

**FIRST SEMI-ANNUAL
UPDATE**

July 7, 2000 –
January 6, 2001

**POLICY II PROJECT
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ABBREVIATIONS

AIDS	Acquired immune deficiency syndrome
AIM	AIDS Impact Model
ANC	Antenatal care
ANE	Asia/Near East
API	AIDS Program Effort Index
ARH	Adolescent reproductive health
ARV	Antiretroviral
CAs	Cooperating agencies
CMO	Chief medical officer
DHS	Demographic and Health Surveys
E&E	Europe and Eurasia
ESA	East and Southern Africa
ESP	Essential Services Package
FP	Family planning
GWG	Gender Working Group
HIV	Human immuno-deficiency virus
HRWG	Human Rights Working Group
ICASA	International Conference on AIDS and STDs in Africa
ICPD	International Conference on Population and Development
IEC	Information, education, and communication
IGWG	Interagency Gender Working Group
IPPF	International Planned Parenthood Federation
IR	Intermediate result
IUD	Intrauterine device
LAC	Latin America/Caribbean
LTA	Long-term advisor
MCH	Maternal and child health
MOH	Ministry of Health
MTCT	Mother-to-child transmission
NGO	Nongovernmental organization
P&F	Planning and Finance
PES	Policy Environment Score
PHC	Primary health care
PLWHA	Persons living with HIV/AIDS
PHN	Population, health, and nutrition
RH	Reproductive health
SADC	Southern Africa Development Council
SO	Strategic objective
STD	Sexually transmitted disease
STI	Sexually transmitted infection
TD	Technical development
UN	United Nations
UNAIDS	United Nations AIDS Organization
UNDP	United Nations Development Program
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WCA	West and Central Africa
WHO	World Health Organization

PROJECT OVERVIEW

POLICY II is a five-year project awarded by USAID G/PHN/POP/P&E on July 7, 2000 to The Futures Group International (FUTURES), The Centre for Development and Population Activities (CEDPA), and Research Triangle Institute (RTI).

POLICY II will continue and expand on the work of POLICY I (1995–2000) with additional emphasis on youth, gender, and human rights; intersectoral policy issues; and policies that promote sustainable access to quality services. While maintaining a strong emphasis on family planning, the project also explicitly addresses HIV/AIDS and maternal health policy issues.

The POLICY Project was designed to facilitate the development of policies and plans that promote and sustain access to high-quality family planning and reproductive health (FP/RH) services. Laws, regulations, and operational policies—and the plans and financial mechanisms through which they are implemented—should promote access to reproductive health information and services by all who need and want them. Broadening the base of support for these policies through involvement of civil society is essential to the process as is addressing the financial issues associated with the provision of FP/RH services. Only then will access to high-quality FP/RH services be sustained, even in the face of changes in government or donor participation.

To achieve POLICY's main objective, the project endeavors to

- Broaden and strengthen political and popular support for FP/RH,
- Improve planning and financing for FP/RH,
- Ensure that accurate, up-to-date, and relevant information informs policy decisions, and
- Enhance in-country and regional capacity to provide policy training.

POLICY starts this first 6-month period active in 23 countries and with three regional organizations, with 154 staff: 60 in the United States and 94 staff and consultants overseas. The following sections of this semi-annual update present the project's results framework and results achieved during the first six-month period. This is followed by a summary of major activities for each of the project's main technical components (IRs and working groups) and each of the countries in which POLICY was active during the first reporting period. The appendix contains a list of all staff affiliated with the POLICY II Project.

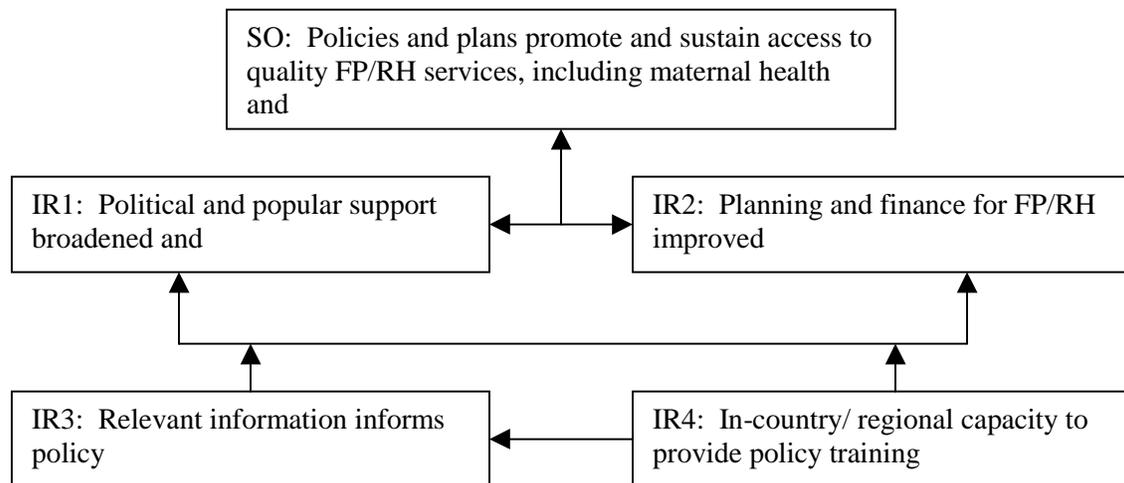
RESULTS FRAMEWORK FOR THE POLICY II PROJECT

The strategic objective (SO) of the POLICY Project is *Policies and plans promote and sustain access to quality FP/RH services, including maternal health and HIV/AIDS*. The project SO is supported by four intermediate results (IRs):

- IR1: *Political and popular support broadened and strengthened;*
- IR2: *Planning and finance for FP/RH improved;*
- IR3: *Relevant information informs policy decisions;* and
- IR4: *In-country/regional capacity to provide policy training enhanced.*

POLICY Project results will be achieved through both global and country activities. Global activities are financed by core funds. These activities are undertaken to provide global leadership on policy issues, promote policy research and evaluation, and develop the tools and techniques for technical support to the field. Country activities are financed by field support funds from USAID country missions and/or regional bureaus or offices. Country activities that integrate technical areas in need of special attention, such as HIV/AIDS, maternal health, and the three crosscutting issues (adolescents, gender, and human rights), will be generally financed using core funds. Figure 1 illustrates the POLICY Project results framework, showing both the strategic objective and intermediate results.

Figure 1
Policy Project Results Framework



PROJECT RESULTS

Every POLICY country workplan includes a results framework that clearly links achievement of results in country to the USAID Mission results framework. Country results are also linked to the project's results framework and the G/PHN framework. POLICY tracks the achievement of results and verifies accompanying documentation. To facilitate and systematize this process, the project has developed a relational database that tracks results, indicators, and associated documentation. The database is now in the beta-testing stage.

As a result of POLICY's ongoing presence in several countries, the project has exceeded its performance benchmarks for the first reporting period. SO-level results are presented below for five countries and 15 IR-level results are presented for 11 countries.

SO: Policies and plans promote and sustain access to quality FP/RH services, including maternal health and HIV/AIDS

of countries that adopt (approve) national/subnational policies, plans, guidelines to promote access to high-quality FP/RH services

- The Chief Medical Officer (who reports directly to the Minister) of the Ministry of Health in **Jamaica** approved the "Strategic Framework for Reproductive Health within the Family Health Programme, 2000-2005." In a letter dated December 1, 2000, the CMO instructed all regional and parish health departments to incorporate relevant elements of the framework into their workplans and service agreements with the central MOH. The framework identifies the following issues as particularly important to future programmatic success: adolescents, the impact of social and cultural factors on RH decision making, integration of family planning and STI/HIV/AIDS services, decentralization of health services, and multisectoral linkages. POLICY provided technical assistance to the MOH to guide the development of the framework.
- POLICY's collaboration with UNAIDS in **Ghana** culminated in the completion of the National Strategic Framework document necessary for directing national and district policies and plans in support of HIV/AIDS. POLICY long-term advisors (LTAs) were members of the group that prepared the framework document, which also makes use of results from the AIDS Impact Model (AIM). POLICY also provided support to the National AIDS Control Program in the organization of the September 2000 meeting in which the Cabinet approved the National Strategic Framework (pending final edits).
- The Student Government Board, Teachers Union, and the Department of Education in **South Africa** approved the HIV/AIDS Policy for Sea Point High School in the Western Cape in November 2000. POLICY/South Africa staff assisted education officials to draft the school-based HIV/AIDS policy, which will serve as a model for other schools in the region to adopt. After participation in a POLICY-supported workshop on monitoring and evaluation, the Department of Education formulated a national HIV/AIDS advocacy plan for its Life Skills provincial coordinators, which Department officials subsequently approved in December 2000.

of countries in which identified barriers to private sector participation in FP/RH policy development and service delivery are reduced or eliminated

- On October 5, 2000, the Medical College of **Peru** approved a new Medical Code of Ethics and Obligations, as the result of a campaign conducted by the Society of Ob-Gyns with POLICY's

technical and financial support. In February 2000, the Ethics Committee of the Medical College presented a proposal for a new code, which included a chapter on family planning that would have set up barriers limiting the types of contraceptive methods that are currently being provided, including sterilization. In May, the Society of Ob-Gyns asked for support from POLICY and USAID to present and lobby for revisions to the code. The Society brought together 12 scientific societies, which met during June, July, and August, to analyze and discuss the proposal that was already on the table and to draft a new one. In September, the Society of Ob-Gyns published a paid advertisement signed by all 12 societies, asking for non-approval of the February proposal and requesting its revision. The Medical College approved the Society's revised proposal on October 5. Policy champions for the new medical code include the Society of Ob-Gyns and its president, Alfredo Guzman, and the Medical College and its Dean, Julio Castro.

of countries that increase resources available for FP/RH

- As a result of advocacy and political pressure from Oasis de San Juan de Dios (an NGO member of the multisectoral citizens group or MCG) and the MCG in Yucatán, **Mexico** (fostered and supported by POLICY TA) in August 2000, the government of the state of Yucatán, through the Secretariat of Health, approved the provision of antiretroviral (ARV) medications for 10 persons living with HIV/AIDS (PLWHA) in the state. This represents the first time the state government has funded any medications for PLWHA (20 PLWHA receive ARV medications through the federally funded FONSIDA program), and a 50 percent increase in funding from state and federal sources.

IR1: Political and popular support broadened and strengthened

of countries with increased numbers and types of agencies involved in FP/RH policymaking

- POLICY has expanded the base of support for HIV/AIDS activities in several provinces of **South Africa**. Since July 2000, at least 10 development NGOs that had previously not focused on HIV/AIDS have now included HIV/AIDS activities within their area of work. Flowing from POLICY-hosted provincial business meetings, two corporate sector forums have been established in the Western Cape and in Kwazulu-Natal. While the specific functions of these forums may differ, they aim to support local businesses in developing and strengthening existing AIDS responses. At the sensitization workshops aimed at organizations addressing women's issues, POLICY fostered the formation of three "Women in Partnership" Committees in the provinces of Western Cape, Free State, and Kwazulu-Natal. The committees will provide leadership for the South African National AIDS Council's women-related activities at the national Women's Summit in March 2001. Stemming from a series of POLICY-initiated workshops aimed at local religious leaders and home-based care organizations, POLICY also helped establish a self-sustaining Faith-based Forum in Western Cape province that supports care needs related to the HIV pandemic.
- As a result of participation in POLICY-supported activities between July and December 2000, such as workshops, meetings, and policy presentations, six additional organizations in **Guatemala** have become involved in FP/RH/POP policymaking processes. Some of the organizations with initial participation during the reporting period are the Secretary of Strategic Analysis, the National Federation of Unions, the National Instance of Health of Chimaltenango, the Latin American Center for Women's Health, the Pluricultural Center of Quetzaltenango for Democracy, and the Central American Institute of Health.
- As a result of advocacy and political pressure activities of the POLICY-supported MCG in Yucatán (**Mexico**), the newly appointed state Secretary of Health created a state Council for HIV/AIDS

(COESIDA) in September 2000. Upon completing its strategic plan in 2000, the MCG proposed that the state program on HIV/AIDS adopt the plan as its own. In response to the previous Secretary of Health's reluctance to establish a formal institutional relationship with the MCG, the group began advocating for the creation of a COESIDA to institutionalize the mechanism for the collaboration that was taking place through the MCG. The MCG will continue to exist as an oversight body to monitor policies and programs on HIV/AIDS and related areas such as human rights, and to advocate for policy changes and improved programs. In addition, the Secretary of Health invited some 8-9 members of the MCG (of a total of around 20) to serve as members of the COESIDA. The COESIDA will form commissions to address the following priority areas: governance and legislation, resource allocation, research, human rights, epidemiology, and education and prevention.

of countries in which NGO networks or coalitions are formed, expanded, and/or strengthened

- In **Uganda**, a central-level network of 22 NGOs, women's groups, the media, religious organizations, cultural organizations, professional associations, youth organizations, and HIV/AIDS programs was formed in September 2000 as a result of participation in workshops sponsored by POLICY and the Population Secretariat. In October, the Vice President of Uganda publicly recognized and endorsed the network, whose mission is to advocate for FP/RH policies and programs that respond to the needs of women and men, including adolescents. The network produced a four-month action plan and, as specified in the plan, it held organizational meetings and participated in an advocacy training program in December.
- POLICY/**Ukraine** supported the formation of the Ukrainian Reproductive Health Network, which includes seven NGOs representing gender, youth, education, and patients' rights issues. The network held its first workshop for 40 participants in September 2000.
- As a result of the POLICY-sponsored September 2000 workshop in Aswan, **Egypt**, 42 NGOs in the governorate formed a coalition called "Cooperation," to achieve community development and attain better family life through promoting and improving health and FP/RH services. In addition, the coalition prepared a proposal for carrying out a project that would make the board of directors of rural health facilities more effective in responding to community FP/RH needs. The proposal has been submitted to the Ministry of Health and Population/Principal Secretary and HE Minister Sallam for approval.

IR2: Planning and finance for FP/RH improved

of countries that develop plans or policies that promote increased resources for FP/RH

- As a result of participation in earlier POLICY-sponsored training workshops, the Ministry of Defense in **Nigeria** prepared and submitted a "white paper" and proposed budget to the Minister in November/December 2000 outlining critical policy decisions that should be made to implement the armed forces HIV/AIDS policy.
- As a result of advocacy from Oasis de San Juan de Dios (an NGO) and the POLICY-supported Multisectoral Citizens Group (MCG) of the state of Yucatan (**Mexico**), the legal department of the Secretariat of Health sent the newly elaborated Basic Package of Health Services to the state's Governance Office in December 2000 for publication in its official periodical. Once published, the guidance will carry the weight of a state law. The local newspaper, *Por Esto*, announced inclusion of HIV/AIDS as component number 16 in the Basic Package of Health Services at the end of November. The Basic Package of Health Services is the set of services and minimum treatments that each state mandates its state-funded health institutions to provide. It is worth noting that

HIV/AIDS is not part of the federal guidelines for health services to be provided at the state level; the state of Yucatan, therefore, is going above and beyond federal requirements by adding HIV/AIDS to its basic package and is one of the only states that has done so to date. In response, the Secretary of Health currently is developing specific strategies to comply with this requirement at the local level across the state.

