CATALYST consortium

TAHSEEN Project

تحسين صحتنا بتنظيم أسرتنا

Combined Quarterly

and Annual Progress Report:

Oct. – Dec. 2003 Progress

&

2003 Summary

Table of Contents

ACRONYMS **4**

A. INTRODUCTION **6**

B. MINIA SUMMARY **7**

C. PROGRESS ON IMPLEMENTING PLANNED ACTIVITIES **9**

THEME 1: FOCUSED ATTENTION TO PRIORITY GROUPS 9
THEME 2: IMPROVED QUALITY FOR THE CUSTOMER 21
THEME 3: STRONGER INSTITUTIONAL CAPACITY AND SYSTEMS 30
THEME 4: SUSTAINABLE SECTORAL SHARES 35

D. PROGRESS ON IMPLEMENTING CROSS-CUTTING STRATEGIES **40**

SUSTAINABILITY 40
YOUTH 41

E. MEASUREMENT AGAINST SELECTED PERFORMANCE INDICATORS **42**

F. ONGOING COLLABORATION WITH PARTNER AGENCIES **43**

G. CURRENT MONITORING AND EVALUATION ACTIVITIES **44**

H. OVERVIEW OF NEXT QUARTER **44**

RESULT 1 44
RESULT 2 44
RESULT 3: 45
RESULT 4: 45
RESULT 5: 45
RESULT 6: 46
RESULT 7: 46
RESULT 8: 46
RESULT 9: 46
RESULT 10: 46

ANNEXES **47**

ANNEX 1 PROGRESS TABLE **48**

ANNEX 2 SUBCONTRACTOR TABLE **49**

ANNEX 3 RESEARCH TABLE **52**

ANNEX 4 RENOVATION TABLE **54**

ANNEX 5 LOCAL MEDIA COVERAGE TABLE **57**

ANNEX 6 MINIA MEDIA GROUP ARTICLES **61**

ANNEX 7 WORKSHOPS TABLE **62**

ANNEX 8 CORPORATE SOCIAL RESPONSIBILITY TABLE **66**

ANNEX 9 REPORTS AND PUBLICATIONS TABLE **72**

ANNEX 10 TRAINING TABLE **76**

APPENDICES **79**

Acronyms

ASU	Ain Shams University
BCC	Behavior Change Communication
CA	Cooperating Agencies
CBT	Competency Based Training
CCS	Contraceptive Commodity Sustainability Plan
CEDPA	Centre for Development and Population Activities
CHL Project/JHU)	Communications for Health Living (USAID
CO	Central Office at the Ministry of Health and Population
CQI	Continuous Quality Improvement
CSI	Clinical Services Improvement Project
CYP	Couple Years Protection
EBM	Evidence Based Medicine
EFCS	Egyptian Fertility Care Society
EFPA	Egyptian Family Planning Association (IPPF affiliate)
EPTC	Egyptian Pharmaceutical Trading Company
FHI	Family Health International
FP	Family Planning
HM/HC	Healthy Mother/Healthy Child (USAID Project/JSI)
HPI	Health Policy and Information (USAID Project)
IDSR	Infectious Disease Surveillance and Results (USAID Project)
IPC	Interpersonal Communications
ISPP	Improving & Sustaining Population Programs (MOHP)
IUD	Intrauterine Device
MCH	Maternal Child Health
MIS	Management Information Systems
MISA	Ministry of Insurance and Social Affairs
MOHP	Ministry of Health and Population
MOYS	Ministry of Youth and Sports

NGO	Non-Governmental Organization
NCCM	National Council for Childhood and Motherhood
NCW	National Council for Women
NPC	National Population Council
PA	Post-Abortion
PAC	Post-Abortion Care
POP-IV	Family Planning & Population IV Project (USAID Project)
PP	Postpartum
PPC	Postpartum Care
PS	Population Sector at MOHP
QI	Quality Improvement
RCT	Regional Center for Training at Ain Shams University
RH	Reproductive Health
RMU	Research Management Unit of NPC
RR	Raedat Rifiat
RR	Reproductive Rights
RTI	Reproductive Tract Infection
SIDA	Swedish International Development Agency
SIS	State Information Service
SOP	Standards of Practice
SPAHRCS	
TL	Tubal Ligation
TNH	Towards New Horizons (USAID Project/CEDPA)
TOT	Training of Trainers
TA	Technical Assistance
USAID	United States Agency for International Development
WHO	World Health Organization

A. Introduction

This report covers the period of October – December 2003, the fourth quarter of the TAHSEEN/CATALYST Project. Additionally, it serves as a combined quarterly and 2003 Annual Progress Report.

During this final quarter of 2003, TAHSEEN/CATALYST was able to bring closure to numerous activities that had been initiated in the first three quarters of the project, while continuing at the same time to complete the preparatory phase of many others. The initiative to make TAHSEEN concepts operational in Minia Governorate continued to be a strong point, allowing TAHSEEN and its' partners to tie project activities to concrete actions in the field and achieve real results while simultaneously revising and updating systems, protocols and curricula at the central level.

The formation last quarter of local steering committees comprised of representatives of different government ministries proved to be key to TAHSEEN's fourth quarter success in Minia. The involvement and guidance from local partners not only gave the project extra momentum and ensured the timely implementation of activities, it also set the stage for building local capacity.

Specific, Minia-based technical interventions in the areas of Quality Improvement, Training, BCC, Youth, NGOs, EBM and CSR moved forward. The renovation of three rural health units and the family planning room in the Mallawi District Hospital was completed, as was the majority of equipping. Training of MOHP and NGO providers in integrated service delivery ensured that the renovated units would enjoy the benefits of staff with up-to-date technical knowledge. The TAHSEEN play and puppet show were presented for the first time, and replication throughout Minia was started, while at the same time, the Minia BCC Media Group continued to meet. A Youth Committee was also established, and on the NGO front, TAHSEEN received project proposals from two NGOs that will serve as umbrella organizations for smaller CDAs. Work continued on the expansion of the Ask Consult Network, building of the Minia University EBM Unit, and ties to groups such as the National Council for Women (NCW) and the National Council for Childhood and Motherhood (NCCM) were strengthened through agreements on concrete project activities.

At the central level, significant achievements this quarter included the completion of key documents related to the integration of RH/FP and MCH services. Among other integration documents, the *MCH/RH Package of Essential Services* was completed, and the *Standards of Practice for Integrated FP/RH and MCH Services* (SOP) was drafted and submitted to numerous partners for their review. These two documents reflect months of intensive and successful work to bring together the MCH and FP sectors and to develop the political commitment to their integration. Other key achievements that will benefit the MOHP on a wider scale included the revision of training curricula such as *the Integrated Counseling* and *Raedat Rifiat*. Training in Supervision and Leadership was initiated, and training in financial management was set for early 2004.

B. Minia Summary

Although TAHSEEN achieved progress in central level activities that was just as important as the progress in Minia, the strong showing of the Minia roll out this quarter deserves to be highlighted here.

TAHSEEN/CATALYST activities in Minia during the final quarter of 2003 truly represent the fruits of efforts over three quarters. In just two quarters of actually developing activities in the governorate, TAHSEEN made remarkable progress towards improving the quality of services that will now be offered in selected rural health units as well as BCC and youth-focused efforts at a governorate level, and it is well on its' way to building strong relationships with NGOs and the commercial sector as well.

At the beginning of the quarter, the Minia Assessment "Situation Analysis of Family Planning and Reproductive Health in Minia Governorate" was finalized and began to be disseminated. This document details TAHSEEN/CATALYST's experience in selecting five communities where start-up activities have largely focused, with emphasis on clinical assessments that were undertaken in 45 MOHP clinics before arriving at a final selection. A more extensive baseline study, which will serve as an intervention evaluation tool, was carried out in the 4th quarter and is currently under review by TAHSEEN.

Renovation of three health units (Tayeba, Sawada, and Nazlet El Amoudein) was concluded, and furnishing and equipping of those units is in progress. Renovation of the other two units (Edmu and Dawoudia) is on schedule to be concluded by end of January. Vital support from governorate officials was key to solving some of the hurdles encountered when building fences around the health units in Tayeba and Edmo and organizing the planting of gardens. Additionally, the renovation and equipping of the FP room at the Mallawi District Hospital, where collaboration will take place with the Healthy Mother/Healthy Child Project (HM/HC), was completed.

Technical training for service providers of these same units on integrated services took place over the course of the quarter. Physicians, nurses, lab technicians and Raedat Rifiat all received orientation on the integrated package of services, and practical, on-the-job training will follow. Clinical management training for a number of the MOHP doctors will soon complement this effort.

While activities in Minia were progressing in all areas, integration is always at the heart of TAHSEEN/CATALYST's activities. An important step forward was the selection of seven anchor facilities by JSI with TAHSEEN support, for the TAHSEEN – JSI/HM/HC collaboration in Mallawi and Mattai Districts. In addition to upgrading facilities and improving the integration of services at the level of district hospitals, the two projects will work together to improve referral systems in these districts through training of providers and Raidat Rifiyat (RR) affiliated with rural health units, as well as through BCC efforts.

Efforts to improve quality will be complemented by EBM activities. An Evidence Based Medicine (EBM) team of 10 doctors from Minia University was formed to be

the basis for the EBM Unit in Minia. The team has started the training process to become the critical mass spreading FP/RH awareness and combating rumors and misconceptions using EBM principles.

In the area of BCC, the Minia BCC Media Group continued to meet and to produce pieces in the local media on RH/FP topics. The TAHSEEN play and puppet show, with RH/FP and youth messages, were both presented for the first time this quarter to enthusiastic responses from the audiences, which were largely composed of young people. With MOHP support, additional dissemination of the puppet show took place during Youth Week in Minia, and more performances throughout the governorate were planned for 2004.

In the areas of youth and NGOs, significant progress was made in setting the stage for full implementation of planned activities starting in the first quarter of 2004. A Minia Youth Committee was launched, drawing together members of numerous government and non governmental agencies, and including youth representatives, that will work to coordinate, harmonize and begin new youth-oriented interventions in Minia. Work continued with NGOs that will implement both CEDPA's Towards New Horizons/Towards New Visions (THN/TNV) programs as well as other TAHSEEN-supported outreach activities. These partners had submitted proposals for both sets of activities by the end of the quarter, and CEDPA and TAHSEEN had provided feedback. Implementation is slotted for the first quarter of 2004.

Intersectoral linkages became a reality when TAHSEEN collaborated with Ministry of Agriculture in an FP/RH awareness seminar for 400 women of reproductive age in Samalout. The seminar was followed by a mobile unit campaign to select areas. More such joint events are planned in first quarter of 2004.

The CSR activities of this quarter included an introductory meeting with one of Minia's representatives in the People's Assembly to introduce TAHSEEN and list the kind of community contributions that are needed. The representative showed great interest in TAHSEEN and promised to engage a number of prominent local business figures in some of the CSR efforts.

By the end of the year, the roll out of activities in Minia had truly helped TAHSEEN to facilitate the implementation of what can be viewed as a "package" of support that, with adaptations to local circumstances, can define governorate-level implementation of TAHSEEN concepts and which may be replicated in other governorates, as appropriate. This illustrative package has been submitted as an annex to the TAHSEEN/CATALYST 2004 Workplan. In short, this quarter can be characterized as a period of growing enthusiasm on the part of project partners and concrete accomplishments at both the central and the governorate levels, both of which reflect the work of the entire year.

C. Progress on Implementing Planned Activities

This section describes progress on all planned activities as well as activities that are not in the TAHSEEN Workplan but that have been undertaken in response to emerging needs, as discussed with USAID and partner agencies. Additionally, a number of tasks were undertaken within planned activities that moved beyond what was stated in the 2003 Workplan. Since the focus of the narrative section is at the activity level, discussion of any new tasks is integrated into the overall discussion of its corresponding activity.

Progress on implementing activities is also summarized in a table format in Annex 1.

Theme 1: Focused Attention to Priority Groups

Result 1 – Youth Better Informed and Use of Services Increased

Activity 1.1 – Extend BCC campaigns to youth sub-groups

The **inventory and assessment of all BCC materials** developed between 1995 and 2003, which was completed in the third quarter, was edited, translated into Arabic in-house, and submitted to USAID for review this quarter. Once cleared from USAID, it will be distributed to the MOHP, State Information Service (SIS)/IEC Center, other RH projects and cooperating agencies (CAs). An in-depth qualitative assessment of BCC messages for youth, which was to be conducted on a sample of the materials surveyed (a task not originally in the TAHSEEN workplan), was cancelled when the additional analysis was found to have limited added value to the primary activity.

The **study to assess BCC coverage for youth and to explore the knowledge, attitudes and practices** of providers and young married and engaged couples, *"Reproductive Health Services for Young Engaged & Newly Married Couples*", was completed in the third quarter, as previously reported. This quarter, the draft version was reviewed by TAHSEEN and USAID, and recommended revisions are being incorporated. It is expected to be finalized, printed and disseminated in the first quarter of 2004. See also Activity 1.2.

The content of the ***Q&A Booklet for Engaged and Newly Married Couples*** was finalized in the third quarter. This quarter, illustrations were developed and a youth friendly format was created after several revisions. The revised layout will be tested prior to printing in January 2004. See also the Q&A Booklet for Parents, discussed under Activity 1.2.

