<i>Description of training and outreach to pregnant women in an urban Muslim setting on pregnancy outcome -- Technical report</i>	Aga Khan Univ. (Fariyal Fikree) Nazo Kureshy	10/1/99	In progress
44.	Pakistan	Training, behavior change/communications intervention, and linkages with the formal health system in a community setting -- Technical paper	Farid Midhet Nazo Kureshy	10/1/99	In progress
45.	US	Attitudes and behaviors of women about anemia and taking iron supplements (Malawi, India, Indonesia, Bolivia, Guatemala, Honduras)—for scientific publication	Leslie Elder Rae Galloway Erin Dusch	4/01/00	In progress
46.	Bolivia	Final anemia qualitative and quantitative research study reports– for general audience	Juan Carlos Leslie Elder	10/1/99	Not started
47.	Guatemala	Final anemia qualitative and quantitative research study reports– for general audience	Elena Hurtado Leslie Elder	10/1/99	Not started
48.	Indonesia	Final anemia qualitative and quantitative research study reports– for general audience	Endang Achadi Leslie Elder	10/1/99	Not started
49.	<i>Egypt</i>	<i>Final report of perinatal quantitative and qualitative research-- to be prepared and submitted for scientific publication</i>	<i>Ray Langsten</i> Colleen Conroy	9/30/00	<i>Request to delete</i>
50.	Guatemala	Final report of perinatal quantitative and qualitative research-- to be prepared and submitted for scientific publication	Elizabeth Bocaletti Jeanne McDermott Patsy Bailey	4/30/00	Not started
51.	Honduras	Final report of perinatal quantitative and qualitative research-- to be prepared and submitted for scientific publication	Ada Rivera Colleen Conroy	9/30/00	Done
52.	US	<i>Perinatal Mortality in Developing Countries: A review of the current literature and methodological issues in community-based assessment— Technical paper</i>	Donna Espuet Jeanne McDermott	9/1/99	Not started

Table- 3
World-Wide Policy

Product No.	Country	Title	Responsible Staff	Date Expected	Status
53.	US	Summaries of interviews and focus groups about content and format of final MotherCare products for programmers and general audience	Measure III Marge Koblinsky	4/1/99	In progress
54.	US	Framework for improvement of quality of care (antenatal, safe delivery, essential obstetric, postpartum, newborn care)*	Jeanne McDermott Colleen Conroy	4/1/99	In progress
55.	US	Pocket handbook for management of obstetric emergencies and normal pregnancy, labor, birth, postpartum and new born care in resource-poor settings	Jeanne McDermott Colleen Conroy	4/1/99	Not started
56.	US	Framework for increasing demand for services for antenatal care, safe deliver, postpartum/newborn care and treatment of complications*	Veronica Kaune Colleen Conroy	4/1/99	Not started
57.	US	Common communication messages for safe birth and the healthy women and newborn	Nazo Kureshy	12/1/99	Not started
58.	US	Framework for improving the policy environment for Safe Motherhood and reproductive health*	Colleen Conroy Marge Koblinsky	4/1/99	Not started
59.	US	Recommendations for national anemia reduction programs, with emphasis on distribution and compliance*	Leslie Elder	9/30/00	Not started
60.	US	Guidance document for district-level monitoring and evaluation of maternal and neonatal health programs, including prototype registers--for programmers	Marge Koblinsky Jeanne McDermott Leslie Elder	9/30/00	In progress
61.	US	Lessons learned document for donors, programmers*	Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott	9/30/00	Not started
62.	US	Lessons learned document for researchers*	Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott	9/30/00	Not started
63.	US	Slide/Powerpoint presentation describing the problems of maternal and neonatal mortality and morbidity and lessons learned, "best practices", and programming priorities*	Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott Measure III	9/30/00	Not started
64.	US	Setting priorities for programming and identifying appropriate packages of services in Safe Motherhood and reproductive health--guidance document for programmers*	Colleen Conroy Marge Koblinsky Leslie Elder Jeanne McDermott	9/30/00	Not started

