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ANNUAL REPORT  
OF  
THE JHPIEGO CORPORATION  
FISCAL YEAR 1982

## REPORT FORMAT

This annual report is divided into four sections. Section I through Section III provides a review of all activities during FY'82, as well as a summary of the work plan for FY'83. Section I provides a brief history of JHPIEGO and a summary of accomplishments during FY'82. Section II describes the educational and training activities of JHPIEGO abroad and in the U.S., as well as activities organized in support of training. Section III presents a review of the activities of the administrative and operating components of JHPIEGO. Section IV is the fiscal report. It provides combined and separate recaps of fiscal activity for the grant AID/pha-G-1064 and the cooperative agreement AID/DSPE-CA-0083.

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SECTION I  
INTRODUCTION

## A. HISTORY OF JHPIEGO

The JHPIEGO Corporation was created as a result of a 1973 study carried out by the Johns Hopkins University through the support of a planning grant from the Agency for International Development (AID).

The findings of the study were presented in December 1973 to a committee of international experts and an advisory committee from the Johns Hopkins University. The groups recommended jointly that steps be taken to design the structure and develop the by-laws of a university-affiliated corporation which would organize and implement a program for international education in gynecology and obstetrics. Its purpose would be to upgrade the knowledge, skills, and technology of obstetricians, gynecologists, and other qualified professionals in the developing world, to make a critical evaluation and advance the diffusion of new methods of promoting reproductive health as they are developed, and to encourage the integration of those methods into the daily practices of medical professionals.

The JHPIEGO Corporation was awarded an AID grant in June 1974 to enable that institutional model to serve as an agent to coordinate and lead collaborating institutions in the U.S. and interested developing countries in their participation in the program for international education in gynecology and obstetrics. JHPIEGO would not only provide educational leadership, but would also serve in a facilitative capacity to mobilize resources and channel funds and equipment to the educational institutions participating in its program.

In September 1980, AID and JHPIEGO signed a cooperative agreement for the continued support of JHPIEGO. The signing of that agreement ensured that JHPIEGO would have the means to continue to organize educational programs for the purpose of upgrading the knowledge, skills, and technology of obstetricians, gynecologists, and other qualified health care personnel in less developed countries in order to promote the mutual goals of AID and JHPIEGO.

Since its inception, JHPIEGO has undergone a process of evolution. Initially, major educational and training programs were conducted by the Department of Gynecology and Obstetrics of the Johns Hopkins University, the Washington University in St. Louis, the American University in Beirut, and the University of Pittsburgh in collaboration with the Western Pennsylvania Hospital. The directors of these centers and JHPIEGO staff formed a council of associates to select physicians from developing countries to receive training and to consider equipment, curriculum, and policy. Cadres of physicians from leading institutions in less developed countries were brought to the JHPIEGO-supported centers named above for intensive short-term postgraduate courses emphasizing high-risk pregnancy, the management of fertility and infertility, surgical contraception, and other broadly-based postgraduate courses promoting the improvement of reproductive health.

At the time of the program's inception, it was thought to be possible to provide, in addition to didactic instruction and clinical observation (Phase I of the program), some personal participation in clinical practice at the institutions affiliated with JHPIEGO. This soon became unfeasible, so instead, physicians were, and continue to be, sent to clinical practice centers overseas for technical training and clinical experience (Phase II), usually following the didactic phase of their course at the Johns Hopkins Educational Center. Once a physician's competence has been certified by the directors of the educational and clinical practice centers, JHPIEGO ships the appropriate surgical equipment to the physician's home institution. The shipment of equipment is followed by a field visit by a JHPIEGO consultant (Phase III) to install the equipment, observe the physician's ability to use the equipment in his/her home institution, and acquaint operating room staff with the importance of the care and maintenance of the equipment.

At present, JHPIEGO maintains only one educational center in the U.S., the Johns Hopkins Educational Center. This reflects the shift of JHPIEGO's focus from U.S.-based training to the development of in-country educational centers. These centers continue to be established in developing countries to meet the demand for training which has been

generated by the large cadre of JHPIEGO-trained physicians who have expressed an interest in developing such programs in their own countries. In addition to utilizing the "phase" model of training outlined above, the overseas centers have adapted numerous other models of training to respond to local needs and objectives.