The **puppet show** targeting youth and addressing issues such as parent-adolescent communication, appropriate age for marriage, delayed first pregnancy and gender equity, was presented for the first time this quarter, and its replication was started. Five of the 12 scheduled performances have taken place in various districts and localities in Minia Governorate, each attended by 60-70 people, mostly youth. The remaining performances are scheduled for January and February 2004. The TAHSEEN team supervised the script development and rehearsals, which were written and directed by members of the Minia BCC Media Group (See Activity 2.5). Performances were followed by a seminar to address information needs of youth. The

panelists, all Minia residents, included a physician, a sociologist / psychologist and Moslem and Christian religious leaders. Collaboration with the MOHP resulted in the inclusion of the puppet show during the MOHP Youth Week festivities in Minia during December 2003. With minor modifications, it may be adapted for use in community events such as polio day or youth day.

2003 Achievements

Each of the three main areas of youth-oriented BCC activities – research, Q&A booklets and the puppet show – represent important achievements for TAHSEEN in Year 1.

- The inventory of BCC materials, with emphasis on those geared towards youth, together with the assessment of BCC coverage for youth, will assist both TAHSEEN and CHL in orienting youth BCC activities in 2004 and beyond.
- The staging of the puppet show in Minia was particularly noteworthy, as the Minia BCC Media Group was a driving force behind its' development, making this a capacity building activity at the same time. Wider dissemination was facilitated by its' inclusion in Minia Youth Week festivities through collaboration with the MOHP, and TAHSEEN will continue to work with the Media Group to explore ways in which it may be adapted for use in other settings.
- The *Q&A Booklet for Engaged and Newly Married Couples*, the first of a series of Q&A booklets to be produced under TAHSEEN, addresses specific FP and RH concerns of youth, and as with the puppet show, it lends itself to use in a wide variety of clinical and non-clinical settings and even to non-youth audiences. Extensively reviewed by youth, technical experts and religious leaders, its' acceptance and utility should be assured. The development of an ambitious dissemination plan with CSI and others will now be the key to its impact and success in 2004.

Activity 1.2 – Increase service providers' awareness of the RH/FP needs of youth

During this quarter, the **rapid assessment** draft report on why young married and engaged couples do or do not seek counseling and services was received, and TAHSEEN and USAID recommended revisions are being incorporated, as reported under Activity 1.1. Assessment results revealed that service providers lack knowledge about family planning methods suitable for young couples and have misconceptions about the negative impact of different family planning methods on young couples' fertility.

Therefore, TAHSEEN, in close collaboration with HWD, drafted a **document on *Contraception for Young Couples*,** from an evidence based perspective, for inclusion in service providers' training materials and in undergraduate medical school curricula. The draft document, which may be used in its entirety or in pieces in the form of handouts, depending on needs, is being revised by the head of the Scientific

Committee for Curricula of Universities. While universities will be interested in the full document, which backs up recommendations with scientific research on methods, a summarized version of recommendations only will be produced for service providers. Dissemination at medical school conferences will kick off its distribution.

The ***Q&A Booklet for Parents***, drafted in the third quarter, was reviewed by one Moslem and one Christian religious leader and tested with adolescent boys, girls and their parents. Following a revision, the final version of the text was reviewed and discussed by an expert committee, including the Undersecretary of MOHP (PHC and POP sectors), university OB/GYN, venereology and psychology professors, and an MOE representative. The final version of the booklet and illustrations are being finalized, pending additional illustrations and testing. Printing is expected next quarter.

Cross-cutting youth activities included a review of the ***raedat rifiat*** **curriculum** and the ***Standards of Practice for Integrated FP/RH and MCH Services*** (SOP) from a youth perspective. Findings from *Contraception for Young Couples* were also integrated into the SOP.

Options for developing a **Youth Hotline** to provide advice, education, counseling and referral services continue to be explored. Discussions are ongoing with a potential implementing NGO, and a revised proposal is being formulated. The Regional Center for Training (RCT) is preparing, revising and modifying hotline staff training materials based on TAHSEEN input. Standardized questions and answers are being developed to ensure that operators properly answer caller questions. An application was made requesting Telecom Egypt's participation in sponsoring the hotline. An agreement with an implementing partner is expected in the first quarter of 2004.

Course materials for **university-based RH peer educator programs** are being developed. Meetings and orientation have been held with 40 Minia University students who have been selected as peer educators. Training and program start-up are expected next quarter after the mid-year vacation. The Director of the Youth Care Department at Minia University was selected as the Minia Youth Committee member to participate in and develop this activity. Tied to the peer educator program, discussions surrounding the establishment of **youth friendly services at a Minia University clinic** continue.

Meetings and discussions with the head of the local television channel in Minia have resulted in the approval and inclusion of a **new youth program on the Upper Egypt TV channel** (Channel 7). The presenter and producer have been selected to join the Minia Youth Committee. Their presence on the committee will help to build the production team's capacity, establish links between the program and youth activities in the governorate, and assure that the program speaks and promotes TAHSEEN messages. The UNICEF study entitled *Adolescents' Communication Needs* was translated for the production team as background and reference about televised youth program needs and formats. TAHSEEN will collaborate with the team to develop a three- month program schedule complete with objectives and session content. It is worth noting that TAHSEEN is providing technical support only to this effort and that

the TV Channel itself is taking the lead in the development, production and airing of the program.

2003 Achievements

While follow up will continue into 2004 and beyond, TAHSEEN achieved all of its planned tasks under Activity 1.2 in 2003: (1) conducting a rapid assessment of the reasons why young married and engaged couples do or do not seek counseling and services; (2) adapting existing service protocols and training curricula to reflect fully the needs of young married and engaged couples; and (3) identifying other youth segments that are secondary priority for improved services.

As mentioned under Activity 1.1, the assessment will provide important input into the formulation of all youth-oriented BCC activities. Already, it has resulted in the development of the technical document, *Contraception for Young Couples* (developed in collaboration with HWD). The cross-cutting activity of integrating youth considerations and issues in training curricula and protocols, as mentioned above, was institutionalized this year and will continue into curricula updating that is planned in 2004 (See Activity 4.4).

Numerous activities undertaken in 2003 responded to the Year 1 task of identifying other youth segments, and beyond this, defining ways to reach them. All of these will continue into 2004. These activities include the production and use of the *Q&A Booklet for Engaged and Newly Married Couples* (Also discussed under Activity 1.1) and the *Q&A Booklet for Parents*. Innovative means of dissemination will be explored and pursued in 2004, in order to make best use of these products, including a possible video conference for dissemination of the parents' booklet at schools, in coordination with the MOE Environment and Population Department, as well as marketing through venues accessible to CSI. The youth hotline, Minia University Peer Educator Program and the TV youth program will greatly contribute to reaching youth through the channels and mediums most familiar to them. Using materials developed for the university program at extracurricular school activities is also being considered.

Activity 1.3 – Develop and implement an FLE program for youth

A Memorandum of Understanding and a task order for CEDPA to implement this activity were prepared by TAHSEEN and approved by CATALYST this quarter. The **Towards New Horizons (TNH) and Towards New Visions (TNV) program trainings** are expected to begin next quarter. CEDPA began negotiations with local partners in Minia regarding the implementation of training, and the process to select facilitators was initiated.

TAHSEEN collaboration with UNICEF and UNFPA on the **development of youth-friendly services** included a presentation made by TAHSEEN at the Developing Guidelines for Youth Friendly Services Workshop. Additional meetings with UNICEF and UNFPA enabled the partners to follow-up workshop recommendations and identify each organization's role in the unfolding process.

2003 Achievements

Again, TAHSEEN accomplished Year 1 tasks according to the 2003 workplan. The TNH curriculum was updated to better reflect youth RH/FP issues during the second quarter of the year, with printing of the revised version during the third quarter. This updated version will be used in the new roll out that is already under way in Minia, as well as future roll-out in other UE governorates.

It should be noted that, in Year 2 roll out of TNH/TNV, TAHSEEN will attempt to include the exercise envisioned for Year 1 of including TNH/TNV locations (those where it has already been undertaken) in TAHSEEN's geographic mapping exercises. Although TAHSEEN gathered information from CEDPA on locations in Year 1, this information, which lists governorates and community names, is not organized in such a way as to identify the exact location (i.e. district) of each community. Therefore, it is not clear whether or not it will be possible to utilize the data in mapping, but TAHSEEN will coordinate selection of areas with CEDPA.

Work with the UNFPA and UNICEF progressed this year. Following numerous meetings with representatives from both agencies, it appeared that the most practical and mutually beneficial area for collaboration would be the development of a standardized curriculum for training of providers in Youth Friendly Services (YFS). And while TAHSEEN did provide significant input to UNFPA to this end in 2003, discussions must continue in 2004 in order to determine the exact nature and products of this collaboration.

Activity 1.4 – Establish an advocacy task force for youth RH/FP issues

(POLICY II with assistance from CATALYST as required)

USAID, POLICY II, CEDPA and TAHSEEN met to discuss the design of a **Youth Advocacy Task Force.** TAHSEEN suggested including Advocates for Youth's *Youth-Adult Partnership* training as a component of the task force advocacy training. A copy of the training module was sent to POLICY II for inclusion, and TAHSEEN received positive feedback about the module from POLICY II.

2003 Achievements

Partners in developing the task force shared ideas for task force design and advocacy training. TAHSEEN will continue to provide assistance as required by POLICY II in 2004.

Other Youth Activities

The **Minia Youth Committee** held its first organizational meeting in December 2003. Eleven committee members from Minia Governorate, Minia University, the MOHP, MOE, MOYS, the media, religious institutions and NGOs attended, representing all organizations working with Minia's youth. The group met to launch a community mobilization process around important youth-specific family planning and reproductive health issues and messages. The Youth Committee's next step will be to conduct a workshop during which core principles and issues will be presented and discussed. TAHSEEN will assist the group to develop common ground and a common

language for discussing FP/RH issues, networking, problem solving and exchanging ideas and experiences.

2003 Achievements

The launching of the Minia Youth Committee was a clear highlight of this year's youth-focused activities, as well as a step towards ensuring youth as a cross cutting consideration at the governorate level. Embracing a wide spectrum of civic, community media and religious leaders, the committee plans to mobilize the community around important youth-specific family planning and reproductive health issues and messages during 2004. The committee took an innovative step by reserving one-third of its membership for youth. It will meet in early 2004 to develop a framework for its operations. Preparation of a youth strategy was also completed during 2003, as an underlying approach for this TAHSEEN cross-cutting theme.

Result 2 – Under-served and Unempowered Women Better Informed and Use of Services Increased

Activity 2.1 – Match areas of greatest need with service provider availability

All tasks planned under Activity 2.1 were revised in Quarter 2 to focus on Minia Governorate for Year 1 and at a national level for program expansion in Year 2. Progress in the final quarter of 2003 included:

- The ***Situation Analysis of Family Planning and Reproductive Health in Minia***, which was completed last quarter, was edited this quarter, sent to USAID for review, and is submitted as Appendix 9 to this report.
- In Mallawi and Matai Districts in Minia**, seven health units were identified by the Healthy Mother/Healthy Child Project (HM/HC) as anchor facilities**, with input from TAHSEEN. These units will receive TAHSEEN support under the model that was applied in the first five communities where TAHSEEN rolled out activities in Minia and Samalout Districts. Additionally, TAHSEEN will collaborate with HM/HC in these areas to implement integrated district planning. The addition of these seven health units completes the selection of areas for TAHSEEN interventions in Minia Governorate in Year 1.
- Agreement was reached with **the National Council for Women (NCW)** to collaborate in development of a questionnaire for baseline data collection in Minia as a first step towards an ongoing exchange of expertise in Minia communities.
- Further **exploration of possible areas for action in urban slums was carried out with the NCCM**. Joint visits were made to Daweka, a Cairo slum area within Manshiet Nasser, by TAHSEEN, NCCM and the MOHP. TAHSEEN will gather additional information on service availability and demand for RH/FP services in this area. Pending the outcome of this assessment, the three institutions will support the strengthening of NGO

outreach and clinical services in this heavily populated area. (See also Activity 2.4)

- ***The Feasibility of a Community Based Counseling and FP Method Distribution System*** study was commissioned, undertaken and completed this quarter. A draft report was prepared, and the final report is expected to be completed in the first quarter of 2004. The study explores the feasibility of and attitudes towards the possibility of MOHP Raedat Rifiat (outreach workers) conducting CBDC activities.
- **Data collection and mapping** of various types of sociodemographic data continued, for use in TAHSEEN's Year 2 geographic prioritization process.

2003 Achievements

Because the emphasis for the roll out of TAHSEEN and other SO20 projects at the field level was directed towards Minia Governorate following the development of the TAHSEEN Year 1 workplan, many of the geographic prioritization processes that were envisioned to be applied at a national or Upper Egypt level were instead focused on Minia in this first year. At the same time, extensive demographic and socioeconomic data was gathered by TAHSEEN for national level analysis, and mapping exercises were initiated.

Identification of areas for project interventions in Minia Governorate was the outcome of a number of processes. TAHSEEN, together with governorate level MOHP counterparts, undertook an assessment of 45 clinics and their surrounding communities in Minia. The results of this assessment, the *Situation Analysis of Family Planning and Reproductive Health in Minia*, served as a key input in the final selection of sites. At the same time, factors such as political commitment at the community level, staff commitment at the clinic level, and the presence or absence of NGOs and other types of community groups as well as other donor-funded projects, were also taken into account. The final selection of five initial sites for concentrated TAHSEEN attention in Minia and Samalout Districts and the addition of seven areas where TAHSEEN will collaborate with HM/HC was just the first step in what will be TAHSEEN's ongoing commitment to this governorate.

With regard to NGO services, an inventory of all NGOs acting in the field of RH/FP in Minia, in addition to a more in-depth assessment of 22 of these groups, led to the selection last quarter of 6 partner NGOs/CDAs, two of which will serve as umbrella NGOs for the smaller CDAs. This process, which is more fully discussed under Result 9, allowed TAHSEEN to identify those partners who would be best prepared and well-suited to conducting activities in areas where TAHSEEN is active that will complement clinic-based interventions through outreach and referral.