IR3: Accurate and up-to-date, relevant information informs policy decisions

of national/subnational policies/plans that use information produced with support from POLICY

- In **Jamaica**, the “Strategic Framework for Reproductive Health within the Family Health Programme, 2000-2005”, published in October 2000, report contains references and citations to POLICY-funded reports and studies.

of countries that use information produced with support from POLICY for policy dialogue, planning and/or advocacy

- Results of the AIM application in **Mozambique** were incorporated into the Ministry of Education HIV/AIDS Impact Assessment, published in late December 2000. Two members of the POLICY-supported HIV/AIDS multisectoral technical group participated in the assessment. The impact assessment was conducted by a local consulting organization, Verde Azul, with financing from UNICEF.
- The Ministry of Health in **Guatemala** used information on the legal framework for FP/RH developed by POLICY in a workshop and meeting in December 2000 that was supported by USAID and UNFPA as part of the Ministry of Health’s (MOH) policy and program efforts. The meeting was organized by the director of the reproductive health program and attended by the technical personnel of the ministry. The information also appeared in a brochure published in January 2001 by the Ministry of Health summarizing the legal basis for reproductive health programs in Guatemala.
- Data produced by POLICY staff in **Haiti** have been cited in MOH and OPS/OMS official documents that are being used for developing national health policies for women and youth. Documents citing POLICY’s reports and data include *Recueil de Statistiques Sociales* (August 2000), *Elements d’Analyse de la Situation des Adolescents et des Jeunes* (December 2000), and *The Situation of Orphans in Haiti* (Autumn 2000). HS2004, the USAID health sector bilateral project managed by Management Sciences for Health, has published and distributed a reference manual to its grantees on the minimum package of services, which reflects the methodology of prioritization contributed by POLICY.

IR4: In-country/regional capacity to provide policy training enhanced

of countries in which LTAs provide TA and/or conduct training in the policy process

- Forty POLICY LTAs from 22 countries participated in Technical Development (TD) Week, and a second full week of specialized training; LTAs in 14 of those countries have subsequently been active participants in the policy processes in their respective countries. Two examples follow.
 - Dr. Laurent Eustache in **Haiti** has played the lead role in furnishing assistance for the establishment of the National Commission on Reproductive Health, participating in the development of the MOH and OPS/OMS national policy on youth and adolescents, supporting the Secretary of State for Population in planning for promotion of the National

- Population Policy, and assisting civil society groups in institutional strategic planning and proposal development.
- Dr. Alin Stanescu, POLICY advisor in **Romania**, met several times in November and early December with the directors of the National Health Insurance House and the College of Physicians to negotiate for retention of the 2000 FP/RH coverage in the 2001 nor Stanescu is also working closely with the Ministry of Health on FP/RH policy barriers and financing issues, especially on contraceptive access at the local level. Participation Coordinator, Daniela Draghici coordinated activities of the Reproductive Health Coalition and liaised with the government, including a December 21 Coalition meeting with the new Minister of Health.

of countries in which counterparts trained or supported by POLICY conduct training in policy dialogue, planning, and/or advocacy

- As a follow-on result to POLICY's SPECTRUM training-of-trainers activity in spring 2000 in **Ukraine**, Dr. Zinaida Oganesisvna Palian, Professor and Chair of the Demography Department at Kyiv's National Economics University, has conducted subsequent training for colleagues at the oblast level in the use of SPECTRUM. Since fall 2000, two of her doctoral students and a master's candidate have been developing analyses using SPECTRUM forecasts. Palian also designed a graduate course on "Statistics of Population and Demography" to be offered in January 2001 in which she teaches graduate students using SPECTRUM's DEMPROJ model. This result illustrates how POLICY's training directly links to curriculum improvements.

CORE-FUNDED ACTIVITIES

INTERMEDIATE RESULTS

IR1: Political and popular support broadened and strengthened

Director: Sue Richiede

IR1 activities are designed to build political and popular support for client-focused FP/RH policies and programs through the formation of sustainable NGO advocacy networks; development and support of private and public sector policy champions; and the creation/strengthening of private-public sector partnerships in policy processes.

Summary of Major Activities:

- Developed a preliminary list of organizations and policy champions in proposed POLICY core package countries
- Collected relevant data and information to develop the Network Sustainability Module that will become part of POLICY's existing *Networking for Policy Change: An Advocacy Training Manual*
- Initiated materials review to develop the Partnerships Module of the advocacy training manual
- Identified additional modules to be incorporated into the advocacy training manual, with initial work focusing on an Operational Policies Module
- Designed and conducted two training sessions on NGO Advocacy Networks for POLICY staff during Technical Development (TD) Week
- Developed the following tools to serve as data sources for IR1 indicators:
 - Network Member Profile
 - Advocacy Network Questionnaire
 - Advocacy Network Sustainability Assessment Tool
- Supported the "Network Development Workshop" in Romania
- Participated in and provided technical direction to the development of POLICY "package" proposals for country work to advance our technical knowledge, facilitate identification and use of innovative approaches, and provide additional resources at the field level
 - Participated in the development of proposals for package countries, including Nigeria, the Philippines, Romania, and Ukraine

IR2: Planning and finance for FP/RH improved

Director: Koki Agarwal

IR2 activities are designed to raise awareness of FP/RH planning and finance (P&F) issues among host-country and donor leadership, test new financing mechanisms, and obtain definitive results from POLICY packages applied in country.

Summary of Major Activities:

- Prepared presentations aimed at raising awareness of key FP/RH finance issues and educating POLICY and USAID staff about potential tools and analytical approaches that can ensure better planning and finance
 - "Medicare Relief Societies in India: An Answer to the Financing Problem for Basic Health Care?" (for USAID/W Global Bureau, August 2000)

- P&F presentation for POLICY technical staff during TD Week (October 2000)
- Began work on a P&F presentation for the USAID/W Global Bureau
- Completed papers on FP/RH Financing issues, including a paper entitled, “Developing Financial Autonomy in Public Hospitals in India: Rajasthan’s Model” that was published in *Health Policy*; and “Health Accounts: An Application to Rajasthan,” which was submitted for publication in *Health Policy and Planning*
- Participated in and provided technical direction to the development of POLICY “package” proposals for country work to advance our technical knowledge, facilitate identification and use of innovative approaches, and provide additional resources at the field level
 - Participated in the development of proposals for package countries including Philippines, Romania, Ukraine, and Nigeria
- Prepared proposal to assist in designing, testing, and assessing user fees in the district hospital, primary health centers, and subcenters in Jhansi, India (currently being reviewed by the Mission)
- Developed and disseminated a list of examples for P&F indicators at both the SO and IR level
- Collaborated with the World Bank/IBD/WHO/USAID Interagency Working Group on Private Sector Participation in Health by providing inputs to background paper on the private provision of health services for children, reviewing drafts of paper, and meeting with World Bank and WHO staff; the final paper is expected in January 2001

IR3: Relevant information informs policy decisions

Director: Karen Hardee

The development and use of information are crucial to successful policy assistance. The objective of IR3 is to provide information, generated from primary or secondary research or the application of computer models, to understand reproductive health dynamics, explore the answers to key policy questions, advocate for change, and estimate the resources required to achieve reproductive health goals. Having policy-relevant information will allow national or local policymakers, planners, and researchers to explore the implications of current trends in data, develop evidence-based solutions to existing problems, and define the actions and resources required to achieve their reproductive health goals.

Summary of Major Activities:

During TD Week, project staff received training on SPECTRUM (an overview) AIM, and NewGen. In addition, the Spanish translation of the remaining SPECTRUM models (AIM, FamPlan, Cost-Benefit) was started; the French SPECTRUM manuals were updated; and DemProj and AIM were translated into Portuguese for use in Mozambique (using field support funds). A meeting was held to discuss the NewGen models and subsequent revisions were made.

POLICY staff proposed to USAID’s SO2 team an activity to develop an advocacy tool for addressing issues in maternal health. POLICY continued work on an Efficacy Guide to review the effectiveness of various reproductive health interventions based on available research.

POLICY drafted a concept paper on addressing operational policy barriers. This paper will be revised to guide the project’s work on identifying operational barriers and tracing the barriers to their policy roots.

IR4: In-country/regional capacity to provide policy training enhanced
Director: Joseph Deering

Through locally hired long-term advisors (LTAs) empowered through continuing support, the POLICY Project provides policy assistance, on-the-job training, and support to policy analysts, advocates, and policymakers. POLICY will continue to strengthen the skills of LTAs by formal updating, training, and exchanges in a range of technical and process areas. POLICY will also develop curricula for application at local, national, and regional universities and education/training centers and assist in institutionalizing capabilities to train the next generation of policy analysts, advocates, and policymakers.

Summary of Major Activities:

POLICY assembled its LTAs, managers, and technical staff totaling nearly 90 personnel for two weeks during TD Weeks in Washington in October 2000. This intensive and comprehensive exercise provided LTAs with a perspective on results from the POLICY I Project and a vision of POLICY II together with detailed discussion of its objectives, expected results, and performance indicators. LTAs participated in and contributed substantively to training workshops on: adolescent RH; gender; human rights; HIV/AIDS; maternal health; market segmentation; operational policies; NGO networks; resource flows; and SPECTRUM models including AIM, FamPlan, NewGen, and Mother-to-Child Transmission (MCTC). This major IR4 activity was implemented expressly to update and strengthen skills of LTAs to deliver on-the-job assistance and training, as well as prepare for more formal, institutionalized education and training interventions in their respective countries and regions.

A second activity was initiated to survey policy-related course work taught in major developing country universities and regional training centers and in selected U.S. universities. Included in this continuing survey are course offerings by cooperating agencies (CAs) and multilateral agencies such as development banks, UN agencies, and NGOs.

POLICY also identified four LTAs with solid connections to local academic and training institutions where policy-related courses could be established and began preliminary planning to enable them to serve as Regional Coordinators of Capacity Building. These LTAs identified several good opportunities for introducing RH policy course work into local university curricula.

The project also identified, proposed, and received approval from USAID for a permanent Director of Capacity Building. Joseph Deering assumed responsibility for this IR on January 1, 2001.

WORKING GROUPS

HIV/AIDS Working Group (SO4 Core Activities)

Program Leader: John Stover

The goal of the HIV/AIDS Working Group is to improve the policy environment to support an effective response to the HIV/AIDS epidemic. The working group supports field-based activities by developing tools and information to build political commitment, formulate appropriate policies, plan the national response, and foster broad participation. Our work also focuses on improving understanding of human rights issues and developing approaches to protect the human rights of those affected by the epidemic. Major activities pertain to updating HIV/AIDS models, promoting human rights, updating the HIV/AIDS policy compendium and other HIV/AIDS indexes, training, and presentation development.

Summary of Major Activities:

- We are working to improve the human rights environment for HIV/AIDS through training, awareness raising, legal and regulatory reviews, networking, and technical assistance. During this reporting period, training sessions were conducted at APHA meetings in Boston and in conjunction with the Harvard Institute in Arlington.
- The project is implementing an activity in Zambia to use mass media to inform people about their human rights and refer them to a network of human rights organizations that can provide assistance to those who need it. Four counselors from the Network of Zambian People Living with HIV/AIDS (NZP+) were trained to counsel clients coming to the NZP+ center for assistance or referral.
- POLICY provides small grants to development NGOs that are not currently active in HIV/AIDS. POLICY provides training in HIV/AIDS and in developing and managing the grants. The NGOs develop proposals and conduct activities to add an HIV/AIDS component to existing activities. Programs are underway in Swaziland, Lesotho, and Botswana under the auspices of the U.S. Ambassador in each country.
- The AIM model has been expanded with the addition of a new module that focuses on demonstrating the impact and cost-effectiveness of programs to reduce mother-to-child transmission of HIV.
- An update of the HIV/AIDS policy database was completed and posted on our website. The update includes new policy and planning documents completed in the past year and focuses in-depth on countries in southern Africa.
- The AIDS Program Effort Index (API) is intended as a profile of program effort in 40 developing countries. The draft final report, "Measuring the Level of Effort in the National and International Response to HIV/AIDS: The AIDS Program Effort Score Index," was completed and submitted to UNAIDS for review in November 2000.
- POLICY is working with the Health Sector Coordinating Unit of the Southern Africa Development Council (SADC) to analyze HIV/AIDS policies in member states and develop model policies and recommendations. Existing policies in all 14 member states were collected and entered into the policy database.
- In support of efforts to form an AIDS Business Council in Swaziland, POLICY organized a regional meeting in Swaziland in November 2000 that brought together representatives from Southern Africa and Thailand to discuss experiences with AIDS Business Councils and develop recommendations for future work and collaboration. The final report is entitled "AIDS in the New Millennium: The Challenge to Businesses in Southern Africa."
- An AIM presentation was prepared for Lesotho. The U.S. Ambassador and the wife of the Prime Minister were trained to use the presentation. POLICY prepared materials for computer slide shows, overhead transparencies, and flip charts.

Gender Working Group (GWG)

Chair: Mary Kincaid

The GWG's purpose is to help POLICY staff better address gender as a crosscutting issue in the project's core and field activities by providing information, technical assistance, and training to POLICY staff and by participating on the PHNC Interagency Gender Work Group (IGWG).

Summary of Major Activities:

- The GWG organized a plenary session during TD Week to share lessons learned from POLICY I about gender and reproductive health, as well as country-specific experiences and successes from India, Jordan, and Guatemala. The country presentations, in particular, sparked a great deal of interest from participants, and the GWG received several requests from field staff to provide information or other assistance to their country programs to help address gender.
- The GWG also prepared a brochure for all staff describing the goals and objectives of the GWG and ways that gender can be integrated into country programs.
- The GWG organized two sessions of a training workshop following TD Week for approximately 28 POLICY staff, primarily from the field. The workshops were designed to provide staff with an opportunity to conduct an initial gender assessment of their country workplans. USAID members of the IGWG served as trainers for the workshop, providing a unique opportunity for POLICY staff to benefit from the cross-fertilization that occurs across organizations and projects.
- POLICY staff Jeff Jordan, Mary Kincaid, and Susan Settergren served as co-chairs for the Gender and Policy (GAP) Subcommittee during this period and provided the majority of technical inputs to its activities. Among other activities, POLICY staff made a presentation of the results of the "Exploring Perspectives" initiative to USAID and CAs in August; served as co-trainers for a workshop on "Gender-sensitive PHN Programming," for USAID personnel, at the TAACS course in November 2000; and participated in GAP and IGWG steering committee meetings.
- POLICY staff, Karen Hardee, served as a co-chair for the Research and Indicators (R&I) Subcommittee during this period, providing technical input to the subcommittee's work.

Adolescent Reproductive Health (ARH) Working Group

Acting Chair: Sue Richiedei

The goal of the Adolescent Working Group is to create a shared understanding of critical ARH issues—both globally and regionally—and the most effective policy responses for improving ARH. The working group emphasizes activities that educate POLICY staff about ARH in order to promote greater integration of ARH policy activities into POLICY workplans.