**Table 4
Information Dissemination**

Product No.	Country	Title	Responsible Staff	Date Expected	Status
65.	US	Six seminars for USAID Washington and cooperating agency staff ¹	Suzanne Jessop Marge Koblinsky	9/30/00	Not started
66.	US	Eight seminars for USAID mission staff, MotherCare country personnel, other donors and interested parties in MotherCare long-term countries ²	Guillermo Seoane Endang Achadi Elizabeth Bocaletti Marge Koblinsky	9/30/00	Not started
67.	US	Six presentation at major national/international meetings ³	Marge Koblinsky	9/30/00	Not started
68.	US	Three presentations or seminars for donors ⁴	Marge Koblinsky	9/30/00	Not started
69.	US	Closing international seminar/workshop in a developing country to present USAID/MotherCare contributions to the field of maternal and neonatal health	Marge Koblinsky	9/30/00	Not started
70.	US	Regional meeting to report on MotherCare program experience	Marge Koblinsky	9/30/00	Not started
71.	US	Summary meeting in Washington DC, for USAID and partners to present research outcomes and summarize lessons learned in MotherCare programs and the state-of-the-art in Safe Motherhood	Marge Koblinsky	9/30/00	Not started
72.	US	Frameworks, communication messages, lessons learned, programming priorities document, and research findings summary sent to all USAID missions, UN multilateral agencies, major bilateral donors, major international NGO/PVO umbrellas,(cont'd in description)	Marge Koblinsky	9/30/00	Not started
73.	US	Provision of all requested materials, site visit preparation, and availability for interview for external final evaluation of MotherCare, as requested	Carla Chladek	9/30/00	In progress

¹ Intended to be held at the RRB

² Three to be held in Bolivia, three to be held in Guatemala, and two to be held in Indonesia

³ One in Mexico (Unicef), Three at APHA, Two at NCIH, and One in Kenya

⁴ Two in Mexico (Unicef) and One at WHO

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**Table 5
Overall Project Deliverables**

Product No.	Country	Title	Responsible Staff	Date Due	Status
74.	US	Monthly Financial Reports	Didier Gaina	Monthly	In progress
75.	US	<i>Quarterly report of progress on contract tasks and performance requirements</i>	Marge Koblinsky	<i>Quarterly</i>	In progress
76.	US	Annual Work-plan	Marge Koblinsky	Annually	First workplan completed
77.	US	Annual report of PHN indicators and narrative results (for inclusion in G/PHN Results Reporting and Resource Request Report--R4)	Marge Koblinsky	Annually	In progress

Italics--Proposed title change-- submitted to contracts with rationale for approval.

* Formats for these products to be determined during a meeting scheduled for March 24-25, 1999

APPENDIX 3

MotherCare III
CONTRACT NO: HRN-C-00-98-00050-00

MANAGEMENT INFORMATION REPORT

September 29, 1998 - March 31, 1999

1. Current and Projected Level of Effort: Not Applicable (Not a Level of Effort Contract)

2. Financial Status by Funding Source:

	Amount Obligated	Expenditure 9/29-12/31	Expenditure Thru 12/98	Expenditure Thru 1/99	Expenditure Thru 2/99	Expenditure Thru 3/99	Balance
1) REQ #986; ORG#10302 CENTRAL (SO2 - BMNH/MCIII/Completion)	2,400,000.00	332,359.99	332,359.99	424,244.97	623,807.98	753,697.07	1,646,302.93
2) REQ #986; ORG#10302 FIELD SUPPORT - Guatemala (FS98-PHN-LAC-CSD-NOA (HLTH))	374,000.00	33,423.79	33,423.79	33,423.79	86,846.97	105,963.99	268,036.01
3) REQ #986; ORG#10302 FIELD SUPPORT - Indonesia (FS98-PHN-ANE-CSD-NOA-HEA)	300,000.00	23,628.01	23,628.01	34,554.75	40,831.18	57,690.53	242,309.47
TOTAL MOTHERCARE III	3,074,000.00	389,411.79	389,411.79	492,223.51	751,486.13	917,351.59	\$2,156,648.41

ADMINISTRATIVE INFORMATIONContract Data:

Contract No. HRN--C-00-98-00050-00

Total level of effort: Not Applicable (Not a Level of Effort Contract)
 Total Estimated Cost: \$4,800,000

1. Level of effort (9/29-2/28/99):	N/a
2. Cumaltive Level of Effort:	N/a
3. Unused Level of Effort:	N/a
4. Expenditures (9/29-3/31/99)	\$917,352
5. Cumulative Expenditure to Date:	\$917,352
6. Remaining unexpended balance:	\$2,156,648