Groundwork was laid for assessments that will be conducted in early 2004 with the NCW in Minia and with the NCCM in an urban slum area of Cairo. These assessments will contribute to the identification of additional areas for selected TAHSEEN interventions with these important partners and will open the door for two truly intersectoral approaches for reaching underserved populations.

In 2004, a standardized approach to identifying underserved districts and communities, largely summarized in the 2.1 section of the Year 1 workplan and as laid out in separate memoranda on this subject, will be undertaken in three Upper Egypt governorates.

Activity 2.2 – Develop and implement service delivery strategies

At the **central level**, significant progress was made this quarter on systems, guidelines and training that will ensure the implementation of revised service delivery strategies at the governorate, district and local level. These activities revolved largely around the integration of services and included: the **completion of the *MCH/RH Package of Essential Services***; training for central and governorate MOHP staff in **horizontal supervision** and in **supervision and leadership**; the completion of the first draft of ***Standards of Practice for Integrated FP/RH and MCH Services***; facilitation of a **workshop on MCH and population sector incentives systems**, with an eye towards integration; and an **assessment of MCH, population sector and other MIS systems** as a preliminary step towards integration. These activities are all described more fully under Result 5.

Additionally, as reported under Result 3, a **study** was undertaken this quarter **on tubal ligation for medical reasons** – private physicians' willingness to pay for training and knowledge, attitudes and practices of providers and clients. And **a study on the supply of PAC services** has been designed and will commence in the first quarter of 2004.

In Minia, training courses, BCC, youth and NGO activities as well as clinic renovations were rolled out in the first five communities where TAHSEEN is focused in Minia, based on Q1-Q3 assessments. **Training included a course for MOHP and NGO service providers on integrated service delivery** (See Activity 4.4).

Renovation of the FP clinic at Mallawi District Hospital was completed, as was the more extensive renovation of three rural health units (RHU), Tayeba, Sawada, and Nazlet El Amoudein. Furnishing and equipping of these units is in progress. Renovation of two additional units (Edmu and Dawoudia) is on schedule to be concluded by end of January. It should be noted that Edmu was substituted this quarter for Bergaia, where a decision was made with governorate MOHP officials not to roll out TAHSEEN activities at this time. Vital support from governorate officials was key to solving some of the hurdles encountered when building fences around the health units in Tayeba and Edmo and removing the old furniture from the gardens to be planted.

The agreement with six NGOs/CDAs to provide outreach and referral activities in communities where TAHSEEN is active will complement activities geared towards improving service delivery by increasing demand. **Draft proposals from the two NGOs that will serve as umbrella organizations were submitted to TAHSEEN** this quarter, and, as reported under Result 9, these will be refined in the first quarter of 2004.

2003 Achievements

At both the central level and the governorate level, TAHSEEN succeeded in moving forward the revision of systems, guidelines and necessary training that will allow improved service delivery strategies to be implemented throughout Upper Egypt as the project expands in 2004 and beyond. Progress in the areas of revising Gold Star criteria, integrating services, standards of practice, supervision, and incentives systems will provide the central level guidelines and processes necessary to ensure that integration is possible at the local level.

At the same time, the results of numerous studies and assessments that were undertaken by TAHSEEN in Year 1 (regarding outreach workers, the postpartum program, CBDC, tubal ligation for medical reasons, services for youth, RH/FP Situation in Minia, counseling approaches, and Ask/Consult strengths and weaknesses) will contribute significantly to refining service delivery strategies in Year 2 and beyond.

TAHSEEN also succeeded in laying the foundation for the successful application of improved service delivery strategies at the local level in Minia by undertaking an integrated, intersectoral and participatory approach that is designed to create synergies at the local level, as clinics are brought up to an acceptable standard, both physically and in terms of technical capacity, as local NGOs and CDAs are strengthened, and as youth and the general population are involved in BCC and awareness raising activities. The fact that a hospital FP consultation room was renovated and three rural health units were more extensively renovated, and that service providers attached to these units already received preliminary training in integrated service provision, demonstrates TAHSEEN's move beyond original 2003 expectations. Service delivery strategies were not only developed; they were applied.

In 2004, the continuation and expansion of these strategies, combined with the further development of work with NGOs in the areas of outreach and referral (and in some cases, service delivery), will complement and strengthen the service delivery aspect of the project, and strengthened linkages to NCW and NCCM activities as well as those of other projects addressing women's empowerment, literacy and other key areas, will round out this approach.

Activity 2.3 – Improve utilization and effectiveness of the Raedat Rifiat

This quarter, the ***Situation Analysis of Outreach Workers*** underwent further revision and editing. A final draft is expected during the first quarter of 2004.

At the request of the MOHP, a **review and revision of the MOHP's RR curriculum** was undertaken this quarter, with the end goal of enhancing the skills of both MOHP and NGO community health workers. Training of RR in Minia using this revised curriculum is scheduled to take place in February, 2004.

2003 Achievements

The draft report of the assessment of community outreach workers, with emphasis on Raedat Rifiat, was completed this year, and although it was not planned for 2003,

TAHSEEN updated the MOHP's RR curricula, taking into consideration issues around OBSI, youth, gender, FP methods and MCH topics. TAHSEEN will work with the MOHP in 2004 to determine how to best respond to the results of the situation analysis.

Activity 2.4 – Conduct women's empowerment activities in target areas

Following last quarter's signing of Memorandums of Cooperation with the **NCW and NCCM**, this quarter, steps were taken to operationalize the cooperation and meetings were held to coordinate and support NCW and NCCM activities. TAHSEEN will supply the NCW project in Minia (Multifaceted Development Project) with technical support in compiling a comprehensive baseline survey in Minia that will provide TAHSEEN with useful health indicators for monitoring in the future. This NCW project provides underserved women with identity cards, micro credit facilities and illiteracy eradication programs.

The NCCM appointed a coordinator to facilitate meetings and investigate areas of cooperation with TAHSEEN. After several meetings, it was agreed that **TAHSEEN/NCCM collaboration** will begin in January 2004 on the **Girls Education Initiative (GEI), Eradication of Child Labor (ECL), and Support of the Girl Year** programs. Technical assistance will include training the GEI facilitators in FP/RH messages targeting girls, training ECL facilitators who interact with the parents of working children, and providing technical input on a comprehensive RH curriculum for secondary school girls in the Support of the Girl Year program.

A consultant will be appointed to conduct a desk review of existing studies on **couples' communication** prior to formulating proper intervention measures at the village level.

2003 Achievements

The major achievement during 2003 for this activity is the operationalization of the Memorandums of Understanding between TAHSEEN and the NCW and NCCM, who are active in women's empowerment activities in Minia and other governorates where TAHSEEN plans to expand activities. Areas for collaboration were defined during meetings with NCW and NCCM project coordinators in Minia and other locations where the organizations are active. During 2004, increased linkages with women's empowerment activities in Minia and potentially Sohag, Assuit and Qena, will result from the efforts of 2003.

TAHSEEN also prepared a document entitled ***Women's Empowerment in Egypt: Current Situation and Supporting Organizations***, documenting national women's empowerment activities and programs including health, literacy, democracy and micro-credit. This unique publication will be shared with TAHSEEN's partners and serve as a reference document for organizations interested in women's empowerment activities. Finally, TAHSEEN completed a cross-cutting gender strategy, and efforts will continue in 2004 to ensure the consideration of gender aspects in training and other areas.

Activity 2.5 – Conduct behavior change activities with women, men and communities

The ***Optimal Birth Spacing Interval*** **(OBSI)** study was completed and edited. Undertaken with core funds from CATALYST Washington, the study will incorporate comments from USAID/Washington and CATALYST; these are currently being integrated into the report prior to publishing and dissemination in early 2004. The report summary will be mailed to stakeholders, researchers and a large number of OB/GYN physicians nationwide. A first dissemination seminar will involve policy-makers and senior OB/GYN physicians from university and teaching hospitals. A second seminar will be held in Minia to disseminate results to Minia physicians, nurses, RRs and supervisors. OBSI guidelines have also been introduced into the revised *Standards of Practice for Integrated FP/RH and MCH Services* of the MOHP.

CHL is producing **BCC materials to promote OBSI**, based on input from TAHSEEN, as reported last quarter. Because the above-mentioned inventory of BCC materials showed that very few existing materials address birth spacing, TAHSEEN and CHL agreed that CHL will develop a series of BCC materials to promote OBSI, including a poster, leaflets and an update of a previously produced TV spot by SIS. The poster is now expected to be ready by end of January 2004. Together with leaflets, these will be used at the service delivery level with post abortion and postpartum patients and their husbands. TAHSEEN also continues to work with CHL to update a flipchart to include RH topics and new FP methods.

The **play promoting male responsibility as well as other FP/RH messages** that was scripted last quarter with guidance from TAHSEEN was presented for the first time in Minia this quarter. Positive reproductive health attitudes and behaviors regarding age at marriage, son preference/gender equity, OBSI, girls' education, couple communication, and empowerment of women are promoted through the play. Collaboration between TAHSEEN and the MOHP resulted in three performances of the play in different districts and locations during the MOHP Youth Week in December 2003. All actors and stage crew were recruited from Minia in order to maximize the play's appeal and increase its sustainability. Twenty-five shows are scheduled between December 2003 and February 2004.

Last quarter, TAHSEEN reported in detail on the formation of the ***Minia BCC Media Group***, its objectives, composition and meetings to date. The monthly series of technical workshops continued this quarter in Minia, with the objective of improving coverage of RH topics in the local media. Also this quarter, the group of 20 media and IEC professionals submitted its products to date (tailored media works loaded with FP/RH messages)to the TAHSEEN-BCC committee/jury for evaluation. The jury, composed of media figure Galal Zaki, Dr Mamdouh Wahba, and the TAHSEEN BCC and Youth Specialists, evaluated the works according to strict technical criteria. Certificates for the best work were distributed at a special event attended by the Minia Governorate Secretary General, representatives from the MOHP and Ministry of Education, religious bodies, and other local leaders. An extended workshop followed the event, during which the selected works were viewed. A total of four monthly

meeting/workshops were held in 2003, with the next one planned for January 20, 2004.

2003 Achievements

TAHSEEN succeeded in moving beyond the Year 1 tasks of BCC strategy development at the local level into actual facilitation of and implementation of local level BCC events. While the BCC component of the project will be adapted to fit the overall service delivery strategy that will be developed in expansion areas in project Years 2 and 3, a number of successful interventions were undertaken in Year 1 that can serve as a core pieces of the "TAHSEEN package" which can be adapted and applied in new settings. These include: establishment of governorate level BCC/Media Groups; replication of the TAHSEEN play/puppet show; establishment of local mechanisms to involve religious leaders; and incorporating RH/FP messages into BCC, literacy and similar efforts of projects in other sectors (e.g. GALAE, World Education).

With the CHL Project initiating activities sooner than projected, TAHSEEN's strategy was already shifted this year to a combined approach wherein TAHSEEN largely supports BCC efforts at the local level while providing technical input to CHL for the development of materials, products and media campaigns that will have national reach.

Result 3 – PP/PAC Women and Those Qualified for TL Better-Informed and Use of Services Increased

Activity 3.1 – Expand the availability of PP/PAC/TL services

The ***Postpartum Care Guidelines*** are still being elaborated by the Healthy Mother/Healthy Child (HM/HC) project. The **Post Abortion Care** RFP has been issued. It includes an assessment of PAC supply in Upper Egypt, investigation of referral linkages, adapting existing PAC FP counseling materials for inclusion in a new FP counseling course, and designing PAC standards of practice guidelines. It is now projected that TAHSEEN will facilitate the strengthening of PAC services in four Upper Egypt hospitals in 2004 as a start. Data collection for the **study on tubal ligation for medical reasons** is ongoing. The study will deepen the understanding of issues surrounding medically indicated TL, provide policy and clinical care implementation recommendations and identify possibilities for training private physicians.

2003 Achievements

With the *Postpartum Care Guidelines* still being reviewed by HM/HC, TAHSEEN/CATALYST will take the lead in working with the MOHP and partners to develop a comprehensive PPC program for Egypt in 2004. A clear picture of post abortion care services will be ready in 2004, when the current supply study elucidating the volume and quality of PAC services in Egypt is available to supplement the EFCS study on PAC demand. TAHSEEN/CATALYST will take the

lead in working with the MOHP and partners to develop a national strategy for comprehensive PAC, clinical standards of practice and a PAC referral system. Preparations are underway for providing clinical training in three Minia hospitals. Results of the study to deepen understanding of issues surrounding medically indicated tubal ligation will provide important information on which to base future public sector activities in this sensitive area.

Activity 3.2 – Improve awareness and knowledge of PP/PAC/TL services

A study on the utilization of the 40th Day postpartum visit is currently in the final stages of editing and translation. It is expected to be ready in February 2004.

Agreement was reached with CHL last quarter to produce **BCC materials for PP contraception**. A poster, to be displayed in general and district hospital OB/GYN wards, and a leaflet, describing FP methods suitable for post abortion women, will be ready by the end of February 2004.

Plans are still under way to include **sessions on PP and PAC issues in the Minia BCC Media Group** activity. As reported previously, these will include a discussion about danger signs during the postpartum period, breastfeeding as a method of contraception and FP methods that are suitable for PP women. A speaker from HM/HC and an expert on PP contraception will be invited to participate. Another session will discuss the incidence of abortion and the needs of post abortion women, including contraception.

TAHSEEN will also be following up in early 2004 on plans to **raise awareness of issues surrounding tubal ligation for medical reasons** through a video that can be shown in waiting areas where high risk groups will be found, as reported last quarter. The study on TL for medical reasons, discussed under Activity 3.1, also includes an investigation into KAP of medically eligible women and their husbands, such that the results of the study will contribute to the formation of relevant BCC efforts.