Summary of Major Activities:

- Designed and prepared a session on ARH for TD Week, including a template presentation on the status of adolescent reproductive health and sexuality worldwide, and a set of resource materials on POLICY ARH activities, staff skills, outside resources, and potential ARH activities
- Commissioned and reviewed draft of occasional paper, "A Conceptual Framework for Evaluating ARH Program and Policy Design: Case Studies from Burkina Faso, Cameroon and Togo", by Anne Calves of the University of Montreal
- Designed a brochure on integrating adolescent reproductive health into country activities
- Initiated development of policy compendium on adolescent reproductive health
- Established resource center for ARH materials

- Identified and hired an international expert in adolescent behavior, Dr. Christine Varga, who will become the permanent chair of the working group in February.

Human Rights Working Group

Chair: Lane Porter

The Human Rights Working Group (HRWG) defines crosscutting human rights issues; determines their applicability to core and country activities concerning FP/RH, maternal health, and HIV/AIDS; develops human rights tools through collaboration of staff, CAs, USAID, and outside professionals; and then raises awareness of human rights issues throughout the project.

Summary of Major Activities:

The HRWG prepared the following presentations for TD Week:

- Reproductive health and human rights
- HIV/AIDS in Mexico
- Family planning/reproductive health in Romania
- Advocacy for youth and RH/HIV/AIDS in Kenya
- Human rights and gender issues in Jordan
- HIV/AIDS & human rights project in Zambia

Also during TD Week, the HRWG conducted two, three-hour training sessions on human rights. Each session included an introduction, presentations, and small group discussion of how human rights can be addressed in the context of POLICY's fieldwork. In addition, Julia Ernst and Heidi Mason of the Center for Reproductive Law and Policy gave a presentation on women's reproductive rights.

Other activities included participation in a two-day USAID sponsored course on "health and human rights" in which POLICY gave a presentation on public health and human rights. Porter prepared initial and subsequent working drafts of "Guidelines for Incorporating Human Rights in POLICY II Country Strategy Workplans," with review and comment by HRWG members and other POLICY staff. Working group members also reviewed drafts of a "Framework for Analysis of HIV/AIDS Legislation and Regulations at the National Level." Both documents are available on the Intranet.

Maternal Health Working Group

Chair: Koki Agarwal

The goal of the Maternal Health Working Group is to develop advocacy tools to increase the political and popular support for maternal health and to examine and document operational policy barriers with regards to maternal health services.

Summary of Major Activities:

- Prepared a presentation and training session on maternal health issues for TD Week
- Developed the workplan for USAID SO2 funding
- Initiated work on fact sheets summarizing information obtained from the Maternal and Neonatal Program Index (MNPI) in POLICY countries

AFRICA

ETHIOPIA

POLICY Project activities in Ethiopia are directed toward scaling up the national AIDS effort by providing support in policy development and strategic planning to the National AIDS Council, Regional AIDS Councils, and key NGOs. POLICY supports the implementation of Ethiopia's multisectoral HIV/AIDS programs by providing technical assistance in the areas of policy advocacy, priority setting, and use of information for policy and program development. This support also assists in increasing the understanding of crosscutting issues of gender and human rights in relation to reproductive health and HIV/AIDS. POLICY also addresses family planning and population policy in Ethiopia. Activities include preparation of policy advocacy materials on the achievements and challenges of the family planning program in Ethiopia.

Summary of Major Activities:

National AIM booklet, third edition: national advocacy material. One of the major activities during the period was preparing, reviewing, and printing the third edition of the national AIM booklet, "AIDS in Ethiopia." Data collection from 15 ANC/HIV sentinel surveillance sites took more than six months and was completed in June 2000. A workshop with national experts was conducted in order to reach consensus on the national HIV prevalence estimates and projections. Many sectoral representatives have participated in drafting and reviewing sections of the booklet. The final content of the booklet was determined after a series of consultative meetings involving the most senior political decision-making body in the Prime Minister's Office. Finally, in consultation with the national MOH/AIDS Control Unit (ACU), the decision was made to print 5,000 copies of the English version and to translate and print 5,000 copies of the Amharic version. Accordingly, the 5,000 English AIM booklets were printed, and the Amharic translation has been completed and is under review. The Amharic version will be ready for printing in early 2001.

Together with the AIM graphics presentation, these booklets will be used as the principal resource in a national advocacy campaign to generate enhanced support for the multisectoral AIDS program. This booklet, the only official document on HIV/AIDS estimates, projections, and impacts of the epidemic, has been a powerful advocacy tool. Hence, POLICY and the MOH/ACU have jointly planned the dissemination of the booklet. As part of the advocacy strategy, a national dissemination workshop for high-level political and program officials had been proposed for the next quarter.

Research. Two policy-relevant research reports, subcontracted under POLICY I to a local research firm, United Management Consultants, were completed. Recommendations from the two studies, "Community and Personal Perception of Risk and Vulnerability to HIV Infection and AIDS" and "Community-Based Study on Factors Affecting Accessibility and Utilization of Condoms," will contribute both to the assessment of HIV/AIDS control and prevention activities previously undertaken as well as to the formulation of expanded activities in the future.

Assessment of future collaboration. POLICY carried out an assessment to identify future areas of collaboration with and assistance to the national and regional AIDS councils and secretariats and the national and regional Health Bureau/ACUs and to determine priority regions and activities. This information was used to prepare the POLICY II workplan. One key finding was the importance of continuing to focus on national-level institutions. In addition, for regional activities, the three high HIV prevalence regions of Dire Dawa, Gambela, and Harari were identified as priorities for future policy work.

Support to the NACS. A major contribution of the USAID Mission through the POLICY Project has been its support of the National AIDS Council Secretariat (NACS) in building capacity of the Project Implementation Unit (PIU) for effective implementation of the Ethiopia Multi-Sectoral HIV/AIDS Project (EMSAP), a World Bank project totaling US\$59 million over three years. NACS completed preparation of the Project Implementation Manual for the EMSAP, the largest HIV/AIDS project in Ethiopia to date. The POLICY Project developed the terms of reference and recruited an international consultant to undertake the first phase of this capacity-building activity. The important process of reviewing and finalizing the Project Implementation Manual (PIM) began during December and was completed during the first week of January 2001. Srish Kumar, POLICY consultant, traveled to Addis Ababa, December 12–27, to assist the NACS with the preparation of the PIM for the EMSAP.

Participation in the ADF-2000. Participating in the second African Development Forum (ADF-2000) was another important activity of POLICY/Ethiopia. The conference, held at the UNECA Conference Hall, Addis Ababa, from December 2–8, brought together more than 1,500 leaders from across Africa to focus on the theme, “AIDS: The Greatest Leadership Challenge.” POLICY was commended by the Information Technology Center for Africa (ITCA) for its notable contribution in developing the SPECTRUM models. SPECTRUM and the Policy Compendium were the highlights of the ITCA display at the forum. POLICY staff also provided a short training program for ITCA staff; and during the forum, they were present at the Exhibition Hall throughout the five days of the conference to demonstrate the AIM application and to explain the application’s process for policy change to the forum participants.

Despite some initial delays on part of the conference organizers, USAID/Addis Ababa and POLICY eventually managed to obtain a booth in the Exhibition Hall of ADF-2000, which was then jointly organized by USAID and POLICY. At this booth, besides the computer display of the SPECTRUM models (not only AIM but all the program packages), POLICY was able to display more than 20 print materials under the USAID and POLICY Project logos. For better visibility, POLICY also arranged to display a few print materials from other CAs, namely Pathfinder/Ethiopia and PACT/Ethiopia. A video and print photograph of this exhibit are available.

Advocacy training. POLICY also participated in a four-day HIV/AIDS training program for trade union leaders organized by CETU in collaboration with Pathfinder/Ethiopia as a means of developing National Work Place HIV/AIDS Policies and Programs. POLICY’s participation was to provide the training instructors and materials while Pathfinder financed the training.

In the two-day, subregional training workshop for religious leaders (Ethiopia, Kenya, Liberia, Nigeria, Sudan, and Uganda) on “Integration of HIV/AIDS in the Developmental and Holistic Ministry of Church,” POLICY was invited by the organizers, Life In Abundance (LIA), to participate and present a technical paper.

Capacity building. As part of the capacity-building activity for national and regional AIDS offices, POLICY procured and transferred six sets of computers, printers, and UPS to the national MOH/ACU, Addis Ababa City Administration AIDS Secretariat, and Dire Dawa, Gambella, Harari, Tigray, and Regional Health Bureaus/ACUs. POLICY has also received a request for the same equipment and Internet access from the NACS.

POLICY staff assisted in preparing a technical presentation for the NACS and USAID/PHN Officer, entitled “HIV/AIDS National Situation and Direction.” POLICY staff also served as instructors for a four-day trade union leaders HIV/AIDS training program on the development of National Work Place HIV/AIDS Policies and Programs.

FAMILY HEALTH AND AIDS/WEST AND CENTRAL AFRICA (FHA/WCA)

The goal of POLICY Project assistance to FHA is to strengthen political commitment to FP/RH and HIV/AIDS programs. Assistance will focus on generating information critical to policy decision making in FP/RH and HIV/AIDS and expanding the role of parliamentarians, NGOs, and other key groups in these areas. This will be accomplished by assisting the government of Burkina Faso in its role as host country for the next AIDS in Africa Conference (ICASA) including application of the AIM model and dissemination of results to national and district leaders; preparation of regional presentations and booklets on the HIV/AIDS situation for such audiences as the U.S. Ambassadors and national decision makers; and workshops directed toward parliamentarians and NGOs to strengthen their role in implementing the Cairo *Programme of Action* and in taking actions to address HIV/AIDS. Regional partners are critical to POLICY activities and include FAAPPD (African-Arab Parliamentary Forum), CERPOD, CAFS, and the Family Health Project (SFPS).

Summary of Major Activities:

POLICY organized a workshop with Parliamentarians for Global Action (PGA) for parliamentarians and NGO leaders from Burkina Faso, Guinea, Mali, and Senegal. The purpose of the workshop, held November 3–5 in Bamako, was to provide an opportunity for legislators and civil society leaders to discuss a “model” law developed by the regional parliamentary network (FAAPPD) and recently adapted and enacted in Guinea. The model law seeks to provide a comprehensive piece of legislation to

GHANA

The goals of POLICY Project assistance in Ghana are to assist the government to implement the national HIV/AIDS and STI policy and to increase the level of support to FP/RH by national and district decision makers. Project assistance focuses on institution building for the National AIDS Control Program (NACP), expanding the advocacy efforts of national (NPC) and regional population councils (RPACs) and NGOs, and supporting policy dialogue for newly elected executive and legislative branches. This is accomplished through technical, material, and financial assistance and training for the NACP and its partner institutions, technical assistance for regional and district advocacy events, and information dissemination through counterpart organizations including the Population Impact Project (PIP).

Summary of Major Activities:

Four consultants completed a preliminary study and PowerPoint presentation on the Economic Impact of HIV/AIDS in Ghana. The study, carried out at the request of USAID using existing field support funds, is the first phase of a project that will include development of an interactive model on the impact of HIV/AIDS in Ghana, once the Mission provides additional funds. The presentation took place at the Mission, and the Mission Director and staff of the PHN Office were present. The director of the Population Impact Project (PIP) coordinated the study.

The POLICY Project collaborated with UNAIDS in a participatory national consensus meeting, funded by UNAIDS, to finalize the draft National Strategic Framework for responding to HIV/AIDS. The draft National HIV/AIDS/STI Policy, developed with TA from POLICY, was one of the basic materials used in the development of this framework. More than 50 participants from a cross-section of the population attended the national consensus meeting. The Cabinet approved the Strategic Framework in September, which will now be forwarded to the president for adoption by the government.

POLICY met with the National AIDS Control Program (NACP) Director and Deputy Minister of Health to discuss strategies for final government approval of the draft National HIV/AIDS/STI Policy. The Minister of Health approved the draft document under POLICY I and submitted it to the Cabinet. It was also used in September as a basic document in a major “policy dialogue event”: the first Cabinet retreat on AIDS, during which the Cabinet established an AIDS Commission patterned after the commission proposed in the draft policy as a legislatively approved body. The recent Ghana elections have caused delays in finalizing the policy document. Nonetheless, the Minister of Health made the following statement on AIDS Day, December 1: “It is in this regard, Chairman, that in September the Ghana AIDS Commission was inaugurated at the first Cabinet retreat on HIV/AIDS. This would be the highest body of the land to coordinate all HIV/AIDS-related activities in the country. The draft National Policy on HIV/AIDS has been submitted to the Cabinet for approval after having gone through a series of consensus building among stakeholders countrywide. The National Strategic Framework to the HIV/AIDS response has been completed and approved by the Cabinet. It is currently undergoing editing prior to reproduction and dissemination. These two activities would provide the necessary enabling environment within which the national response would be pursued.”

Other activities included the ongoing effort to develop a replication strategy for community NGO advocacy, and participation by the LTA and POLICY Advocacy Consultant in meetings organized by other agencies to discuss AIDS prevention strategies.

KENYA

The goal of POLICY's work in Kenya is to provide technical assistance to build the capacity of key government agencies and NGOs to improve reproductive health (RH), maternal health, family planning (FP), and child health services; reduce the increase in HIV infections; and mitigate the impacts on those infected and affected by HIV/AIDS. Priority areas include the following: assist the government to develop policies and strategies for condom and contraceptive security and financial sustainability; build capacity at central, provincial, and district levels to improve health financing policies and systems, especially for reproductive and child health services; improve and broaden advocacy for postabortion care; build capacity for RH and HIV/AIDS advocacy for youth/ adolescents, including networking among NGOs, district and local officials, religious groups, and other civil society groups; assist the National AIDS Control Council (NACC) to implement its strategic plan; build the capacity of new AIDS Control Units (ACUs) in several key ministries to develop effective multisectoral HIV policies and programs; build program development and implementation capabilities of new Constituency AIDS Control Councils (CACCs); strengthen HIV sentinel surveillance data, analysis, and policy advocacy; and assist the uniformed services (especially the police and the military) to develop and implement improved HIV/AIDS prevention and care programs.

Summary of Major Activities:

The principal activity during this period was discussions with officials of the USAID Mission and several POLICY partners and collaborating organizations about possible POLICY II activities and the results that these activities would achieve. The following discussions were especially noteworthy:

- The Kenya AIDS NGOs Consortium (KANCO) is developing and will submit to POLICY two proposals to fund large HIV/AIDS policy and advocacy programs through subcontracts with POLICY, one with field support funds and one with CDC LIFE funds.
- POLICY met with Dr. Margaret Gachara, the newly appointed director of the National AIDS Control Council (NACC), and the Council Chair Dr. Abdallah. POLICY will provide the NACC with significant technical and financial support for a range of activities. The first activity with NACC was the preparation and production of 3,000 copies of a briefing kit for NACC for World AIDS Day activities on December 1, and the launch of NACC's new strategic plan on the same date.
- POLICY met with senior staff of the Africa Medical and Research Foundation (AMREF) to discuss possible financial and technical assistance (in collaboration with IMPACT/Kenya) for HIV/AIDS policy research and advocacy for the Kenyan police.
- During TDYs in November, extensive discussions were held with USAID/Nairobi staff about possible field support funding for a large POLICY program in RH finance. This would support the implementation of USAID/Nairobi's RH finance assistance program from July 2001 to June 2004. It was agreed that POLICY, in collaboration with the Mission and the MOH, would undertake a major assessment commencing in early January 2001 that would result in a workplan for this proposed program. The scope of work for this assessment was developed further during meetings on November 21 and 30 in Washington, D.C., attended by POLICY staff and USAID/Nairobi officials. POLICY Director Harry Cross will be a member of the eight-person assessment team, to be led by Kocher. The assessment is scheduled for January 8–26, 2001.