2003 Achievements

In 2003, TAHSEEN laid the groundwork for further developing awareness raising around the issues and services for PP/PAC and TL for medical reasons. The results of the three above-mentioned studies, one addressing each area, will be key to determining the best approach to take on each of these topics. In the meantime, the collaboration with CHL on materials production and the inclusion of these topics in BCC Media Group events will be a significant step forward in raising awareness at both the national and governorate levels.

Theme 2: Improved Quality for the Customer

Result 4 – Quality of RH/FP Services Improved

Activity 4.1 – Refresh the Gold Star program

Last quarter agreement was reached on the structure of the New Quality Improvement Program, on which a Gold Star system will be based. With the important emphasis on

integration, discussions with FP and MCH departments have resulted in an agreement that this new system should encompass both FP and MCH quality improvement (QI) systems. This expansion of the Gold Star program requires a longer development process than was originally foreseen in the TAHSEEN workplan. This quarter, the details of the indicators and data collection tools are under review. See Activity 5.1.

2003 Achievements

While the decision of the MOHP Integration Committee to work quality improvement systems into the overall integration effort results in a longer timeline for the completion of the Gold Star re-casting, there are indeed key achievements worth noting in 2003.

The first of these was the preliminary recasting of performance criteria to make them quality-driven. As reported last quarter, this revision not only ensures that providers are evaluated based on quality-related measures, it also now incorporates youth, gender and sustainability elements for the first time. As other integration processes are finalized, the Gold Star revision too, can be finalized.

The other key achievement that is closely tied to Gold Star was the re-design of the MOHP/PS Central Office supervisory system from a vertical to a horizontal system. The new system, as highlighted in the July-September Progress Report's "TAHSEEN Success Story", will contribute to increased cost-effectiveness and efficiency of supervision, while at the same time encouraging a more participatory, problem-solving and integrated approach.

Activity 4.2 – Create a CQI initiative for the NGO and commercial sectors

No activities planned for Year 1.

Activity 4.3 Introduce continuous medical education (CME)

A follow up meeting of physicians who attended the EBM and curriculum design course at the University of California/Irvine was held this quarter. Dialogue continued around developing mechanisms for skills transfer in order to implement CME in Egypt.

2003 Achievements

Although there were no CME activities foreseen in TAHSEEN's Year 1 Workplan, an important step forward was taken this year when the TAHSEEN Training Specialist led a group of 16 physicians from the MOHP and EFPA to participate in a Curriculum Design and Evidence Based Medicine (EBM) course at the University of California/Irvine, where they gained practical experience in curricula design. Upon returning to Egypt, follow-up meetings were held to establish mechanisms for EBM knowledge and skills transfer. During 2004, it is anticipated that those participating in the UC/Irvine course will become EBM trainers in the governorates and join their EBM colleagues from the medical schools to become the nucleus for the CME program.

Activity 4.4 – Strengthen service provider training systems

TAHSEEN received a request from the MOHP this quarter to update or revised numerous MOHP curricula. TAHSEEN responded positively to this request, and this curricula work is reflected in the 2004 workplan. A portion of the work was already undertaken in the October-December quarter, including the **revision of the curriculum for Raedat Rifiat** training. While the effort was led by TAHSEEN's Training Specialist, the revised version was also reviewed and revised by TAHSEEN's Youth, Gender and NGO Specialists, in order to ensure adequate consideration of these important perspectives.

Also, by the end of the quarter, the printing of the TOT and service providers' **training manuals for sub-dermal implants** was near completion, as was the printing of the FP Curriculum for Secondary Technical Nursing Schools.

Beyond curricula development, **TAHSEEN also facilitated a training course for service providers and other health personnel in Minia** integrated primary health care services (FP/RH/MCH) (See also Activities 2.2 and 9.4). The training was conducted by RCT, with guidance from TAHSEEN. The breakdown of participants, with slight modifications from what was planned and reported last quarter, was:

- 12 doctors (7 MOHP / 5 NGOs)----- 3 weeks
- 30 nurses (MOHP) -----2 weeks
- 8 lab technicians (MOHP) ------ 1 week
- 16 RRs (MOHP) ------- 1 week

The training, consisting of both theoretical and on-the-job practical portions, refreshes RH/FP knowledge and prepares the providers and RR for the integration of services.

2003 Achievements

With regard to training needs assessments, assessment tools to identify organizational and clinical training needs for in-service training were developed based on meetings with the MOHP training unit, EFPA and CSI. In Minia, the health providers' individual needs were assessed through field visits, interviews and observation checklists. This activity will continue in 2004 in two Upper and two Lower Egypt governorates.

With regard to curricula development, TAHSEEN's role with reference to updating pre-service training curricula was defined during meetings with USAID, and agreements were reached to respond to additional MOHP requests for updating of in-service curricula. TAHSEEN will ensure the materials are gender and youth sensitive.

Specific curricula development that took place this year, while not specified in the Year 1 workplan, was done in response to emerging needs, as agreed with the MOHP and USAID, and it included:

- Development of an in-service training package for Norplant and Implanon, which was expanded to include Norplant insertion (in addition to Norplant removal), Implanon insertion and removal, and counseling for both methods. Meetings held with RCT, Ain Shams University Norplant trainers, EFCS, MOHP/MIS/FP and the former director of the Norplant Steering Committee contributed to the finalization of the training packages for sub-dermal implants. Trainers' guides and participant handbooks comprise the two, two-volume training packages developed for service providers and training of trainers. Both packages include a unit on counseling, in Arabic, that focuses on the principles of client-provider interaction, and provides clinical profiles of Norplant and Implanon. A validation workshop was held with key partners to fine tune the training packages prior to printing.
- Development of the *Family Planning Curricula for Secondary Technical Nursing Schools*: The TAHSEEN revision of family planning topics in this curriculum was the result of an agreement between the HM/HC Project and the MOHP to revise and print the MCH chapter of the teachers' curriculum and the MCH training curriculum for nursing students. The Competency Based Training (CBT) package includes a teachers guide and student handbook, as well as PowerPoint presentations and transparencies. Meetings to redesign the FP curriculum were held with MOHP/PS, nursing, human resources, and development and research departments, as well as nursing school instructors, RCT and the nursing faculty. A workshop to validate the curriculum was held with representatives from USAID, MOHP, RCT, the nursing and medical schools and NGOs. Modifications were incorporated into the curriculum, and printing is in progress.
- Development of an *Integrated Counseling* module as described below under Activity 4.5.

Actual training in integrated primary health care services (FP/RH/MCH) was facilitated by TAHSEEN in Minia, as reported above, for 12 physicians, 30 nurses, 16 RR and 8 laboratory technicians. Under the close supervision of the FP and MCH directors, the training included FP/RH and MCH elements. On the job training will follow in 2004.

Activity 4.5 – Implement improved training in basic counseling techniques

A **comparison of MOHP and CSI counseling approaches** was initiated this quarter in four governorates. Results of the study will assist in understanding CSI's apparent superior performance, so that lessons learned can be shared with others implementing counseling activities.

In order to design a new, **integrated counseling curriculum**, a review of available counseling material and training packages was performed. After meetings with MOHP/PS and MCH departments, JSI, CSI and EFPA to discuss topics for inclusion, two training packages were developed. The first is generic and includes basic

principles of counseling and client-provider interaction. The second covers counseling topics specific to FP, RH, and MCH with an emphasis on optimal birth spacing. A workshop was held and attended by MOHP clinical supervisors, FP directors and MOHP/PS/MCH advisors to modify, fine tune and assure that the counseling material was consistent with the revised MOHP SOP and various MOHP protocols. Additional stakeholders will be involved in discussing and reviewing the packages in 2004.

2003 Achievements

TAHSEEN investigated the various approaches currently being used by public and NGO clinics during 2003 in order to improve provider-client interaction through counseling. Special emphasis was placed on examining CSI techniques as a way to better understand its superior performance when compared to MOHP services. Agreement was reached to redesign the HM/HC counseling materials in light of service integration.

Activity 4.6 – Support RCT through to self-reliance

TAHSEEN efforts to build **Regional Center for Training in Family Planning and Reproductive Health** (RCT) sustainability were evident during the process of **developing its 2004 Annual Workplan**. Efforts to build institutional capacity this quarter, combined with TA provided in previous quarters were evident as RCT only required minimal input from TAHSEEN.

2003 Achievements

In order to assist the RCT prepare a strategic plan covering 2003-2007, TAHSEEN prepared an analysis of training institutions that were potential competitors. With USAID scheduled to phase out funding for the institution it created in 1988, and with no legal status as an Egyptian institution, RCT is adapting to the lower funding levels projected over the next five years and repositioning itself for sustainability. While RCT carried most of the workload required to develop individual strategies and plans, TAHSEEN provided a systematic methodology, facilitated its application and supplemented RCT's strategic thinking as required. The basic methodology used by TAHSEEN was divided into four blocks of work. See Figure 3 below.

Figure 3 Strategic Planning Methodology

During the past year, RCT developed the tools necessary to launch an aggressive business development initiative to help them achieve sustainability by 2007. An internal marketing workshop was held to discuss marketing and development activities critical to sustainability. As a result, a position description was created and the process was initiated for hiring a marketing development manager who will implement the strategic plan. The organizational structure was updated, and a full salary and grade structure developed. Activities and meetings continue with regard to RCT's efforts to become a special unit of Ain Shams University (ASU) and establish its legal status within the Egyptian institutional environment. TAHSEEN also sponsored an RCT representative to attend the Third International Workshop on Innovative Marketing Communications (IMC-3): Promoting and Selling Training and Services in a Competitive Global Market. In 2004, TAHSEEN will continue to assist RCT to overcome any obstacles that arise in the implementation of its strategic plan.

Result 5 – Integration Within the SO20 Program Strengthened

Activity 5.1 – Integrate RH/FP services with MCH services supported by HM/HC

This quarter significant progress was made in several key areas with respect to integration. The *Basic Package of Essential FP/RH/MCH Services*, renamed the ***MCH/RH Package of Essential Services*** was agreed upon and accepted (See Appendix 1). This is a major milestone. The sectors discussed and agreed on the broad scope for a ***Standards of Practice for Integrated FP/RH and MCH Services***. The document, based on *MCH/RH Package of Essential Services*, was drafted and sent to numerous partners for review. The reproductive tract infection (RTI) section will be further developed in collaboration with FHI, which is currently working with the MOHP to prepare RTI protocols for all health system levels.

This quarter the training curriculum and operations manual for integrated supervision at the district level was drafted. It provides for joint visits to clinics by FP and MCH supervisors using a joint methodology and making joint action plans. The curriculum and operations manual will be available for review next quarter.

The study on *Integration of Family Planning / Reproductive Health and Maternal and Child Health Services: Missed Opportunities and Challenges* was completed and sent to USAID this quarter. The document, which complements the Memorandum of Cooperation, lists and analyzes missed opportunities resulting from vertical programming and integrates ideas resulting from the consensus reached on basic integration design scope and principles (Task 5.1.2). Meetings continue with the MCH and FP sectors and JSI to jointly plan and test integration activities in Mallawi and Mattai districts in Minia governorate.

2003 Achievements

Integration of FP/RH and MCH services has been a general topic of discussion under several previous projects without significant forward movement; yet experience from other countries indicates that client needs are better fulfilled by providing an

integrated package of FP, RH and MCH services through one provider, at one service delivery point. An analysis of FP and MCH service delivery and organization in Egypt suggests that it would be difficult to better meet the full range of client health needs or improve service delivery efficiency and effectiveness under current vertical programming.

Vertical programming relies on the provision of separate programs catering to unique FP and MCH goals as distinct programs; each with its own training curricula, staffing patterns, information systems, supervisory tools and a top-down management approach. Attempting to integrate these systems is a large, complex and politically sensitive task.

During 2003, TAHSEEN and its partners have taken important steps toward the integration of services, guided by the vision set forth in the *Integration of Family Planning / Reproductive Health and Maternal and Child Health Services: Missed Opportunities and Challenges* (See Appendix 2). Rolling out and field testing integrated activities in Minia, where TAHSEEN/CATALYST maintains crucial collaboration with HM/HC project, is central to TAHSEEN's implementation strategy.

The complexity of ensuring that integration is addressed in a comprehensive fashion became apparent as TAHSEEN moved into these efforts, and this is reflected in the wide-ranging number of areas that are now being addressed. The first step, demonstrating political commitment among partners, was the signing of a Memorandum of Cooperation between the MOHP Population Sector, MOHP MCH sector, USAID, John Snow, Inc., and TAHSEEN/CATALYST within the first six months of project start-up. A joint letter in Arabic, signed by the MOHP undersecretaries for Population (Dr. Yehia Hadidi) and MCH (Dr. Esmat Mansour), addressed all MOHP staff and announced their commitment to service integration as a cornerstone of the quality enhancement initiative and asked for full and enthusiastic support from all MOHP staff. An MOHP Task Force, assisted by TAHSEEN/CATALYST and JSI, was formed composed of key staff from the population and MCH sectors, with the Memorandum of Cooperation serving as the scope of work. Meetings have been held in Cairo and Minia, with Minia discussions focused on the practicalities of designing the new systems.

With political commitment assured, TAHSEEN addressed the question, "What services need to be delivered in an integrated fashion?" While this description was available for MCH services, there was no FP/RH equivalent. TAHSEEN then assisted the FP/RH sector to develop a basic package of FP services. With this package in hand, TAHSEEN opened discussion within the Task Force on an integrated package. Agreement was reached on an *MCH/RH Package of Essential Services* that describes service delivery and responsibilities at all levels. Once the integrated package was completed, a *Standards of Practice for Integrated FP/RH and MCH Services* was drafted to describe how the services should be implemented. These standards are being reviewed by the integration committee. Once agreement is reached, the draft will be presented to a larger stakeholder group to ensure buy-in and ownership in 2004. TAHSEEN is also collaborating with FHI, which is implementing a similar

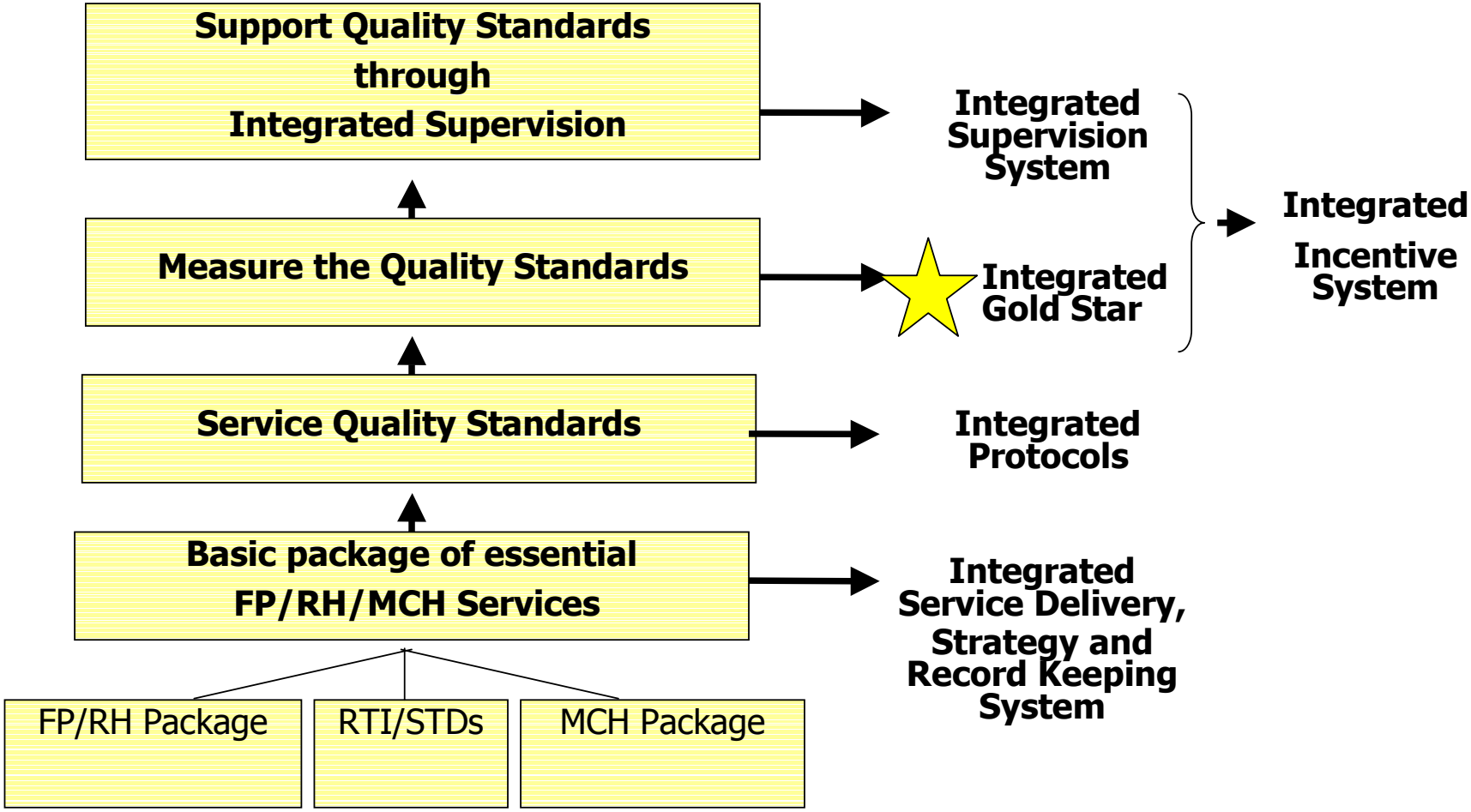
process for RTI services, results of which will be incorporated into *Standards of Practice for Integrated FP/RH and MCH Services*. Distribution of the final product is envisioned during 2004.

With the *Standards of Practice for Integrated FP/RH and MCH Services* drafted, TAHSEEN turned its attention to quality standards for integrated services. A joint supervision system for FP and MCH supervisors of rural health units was developed. Agreement on the structure of this integrated supervision system was reached, and a draft of indicators is being reviewed by the integration committee. To complement the new supervisory system, TAHSEEN/CATALYST is developing an integrated supervision training course for district supervisors who must be able to supervise new activities in an integrated setting and support the expanded duties of health care staff.

The joint supervisory team, a combined FP and MCH team, will in turn inform the Safe Motherhood Committee, ably supported by HM/HC project, and inform district health managers. The information that they will provide will be invaluable to the integrated district health planning procedure. A methodology for integrated district health planning, based on existing FP and MCH sector strengths and congruent with World Health Organization (WHO) district health planning methodology, is planned for 2004. The new integrated supervision system will result in a revised joint Gold Star program. This will reliably inform clients about the quality of FP/RH and MCH.

An FP and MCH sectors' MIS systems review was started in 2003 to determine the best data collection and management system for integrated supervision and Gold Star, and for possible overlap and integration opportunities, foreshadowing future strengthening and integration of these MIS systems. An integrated incentive program, described under Activity 7.4, is under development and will be key to the overall success of the integration effort. Integrated record systems at the district level and below are required for successful integration and will be designed based on the *Basic Package*. Changes in record keeping and reporting will minimize the record keeping burden and eliminate the need for separate reporting and evaluation systems. During 2004, TAHSEEN will work with the Health Sector Reform project to provide assistance in their record keeping initiatives rather than duplicating efforts in this area.

An integrated service delivery system will also be needed that describes client flow, referrals, etc. The family health system lends itself to this purpose and TAHSEEN will actively support the propagation of this system in 2004. Phased training and refresher courses will provide the means for introducing new skills, maintaining positive rapport and provider/supervisor interest in quality care. The possibility and extent of integrated training will be determined through an assessment of the two training systems in 2004. Integrated counseling courses have already been developed to further strengthen integration efforts at the clinic level.


Support Quality Standards through Integrated Supervision
Measure the Quality Standards
Service Quality Standards
Basic package of essential FP/RH/MCH Services
FP/RH Package
RTI/STDs
MCH Package
Integrated Supervision System
Integrated Gold Star
Integrated Protocols
Integrated Service Delivery, Strategy and Record Keeping System
Integrated Incentive System

Activity 5.2 – Add RTI/STDs to the standard RH/FP service package

RTI/STDs have been added to *MCH/RH Package of Essential Services,* and the *Standards of Practice for Integrated Services* will include RTI guidelines. The guidelines currently being prepared by FHI with the Department of Preventive Services will serve this purpose. TAHSEEN will not develop RTI guidelines as part of the *Standards of Practice* to avoid duplication of efforts.

2003 Achievements

Inclusion of RTI/STDs in the *MCH/RH Package of Essential Services* marked the first step to ensuring that RTI/STD is a part of integration. Finalization of the *Standards of Practice for Integrated Services,* expected towards the end of the first quarter of 2004, will complete the effort.

Activity 5.3 – Share RH/FP protocols widely

This quarter saw the start of the formulation of ***The Standards of Practice for Integrated Services***, which include FP, RH and MCH guidelines for the primary health care level. Finalization is expected in the first quarter of 2004. Discussions will be held with HM/HC, FHI and other programs and organizations to jointly publish the guidelines in large numbers and distribute them countrywide.

2003 Achievements

As noted above, the new protocols have been drafted.

Activity 5.4 – Train service providers on cross-referral techniques

Training in cross-referral was planned to take place in conjunction with training on the integrated standards of practice. This quarter, in conjunction with USAID, a decision was made to integrate appropriate referral techniques into all relevant training packages, such that this activity will no longer exist under the TAHSEEN 2004 workplan as a stand-alone activity.

Theme 3: Stronger Institutional Capacity and Systems

Result 6 – Policies Identified and Implemented to Support a Sustainable RH/FP Program

Activity 6.1 – Promote and support policy changes

This activity is managed by TAHSEEN/POLICY II.

Activity 6.2 – Provide training in policy formulation and analysis

This activity is managed by TAHSEEN/POLICY II.

Activity 6.3 – Support NPC's Research Management Unit

This activity is managed by TAHSEEN/POLICY II.

Activity 6.4 – Support periodic DHS/SPA surveys

This activity is jointly managed by TAHSEEN/POLICY II and TAHSEEN/CATALYST. No activities were planned for this quarter .

Result 7 – RH/FP Management Systems Strengthened

Activity 7.1 – Improve RH/FP program coordination and monitoring

In lieu of the Steering Group, TAHSEEN facilitated the first Quarterly Progress Review Meeting for USAID-funded population projects in December. The first forum of the Coordination Body is scheduled to take place during the first quarter of 2004.

2003 Achievements

While coordination among USAID-funded population projects only got off to a formal start with the December Progress Review Meeting, it is expected that these meetings will occur on a quarterly basis in 2004, in addition to at least two forums on best practices to be held over the course of the year.

Activity 7.2 – Improve financial management within the RH/FP program

As reported last quarter, TAHSEEN designed a scope of work for a **financial management training course** for financial managers, and this quarter, a qualified firm was selected by TAHSEEN and the MOHP through a competitive process. A detailed workplan was developed by the firm and approved. Training needs assessments were completed at the central and governorate levels. The curriculum was developed, and four courses are scheduled to commence for 90 MOHP central and governorate level participants in early January 2004.

2003 Achievements

The past year has witnessed great strides in developing human and institutional financial management capacity within the MOHP Population Sector (PS). Beginning with a jointly drafted scope of work, the MOHP and TAHSEEN began the process of creating a new cadre of financial managers to improve MOHP financial management capacity and enhance sustainability prior to USAID-planned funding phase out. A task force of financial management and training experts prepared a Financial Management Situation Analysis Report, based on in-depth personal interviews and audits of governorate and central office financial systems. Following the analysis, the task force reviewed and tailored available training curricula to meet trainee needs based on the situation analysis results. A one day seminar was held with MOHP and TAHSEEN to finalize and agree on the following training course content: budgeting and financial planning, accounting and procurement cycles, financial documentation and records, accounting principles, internal controls (financial monitoring and evaluation), financial auditing, bank reconciliation, and financial automation. Participant and trainer guides, PowerPoint training presentations and resources, and

financial forms were developed as training materials. The competency based training (CBT) courses will be co-facilitated by MOHP master trainers in early January 2004.

As the Egyptian family planning program reaches maturity after three decades of progress, one of the key remaining challenges is to improve the program's financial sustainability as delivered through health facilities. To reach this goal and attain stronger institutional capacity and financial systems, TAHSEEN / CATALYST provided technical assistance to the MOHP/ISPP Financial Management unit to revise /implement the CORE financial analysis package in agreed upon selected areas in Egypt.

During 2003, TAHSEEN developed a cadre of MOHP master trainers to apply the CORE tool to targeted MOHP clinics and to train/support other MOHP staff in its use. Seven MOHP/HQ master trainers (from the M&E and financial management departments) were selected to serve as the central MOHP CORE training team, and eight MOHP/ governorate master trainers (two from each health governorate) to facilitate the HQ team's work. The training program consisted of initial classroom training, data collection in eight clinics, computer data analysis, presentation and discussion of the clinic analysis, and training of trainers. Participants were fully involved in all stages and partnered with trainers in the central data collection and analysis component. Training activities have provided trainee master trainers with substantial, practical hands-on education.

As a result, the MOHP now has CORE master trainers and a simplified, comprehensive tool to analyze the costs of service provision at the service delivery point, identify information needs for management decision making related to cost efficiency and cost recovery, create benchmarks for measuring cost efficiency and recovery improvements, collect data for financial analysis, use CORE spreadsheets for data entry and scenario planning and train others in using CORE as a management and planning tool. Additionally, clinics have been identified for piloting the CORE training.

Activity 7.3 – Improve MOHP's work planning and analysis

Follow-up provision of technical assistance to the MOHP/CO in work planning, monitoring and evaluation continued this quarter. In the fourth quarter, TAHSEEN provided TA to MOHP/CO units in format designs for recording performance monitoring indicators and data.

2003 Achievements

TAHSEEN completed its' planned task of assisting the MOHP in the development of its' 2003 workplan early in the year. Support to work planning and monitoring and evaluation then continued over the course of 2003. Specifically, assistance was provided in the development of a revised organizational chart, a workshop on operationalizing the monitoring and evaluation plan and follow up to this workshop, including design of data recording formats.

Also, although the TAHSEEN workplan did not originally consider support to supervision and leadership training, this activity was undertaken during the final

quarter of the year in response to an MOHP request and as part of TAHSEEN's overall efforts to provide assistance in strengthening the Central Office. Training, which was initiated in December, will take place in three consecutive sections (theory and on the job training combined) and will involve 12 CO supervisors and 30 governorate level supervisors from ten governorates. The remainder of the training will take place during the first quarter of 2004.

Activity 7.4 – Improve flexibility of public sector compensation and benefits.

In October, TAHSEEN held a workshop for MOHP Central Office and governorate level FP and MCH staff in order to reach a common understanding of current incentive systems, their strengths and weaknesses, as a precursor to the overall development of an integrated system. Additionally this quarter, data was collected at the field level on service providers' pay and incentives.