MOZAMBIQUE

The goal of POLICY Project assistance in Mozambique is to help ensure that uniform, timely, and accurate information on HIV/AIDS is available to partners in the National Program to Combat STDS/HIV/AIDS, and that intervention efforts apply that information for program planning and financing, monitoring, and evaluation. Project assistance focuses on strengthening the capacity of a local multisectoral, multidisciplinary “Technical Group” to update projections as new data become available and provide technical assistance to other counterparts in their use. POLICY trains counterparts and provides training and internships for university students; coordinates linkages between the Technical Group and the National AIDS Council (NAC), line ministries, and the private sector; and participates in NAC’s donor coordination activities.

Summary of Major Activities:

The major activity of the period was a public relations dissemination event on November 24 to launch the CD version of the HIV/AIDS fact book, *Demographic and Health Impacts of HIV/AIDS in Mozambique*, which was produced under POLICY I. The book contains the results of the AIM application, which have been accepted as the official government of Mozambique projections for the AIDS epidemic. The event was financed jointly with UNFPA.

The event, sponsored by the National Statistics Institute (INE), included presentations by both the Minister of Health and the President of INE. Eighty-eight people attended, including high-ranking members of most of the line ministries, national NGOs and religious leaders, international donors, and the press. The event was timed to precede the donors’ table to discuss the National Strategic Plan for HIV/AIDS; its purpose was to promote the results of the AIM application and to emphasize that the results should form the basis of all official planning for HIV prevention and mitigation of AIDS. Slides from the presentation were aired on national television before coverage of the donors’ meeting and World AIDS Day.

POLICY continued to work to strengthen the technical group. While the group plans to expand its membership, members decided that for the moment they would rather remain autonomous instead of seeking official institutional sponsorship. By January, the group will incorporate additional representatives from the four original institutions (the MOH, INE, Ministry of Plan and Finance, Center for Population Studies) as well as three new institutions (Faculty of Medicine, Ministry of Education, Ministry of Agriculture) and two members from Zambezia Province. Translation of DemProj, AIM, and AIDSProj into Portuguese was completed, and a training course has been scheduled for January 2001. Participants will include the expanded technical group, the CDC country representative, and a member of Verde Azul, a local consulting organization.

Finally, POLICY was approached by several new potential counterparts, including the National Customs Service and a youth NGO, for assistance in assessing the impact of HIV/AIDS on their sectors. Further discussions are scheduled with the technical group to explore potential collaboration.

NIGERIA

The POLICY Project is working to increase political support for high-quality HIV/AIDS and FP/RH services and to improve the planning and financing of such services. To achieve these objectives, the project is working with a wide range of stakeholders and interest groups through a multisectoral approach. Activities of the project include development of HIV/AIDS policies in the civilian and military population, development of a national population policy, development of strategic plans for HIV/AIDS and for young adult reproductive health, advocacy for HIV/AIDS, family planning and young adult reproductive health, research on the effects of HIV/AIDS on vulnerable segments of the population, and the use of accurate information for advocacy and planning.

Summary of Major Activities:

POLICY activities continued the work started under POLICY I in the HIV/AIDS area and commenced work in the FP/RH area. HIV/AIDS activities concentrated on the project's two main public sector collaborators: the National Action Committee on AIDS (NACA) and the military. However, some work also continued with the unit in the MOH that is responsible for HIV/AIDS.

With the NACA, POLICY's principal work was to facilitate and provide technical assistance for the completion of an Interim Action Plan (IAP) for HIV/AIDS. The IAP is a two-to-three year strategic plan collaboratively developed with a wide range of stakeholders. It will serve as a framework for HIV/AIDS interventions in the next few years and should also facilitate donor coordination. POLICY provided four local consultants and assistance from the Country Coordinator, Dr. Jerome Mafeni. Two drafts of the IAP were prepared and a final version will be finished in early 2001.

POLICY also supported NACA by preparing the Nigerian delegation to participate in the UN-sponsored African Development Forum (ADF) that took place in Addis Ababa in December. The ADF was attended by various policymakers from across Africa and focused this year on the AIDS epidemic. POLICY also sponsored two participants of the Nigerian delegation and organized a workshop during which Nigeria's position paper was prepared.

With the military, POLICY continued to work with the Armed Forces Program in AIDS Control (AFPAC) and initiated collaboration with the Ministry of Defense (MOD). With the AFPAC, POLICY completed the study design of a "knowledge, attitudes, practices, and prevalence" (KAPP) study that will be carried out in the first half of 2001. The work for the study consisted of completing the data collection instrument, completing the project workplan, and identifying a Lagos-based local consultant/epidemiologist who will assist with the study. With the MOD, POLICY sponsored and organized a three-day workshop to review the results of the POLICY I-sponsored review of the military HIV/AIDS policy to draft a set of policy recommendations for the Minister of Defense. The resulting "white paper" was submitted to the minister in early December for his consideration.

POLICY also continued to work with the Federal Ministry of Health (FMOH) on the AIM application. The FMOH had managed to secure government funding for the AIM technical oversight committee to continue its work, but this proved insufficient. Thus, POLICY provided additional funds for a meeting to decide which impact areas could be included in the planned AIM booklet and updated presentation.

In a separate activity with the FMOH, POLICY sponsored and facilitated a founding meeting for a National Research Network on HIV/AIDS. The network met once and identified priority areas for research. POLICY will potentially sponsor a small number of studies.

In support of improved information on HIV/AIDS in the news media and increasing the information flowing into Nigeria in this area, POLICY negotiated and signed a subcontract with the NGO, Journalists Against AIDS (JAAIDS). This project will establish a Nigeria-AIDS website, set up an information and resource center for the media, and foster increased and improved press coverage of HIV/AIDS in Nigeria.

In the area of FP/RH, work concentrated mainly on identifying a program of policy support in the areas of advocacy, awareness raising, and policy revision. POLICY staff met with a number of local CAs, NGOs, international organizations, as well as the FMOH and the National Population Commission. Areas identified for initial work included the revision of the 1989 National Population Policy, SPECTRUM training, the RAPID model update and accompanying booklet, and presentation and secondary analysis of key policy-relevant DHS data.

As a guide to strategy development in the FP/RH area, as well as a monitoring device, POLICY applied three modules of the Policy Environment Score (PES.) Thirty-one key informants responded and a report was drafted.

Finally, POLICY opened an office in Abuja, Nigeria's capital, in order to be close to key government agencies. The new office, which will accommodate between seven and eight technical and support staff, has a conference room in which meetings and training workshops can take place.

REDSO/ESA

POLICY staff met with REDSO/ESA HIV/AIDS Officer Janet Hayman to discuss the REDSO Results Framework and possible activities to be carried out with POLICY's REDSO HIV/AIDS and RH/Child Survival funding. Following these discussions, POLICY submitted a description of potential activities in support of REDSO's SO to Hayman, who requested that POLICY delay drafting a workplan until after the CAs meeting, scheduled for February 2001. By that time, Hayman expects to have discussed POLICY assistance with the REDSO RH officer and other stakeholders.

SAHEL REGION/CERPOD

POLICY's goal in working with CERPOD is to strengthen the role of parliamentarians, NGOs, and journalists in promoting the Ougadougou Plan of Action of the CILSS countries, which addresses the ICPD goals. Assistance focuses on technical and financial assistance for networks representing each of these three groups. POLICY will organize periodic workshops and conferences for each network and provide financial assistance to carry out advocacy activities.

Summary of Major Activities:

POLICY I activities continued through November 30. Under POLICY II, the country manager and the local project manager have closed out all POLICY I activities and prepared the workplan for POLICY II.

SOUTH AFRICA

The goal of POLICY Project assistance in South Africa is to continue to build and strengthen the capacity of organizations and institutions across all sectors to design, implement, and evaluate comprehensive HIV/AIDS prevention, care, and support programs and policies. Project assistance focuses on improving multisectoral capacity and involvement in the country's national HIV/AIDS and STD program. This is accomplished by assisting different role-players in developing and implementing effective advocacy strategies for HIV/AIDS; strengthening collaboration between the governmental and nongovernmental sectors; encouraging effective planning for HIV/AIDS programs; and increasing the information used for policy and program development.

Summary of Major Activities:

National government departments. Following the XIII International AIDS Conference in Durban, the Department of Welfare's National Population Unit organized a five-day conference aimed at unpacking relevant recommendations from the AIDS Conference and strategically planning for the future. POLICY provided technical and skills-building assistance at an advocacy workshop that formed part of the main program. Participants included provincial Population Unit representatives that now have advocacy strategies to meet their HIV/AIDS province-specific needs, including the meaningful incorporation of HIV into population-related activities. Assistance to the Department of Correctional Services commenced during October through the development of a prison-based skills-building workshop for HIV-positive prisoners in Brandvlei Prison in the Western Cape. This series of activities aims to increase the skills of long-term HIV-positive prisoners as peer counselors to decrease the burden currently faced by prison authorities. POLICY has also assisted the Subdirector of Statistics (South Africa) with the development of its HIV/AIDS policy, which is currently in its third draft prior to formal approval and acceptance by the Department.

Development NGOs. POLICY continued its support of NGOs that do not have HIV/AIDS as a core function by building the capacity of these organizations to include an HIV/AIDS component into their existing work. Working with selected organizations in all nine provinces, POLICY strengthened monitoring and evaluation skills by hosting a series of capacity-building workshops. As a result, many of these NGOs have successfully applied for funds from both the Department of Health (DOH) and other donors to develop clear and concise program indicators and to critically evaluate their own efforts. Because of both the success of and increased demand for this activity, the DOH has asked that POLICY repeat a similar process of capacity-building exercises aimed at community-based organizations (CBOs) that are involved in broad developmental issues during 2001.

Local government. After piloting the HIV/AIDS and Local Government Toolkit with more than 60 nominated local government officials and councilors in Kwazulu-Natal during November 1999, POLICY initiated a one-day follow-up meeting in September to review the process, share successes and obstacles, and disseminate the new information and resources. The outcome of this meeting also provided the framework for the scaling-up of this activity for SALGA (South Africa Local Government Association). Because of the successful use of the toolkit among the pilot local authorities, a strategy was created to institutionalize—through SETA (Sector Education and Training Authority)—the HIV/AIDS Toolkit Training as one of the local government capacity-building courses.

South African National Civil-Military Alliance. The annual general meeting of the Civil-Military Alliance that was held in late November also provided the opportunity for POLICY to meet the identified needs of this national HIV/AIDS alliance. A four-day skills building workshop increased the strategic planning skills of the 65 participants by focusing on the elements of the logical framework approach. All

provincial arms of this alliance have now been invited to apply (by February 2001) for specific activity funding to the AIDS Directorate in Pretoria. At the official launch of the Civil-Military Alliance in September, where the Deputy Minister of Defense was named as the patron, the POLICY Project was highlighted as the alliance's key capacity partner. Proof of this is the peer education training that POLICY supported in September–October for the Northern Cape province.

The corporate sector. POLICY's continued support of the national South African Business Council on AIDS increased through the involvement of key provincial businesses in two additional provinces (Kwazulu-Natal and the Eastern Cape). Following the formation of the Western Cape Business Forum on AIDS after a POLICY-initiated one-day HIV/AIDS and Business workshop: "Understanding the Impacts; Exploring Your Issues; Defining Priorities" earlier in 2000, POLICY assistance to corporate South Africa has increased. This has included HIV/AIDS policy guidance and referral to Citibank, the University of the Western Cape, and Babette Clothing Manufacturers, among others. POLICY technical assistance and planning has also supported the world's first-ever post-graduate diploma in HIV/AIDS Management (which will be offered jointly by the University of Stellenbosch and National School of Public Health at MEDUNSA from 2001)

Men's and women's groups. In conjunction with the representative for women on SANAC, POLICY commenced its series of nine provincial workshops aimed at key women's organizations in the latter half of 2000. To date, workshops have been conducted in three provinces and reached more than 40 different organizations, with the broad aim of introducing organizations working with women around the country to the revised South African National HIV/AIDS Plan (2000–2005). The initiative also focuses on strengthening the ability of these organizations to consider issues related to HIV/AIDS and gender within their current activities and to spearhead the national "Women in Partnership Against AIDS" initiative.

POLICY has also focused on strengthening the capacity of the ever-increasing number of openly HIV positive people in South Africa. In December, POLICY provided strategic planning assistance to NAPWA (National Association of People Living with HIV/AIDS) as the organization developed its strategic plan for the next three years.

TANZANIA

The goal of POLICY Project assistance in Tanzania is to improve the policy environment for HIV/AIDS and reproductive and child health. Objectives include building and strengthening the capacity of government and civil society organizations and institutions across all sectors to advocate for policy change within and outside their organizations to improve the design, implementation, and evaluation of HIV/AIDS prevention, care, and support programs and policies. Project assistance is focusing on improving multisectoral capacity and involvement in the country's national HIV/AIDS and STD program. Activities are being accomplished by assisting different stakeholders to develop and implement effective advocacy strategies for HIV/AIDS; strengthening collaboration between the governmental and nongovernmental sectors; encouraging effective planning for HIV/AIDS programs; and increasing the information used for policy and program development.

Summary of Major Activities:

Major activities were focused on POLICY's work with the Ministry of Justice and Constitutional Affairs (MOJ) and the Tanzanian Women Lawyers' Association (TAWLA). With POLICY support, TAWLA sponsored a World AIDS Day event (December 1) to raise awareness of the legal issues surrounding HIV/AIDS. POLICY has also assisted in the establishment of a protocol between the MOJ and TAWLA to carry out a legal assessment of HIV/AIDS constitutional, statutory, and customary law issues. The results of this assessment will be used as a basis for law reforms to be supported by the MOJ's Law Reform Commission.

Numerous Tanzania POLICY partners visited Washington, D.C. In October, Drs. Adeline Kimambo and Patrick Swai from the Tanzania Public Health Association (TPHA) attended TD Week and participated in the training workshops and activities planning the following week. In November, POLICY staff met with the MOH's Chief Medical Officer and key members of the MOH HIV/AIDS Technical Advisory Committee to discuss the project's interest in assisting with the improvement of the national surveillance system, to generate information on the HIV/AIDS situation. As a result of discussions with Dr. Fimbo, Director of Advocacy and IEC at the NACP, POLICY is planning to assist the NACP with the orientation workshop for the National Advisory Board on AIDS to be held in early 2001.

POLICY staff participated in the White House's World AIDS Day Summit for Faith Leaders, during which they worked with Tanzania's Anglican Archbishop Mtetemela to discuss POLICY support to the Anglican Church of Tanzania (ACT) and to prepare a press release on the Archbishop's attendance at the White House Summit. POLICY's work with ACT will assist in its ongoing internal advocacy work on HIV/AIDS. In November, in Dar es Salaam, ACT sponsored a five-day workshop for all religious groups in Tanzania, entitled "Living with Hope." The workshop presented information on a variety of religious organizations' responses to the HIV/AIDS crisis. During the next quarter, POLICY will begin to work with the Christian Social Services Committee and other NGOs to support their ongoing advocacy efforts.

POLICY staff also began discussions with new members of Parliament to support a strategy to heighten awareness of the importance of the HIV/AIDS issue when the 2001 Parliament convenes.

UGANDA

The goal of POLICY Project assistance to Uganda is to strengthen the commitment of national leadership to population and RH issues as a means of achieving its national development goals as described in the government's Vision 2025 document. Assistance focuses on collaborating with the Population Secretariat in the application of RAPID, development of an accompanying RAPID presentation with input from NGOs, and implementation of a dissemination plan aimed at national decision makers. POLICY transfers equipment, skills, and other tools to the Population Secretariat for application and dissemination of RAPID; and provides limited technical support and training for consolidation of a national NGO network to enable it to participate in finalizing and disseminating the RAPID presentation.

Summary of Major Activities:

A major activity has been the application of the RAPID Model. POLICY and its primary counterpart, the Population Secretariat, recruited a local consultant, conducted orientation and training in RAPID for different audiences, transferred needed equipment, and organized a technical team for the RAPID application. POLICY consultants researched themes relevant to Uganda's national development plans as embodied in Vision 2025 and identified and collected data inputs for the model. Meetings of technical team members and communication with Washington-based POLICY staff have been initiated to discuss and reach consensus on how best to interpret existing information especially on the subject of HIV/AIDS, and to make informed judgment on demographic and sectoral data inputs. Scopes of work have been drafted to prepare chapters for a presentation, using professionals with expertise in each area.

Another major activity has been the formation and training of a central-level NGO network. POLICY and the Population Secretariat held a preliminary meeting with 17 representatives of the NGO sector. A second, two-day meeting was held to constitute the network with 46 participants representing 22 NGOs, women's groups, the media, religious organizations, cultural organizations, professional associations, youth organizations, and HIV/AIDS programs. The participants reached agreement on a network mission of effectively advocating for FP/RH policies and programs that respond to the needs of women and men, including adolescents. The RAPID technical team was introduced to the network, and an NGO representative was selected as a team member. The Vision 2025 was reviewed and a four-month action plan was developed. POLICY staff held meetings of the NGO network and its steering committee in November and conducted a weeklong training program on advocacy in December.

Other activities included ongoing development of a dissemination plan for the final RAPID national presentation within the context of the Population Secretariat's Advocacy Sub-program, and a long-term, district-level capacity-building plan.

ASIA/NEAR EAST (ANE)

BANGLADESH

The goal of POLICY assistance in Bangladesh is to improve the policy environment for FP/RH programs. Assistance will focus on formulating and improving policies and plans that promote and sustain access to effective health service delivery among the needy. Toward this end, POLICY works to ensure that NGO and community involvement is broad-based for better services covering a larger clientele; builds consensus to increase resources for FP/RH programs; improves the ability of government planners and NGO managers to conduct rational and effective planning; and assists in the generation of accurate and timely information for meeting program requirements.

Summary of Major Activities:

RTI arranged the Reproductive Health Financing Course, October 23–November 17, at their offices in North Carolina. Four officials from the Ministry of Health and Family Welfare (MOHFW) attended the workshop. Participants successfully completed training on efficient management of the ESP Model.

The Bangladesh Institute of Research for Promotion of Essential and Reproductive Health and Technologies (BIRPERHT) organized a Divisional Stakeholders Workshop in October to elicit opinion from all walks of life, toward finalization of the Bangladesh National Population Policy. It was the final workshop on the draft population policy, following five divisional workshops. The Honorable Minister, MOHFW, Sheikh Fazlul Karim Selim, was the chief guest in the closing session of the workshop.

A meeting of the National Integrated Population and Health Project (NIPHP) Corporate Steering Group was held at the MOHFW on November 9 to approve nine workplan components. Sayed Alamgir Farrouk Chowdhury, Secretary, MOHFW, chaired the meeting, in which the role and contribution of NIPHP in strengthening the government's effort to deliver health and population services were recognized.

The NGO Core Group was set up to provide policy guidance to the consultants responsible for planning and convening the NGO workshop held in the POLICY office on October 17. The Additional Secretary MOHFW chaired the meeting, which was attended by representatives of USAID, DFID, and the World Bank, among others. The Core Group approved the draft issue paper for the NGO workshop.

A two-day workshop was held on November 21–22 to discuss an increased role for NGOs in the delivery of ESP services, specifically the areas of potential NGO involvement; ways the government could best support the NGOs to expand their delivery of ESP services; available mechanisms for ensuring adherence to minimum standards of service quality; and improving coordination between the government and NGOs. Consensus on most of the areas was reached and recommendations made and submitted to the MOHFW. More than 80 participants from the government, NGOs, and development partners attended the workshop, including senior government officials, key donors, and representatives of major NGOs.

The POLICY office is trying to develop an appropriate follow-up mechanism for the NGO workshop to ensure implementation of recommendations. Donors endorsed the idea of forming a technical working group, headed by the Planning Minister, composed of government officials, NGO representatives, and representatives of development partners. The working group may be required to develop an action plan for the government to approve and adopt. The next step would be to persuade the Planning Minister to head the working group, subject to endorsement by the Minister and Secretary of Health.

In coordination with the DELIVER Project, POLICY will assist the MOHFW and the Social Marketing Company (SMC) to develop a contraceptive security strategy. On November 11, the Country Director met with staff from JSI and DELIVER to discuss planned activities.

EGYPT

The POLICY Project in Egypt supports USAID/Cairo's objective in the population/family planning sector—to reduce fertility. To achieve this objective, the coverage and quality of services offered by the Egyptian family planning program are being expanded, and the program's institutional and financial sustainability are being improved. POLICY is helping by providing technical and financial support to Egyptian institutions in the development and presentation of FP/RH policy analyses; developing FP/RH financial analyses and presentations so that systematic attention can be given to sustainability issues; engaging in policy dialogue with relevant and influential government policymakers and institutions; and helping strengthen the ability of NGOs to engage in constructive policy dialogue and advocacy.

Summary of Major Activities:

The head of the MOHP/PS, Dr. Yehia, asked POLICY to assist in developing a mechanism to monitor projects affiliated with the sector that are financed by different donors and work in various programmatic and geographic areas. POLICY staff prepared a questionnaire, sent it to all projects working with the sector, and conducted interviews with key persons at MOHP, including the minister and his advisors. After analyzing available information, POLICY wrote a memorandum to the minister recommending the establishment of a PMU in the population sector. The memo was officially submitted to the minister's office, and formal approval was received on September 28. The PMU, headed by Dr. Yehia, has four coordinators (Monitoring, Information, Training, and NGO/Private Sector). As requested by the head of the MOHP/PS, the PMU prepared a presentation reflecting the sector's vision and strategy, which was presented at the donor meeting on December 7. Donor representatives expressed their appreciation for the clarity and comprehensiveness of the MOHP/PS presentation, which will help them to set priorities for future interventions. Abu Nuwar, UNFPA, commented that the presentation has started a dialogue between the donor community in Egypt and MOHP/PS.

Dr. Mona Khalifa met with the Minister of Health and Population to discuss the need to increase cooperation between the NGO community and the MOHP in FP/RH in the areas of outreach, advocacy, and awareness in order to increase the use of FP facilities. Thirty-five participants attended a workshop September 19–21 at the El-Begom Health Unit in Al-Aakab El Kubra, Aswan, to present the benefits of increased participation between the government and nongovernmental sectors. Dr. Ismail Sallam, Minister of Health and Population and Governor of Aswan, opened the workshop. POLICY staff and local consultants facilitated the workshop.

POLICY has collected and analyzed data about the Suez governorate (where the 2000 DHS showed a decrease in the contraceptive prevalence rate) and developed a presentation using mapping software to identify areas for intervention and high-priority issues. The information was presented to the USAID Mission, since it is interested in demonstrating how NGOs can help to remedy such situations. The Mission, however, found the information to be insufficient and asked POLICY, POPIV, and the Clinical Services Improvement (CSI) Project to prepare a proposal for collecting more information, which will cover all of Suez and two other governorates (Ismailia and Port Said). The group is currently discussing methods for data collection with a researcher. Data collection procedures include a qualitative sample survey, focus group discussions, and in-depth interviews.

POLICY developed a plan to identify and support policy champions, using the project's large database on persons from different government ministries, NGOs, and other organizations that have received training from POLICY. POLICY finalized the first stage of the plan and interviewed knowledgeable persons to set criteria for identifying champions, which will lead to the identification of 25 individuals who will subsequently receive technical and financial support to become more effective advocates for improved

FP/RH services. Three roundtables are planned for January 2001, in which speakers will be invited to discuss adolescent, gender, and reproductive rights issues, highlighting current interventions.

A training needs assessment showed that PS staff need improved data analysis skills. Therefore, POLICY conducted a three-day workshop for MOHP staff, entitled “Analysis of Survey Data Using SPSS.” Ten trainees from the PS attended the workshop, which was held from November 21–23. POLICY prepared handouts on the SPSS package and data from the 1995 Egypt DHS for the training.

In collaboration with POPIV, POLICY/Egypt made plans for a conference in April 2001 to develop a draft sustainability strategy. The plans include a presentation on Turkey’s experience in contraceptive independence, a short course in economics and finance, and preparation of 12 background papers. POLICY and POPIV presented the plan to the Mission and the MOHP/PS, which was approved for implementation. Also, POLICY made a presentation to a large audience at MOHP (including POPIV, USAID, and other CAs) on the recently completed study on the cost of family planning, entitled “How Much Would It Cost to Achieve Egypt’s Family Planning Goal?” HE Minister Sallam asked that the report be translated into Arabic for wider dissemination and presentation to the House of Parliament.

Contribution to strategic planning at NPC. In collaboration with POPIV, POLICY provided technical and financial assistance for the development of a strategic planning manual to be used by NPC at the governorate level.

INDIA

POLICY Project activities in India focus primarily on supporting the USAID Mission's major bilateral project in Uttar Pradesh (UP), the Innovations in Family Planning Services (IFPS) Project. The objectives of the \$325 million IFPS Project are to improve the quality of FP/RH services, increase access to services and methods, and raise demand for a range of FP/RH services. POLICY staff works closely with the Mission and their NGO counterpart, the State Innovations in Family Planning Services Agency (SIFPSA). Technical assistance includes activities related to planning, monitoring and evaluation, data collection and analysis, website design and management, and operational policies. POLICY also works with the UP state government to implement the state's population policy, which was enacted in July 2000.

Summary of Major Activities:

After conducting the baseline surveys in four districts of UP, POLICY conducted four 2-day workshops in these districts in August 2000 to share the baseline findings, set the objectives, and select strategies. During September, POLICY, in consultation with SIFPSA, USAID, and CAs, selected district-specific strategies and interventions and prepared district action plans (DAPs) with budgets. The Project Appraisal Committee of the IFPS Project approved the DAPs on September 29. POLICY prepared operational plans, identifying the individuals responsible to implement each specific activity and the time by which the activity should be completed. Three one-day consultation meetings were held in three districts (the fourth district meeting could not be held due to local district elections) in November. Based on comments provided by the district officers, the plans were revised and finalized in December 2000. POLICY also helped SIFPSA recruit project managers for DAP districts.

POLICY initiated activities to prepare DAPs in five additional districts of UP. Project staff identified agencies to conduct baseline surveys and signed contracts with these agencies. Data collection on selected RH indicators from 1,500 households in each district was completed in December, and POLICY prepared software packages and data analysis plans to analyze the data, which is currently in progress. POLICY staff also visited about 120 community health centers in the five districts and collected information on infrastructure and operational policies. POLICY will analyze and share this information with health officers in the districts and representatives of NGOs and the private and cooperative sectors to develop district-specific RH intervention strategies.

The UP government asked POLICY to prepare an operational plan that helps to implement all components of the UP population policy. POLICY prepared the plan and made online presentations to officers of the Directorate and Secretariat. After incorporating comments, the operational plan was sent to the Chief Minister's office for approval. The plan was then to be placed before the Cabinet for formal approval. However, several political and administrative changes in personnel have delayed approval. It is anticipated that the plan will be brought before the Cabinet sometime in January 2001.

The USAID Mission asked POLICY to conduct an SO2 indicator survey, with a sample of 10,000 households, to assess the performance of the IFPS Project in UP. POLICY selected primary sample units in 10 randomly chosen districts, trained 140 field investigators and 70 realtors, and launched the data collection on December 29. Results will be presented to the Mission and CAs on February 16, 2001.

The sampling plan for the PERFORM survey was prepared and shared with the Mission. POLICY also drafted four instruments for data collection and modified the instruments based on comments given by POLICY's Maternal Health Working Group.

JORDAN

The POLICY Project is assisting USAID/Amman and its local partners to improve access to and the quality of reproductive and primary health care services. POLICY is accomplishing this by promoting the adoption and dissemination of the revised National Population Strategy (NPS); increasing the awareness of and support for the NPS among members of Parliament, government policymakers, the private sector, civil society organizations, NGOs, religious leaders, women's groups, and other key leaders; developing a national plan to implement the NPS; and enhancing the capability of the National Population Council's General Secretariat to plan, monitor, evaluate, and coordinate the national implementation plan for the NPS. In addition, the POLICY Project is working closely with national Jordanian NGOs to enhance their capacity by building a network of women's groups that promotes their participation in the policy process for reproductive health with special emphasis on gender, human rights, and adolescent issues.

Summary of Major Activities:

The Jordanian National Population Commission (NPC), POLICY's main counterpart, organized a two-day national forum in September on the revised National Population Strategy (NPS) to reach consensus on the strategy and related programs, build political support for the strategy, and disseminate it to the highest level of executives and policymakers. The forum was patronized by His Majesty the King, and attended by the speaker of the lower and upper house, ministers, chairs of parliamentary committees, high-level public officials, and by representatives of NGOs, civil society organizations, and donors. Following the conference, NPC held a meeting to discuss comments made by the conference participants on the NPS. Minor changes were made in the document that was later sent to the government for endorsement. The meeting also provided an opportunity to brainstorm about the format of the NPS implementation plan.

The Country Director wrote two memos to the MOH and Ministry of Finance explaining the benefits to individuals and the country, associated with the removal of duties and tariffs on modern contraception. The memos, sent to the ministers of Health and Finance by the NPC/GS, are one of the follow-up activities for implementing the recommendations of the "Analysis of Policy, Legal, and Regulatory Barriers to Improved RH Services in Jordan," which POLICY completed in May 2000.

The Mission asked POLICY to project the contraceptive prevalence rate for 2001–2004 based on the recent trends obtained from annual surveys between 1997 and 2000. The Mission will use this information in a report to USAID/W and the Congress.

To strengthen the capability of NGOs, government organizations, and other representatives of civil society in networking and advocating for important issues facing women in Jordan, POLICY's Participation Coordinator conducted six 1-day workshops in July and August, attended by 109 participants. Workshops included an introduction to advocacy networks, dissemination of two recent studies on youth and menopausal women, and a presentation on RH issues in Jordan. In addition, using a grant from POLICY, the Princess Basma Women's Resource Center (PBWRC) conducted four 2-day workshops on gender and RH rights for 118 religious leaders across the Kingdom in cooperation with the Ministry of Awqaf and Islamic Affairs.