2003 Achievements

Two tasks were outlined under this activity in the 2003 workplan. One of these, "Work with the MOHP on addressing the excess supply of doctors", has been eliminated from TAHSEEN/CATALYST responsibility, per agreement with USAID.

The second one focuses on incentives, and this is the task that TAHSEEN/CATALYST will continue to concentrate on in 2004, with the goal of developing a revised, integrated system by the end of this year. In addition to the workshop on incentives that was held in October, TAHSEEN conducted follow-up meetings with MOHP FP and MCH sectors at the central level, as well as with MOHP finance experts, in order to fill out the current understanding of systems and to begin to develop alternatives.

Activity 7.5 – Support MOHP management information systems

Technical assistance continues to be provided to MOHP staff in **MIS troubleshooting**, and additional support is being provided to update and expand the features of the **MOHP training database**. Search facilities were added and documented to make finding data easier and user-friendly. The **ability to transfer data between the governorates and the CO** was also **updated**. MOHP staff contributed to the development of an MOHP **sub-dermal implants tracking system,** enabling them to track family planning clients who use the implants, run statistics on method usage and send messages to clients for follow up and implant replacement.

An **MOHP-NGO database** was started to track all NGOs providing FP/RH services countrywide. This information will assist the MOHP to identify areas lacking health facilities and services. As a **step towards integration of services** (See Activity 5.1), technical assistance was provided for a **situation analysis of population and MCH sector information systems**.

Data about Minia pharmacies and various types of health services were **collected** to identify areas of greatest need (See Activity 2.1). Data collection will be **expanded to other governorates in 2004**. **Mapping district and governorate** female literacy,

Couple Years Protection (CYP), and Human Development Index information was completed as a tool for decision making and project expansion.

2003 Achievements

TAHSEEN/CATALYST provided the MOHP with MIS technical assistance in several critical areas during 2003, including MIS CORE financial management system adaptation and service integration activities, training management systems, sub-dermal implants tracking system development and ongoing technical support. The work on indicator development and identification of the information required to calculate family planning indicators (See Activity 7.3) was also supported from a technical MIS standpoint. Additionally, MIS activities supported the development of an MOHP NGO database, which will assist both the MOHP and TAHSEEN in work with the NGO sector in Minia and countrywide.

Internal TAHSEEN MIS work has been developed that will benefit various project activities in Year 2. The Minia youth hotline database will track the inquiries and demographic characteristics of the callers. It will help in evaluating services, identifying the most commonly asked questions and identifying the governorates with the most inquiries. A great deal of demographic and socioeconomic information and data at governorate and district levels was gathered and input into a GIS, in this way preparing the MIS groundwork for TAHSEEN to be able to target project activities based on spatial analysis of data.

Result 8 – Contraceptive Security Ensured

Activity 8.1 – Finalize and implement a contraceptive commodity sustainability plan (CSS)

CATALYST and POLICY II together

This quarter, as agreed with USAID, POLICY II took the lead in following up on the contraceptive security issue.

2003 Achievements

While agreement has now been reached that POLICY II will lead this effort, CATALYST will continue to provide support as needed, and in 2003, progress was made jointly by POLICY and CATALYST. Two updated, user-friendly summaries of the ***Contraceptive Cost Study*** conducted in 2002 were prepared and disseminated. The study itself was finalized and will be disseminated by POLICY II in 2004. A contraceptive security assessment based on the SPAHRCS model was conducted by POLICY II.

Activity 8.2 – Develop and implement USAID's contraceptive commodity phase-out plan

POLICY II

Again, POLICY II will lead this activity. A preliminary draft of USAID's **contraceptive commodity phase-out plan** was developed and discussed with the

MOHP. Further discussions are expected between USAID and the MOHP to finalize the phase out plan.

Activity 8.3 – Reinforce existing contraceptive commodity procurement capabilities

POLICY II

This POLICY II activity requested no TAHSEEN assistance this quarter.

Theme 4: Sustainable Sectoral Shares

Result 9 NGO Sector's Role in RH/FP Expanded

Activity 9.1 – Identify NGOs/CBOs to work with TAHSEEN

As reported in previous quarters, an inventory of NGOs in Minia that have activities related to RH was conducted, using a task-specific data collection form (See Appendix 3). Twenty-two potential partners in Minia and Samalout Districts were identified, short listed and analyzed for sustainability potential, RH program experience and proximity to TAHSEEN activities. Of these, seven had been identified last quarter as possible partners (See Appendix 4). This quarter, when the community of Bergaia was replaced by Edmo, where no suitable NGOs were identified, six potential partners remained. These partners include St Marc for Development, Al-Fateh Islamic Association, Al-Amal for Women's Enhancement, the Coptic Evangelical Organization for Social Services (CEOSS), Al Tayeba Evangelical Association and the Better Life Foundation. **TAHSEEN held a workshop with these organizations in October** to discuss the project and to solicit project proposals. By the end of the quarter, **proposals from the two potential umbrella organizations**, CEOSS and St. Marc, were under revision, following feedback from TAHSEEN on preliminary versions.

TAHSEEN also worked closely this quarter with the Center for Development and Population Activities (CEDPA) in Minia, where some of TAHSEEN's selected NGO partners will also be implementing CEDPA's **TNH/TNV** programs. **Replication of the NGO identification process** used in Minia and Samalout districts began **in Mallawi and Mattai** districts this quarter, where TAHSEEN will join forces with JSI/HM/HC in integration.

2003 Key Achievements

The inventory of 415 Minia NGOs working in the RH/FP field is of tremendous importance to both TAHSEEN and the MOHP NGO Unit. This inventory contains the latest information following the recent Ministry of Insurance and Social Affairs (MISA) registration drive and issuance of Law # 84/2002. It will be used to help the MOHP to prepare a database of NGOs providing RH/FP medical and non-medical services for future collaboration, training, contraceptive supply and monitoring activities. TAHSEEN will compile an inventory in each governorate where it has

activities. Additionally, the NGO selection process used by TAHSEEN in Year 1 will be refined and replicated in Year 2 governorates as the project expands.

Activity 9.2 – Improve selected NGOs' advocacy capacity

POLICY II

Activity 9.3 – Improve selected NGOs' education and outreach capacity

Two workshops were held with selected NGOs to gather suggestions and input into **training needs for NGO community outreach workers and NGO board members and staff.** Mechanisms for collaboration between TAHSEEN and the NGOs were also decided. CEOSS and St Marc, two large NGOs, were selected as umbrellas for smaller CBOs; they will assist them to build their capacity, sharpen skills, and supervise and monitor their activities. A **training plan for NGO community outreach workers** is **being written** that will use the **MOHP RR training curriculum**, currently in its final stage of revision (See Activity 4.4). A small number of MOHP RR is expected to join the NGO training course. Suggested topics for community outreach worker training include communication skills, counseling, home visits, referral, and reproductive health issues/messages. Topics for board member and staff training include resource mobilization, strategic planning, financial and managerial issues/skills, gender issues, and negotiation skills.

2003 Achievements

Year 1 was designed to be a planning year for TAHSEEN/CATALYST in the NGO sector, and indeed, through needs assessment meetings and workshops, plans were fully laid to roll out NGO activities in Minia Governorate in early 2004, with replication to follow in expansion governorates. First steps were taken towards strengthening collaboration between NGOs and the MOHP in 2003 with the revision and updating of the MOHP/RR curriculum, to be used to train NGO community outreach workers in 2004.

Activity 9.4 – Improve selected NGOs' clinical/referral delivery capacity

Two NGO physicians joined MOHP peers in the RCT-conducted primary care training course in Minia (See Activity 4.4). This three-week training provided didactic and clinical sessions covering many aspects of reproductive health/family planning, infection control and counseling.

2003 Achievements

Again, TAHSEEN/CATALYST was not meant to move beyond the planning stage in 2003. No service delivery NGOs were selected in Minia in 2003, but assessment tools that were designed this year allow the project to select those service provision NGOs that will be most suited to play this role in the future, whether this be in Minia or other UE governorates. Further collaboration between NGOs and the MOHP was evident when NGO physicians joined MOHP peers for integrated RH/MCH training in Minia. Further collaboration in key areas is expected in 2004.

Activity 9.5 – Link USAID-funded NGOs to other ongoing programs

A number of programs with which TAHSEEN expects to collaborate in Minia, including those of World Education and the NCW, were discussed with NGOs selected to implement TAHSEEN activities, as a preliminary step towards linking programs.

2003 Achievements

No activities were planned for 2003, however, initial steps have been taken to link selected and USAID-funded NGOs to ongoing programs in Minia, whether these programs involve RH/FP activities or other activities such as literacy, micro-credit, environment and others.

Activity 9.6 – Support CSI through to self-reliance

A study assessing **CSI's future legal status** was completed, submitted and discussed with USAID, TAHSEEN and CSI. The final report is under revision and expected early next quarter. Seven options for self-reliance were detailed. After several meetings attended by USAID, MOHP and EFPA, a collective decision was made in support of CSI **resolving its indeterminate legal status** by transitioning into an **independent NGO**. The EFPA will study its' legal responsibilities, and CSI will begin preparing for the transition.

The **CSI clinics' relative performance** was **analyzed** based on data in the draft report. Finalization is expected next quarter. TAHSEEN sponsored the CSI Executive Director's attendance at the Third International Workshop on Innovative Marketing Communications (IMC-3): Promoting and Selling Training and Services in a Competitive Global Market, as a step towards sustainability. A job description was developed for a **Marketing Development Manager** who will **develop and implement aggressive business development activities**. **EFPA/CSI funding sub-agreement and amendment signed**. An **audit** of CSI was **initiated** for reimbursement of costs.

2003 Achievements

During 2003, CSI started on the road to self-reliance. An internal planning team was formed to organize CSI's strategic response to the planned phase-out of USAID support by 2007. CSI implemented two studies to assess its relative performance, strengths, and precarious legal status as a project of the Egyptian Family Planning Association (EFPA). Results of the studies enabled them to develop a strategic business development approach and to decide on attaining independent NGO status as the best option for solving its legal status. TAHSEEN will continue to provide technical assistance to build institutional capacity and implement its business plan. The sub-agreement to support EFPA/CSI has been approved by USAID/Washington and signed at the TAHSEEN/CATALYST office.

Other NGO Activities

Overall, there was concerted momentum during 2003 to work with and support NGOs through interactions with the **MOHP/PS NGO Unit**. In an effort to reach underserved

slum and squatter areas, TAHSEEN supported an MOHP workshop where plans and priorities were set and developed for five squatter areas in Cairo, Beheira, Minia, Assuit and Qena governorates. Additional collaboration with the **NCCM** will address the Al Dwaika squatter area to foster closer NGO relations and bring RH/FP services and awareness raising activities to the population. TAHSEEN will also continue work with the NCCM and a group of experts to update NCCM's RH curricula funded by UNFPA. Possible collaboration with the Swedish International Development Agency (SIDAin Minia was explored with SIDA representatives..

Result 10 – Commercial Sector's Role in RH/FP Expanded

Activity 10.1 – Promote an integrated RH/FP/MCH network of physicians and pharmacists

Based on the completed assessment of the Ask-Consult Network, TAHSEEN initiated activities in Minia and other governorates to **expand the Network** to remote areas, **improve** Network members' **counseling techniques**, **increase coordination between the Network and the EBM unit** of the Minia Medical School, provide Network members with accurate FP/RH/MCH information (January 2004) and establish relationships between the Network and the **Regional Council of Population and Family Planning in Minia** headed by the Governor, who has appointed the heads of the Pharmacy and Medical Syndicates to the Council, assuring private sector representation.

2003 Achievements

The commercial sector, which includes pharmaceutical companies, pharmacists and private physicians is one of the important vehicles TAHSEEN uses to enable the RH/FP program to achieve its goals. Members of the Ask-Consult Network confirmed that training courses and materials are invaluable information sources that provide factual, scientific information and enable them to improve their counseling capabilities. By alleviating client fears and misconceptions, the pharmacists and private physicians build trust and create demand for sales and services. Promotional materials, distance education and EBM materials provided to Network members further enhance and upgrade their skills and knowledge. As the project moves into its second year, TAHSEEN expects the private and commercial sectors to play their part in the service delivery integration process by adopting and applying the same standards of practice for integrated FP/RH and MCH services. Participation in orientation sessions during upcoming months will help the private sector to secure its rightful place in an integrated FP/RH and MCH system.

Activity 10.2 – Encourage pharmaceutical companies' participation in RH/FP markets

An **assessment to explore current RH/FP products in the Egyptian market** and the **impact of currency depreciation and fixed, subsidized prices on RH/FP product availability** has been submitted to USAID and POLICY II for review. Results of this study will have significant impact on policy decisions and therefore

require additional analysis next quarter. Contents of the study include detailed information about the producer, manufacturer, distributors and prices to consumers for each product. The assessment also explores product promotion and registration processes, challenges and suggestions to facilitate the processes, the pros and cons of local contraceptive production and the impact of currency depreciation on RH/FP product availability in the market place. Some results follow:

Family Planning Products Currently Available in Egypt

Oral Contraceptives	Injectables	Implants	IUDs	Condums	Other RH products
10 kinds combined pills and 2 kinds under registration	3 month injectable (DEMPA) available	Norplant – Implanon (MOHP clinics)	6 kinds imported by private sector	3 kinds imported by private sector	Calcium, iron, vitamin A, folic acid produced by 25 companies
2 kinds of progesten only pills and 2 kinds under registration	2 month injectable (Norstant) available	Cu T 380A subsidized by USAID			Efficacy low for many locally produced products
1 kind emergency pill	1 month injectable Mesigyna stopped and replaced with Mesisept Neither available				

2003 Achievements

The completion of the product availability study paves the way for TAHSEEN to develop a more detailed strategy for working to expand the numbers and types of products available on the market. Results are already being used to open discussions with pharmaceutical companies to develop a protocol regarding production, importation, registration,, pricing, distribution and promotion.

Activity 10.3 – Promote corporate social responsibility with respect to FP/FH issues

TAHSEEN continued to explore CSR options in Minia this quarter. TAHSEEN collaborated with the MOHP, NGOs, the local community and the Medical School to **assess potential CSR partners** in the governorate. A **list was developed and potential pharmaceutical and non pharmaceutical partners identified** (See Appendix 5). Open discussions were held with selected companies to explore their interest in supporting the activities of various Minia institutions and an **action plan for follow-up was developed**.

2003 Achievements

At the local level in Minia, CSR activities during 2003 led to the identification of potential CSR partners at the governorate and national levels and identification of organizations most likely to support the EBM unit at the medical school. During 2004, this activity will branch out to actively recruit private sector sponsors for the Minia Medical School EBM Unit, which will serve as the scientific arm of the RH/FP program in Minia and help assure sustainability.

Activity 10.4 – Encourage commercial sector participation in policy dialogue regarding contraceptive security

The workshop to disseminate the assessment results indicated in activity 10.2 will ensure commercial sector involvement in policy dialogue, as both the private and public sectors will be represented. See Activity 8.1.

2003 Achievements

The Governor's recent appointment of Minia commercial sector representatives to the Regional Council for Population and Family Planning is an important step in linking the commercial sector to policy dialogue at the local and national level. Inclusion on this important council gives the private sector a voice in the process of planning, monitoring and evaluation RH/FP activities and an opportunity to discuss problems that impede private sector participation at both national and local levels.

Other 2003 Activities

Evidence-Based Medicine

Within the context of encouraging the development of EBM activities, TAHSEEN is **establishing an EBM Unit in the Minia Medical School.** The new unit has selected ten members from the OB/GYN Department of the Minia Medical School. Workshops on EBM and Internet Use have been held. The EBM unit has also begun collaboration with the Minia Ask-Consult Network by providing them with updated information, which will be further discussed with CHL. Efforts to involve the private sector in funding the EBM initiative are underway (See Activity 10.3). The EBM experience will be replicated in other governorates where conditions and resources make an EBM unit feasible and practical.

D. Progress On Implementing Cross-Cutting Strategies

Sustainability

Last quarter, all TAHSEEN Specialists completed the project's Sustainability Checklist. Review of checklists will be starting in 2004 ensuring, the sustainability of activities implemented in Minia and other expansion governorates. A new Management and Sustainability Specialist has been selected and will officially start his duties as of 15th January, 2004.

2003 Achievements

Early in 2003, TAHSEEN's cross-cutting Sustainability Strategy was finalized, and activities started to reinforce a sustainability mindset among TAHSEEN staff. A process was developed in order to keep sustainability in the forefront of all activities while TAHSEEN/CATALYST staff are implementing their tasks. Staff were first familiarized with sustainability concepts and terminology, a process that began with sessions on sustainability at the TAHSEEN/CATALYST orientation workshop in February and continued with another office-wide session on the sustainability strategy. A sustainability checklist was developed and piloted, then reviewed with the Specialist involved in the pilot. The checklist was refined based on the result of the pilot, and all other TAHSEEN/CATALYST specialists completed it last quarter. Review and updating of checklists will be starting in 2004.

Youth

The cross-cutting nature of youth activities in TAHSEEN continued to be reflected by the fact that a large number of activities with a youth component were classified as training, quality, BCC or NGO work. Key cross-cutting collaboration this quarter included:

- Youth perspectives and issues were written into the integrated SOP that were drafted this quarter.
- Close collaboration between the youth and NGO components of TAHSEEN has been necessary to develop the roll out of TNH/TNV in Minia.
- The play and puppet show produced and now shown in Minia this quarter required ongoing input from a youth perspective, as the majority of themes were relevant to youth.
- The Q&A booklets are youth BCC materials whose development has been driven by the TAHSEEN Youth Specialist, but whose dissemination will be in large part considered as a BCC effort. The same can be said of the Youth Hotline.

2003 Achievements

Following completion of a TAHSEEN Youth Strategy, youth-focused activities were quickly developed, many of these in the BCC realm. At the same time, youth issues were inseparable from the development of training curricula, NGO and gender activities in particular. In 2004, an effort will be made to develop a tool that facilitated the review of all project activities for youth issues.

Gender

Many of the activities reported this quarter included a gender perspective. The cross-cutting nature of the gender component in TAHSEEN is evident by the wide range of activities in the areas of training, BCC, youth and NGOs that incorporated a gender perspective or component:

- A gender orientation session was included in the integrated services training given to 12 MOHP, NGO and mobile clinic doctors in Minia. The doctors, both male and female, also took part in a gender working exercise, in addition to the formal presentation.
- The RR training curriculum was revised, and an entire session on gender, complete with working exercises, was included.
- The Q& A booklet for youth and newly married was reviewed for gender issues, and added a number of gender sensitive questions were added.
- The Minia play script was also reviewed, and suggested modifications were incorporated that emphasized the value of girl children.
- Two gender sessions were given as part of the training of the Youth Committee in Minia. The first session introduced gender concepts, while the other addressed male involvement issues. Both were followed by working group exercises.
- Gender input was provided into the Minia NGO proposals, in order to ensure gender balanced activities.

Collaboration with other projects under NCW and NCCM took concrete step beyond the MOUs. A gender perspective was provided to the NCW-designed questionnaire for baseline data gathering in Minia, and gender input was also given to a curricula that will be developed under an NCW project addressing girls at the secondary level.

2003 Achievements

Although the Gender Specialist only came on board the TAHSEEN team in October, 2003, tremendous progress was made in a short period. All gender activities to date have been and will continue to be cross-cutting in nature.

E. Measurement Against Selected Performance Indicators

TAHSEEN/CATALYST will begin to report measurement of progress against selected performance indicators in 2004, following USAID approval of a revised Monitoring and Evaluation Plan. Progress was made on this plan during the final quarter of 2003 with the visit of CATALYST's Senior M&E Advisor and the definition of process and output indicators as the 2004 workplan was developed. Outcome indicators have also been developed, and these will be combined into a single plan that is expected to be finalized by the end of January, 2004.

F. Ongoing Collaboration With Partner Agencies

As will be the case over the life of the TAHSEEN Project, the main partner to implement the majority of activities will continue to be the MOHP/PS, and to a lesser degree, MOHP/MCH. MOHP-TAHSEEN Collaboration that is especially worth noting this quarter includes:

- The MOHP/CO Head of IEC provided input into the final script of the TAHSEEN play that was developed in Minia. Coordination with governorate-level MOHP partners during Youth Week widened the dissemination of the puppet show.
- TAHSEEN responded to MOHP requests for updating of various curricula, and the MOHP will be closely involved in the updating processes. Examples this quarter included the Integrated Counseling and Raedat Rifiat curricula.
- The MOHP in Minia agreed to include 2-3 RR in the TNH/TNV roll-out, allowing these selected RR to work as TNH/NV Facilitators at no extra cost to the program.
- The MOHP Head of Squatter Areas visited a Cairo slum area with TAHSEEN/CATALYST and NCCM representatives and agreed on MOHP contributions to a joint effort in this zone.
- The entire integration effort, from SOP to service packages, to supervision, MIS and incentives, is being undertaken in strict collaboration with both the population and MCH sectors of the MOHP.
- The MOHP co-facilitated and/or participated in workshops on the incentives system, integrated counseling, and supervision and leadership.
- Contributions and revisions were received from the MOHP in the development of the RFP for a Financial Management Training course.
- TAHSEEN responded on an ad-hoc basis to MOHP MIS needs.
- In Minia, the cooperation of the MOHP and Minia Governorate were essential to the renovation of rural health units.

Other partnerships continued to be strengthened. Important coordination took place this quarter with other government partners, including the NCW and NCCM, as mentioned primarily under Activity 2.4. The USAID/Washington approval of the EFPA/CSI subagreement this quarter also facilitated full TAHSEEN support to CSI as a key partner in the NGO sector. Technical assistance to RCT in the implementation of their plans continued on track.

CA coordination continued to involve ongoing work with JSI/HM/HC in the development of all integration efforts and with CEDPA in the development of the TNH/TNV roll-out in Minia. Additionally, this quarter saw continued communication with CHL regarding the development of BCC activities and products in the areas of OBSI, PP and PAC services.

G. Current Monitoring And Evaluation Activities

This quarter, TAHSEEN undertook a thorough documentation of its experience in Minia Governorate to date. The document, which is now in a draft form, describes the roll out of TAHSEEN/CATALYST activities in a manner that draws lessons and builds a "how-to" perspective for future replication. It is hoped that this document will be a first self-examination tool as well, allowing TAHSEEN/CATALYST to view the entirety of the work that was undertaken in Year 1 that had roll-out aspects at the governorate level, challenges that were encountered, how they were overcome and lessons learned.

H. Overview Of Next Quarter

General

- The renovation of Edmu and Dowdeia Rural Health Units in Minia will be completed.

Result 1

- The final version of the *Inventory of BCC Materials* will be printed and disseminated in English and Arabic.
- The final report *Reproductive Health Services for Young Engaged & Newly Married Couples* (assessing BCC coverage and KAP of providers and youth) will be printed and disseminated.
- The *Q&A Booklet for Engaged and Newly Married Couples* will be produced and disseminated.
- The *Q&A Booklet for Parents* will be finalized and printed.
- The puppet show addressing parent-adolescent communication will be replicated in various venues in Minia.
- CEDPA will commence roll-out of TNH in five communities Minia under TAHSEEN.
- The *Contraception for Young Couples* training module for inclusion in service providers and undergraduate medical school curriculum will be finalized and made available to universities.
- The NGO proposal for the youth hotline will be reviewed and feedback will be provided to the NGO.
- The Minia Youth Committee, following its' launch in December, will now meet regularly.

Result 2

- Preliminary analysis of geographic areas for expansion in UE will take place, involving collection of additional data on services and clients.

- The final report, *Situation Analysis of Outreach Workers*, will be printed and disseminated.
- The final version of the *TAHSEEN Cross-Cutting Gender Strategy* will be submitted to USAID.
- TAHSEEN will support NCW's Multifaceted Development Project in Minia in a baseline survey activity.
- *Optimal Birth Spacing Interval (OBSI)* study will be published and disseminated.
- TAHSEEN/NCCM collaboration will begin on the Girls Education Initiative (GEI), Eradication of Child Labor (ECL), and Support of the Girl Year programs.
- TAHSEEN will continue to follow up with CHL regarding the OBSI poster.
- Additional performances of the play promoting FP/RH messages will be staged in Minia.
- Monthly meetings of Minia BCC Media Group will continue.

Result 3:

- TAHSEEN will follow up with CHL regarding the poster and leaflet describing FP methods suitable for post abortion.
- The PAC supply study in Upper Egypt will be conducted.
- Research on Tubal ligation for medical reasons: Attitudes of service providers and potential clients, will be finalized.
- A report on the *Assessment of the Postpartum Program* (inc. 40th Day Visit) will be printed and disseminated.

Result 4:

- Printing of both volumes Norplant/Implanon training package will be finalized.
- The curriculum, Family Planning Curricula for Secondary Technical Nursing Schools, will be printed and disseminated.
- The assessment of MOHP and NGO counseling approaches will be finalized.

Result 5:

- Integrated SOP will be finalized.
- Supervision and Leadership training will be finalized.

Result 6:

POLICY

Result 7:

- Financial management training program will be delivered for MOHP and governorate level participants.
- TAHSEEN-trained MOHP master trainers will co-facilitate financial management training.
- Supervisory training for CO and governorate level supervisors will be continued.

Result 8:

POLICY

Result 9:

- Raedat from NGOS will be trained in RH issues, referral, home visits and communication skills.
- An internal committee within the MOHP will be formed comprising the various units that work with NGOs.
- NGOs in two new districts in Minia (Mallawi and Mattai) will be screened and selected for partnership with TAHSEEN.

Result 10:

- The study *Ask/Consult Strengths and Weaknesses* will be finalized and disseminated.
- Agreement regarding CSR to EBM activities in Minia will be formalized.