With support from POLICY, the Development Information Unit at Queen Zein Alsharaf Institute for Development conducted six 2-day workshops to form a core research group at the Jordanian National Forum for Women (JNFW). The workshop included an introduction to the role of the core group, introduction to information networks, and training in basic research skills. Fourteen persons attended the workshop.

On September 20, at the request of the Jordanian Association for Family Planning and Protection (JAFPP), the Country Director discussed changes in FP/RH policies and programs in Jordan since the

1994 ICPD in a presentation entitled “Post-Cairo RH Policy in Jordan to 2000.” The audience consisted of members from IPPF-affiliated Arab countries. The Country Director also drafted a memo to the Ministry of Education to obtain information on the number of high school principals, counselors, and biology teachers. The information is necessary to design activities for adolescent RH. The Participation Coordinator participated in two workshops to review the new National Strategy for Women. She also conducted a one-day workshop on gender for media persons in cooperation of the PBWRC.

PHILIPPINES

POLICY Project assistance in the Philippines aims to strengthen the capability of community-based people's organizations and institutions, particularly of local government units, in the design, implementation, and evaluation of population policies and plans for resource mobilization and utilization. Project assistance focuses on gradually gaining FP/RH program financial sustainability and improving the quality of FP/RH services that promote the health of Filipino families. This is accomplished through an effective, multisectoral, and participatory advocacy plan and implementation of population policies that will increase domestic resources for FP/RH services in both the public and private sectors and enhance private sector participation in the provision of such services. Key players will be given assistance in the development of data-based population policies, plans, and programs.

Summary of Major Activities: There were no major activities undertaken by the POLICY Project during this reporting period, primarily because of the extension of POLICY I through November 2000.

During December, the POLICY office was principally occupied with documenting the final results of the POLICY I Project (especially the lessons learned from the Local Advocacy Project and the Contraceptive Interdependence Initiative (CII) activities), and evaluating and documenting the experience with placing advisors within POPCOM's Research Management Units (RMU). The staff also worked closely with Philippine counterparts—the Department of Health (DOH) and POPCOM—to finalize the POLICY II workplan.

Project staff laid the foundation for activities that will soon be underway, such as assisting with the development of operational plans for the DOH and conducting policy dialogue with policymakers to generate government commitment for a National Population Bill. Activities included conducting meetings with the USAID Mission, counterparts, and other affiliated individuals and organizations; initiating surveys and analyses whose results are to be used at a later stage; and preparing contracts and agreements with consultants who will be actively engaged in the project's future activities.

EUROPE AND EURASIA (E&E)

ROMANIA

The goal of POLICY assistance in Romania is to ensure that policies and plans promote and sustain access to high-quality FP/RH services by removing priority policy barriers and critical financing concerns. Achieving this goal requires assisting the RH Coalition and policy champions from the public sector in generating support for FP/RH, especially among newly elected national government officials and parliamentarians. Building on past successes in health insurance and State Budget resources for FP/RH, POLICY is also providing technical assistance directly to the public sector to remove two policy barriers affecting the nationwide network of FP centers and their linkage to other health-care levels, and to facilitate policy dialogue on developing and financing a wider array of FP services by primary care family doctors.

Summary of Major Activities:

POLICY supported the MOH September 25 forum to identify and propose solutions to FP policy barriers, especially after recent policy changes. Using an updated list of policy barriers, prepared by POLICY staff, forum participants identified four critical barriers: unclear financing of all family planning program activities; lack of service delivery guidelines on the functions of FP clinic staff; their linkage to primary care providers; and family planning for specific groups, including postabortion women and adolescents. Discussions included alternative solutions and responsible agencies. Dr. Mihai Horga, MOH Director of the Department of Mother and Child, requested that POLICY prepare the forum report for use in developing the National RH Strategy (NRHS).

POLICY assisted the MOH in implementing issues related to contraceptive financing. POLICY's LTA and the supporting team are ascertaining the status of *judet* contraceptive distribution to identify needed policy action. Findings thus far show that most judets received centrally procured contraceptives slated for free distribution to targeted groups. Only six out of 41 judets have not purchased contraceptives locally using special funds released by the MOH. POLICY staff will undertake follow-up judet trips in 2001.

POLICY advocated to the National Health Insurance House (NHIH) and the College of Physicians (COP) for continued family planning coverage under health insurance, after various sectors, including local insurance houses, objected to the inclusion of family planning clinics in the health insurance system.

POLICY coordinated the December 13, 2000, meeting on next steps regarding FP/RH barriers. For national policy, the two key barriers were FP/RH funding under the new government, given top-level changes at the MOH, Ministry of Finance, and NHIH; and fee-for-service incentives for family planning provision at the primary care level of health insurance to reduce abortions. For judet-related policy, contraceptive security dominated, compounded by lack of clarity among local health authorities about their accountability for centrally procured contraceptives for free distribution to targeted populations, and the use of special funds to buy contraceptives locally to be sold in turn to nontargeted clients, with earnings to "build" the contraceptive revolving fund. POLICY staff will visit selected judets to assess these issues and recommend appropriate policies to the MOH. Also discussed was establishing/designating a family planning coordinating center in each judet to improve the management and cooperation of family planning providers. Participants asked POLICY to develop a two-page brief for use in early 2001 to advocate to new government officials for political support and improved financing for reproductive health. In addition, core funds were used to prepare a policy brief on key reproductive health issues under health insurance, including incentives for family planning provision at the primary care level.

Taly Valenzuela, POLICY Advocacy Director, facilitated the Network Development Workshop on September 27–29. Participants included National RH Coalition members: women’s groups, FP/RH NGOs, and professional associations in Bucharest and five judets. The workshop enabled participants to revise the Coalition’s Mission and Vision Statements. Participants agreed to form local advocacy networks and developed plans for local network formation and expansion.

Daniela Draghici followed up network-building efforts by traveling to Iasi for the local network meeting. NGOs in five judets are presently contacting other NGOs to join their networks, informing local governments about their efforts, and liaising with public sector providers. Local NGOs are also initiating inventories of NGO skills and will form coordinating committees. A national Coalition member from the Institute of Women designed a database for storage and processing of data from NGO profiles and skills inventories. It will be used to elect subcommittee members in late January.

The Coalition gathered on December 21 for a meeting cosponsored by POLICY, UNFPA, USAID, and the National Confederation of Women. Coalition members facilitated and provided agency briefs and newsletters. One highlight was a presentation of a booklet on menopause by the Medical Menopause Association of Romania, which expressed interest in joining the Coalition. Dr. Daniela Bartos, the new MOH minister, coauthored the booklet. Dr. Mihaela Badea presented the Coalition’s “Women Voting Health” campaign for the November elections to showcase the Coalition’s advocacy with political leaders. Daniela Popa, Women’s Institute, reported on the Network Development Workshop. Participants requested training in presenting RH issues to MPs, since advocacy is needed for the coming state budget deliberations to ensure RH funding. Samaranda Ionescu, National League of Women, offered to link the Coalition with key new MPs and government members. The Coalition awarded certificates of appreciation to Dr. Daniela Bartos and Sheilah Kast Rosapepe, the U.S. Ambassador’s wife, for active involvement in the 1998–2000 “Women Choosing Health” advocacy campaigns. The MOH representative, Dr. Mihai Horga, expressed the willingness to work with the Coalition for upcoming advocacy efforts. Two donor agency representatives, Susan Monaghan (USAID) and Elin Ranneberg (UNFPA), praised the Coalition’s accomplishments and results-oriented activities and committed to supporting it in future advocacy efforts.

POLICY has been working with JSI and other CAs and Romanian counterparts to help the MOH develop the NRHS. POLICY was the lead CA for the working group(s) on policy barriers and financing. Dr. Horga of the MOH asked POLICY to specify the structure of the policy barriers/financing working groups, propose members, and develop scopes of work.

RUSSIA

POLICY's goal in Russia is to strengthen the capacity of the Advocacy Network for Reproductive Health (Network) to advocate for policy change that promotes access to quality family planning, maternal health, and STD/AIDS prevention services. This is accomplished by providing technical and financial assistance to the Network to plan, implement, and evaluate its ongoing advocacy campaign. POLICY assistance focuses on the Network's programmatic, institutional, and financial sustainability.

Summary of Major Activities:

The Network received an official response to their letter to President Putin from the MOH, dated August 10. During this reporting period, the Network's Dialogue with Policymakers Group followed up with their colleagues at the MOH to better understand the response and to plan next steps in their campaign for increased contraceptive supplies. A Network member also drafted a one-page public relations piece about the Network that is currently being reviewed by Network members.

During a meeting held at the POLICY/Russia office on December 14, the Coordinating Committee and Network members responsible for planning a roundtable with federal officials created a detailed action plan for this activity, now scheduled for mid-March 2001. The NGO Hera will submit a minigrant application to POLICY for financial support.

In August and September, Network members in four regions conducted a pretest of the fact sheet, entitled "Improve Health by Supporting Contraceptive Use." Local policymakers provided favorable feedback and suggested no major changes to the draft. POLICY consultant Dr. Sakevich is updating the fact sheet regarding the HIV/AIDS infection rates in Russia. The fact sheet will be used at the upcoming roundtable.

On December 15, a small task force of Network members met to work on the second edition of their newsletter. The group confirmed the purpose, article topics, authors, and timeline for producing the newsletter. Network member Irina Taenkova, the editor for this edition, described these decisions in a memo to all Network members.

Network member Lyudmila Kanovalova from the Sverdlovsk region reports that their regional working group continues to work on improving the family planning section of the reproductive health program. They are requesting information from distant territories in the Sverdlovsk region so that the final program proposal will reflect the needs of the whole region. The program is designed as a four-year project (through 2005); they expect the program to be approved and adopted early next year (2001). Recently, the governor of Sverdlovsk publicly acknowledged the contributions of Dr. Kanovalova and her colleagues at a year-end meeting called by the governor.

TURKEY

POLICY Project assistance in Turkey is aimed at helping the government to achieve public sector contraceptive self-reliance in the face of foreign donor phaseout. In addition, POLICY has helped to create and now supports strengthening the capacity of an NGO Network for Women (KIDOG), whose mission is to advocate for women's health, education, and legal rights. POLICY's partnership with the Turkish Ministry of Health, other key ministries, and KIDOG combines policy analysis, dialogue, and advocacy with the aim of securing funds for contraceptive supplies. Funds for contraceptives are generated through the government budget and a cost recovery strategy.

Summary of Major Activities:

The major activity of the period was the evaluation of mid-term results of the pilot study to test cost recovery mechanisms for contraceptive commodities. POLICY/Turkey initiated a pilot study in three sites (Adana, Mersin, and Tarsus) for six months using three different price levels. The purpose of the study is to assess various aspects of the targeting strategy for free and subsidized contraceptive commodities dispensed at the MOH's primary health care (PHC) facilities.

Some assessments were based on data received from 40 percent of all pilot facilities, representing only 30 percent of the total expected caseload during the entire study. Of all users continuing to receive contraceptive commodities from MOH facilities, 53 percent paid the full donation requested. Although an additional 9 percent paid only a partial donation, the total proportion of payers reached 62 percent, which is especially noteworthy considering that donations are collected on a voluntary basis. In terms of payment rates, IUD clients rank first (60 percent), with full and partial payment categories at 19 percent. Oral contraceptive and condom users have lower rates, with full and partial payment rates of 60 and 58 percent, respectively.

Clients' reactions toward the donation policy have been assessed on the basis of the providers' accounts. Generally, clients have been compliant with little complaint. Explanations offered by providers (midwives/nurses) have usually helped soften clients' reactions, thus indicating that the operational success of the targeting strategy depends largely on the motivation (attitudes and behavior) of particular staff. Providers' attitudes and reactions to the policy have been of vital importance. Provincial health directorate staff and Health and Social Aid Foundation (HSAF) staff at the provincial level have been highly supportive, making it possible to successfully implement the study.

Given the preliminary results based on certain assumptions, the MOH may raise as much as 44 percent of its annual funding requirement through client donations, which will result in complete coverage when added to the MOH public funds. Based on the preliminary assessment, the ambitious attempt to formulate a financing policy based partially on donation revenue for contraceptive commodities stands a high chance of success in Turkey. POLICY/Turkey visited pilot sites to ensure that data collection was finalized, by December 5, 2000. Data collection was computerized during this period, except for a few sites that started later than June 5, 2000.

Also during this period, a focus group study to assess provider attitudes was designed and carried out in one pilot site. By January, all pilot study findings and focus group assessments in all three sites will be evaluated, with results providing input to the phased nationwide implementation. In addition, POLICY/Turkey hired Sema Guler, a former member of KIDOG, as the participation coordinator, effective January 1, 2001.

UKRAINE

POLICY's goal in Ukraine is to strengthen the ability of the MOH and local partners to implement the National Reproductive Health Program 2001–2005 (NRHP) and policies that improve reproductive health service delivery. This is accomplished by providing technical and financial assistance to two local sites as they develop their local reproductive health programs; to the Policy Development Group as it assists the two local sites, identifies operational barriers that impede successful implementation, and develops a monitoring and evaluation system; and to the Ukrainian Reproductive Health Network to plan, implement, and evaluate its ongoing advocacy campaign in support of adoption and funding for the NRHP.

Summary of Major Activities:

Formation and strengthening of an NGO Network constituted the major activity of the period. Two workshops were conducted: a network building workshop in September and an advocacy training workshop in December. In September, with input from USAID, WINROCK, and Counterpart Alliance for Partnership (CAP), POLICY gathered a diverse group of 40 civil society representatives to develop a network that supports improving women's status, FP, and reproductive health. The purpose of the first workshop was to establish an advocacy network comprising nongovernmental and private organizations in Ukraine committed to the promotion of policies that promote and sustain access to quality FP/RH services. Representatives included organizations such as the Union of Ukrainian Women, Kharkiv Center for Gender Studies, a private Family Health Center of Odessa, Shering Pharmaceutical Company, and the Association for Patient's Rights. The workshop resulted in the formation of the Ukrainian RH Network. The newly created network developed its mission statement, logo, and an organizational structure.

POLICY continued to strengthen the network in the December 2000 advocacy training workshop. By the end of the workshop, the network chose an advocacy issue, advocacy goal, and advocacy objectives. The advocacy issue is the lack of an adopted and financed NRHP. The advocacy goal is to ensure regular and sufficient financing for the NRHP. Two advocacy objectives were drafted, focusing on oblasts/cities earmarking funds for 2002–2003 to implement the NRHP and specifically highlighting the need to prioritize financing for IEC to adolescents. By January, the network expects to draft a charter and create a website. The network will meet again in March to obtain training in message development and create its advocacy action plan.

POLICY, with support from USAID/Kyiv, is collaborating with CAP, since it will be providing small grants to health organizations in 2001. Assuming the timing for release of the small grants will not pose problems and nothing else will preclude the network from submitting a strong proposal, the network has a good chance of receiving minigrants from CAP. In addition, the network proactively decided to create a committee on funding tasked with identifying other sources of grants.

In addition, POLICY has been organizing two activities that will be officially launched in January 2001. The first is support to the Policy Development Group (PDG), a multisectoral group of reproductive health stakeholders, as it assists an oblast and a city to develop reproductive health program implementation plans. The second is support to the MOH and PDG in identifying operational policy issues in the public sector reproductive health system and developing policy responses. These are follow-on activities in support of the PDG's policy champions aimed at creating a more conducive policy environment for reproductive health and improved planning and financing for FP/RH. In December, POLICY completed the first draft of an analysis, "Health Sector Reform Profile: A Background Paper to Initiate Identification of Operational Policy Issues," to be presented in the January workshop.

LATIN AMERICA/CARIBBEAN (LAC)

GUATEMALA

The goal of POLICY assistance in Guatemala is to help create a favorable policy environment for FP/RH and population issues. To achieve this objective, POLICY supports the active participation of private and public sector organizations in public information campaigns, advocacy activities, and reproductive health policy formulation; and provides technical assistance in developing and/or strengthening policies, laws, regulations, and plans that promote and improve access to FP/RH services. POLICY also provides technical assistance to develop, update, and transfer policy tools and methodologies to ensure that up-to-date and relevant information informs policy decisions.

Summary of Major Activities:

During September and October, POLICY provided technical assistance to a committee designated by Deputy Zury Ríos, Vice President of the Congress. The strategy was to develop a proposal for the Population Law, which included development of a technical document, involvement of NGOs, and consultation among selected and representative groups of the population. In addition, it included technical assistance to the Congressional commission responsible for passing the law and its publication and dissemination. UNFPA and POLICY are coordinating efforts in support of the Population Law. To date, the committee has completed the first draft of the technical proposal. UNFPA provided a Mexican consultant, and POLICY organized and facilitated two technical meetings with CAs and USAID to revise the proposal in October and December. Deputy Ríos is currently revising the technical document; once approved, civil society groups and NGOs will review and suggest further modifications.

In October, the Central American Parliament and the Population Inter-Parliamentarian Group (GIP), coordinated by IPPF, invited POLICY to make a policy presentation on FP/RH, focusing on linkages with gender and human rights. More than 100 people attended this presentation at the regional Congress, including Central American parliamentarians and Guatemalan legislators.

In coordination with the Center for Reproductive Health Law and Policies (CRLP) of New York, POLICY organized a high-level seminar, "Family Planning: an Unfulfilled Human Right in Guatemala," in December. CRLP presented the results of its research carried out in 1998, and POLICY presented comments on the results, highlighting how the lack of access to family planning services and information constitutes a violation of human rights. POLICY distributed a brochure summarizing the legal basis for FP/RH in Guatemala. Around 50 people attended the seminar; among them, Dr. Julio García Colindres, Director of the MOH Reproductive Health Program, and the technical advisory team. The coordinator of the Social Cabinet, USAID representatives, CAs, and NGO representatives also attended.

POLICY co-sponsored this workshop with the Latin American Faculty Social of Sciences (FLACSO) and the Program of Technical Assistance to Congress (PML) to strengthen the capacity for policy formulation in the FP/RH/POP areas. Participants in the workshop were policymakers and high-level technical advisors of the public sector and NGOs. Most are currently involved in diverse aspects of FP/RH/POP policy formulation. The coordinator of the Social Cabinet and the MOH's RH Program Director attended the workshop.

The PES is one of the R4 indicators for the Mission. POLICY conducted a new application of the survey between September and October 2000. Results show a score of 52 points, an increase of seven points compared with the first survey carried out in 1997. CAs and USAID-funded projects in Guatemala have used the PES as a tool for analyzing the FP/RH policy environment. This activity will continue through January.

HAITI

The goal of POLICY Project assistance in Haiti is to fill the reproductive health policy void resulting from a severely weakened public sector by strengthening civil society's role, building public-private sector partnerships, and supporting the public sector's strategic planning process. Assistance focuses on helping NGOs and other civil society groups, and national and departmental officials to implement the RH and HIV/AIDS and other objectives in the national population policy. This is accomplished by supporting the creation and operation of a public-private sector National Reproductive Health Commission, providing technical and financial assistance in advocacy and fundraising to civil society organizations with grassroots membership focused on youth, women, HIV/AIDS, and other key interests; assisting the Secretary of State for Population (SEP) with information dissemination on the national population policy; and collaborating with the bilateral project, NGO grantees, and MOH department officials to improve the quality of and access to FP/RH.

Summary of Major Activities:

POLICY provided technical assistance to the MOH in preparing the proposal for forming a National Commission on Reproductive Health (NCRH), which was accepted by the MOH. POLICY helped prepare the first draft of the by-laws for the commission, which was also accepted with slight modifications. POLICY participated in preparatory meetings for the first General Assembly meeting of the NCRH and communicated with key NGOs to seek their support for the efforts underway. Finally, POLICY has been asked to participate on the Secretariat of the NCRH.

POLICY provided support to the SEP in a series of meetings to develop a plan to promote support for the National Population Policy. Assistance to civil society organizations included technical assistance to POZ (an HIV/AIDS education and service NGO) in preparing a strategic plan for institutional strengthening. POLICY also provided assistance to several NGOs to celebrate the International Day to Prevent Violence Against Women. In addition, POLICY provided support to the UNDP to celebrate Internal Day to Eradicate Poverty, including presiding over one of the panels.

POLICY collaborated with the bilateral project, HS2004, to define the content of the minimum package of services for FP/RH and child survival using a methodology contributed by POLICY. HS2004 and POLICY also discussed joint plans for advocacy, strategic planning, and gender equity in the provision of reproductive health services. POLICY was invited to collaborate with the MOH and Pan-American Health Organization/World Health Organization (OPS/OMS) to develop national health policies for youth and adolescents. In this regard, POLICY helped prepare two proposals, which were accepted: one related to a process for policy formulation and the other to a framework within which the policy would be developed. POLICY began meeting regularly with the OPS/OMS and a committee formed to continue the work. POLICY also collaborated with UNFPA to elaborate their Five-year Plan for Haiti, including participation in a five-day workshop and a daylong workshop to analyze the context and identify key strategies. With respect to civil society organizations, POLICY assisted two NGOs in developing proposals for receiving financial assistance from the project for their activities: VDH and Femm Soley Lever. POLICY met with another NGO (AOPS) to initiate assistance in institutional strengthening and fundraising. In addition, POLICY was invited to participate in discussions of the ruling political party to develop a national health plan.

JAMAICA

The goal of POLICY Project assistance in Jamaica is to strengthen plans for implementation of reproductive health in Jamaica. POLICY works with the Ministry of Health to disseminate the MOH Strategic Framework for Reproductive Health within the Family Health Program, 2000–2005, and to ensure that workplans at the decentralized level are consistent with the framework. POLICY also continues to provide support to the National Family Planning Board to help the organization implement its reorganization. POLICY collaborates with Youth.now, USAID/Kingston's bilateral adolescent reproductive health project, to ensure that POLICY's more general reproductive health policy activities support Youth.now's adolescent-specific policy activities.

Summary of Major Activities:

POLICY assisted with the development and printing of the October 2000 document *MOH Strategic Framework for Reproductive Health within the Family Health Division 2000–2005*. The strategic framework contains results of an analysis of the RH situation in Jamaica and gaps in program activities conducted under POLICY. This official document will serve as the basis for reproductive health programming in the MOH for the next five years (2000–2005).

POLICY is working with the MOH and the National Family Planning Board (NFPB) to prepare a summary and a PowerPoint presentation of the strategic framework for a quarterly MOH meeting for national and regional senior staff to be held at the end of January 2001.

POLICY also discussed with the NFPB its needs for assistance to implement a reorganization and rightsizing. Elements of the reorganization were recommended to the NFPB by KPMG–Peat Marwick, a management consulting firm funded by POLICY to prepare a five-year strategic plan for the NFPB.

POLICY also conducted a PES in December 2000, the second PES conducted in Jamaica on behalf of USAID/Kingston. The first was conducted in the summer of 1999. Results are expected in the next reporting period.

MEXICO

In Mexico, the POLICY Project works to promote enhanced participation in the planning process and to improve the policy environment for HIV/AIDS in targeted states. It does this by forming multisectoral planning groups from a broad range of state and local organizations working in HIV/AIDS and related fields and helping them to develop an integrated strategic plan for HIV/AIDS addressing the needs of the states' vulnerable populations. POLICY provides follow-up technical assistance to help establish the planning groups as a permanent advisory board and to advocate on HIV/AIDS policy in the states. POLICY also provides assistance to the National AIDS Council on a consultative process for developing its new five-year plan on HIV/AIDS prevention and treatment, with possible future work to include operationalizing the plan at the state level and operations research on stigma and HIV.

Summary of Major Activities:

POLICY continued to provide assistance to the National Council for AIDS Prevention and Control (CONASIDA) in implementing the Decentralized Strategic Planning Program (PPED). In October, POLICY initiated the PPED in Oaxaca and Veracruz with a series of meetings for officials from the HIV/AIDS programs and NGOs in the two states. During these meetings, POLICY staff informed stakeholders about the various stages of the strategic planning process; worked with them to develop a list of respondents for the AIDS Policy Environment Score (APES) survey, Situation Analysis, and Response Analysis; and provided training on application of the APES. Subsequently, the baseline APES was applied in Veracruz.

In addition, POLICY staff provided follow-on assistance to the multisectoral citizens groups in the states of Yucatan, Guerrero, and Mexico, where PPED activities for HIV/AIDS, commenced under POLICY I, are in various stages. In Yucatan, the Multisectoral Strategic Plan for HIV/AIDS, which was presented to the governor by the State Secretary of Health in July 2000, is now under consideration. In Guerrero, the multisectoral group, CEMPRAVIH, renewed its effort to completing a strategic plan, incorporating an existing operational plan that has been the guide for activities during the year. In Mexico, POLICY assisted the multisectoral group to further define its structure and functions; the group now has four subcommittees working on priority topics to be included in the strategic plan. In each of these states, POLICY staff applied the second round of the APES. The team also applied the second round of the APES in the Federal District, where the results showed a significant change from the baseline score: an increase of 12 points, from 39 percent in 1998 to 51 percent in 2000.

At a request from the head of CONASIDA, POLICY staff carried out a 10-hour course, "Public Policies and Strategies to Negotiate with Civil Society." Both high- and mid-level officials from CONASIDA attended. CONASIDA also requested POLICY assistance in developing their "National Plan for Prevention and Control of HIV/AIDS and STIs, 2001–2006" in a participatory and multisectoral manner.

Other activities during this period included the following:

- POLICY staff gave lectures on "Fundraising for HIV/AIDS" during the National Assembly of FRENPAVIH (National Front of Persons Living with HIV) and the National Conference of NGOs that work on HIV/AIDS.
- POLICY's LTA, Edgar Gonzalez, appeared on the program Radio IMER, where he discussed the relationship between civil society and government within the context of HIV/AIDS efforts.
- POLICY staff delivered a lecture on strategic planning for NGOs in the state of Mexico.

PARAGUAY

POLICY's assistance in Paraguay is designed to create a policy environment favorable to reproductive health and population issues. Project assistance focuses on developing and facilitating the approval of Paraguay's first National Population Policy. This is accomplished by creating and providing intensive training and technical assistance to a multisectoral group of experts who will work with the Population and Development Unit to develop the population policy and advocate for its implementation. POLICY also organizes and facilitates meetings and workshops among core group members to discuss and determine the content of the policy.

Summary of Major Activities:

In Paraguay, POLICY is working to develop the country's first National Population Policy. Toward this end, in September/October 2000, the POLICY Project in collaboration with UNFPA, the Inter-American Development Bank (IBD), and the Department of Statistics and Census sponsored and organized a postgraduate course entitled "Programs and Policies on Population and Development." The purpose of the eight-week course was to create a core group of experts to work with the Population and Development Unit (UDPD), within the Secretary of Technical Planning (STP), to develop the population policy and advocate for its implementation.

Building on the momentum of the workshop, POLICY's local consultant worked closely with UDPD to conduct a series of follow-on activities:

- Formulation of a 10-person Executive Team that will spearhead efforts to develop the population policy and build consensus on its content among diverse government institutions, policymakers, and civil society. The team consists of representatives from STP, the ministries of Health and Education, the municipality of Asuncion, and the National Police, all of them alumni from the postgraduate course.
- Creation of a larger group of interinstitutional technical advisors, also drawn from the course, to support and advise the Executive Team during the process. Members of the group formed five thematic subgroups according to their expertise: education, health and reproductive health, employment and poverty, environment and development, and migration and spacial distribution. Each of these themes will receive special attention in the population policy.
- Completion of an analysis of Paraguay's socio-demographic situation initiated by UDPD during POLICY I. Five hundred copies of the analysis, "Diagnostico Socio Demografico del Paraguay," were printed and disseminated at a special seminar.
- Organization of a seminar to present and analyze the information contained in the diagnostic, as well as to identify key issues that merit attention in future policies. Seminar participants included representatives from a multitude of government agencies and ministries, NGO officials, parliamentarians, and members of the press. Over 200 participants attended. The Minister of Planning inaugurated the seminar and pledged support for future efforts, directed at developing the population policy. Newspapers, television, and radio provided extensive coverage of the event.

Because of limited funding, POLICY will only provide support in Paraguay through February 2001. Thus, POLICY worked with UDPD to develop a proposal for funding and submitted it to UNFPA.

PERU

The goal of POLICY assistance in Peru is to strengthen civil society organizations to advocate for sexual and reproductive health and rights and to participate in the design and surveillance of FP/RH policies and programs so they respond to the needs of both women and men. Project assistance focuses on training and technical assistance to local partners in the area of sexual and reproductive rights, analysis and wide dissemination of information on RH issues, and support for policy dialogue and advocacy in the context of Peru's changing political climate.

Summary of Major Activities:

POLICY provided technical assistance to the National Network for the Promotion of Woman (RNPM) during the elaboration of its national strategic and programmatic plan. A local consultant prepared a diagnosis and conducted a strategic planning workshop with 68 members of the 25 departmental branches of the network. During the three-day workshop, December 7–9, network members identified specific strategies and actions that could be implemented in their local contexts. The draft of the national strategic and programmatic plan will be finalized in the next few weeks. POLICY will continue assisting the network branches to prepare their departmental operational plans.

POLICY developed a plan for strengthening citizen surveillance committees created by the RNPM. The objective of these committees is to promote the participation of grassroots organizations in overseeing the quality of FP/RH services, with special emphasis on the respect for human rights. In coordination with USAID/Lima/PHN, POLICY conducted a workshop on December 12–14 for members from three surveillance committees from El Indio, El Algarrobo, and Vice (Piura) to update them in advocacy strategies, reproductive rights issues, and use of a checklist to address adherence to reproductive health norms by service providers. Five case studies on providers and family planning users documented the positive impact of family planning services in the lives of women and men in Peru.

POLICY also started coordinating with ASONEDH members in conducting an advocacy workshop to focus on reproductive rights for a coalition of African–Peruvian human rights organizations. In addition, coordination meetings with four organizations (RNPM, Redes Jovenes, Manuela Ramos, and Flora Tristan) were held to identify laws and regulations that could pose a barrier to access and services, and to plan advocacy campaigns to promote legal and normative changes.