Annexes

Annex 1 Progress Table

Annex 2 Subcontractor Table

Sub-Contractor Table

Sub-Contract #	Sub-Contract Name	Contract Date	Contract Period	Topic
PO #EKE411/ 624/0028	SAPAC	10-Apr-03	9 weeks	Technical research on the "Ask Consult" program
2		1-Jun-03	06/01/03 - 09/30/03	Technical Research on Identifying the Key Success Factors for Clinic Utilization and Cost Recovery in Clinical Services Improvement (CSI) Project.
3		1-Jun-03	06/01/03-08/31/03	A study to Investigate " Reproductive Health Services for Young Engaged and Newly Married Couples"
4	Allied Corporation -Egypt	10-Aug-03	6 Weeks	Technical research on CSI Legal Status Assessment
5	MEDTEC	4-Oct-03	6 months	Making a difference in Minia through implementing a set of comprehensive activities
6	Heart to Heart	8-Oct-03	2 months	Implementing a Comprehensive Package of Activities to Achieve its Goals in Selected Areas in Minia Governorate
7	El- Zanaty & Associates	13-Oct-03	10 weeks	Technical Research on the Feasibility of a Community Based Counseling and Family Planning Method Distribution System
8	Eng. Mohamed Auadallah	1-Dec-03	2 months	Renovation for FP clinics of El Sawada and El Doudadia Minia Governorate

Sub-Contract #	Sub-Contract Name	Contract Date	Contract Period	Topic
9	Eng. Samir Sleem Lateef	12-Jan-03	2 months	Renovation for FP clinics of El Bergaya, Nazlet El Amoudeen and El Tayeba
10	RCT	15-Dec-03	9/15/03- 11/ 21/03	Providing Training Course in Family Planning
11	Unified Group for Technical and Consultancy Services	29-Nov-03	11/29/03-1/15/03	Creation of New Cadre of MOHP Financial Mangers
12	BLI Consulting Group	15-Dec-03	12/15/03-3/31/03	Training in Integrated Supervision for the Ministry of Health and Population
13	EFCS			Cancelled
14	Grant Thornton Mohamed Hilal	18-Dec-03	2 weeks	Audit Monthly Expenditures Report of CSI from Jan. 1, 03-Dec. 31, 03

Annex 3 Research Table

Research and Assessments

Task #	Name	Date		Company	Location	Type of Research	Methodology
		From	To				
9.6	CSI Legal Assessment Study	Sept	Oct	Allied Corporation	Cairo	Assessment of seven options for the sustainability of CSI	All concerned parties, legal and NGO experts interviewed, opinions analyzed and matched against the 7 options
9.6	CSI Clinics Assessment of Performance	June	Dec	SPAAC	Cairo	Comparison between CSI successful and less successful clinics to understand success factors	Comparison of sample of successful and less successful CSI clinics countrywide to identify and understand factors influencing CSI clinic performance
10.1	Assess the Past Success of Ask/Consult	April	Nov	SPAK	2 Upper Egypt and 2 Lower Egypt governorates and Cairo governorate	Assessment study	Field visits using, focus group discussions and mystery clients
10.2	Assess RH/FP Products Available in the Egyptian Market	April	Aug	Dr. Mostafa ELHadary	Cairo	Assessment study	Document review including reports, materials from pharmaceutical companies and MOHP registration and pricing process

Annex 4 Renovation Table

Renovations

Facility	Unit Type	Location	Renovation Type
Sawada MOHP Clinic	Rural Health Unit	Sawada, Minia District, Minia Governorate	General Renovation: For entire unit, fortifying walls as needed; re-tiling floors of corridors and consultation rooms; painting and tiling of walls; renovating bathrooms including fixtures; upgrading electricity and plumbing throughout the unit; installation of water heater; signing; improving garden area. **Status: completed**
El Dawedia MOHP Clinic	Rural Health Unit	El Dawedia, Minia District, Minia Governorate	Only small upgrades required on main floor: re-tiling floors of corridors and consultation rooms, painting and tiling of walls. **Status: in progress**
El Edmu MOHP Clinic	Rural Health Unit	El Edmu, Minia District, Minia Governorate	Only small upgrades required on main floor: re-tiling floors of corridors and consultation rooms, painting and tiling of walls. **Status: in progress**
Nazlet El Amoden MOHP Clinic	Rural Health Unit	Nazlet El Amoden, Samalaut District, Minia Governorate	General Renovation: For entire unit, fortifying walls as needed; re-tiling floors of corridors and consultation rooms; painting and tiling of walls; renovating bathrooms including fixtures; upgrading electricity and plumbing throughout the unit; installation of water heater; signing; improving garden area. **Status: completed**
El Tayeba MOHP Clinic	Rural Health Unit	El Tayeba, Samalaut District, Minia Governorate	General Renovation: For entire unit, fortifying walls as needed; re-tiling floors of corridors and consultation rooms; painting and tiling of walls; renovating bathrooms including fixtures; upgrading electricity and plumbing throughout the unit; installation of water heater; signing; building fence around unit to separate from market; improving garden area. **Status: completed**
Mallawi District Hospital (MOHP)	District Hospital	Mallawi, Mallawi District, Minia Governorate	Limited upgrading of the family planning waiting area, consultation and counseling rooms is taking place, consisting of paint and tiles (wall and floors). **Status: completed**

Annex 5 Local Media Coverage Table

Local Media Coverage - Press

Date	Title	Topic
6/12/2004	El Akhbar Newspaper	Family Planning was permitted by Islam for the sake of the society and the republic
December 2003	El Shabab Edition no. 317	The population and youth cases in the Demographic Center Conference
4/11	El Akhbar	The undersecretary for women is warning of the dangers of over population requesting the implementation of law of restrictions on unorganized reproduction
4/11	El Ahram	A new health policy to reduce reproduction with ways that don't disagree with religions
4/11	El Ahram	Social negatives for population explosion
18/11	El Akhbar	Population problem and its effects on development
18/11	El Akhbar	Population affects Egypt's present and future
13/11	El Gomhoreia	Family Planning saves 137000 million pounds
20/11	El Ahram	Reproductive health services available for 7.5 million citizen in squatter areas
28/11	El Ahram	Starting the implementation of "Supporting RH services Project" in 10 governorates
30/11	El Ahram	Remarkable phenomenon about womens' situations in Minia
30/11	El Akhbar	Population bomb
9/11	El Ahram	Sharp decrease in FP methods
9/11	El Akhbar	Expansion in danger pregnancy follow up clinics inside hospitals
4/1	El Akhbar	Decrease in population gross rates in Giza to 2.1 %
8/1	El Akhbar	Redistribution of population is a national must.

Local Media Coverage - Press

Date	Title	Topic
12/1	El Ahram	"Read" is the solution
30/1	Al Seha Wal Gamal	FGM ….Egyptian case
8/1	El Gomhoreia	High growth rates: Decrease in population
9/1	El Akhbar	FP and stopping population burst …The nation's national project Islam allows organizing and refuses birth control and sterilization.
6/1	El Ahram	A plan against population problem with contribution of ministries and related authorities
4/1	El Gomhoreia	Specialized health bureaus services. FP and strategy of maternity deaths decrease
8/1	El Ahram	FGM "Resistance Project"

Annex 6 Minia Media Group Articles

Annex 7 Workshops Table

Workshops

Title	# Days	Location	Purpose	Participants		Sponsoring Organizations
				#	Type	
Mechanisms for Collaborating with selected NGOs in Minia	1	Minia	Develop mechanisms for TAHSEEN and selected NGO collaboration for capacity building, implementation and community mobilization	21	NGOs' board members and staff	TAHSEEN
NGO Service Center Conference for Disseminating Activities of Funded NGOs	1	Cairo	Disseminate information on activities carried out by 8 NGOs funded through the NGO Service Center	+/-100	Board members, NGO staff MISA, USAID, MOHP, other USAID project representativ esNGO Service Center staff	NGO Service Center
Contraceptive Use in Fayoum and Sohag Governorates	1	Cairo	To compare contraceptive use rates in Fayoum & Sohag and success factors in Fayoum	+/-100	University, research, sociology, demography experts; USAID and USAID funded project representativ esetc.	NPC
Marriage Patterns Among Youth	1	Cairo	To shed light on marriage patterns among youth especially *orfi* marriage	+/-100	University, research, sociology	NPC

Title	# Days	Location	Purpose	Participants		Sponsoring Organizations
				#	Type	
Evidence Based Medicine	1	Minia Medical school	Formulate EBM team in Minia Medical school	10	Professors of OB/GYN	TAHSEEN, Ain Shams University, and MEDTEC
Youth Committee	1	Minia	Establish the Youth committee	11	MOHP, MOYS, MOE, Minia governorate, Sheikh and Priest, Minia TV channel, two NGO representatives	TAHSEEN
Nursing school curriculum	3	Alexandria	To approve and reach consensus on the training package		Physicians and nurses	
Subdermal Implants	3	Ain Soukhna	To approve and reach consensus on the training package		Physicians and nurses	

Setting Priorities and Develop a Work Plan for Slum Areas	2	6th of October City	To set priorities and develop a work plan for slum areas in five governorates	40	MOHP Population Sector Family planning directors from five governorates	TAHSEEN

Annex 8 Corporate Social Responsibility Table

Corporate Social Responsibility List Pharmaceutical Companies

#	Organization	Location		Function	Willing to Participate		Form of Participation	Supported Organization	Estimated Cost	Comment
		National	Local		Yes	No				
1	Organon	✓		Pharmaceutical						
2	Wythe	✓		Pharmaceutical						
3	Multi Pharma	✓		Pharmaceutical						
4	Novartis	✓		Pharmaceutical						
5	Space Medical	✓		Pharmaceutical						
6	Soficom Pharm	✓		Pharmaceutical						
7	TACO	✓		Pharmaceutical						
8	CID	✓		Pharmaceutical						
9	El Nile	✓		Pharmaceutical						
10	MEDTEC	✓		Pharmaceutical						
11	EPTC	✓		Pharmaceutical						

Corporate Social Responsibility List Pharmaceutical Companies

#	Organization	Location		Function	Willing to Participate		Form of Participation	Supported Organization	Estimated Cost	Comment
		National	Local		Yes	No				
12	UCP	✓		Pharmaceutical						
13	Selag	✓		Pharmaceutical						
14	Alpha Chem Scientific Office	✓		Pharmaceutical						
15	ITIC	✓		Pharmaceutical						

Corporate Social Responsibility List Non-Pharmaceutical Companies

#	Organization	Location		Function	Willing to Participate		Form of Participation	Supported Organization	Estimated Cost	Comment
		National	Local		Yes	No				
1	Overseas for Computers	✓		Business						
2	IBM	✓		Business						
3	Toshiba El Arabi	✓		Business						
4	Kodak	✓		Business						
5	Proctor & Gamble	✓		Business						
6	BMB & B	✓		Business						
7	Bahgat Group	✓		Business						
8	Glaxosmith Kline	✓		Business						
9	American Chamber of Commerce in Egypt	✓		Business						
10	Volunteer for Population & Development	✓		Business						
11	Mansour Group	✓		Business						
12	International Islamic Center	✓		Business						

Corporate Social Responsibility List Non-Pharmaceutical Companies

#	Organization	Location		Function	Willing to Participate		Form of Participation	Supported Organization	Estimated Cost	Comment
		National	Local		Yes	No				
13	EFCS	✓		Business						
14	Zanati Association	✓		Business						

Corporate Social Responsibility List Minia Governorate										
#	**Organization**	**Location**		**Function**	**Willing to Participate**		**Form of Participation**	**Supported Organization**	**Estimated Cost**	**Comment**
		National	**Local**		**Yes**	**No**				
1	Coptic Evangelical Organization for Social Services									
2	EFPA									
3	Ministry of Agriculture									
4	Minia University									
5	Youth Centers									
6	Attached list of industrial companies (13 project)									

Annex 9 Reports and Publications Table

Reports and Publications

Research Reports	
Document Title	**Description**
Institutional Capacity Analysis of NGOs in Two Districts in Minia	22 NGOs in Minia and Samalout (2 Minia districts) screened and assessed for institutional capacity and sustainability potential in order to select groups with whom TAHSEEN can partner
Inventory of NGOs Active in the Field of RH in Minia and the Most Important RH NGO Networks Nationwide	List of NGOs active in RH in Minia developed List of most important NGO networks nationwide NGO name, location other relevant information included
FP/RH The Feasibility of a Community Based Counseling and FP Method Distribution System	Draft finished. Study used a series of focus group discussions with raedat, clients, providers, managers etc., to identify determinants for the design of a Egyptian CBD program, such as the specifics of supply, method mix, quality control, financial arrangements. Account managers', raedat, nurses' and clients' preferences were taken into account.
Situation Analysis of Family Planning and Reproductive Health in Minia Governorate	The assessment was undertaken to determine the status of the FP/RH program in Minia Governorate, define TAHSEEN areas of intervention and establish an improvement plan that maximizes available resources.
Q&A Booklet for Engaged and Newly Married Couples	Presents FP/RH material for these targeted groups in lively Q&A format
Women's Empowerment in Egypt: Current Situation and Supporting	Comprehensive list and database of organizations involved in

Organizations	women's empowerment activities
Optimal Birth Spacing Interval (OBSI)	Presents and analyzes who are the decision makers regarding birth spacing within Egyptian extended family structure and the influences on women as decision makers
MCH/RH Package of Essential Services	Details agreed upon key areas for integration
Situation Analysis of FP/RH Outreach Workers in Egypt	Studies and analyzes history and current state of raedat rifiat and community health workers programs in Egypt
Integration of Family Planning / Reproductive Health and Maternal and Child Health Services: Missed Opportunities and Challenges	Lists and analyzes missed opportunities resulting from vertical programming and integrates ideas resulting from the consensus reached on basic integration design scope and principles
Training Curricula and Clinical Guidelines	
Document Title	**Description**
Contraception for Young Couples	Module for inclusion in medical school curriculum and service provider's training
Secondary Technical Nursing School Curriculum in Family Planning Topics	Material expanded from 9 pages to two volumes

Annex 10 Training Table

Training

Course		Duration			Participants				Location	Implementing Agency
Title	Type	# days	From	To	Males	Females	Total Number	Type		
Training Course for Physician Service Providers in Primary Health Care	Clinical	16	11/1	11/18	5	2 5	2 10	NGO physicians MOHP physicians	Minia	RCT sponsored by TAHSEEN
Training Course for Physician Service Providers in Primary Health Care	Clinical training in RH/FP, infection control, counseling	18	1/11	18/11	5	7	12	Physicians	Minia	RCT
Training Course For Nurses In Primary Health Care	Clinical	12	1/11	13/11	-	15	15	Nurses	Minia	RCT
Training Course for Raedat Rifiat in Primary Health Care	Practical	6	15/11	20/11	-	16	16	Raedat rifiat	Minia	RCT
Training Course for Lab Technicians in Primary Health Care	Clinical	6	1/11	6/11	8	-	8	Lab technicians	Minia	RCT
Training Course for Nurses in Primary Health Care	Clinical	12	8/11	20/11	-	15	15	Nurses	Minia	RCT

Appendices