POLICY collected information from the following NGOs on their advocacy activities with municipalities: ASERVIR (Arequipa), ASODEL (Cajamarca), ATUSPARIA (Chimbote), CEPROMUJJ (Piura), and INPPARES (Tacna). POLICY staff made several visits to the municipalities of Comas, Villa El Salvador, and Barranco to prepare a plan for including reproductive health activities in municipal plans.

POLICY also prepared and disseminated seven biweekly information sheets on FP/RH, based on a review of local and international media. This information sheet was sent via e-mail to more than 80 civil society organizations and NGOs, and to more than 50 individuals across the country. The information provided by these sheets keeps readers up-to-date on changes in the policy environment. One bi-monthly e-mail summary on the international policy context on FP/RH was also sent to a smaller list of NGOs.

POLICY staff made a presentation on population policies at the MOH Annual Training Program on Family Planning and Maternal and Child Care; provided technical assistance to the NGO Manuela Ramos in curriculum design of the Annual Postgraduate Program on Women's Rights, and presented a paper on Human Rights and Health for the workshop.

COLLABORATIVE ACTIVITY HIGHLIGHTS

POLICY collaborates with partner institutions and other donors, both at the project level and in country-specific settings to achieve common objectives and results. For example, POLICY staff are active members of several USAID working groups including the Interagency Working Group on HIV/AIDS, the IWG on HIV/AIDS Care and Support, Interagency Gender Working Group (IGWG), Maximizing Access and Quality (MAQ) Committee, and the Population and Health Materials Working Group (PHMWG) and its Documentation and Dissemination Subgroup. Other instances of collaboration during this reporting period include

- Design of an advocacy training working on “Asia Pacific Alliance: Advancing the ICPD Agenda” with Population Action International.
- A study of private sector participation and child health in collaboration with the Interagency Working Group composed of the World Bank, WHO, UNICEF, and USAID.
- Work with the Inter-American Development Bank to plan a FP/RH finance workshop.
- Implementation and dissemination of the AIDS Program Effort Index in conjunction with UNAIDS.
- Inputs to the RTI workshop on FP/RH finance.
- Updates to AIM and DemProj in conjunction with the Bureau of the Census and the UN Population Division.
- Work with Advocates for Youth, the FOCUS Project, and the Center for Law and Reproductive Policy to develop presentations for staff attending TD Week.
- Distribution of materials and demonstration of software during the core course on Population, Reproductive Health, and Health Sector Reform, sponsored by the World Bank Institute.
- A meeting with Jane Bertrand of the Measure/Evaluation Project to discuss collaboration on the development of updated indicators for policy.
- Participation in the December 18 workshop of USAID’s Interest Group on Simple Fertility Awareness-Based Family Planning Methods.

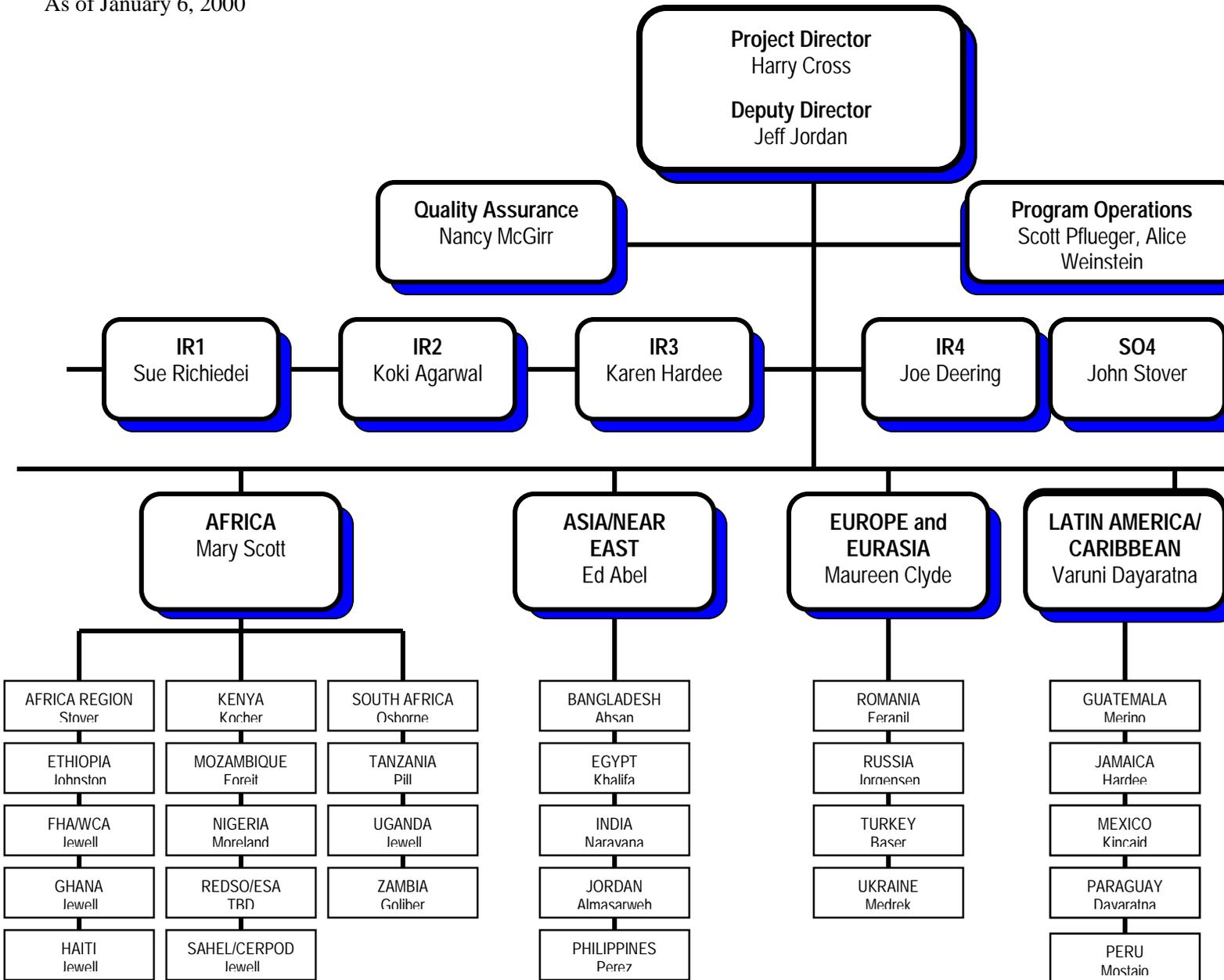
In addition, many of POLICY’s country activities seek to actively involve other CAs in collaborative activities. Country workplans include a list of USAID-funded CAs currently working in PHN and associated areas, and where appropriate, describes the potential for collaboration. Opportunities for collaboration will increase as project’s activities advance in each country. Some country-specific examples of collaboration follow.

- POLICY collaborates closely with all CAs working in Jordan in the RH field. POLICY provided AVSC with projections of the number of female sterilization users for 2000–2020 to evaluate future demand for female sterilization. POLICY also provided inputs for designing a study of long-acting contraception to be sponsored by AVSC. POLICY worked with the CMS Project during the RH Services and Commodity Promotion Workshop for Pharmacists: POLICY made a presentation on population and reproductive health challenges and needs in Jordan for the period 2000–2020. In addition, POLICY worked with Abt Associates, Inc., to develop results indicators for the Mission.
- POLICY supported the UNAIDS GIPA Program in South Africa by providing technical assistance in the development of their strategic plan. POLICY collaborated with UNFPA in support of the National Population Unit’s national summit. Collaboration with both the Equity Project and the U.S. Peace Corps is continuing through support of their AIDS involvement initiatives.
- Working with Nigeria’s National Action Committee on AIDS, POLICY collaborated with the World Bank, UNAIDS, UNICEF, FHI, DFID, and UNDP in the preparation of the Interim Action Plan for HIV/AIDS. POLICY also collaborated with the WHO on continued work with the AIDS Impact Model. POLICY is collaborating with FHI/IMPACT on work with the military on HIV/AIDS.

APPENDIX
MANAGEMENT STRUCTURE AND STAFF LISTING

MANAGEMENT STRUCTURE

As of January 6, 2000



MANAGEMENT STRUCTURE

Directors	Country	Country Manager	Administrator/ Administrative Backstop	CTO
<i>Africa:</i> Mary Scott Backstop: Jeff Jordan	Africa Regional Funds	John Stover	Alice Weinstein/ Bonnie Dye	Elizabeth Schoenecker
	Ethiopia	Alan Johnston		
	FH&A	Norine Jewell		
	Ghana	Norine Jewell		
	Haiti	Norine Jewell		
	Kenya	Jim Kocher		
	Mozambique	Karen Foreit		
	Nigeria	Scott Moreland		
	REDSO/E	TBD		
	Sahel/CERPOD	Norine Jewell		
	South Africa	Kevin Osborne		
	Tanzania	Charles Pill		
	Uganda	Norine Jewell		
Zambia	Tom Goliber			
<i>Asia/Near East:</i> Ed Abel Backstop: Harry Cross	Bangladesh	Syed Ahsan	Scott Pflueger/ Megan Noel	Mai Hijazi India: Elizabeth Schoenecker
	Egypt	Mona Khalifa		
	India	Gadde Narayana		
	Jordan	Issa Almasarweh		
	Philippines	Aurora Perez		
<i>Europe & Eurasia:</i> Maureen Clyde Backstop: Harry Cross	Romania	Imelda Feranil	Alice Weinstein/ Chris Lewandowski	Elizabeth Schoenecker
	Russia	Anne Jorgensen		
	Turkey	Zerrin Baser		
	Ukraine	Monica Medrek		
<i>Latin America:</i> Varuni Dayaratna Backstop: Jeff Jordan	Guatemala	Lucia Merino	Scott Pflueger/ Daly Salegio	Mai Hijazi
	Jamaica	Karen Hardee		
	Mexico	Mary Kincaid		
	Paraguay	Varuni Dayaratna		
	Peru	Patty Mostajo		

<i>Core Activities</i>	IR1	Sue Richiedei	Alice Weinstein/ Kristen Totino	
	IR2	Koki Agarwal	Scott Pflueger/ Vicky Bush	
	IR3	Karen Hardee	Alice Weinstein/ Chris Lewandowski	
	IR4	Joe Deering	Scott Pflueger/ Bonnie Dye	
	SO2 – Safe Motherhood	Koki Agarwal	Scott Pflueger/ Chris Lewandowski	
	SO4 – HN/HIV/AIDS	John Stover	Alice Weinstein/ Bonnie Dye	
<i>Working Groups</i>	Adolescent RH	Susan Richiedei	Scott Pflueger/ Kristen Totino	
	Safe Motherhood	Koki Agarwal	Scott Pflueger/ Chris Lewandowski	
	Gender	Mary Kincaid	Alice Weinstein/ Daly Salegio	
	Human Rights	Lane Porter	Alice Weinstein/ Megan Noel	
	Quality Assurance	Nancy McGirr	Scott Pflueger	

POLICY STAFF

Edward Abel, Policy Analyst, Modeler, ANE Regional Director

Kokila Agarwal, Reproductive Health Specialist, Planning and Finance Director, Maternal Health Working Group Chair

Shawn Aldridge, Reproductive Health/AIDS Specialist

Hady Amr, Policy Analyst

Lori Bollinger, Economist

Nadine Burton, Reproductive Health Specialist

Dennis Chao, Economist, Modeler

Maureen Clyde, Policy Analyst, E&E Regional Director

Henry Cole, Senior Advisor

Harry Cross, Project Director

Varuni Dayaratna, Economic Analyst, LAC Regional Director, Paraguay Country Manager

Joe Deering, Capacity-Building Director

Imelda Feranil, Demographer, Romania Country Manager

Christina Fowler, Reproductive Health Specialist

Karen Foreit, Evaluation Coordinator, Mozambique Country Manager

Thomas Goliber, AIDS Specialist, Zambia Country Manager

Danielle Grant-Krahe, Participation Specialist

Karen Hardee, Research Director, Jamaica Country Manager

Robert Hollister, Institutional Development Specialist

Norine Jewell, Legal Specialist, Country Manager for FHA/WCA, Ghana, Haiti, Sahel/CERPOD, and Uganda

Alan Johnston, AIDS Specialist, Policy Analyst, Ethiopia Country Manager

Jeff Jordan, Deputy Director

Anne Jorgensen, Participation Specialist, Russia Country Manager

Nicole Judice, Policy Analyst

Mary Kincaid, Policy Analyst, Mexico Country Manager, Gender Working Group Chair

Sharon Kirmeyer, Demographer

James Kocher, Policy Analyst, Kenya Country Manager

Cynthia McClintock, Policy Analyst

Nancy McGirr, Quality Assurance Coordinator

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Kevin Osborne, Policy Analyst, South Africa Country Manager

Charles Pill, Policy Analyst, Tanzania Country Manager

Lane Porter, Legal and Human Rights Specialist, Human Rights Working Group Chair

Sue Richiedei, Participation Specialist, Advocacy Director, ARH Working Group Chair

Mary Scott, Policy Analyst, Africa Regional Director

Susan Settergren, Policy Analyst

Suneeta Sharma, Policy Analyst

Jeffrey Sine, Economist

John Stover, AIDS Specialist, HIV/AIDS Director, Africa Regional Core Fund Manager

Molly Strachan, Policy Analyst, Information Services Specialist

Sumi Subramaniam, Policy Analyst

Taly Valenzuela, Advocacy Director and LAC Regional Director (to 12/00)

Doug Willier, Information Technology Specialist, Web Manager (from 1/2001)

Cynthia Woodsong, Anthropologist

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Ashok Singh, Field Officer
Alla Vaz, Administrative Officer

JAMAICA

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JORDAN

Issa Almasarweh, Country Director

Amal Dhagastani, Participation Specialist (to 12/00)

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Peter Nyarango, Consultant

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O. Oshun, Consultant

O. Dali, Consultant

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Marcela Huayta, Participation Coordinator

Lidia Reyes, Participation Coordinator

Eugenia de Arias, Administrative Assistant

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Vilma Metiam Aquino, LTA

Annabella Fernandez, LTA

Virna Buenaventura, Project Administrator

Sheila Marie Penaflores Rejano, Project Secretary

REDSO/ESA

TBD

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Luminita Marcu, Consultant

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Viktoria Sakevich, Consulting Demographer
Katya Yusupova, Administrative Assistant
Julia Andrianova, Part-time Accountant

SAHEL/CERPOD

Alle Diop, Activity Manager
Badara Seye, Consultant

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Rene Peterson, Office Manager
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Melanie Judge, Training Support Coordinator
Anna van Esch, Project design Coordinator
Solly Resego, Consultant
Saadiq Kariem, Consultant
Rose Smart, Consultant
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Ntsiki Jolingana, Consultant
Nancy Coulson, Consultant
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Abigail Dreyer, Consultant

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Patrick Swai, TPHA
B.J. Humplik
Peter Riwa, Health Scope
Simbakalia, Health Scope

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Zerrin Baser, Country Director
Fahrettin Tatar, POLICY Analyst

UGANDA

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