The courses offered at the Johns Hopkins Educational Center, too, have undergone a process of evolution. The initial course for clinicians, conducted only in English and Spanish, has given rise to 5 other courses, which include infertility, microsurgery, administration, academic skills, and sexually transmitted diseases. Most courses are conducted in English, French, and Spanish. Occasionally, courses are offered in Portuguese, and one course was conducted in Turkish.

Detailed descriptions of program activities abroad and in the U.S. appear in other sections of this report.

## B. SUMMARY OF ACCOMPLISHMENTS

Fiscal Year 1982 represented for JHPIEGO a period of diversification, expansion, and refinement. The period was characterized by new directions for collaborative educational programs. Participation in overseas training programs increased dramatically. New systems for monitoring and evaluation were established and existing systems, refined. These initiatives, developed and implemented by JHPIEGO staff, resulted in new dimensions for training and enhanced the effectiveness of record-keeping and evaluation-related activities.

By the end of FY'82, a cumulative total of 9,715 health professionals representing 2,428 medical institutions in 111 countries had participated in JHPIEGO-supported educational programs in the U.S. and in developing countries.

Over 4,900 of these individuals were trained during the reporting period. A significant 95% of this year's trainees participated in regional and national programs, reflecting the continued emphasis on providing training overseas. The training of an unprecedented 3,112 students of medicine and nursing during the reporting period reflects JHPIEGO's continuing efforts to place reproductive health education within national health infrastructures. Such undergraduate training serves the important objective of reaching future providers of reproductive health care and instilling at an early point in their careers the concepts and skills necessary to deliver services in maternal and child health and family planning. Furthermore, it broadens the spectrum of the educational levels at which JHPIEGO supports training.

In the four regions of the developing world, JHPIEGO-supported educational centers continued to offer courses in various aspects of reproductive health to physicians, nurses, and other health professionals. Training in support of other efforts was expanded to include the specialized fields of anesthesiology (emphasizing "local" methods) and microsurgery. The emphasis on training physician-nurse teams continued. Innovative projects were under development for implementation in a number of countries, many of which had not previously offered JHPIEGO-supported programs.

The development and implementation of these new programs necessitated a considerable amount of travel on the part of JHPIEGO staff and consultants. Nearly 40% of all JHPIEGO travel was undertaken for program development and other training initiatives. The percentage of such travel has increased since last year and is expected to continue to do so in the future.

Six new collaborative educational programs were established this year, bringing to 23 the total of functioning in-country programs. In Africa, educational programs were located in institutions in Kenya, Nigeria, Somalia, Sudan, Uganda, and Zaire. Asian institutions offered courses in Burma, Malaysia, Pakistan, the Philippines, and Thailand. Three programs in Brazil, two in Mexico, and one each in Chile and Colombia offered courses in institutions in Latin America. Near Eastern programs were carried out in Egypt (two programs), Morocco, Tunisia, and Turkey.

JHPIEGO's selection of candidates for U.S.-based training continued to reflect in-country and regional priorities, with nearly half the countries represented being from the African continent. An effort to address the significant infertility problem which exists in Africa was demonstrated by the increased number of African participants who attended the management of infertility course. By year's end, a new course, "Promoting Reproductive Health through the Management of Sexually Transmitted Diseases", had been developed and was scheduled for implementation at the Johns Hopkins Educational Center early in FY'83. Still under consideration for the Educational Center was a course on the pharmacology of reproductive health. Since the clinicians' course, "Advances in Reproductive Health", is now offered in many countries throughout the developing world, it will no longer routinely be included on the agenda for the Educational Center.

The essential clinical component of many of these educational projects was provided by 45 clinical practice centers operating under 29 separate agreements with JHPIEGO. These centers offered clinical experience in endoscopy, minilaparotomy, microsurgery, and anesthesiology for physicians, and the appropriate clinical support training for nurses and paramedics.

Numerous site visits were made to established educational centers by JHPIEGO senior staff to evaluate programs and to verify the preparation of documentation of program activities and financial transactions. During these visits, efforts were made to ascertain compliance with voluntary participation and other requirements of agreements. A great deal of staff time was spent in the development of programs for the African and Caribbean regions. These efforts are expected to come to fruition in the form of new programs during FY'83.

JHPIEGO continued to provide certain medical equipment to affiliated institutions overseas. Improved maintenance of laparoscopic systems, more efficient utilization of repair and maintenance centers, and the phase-out of electrocautery systems resulted in approximately a one-third reduction in spare parts costs over the previous year. Efforts were redoubled in the promotion of preventive maintenance of laparoscopic systems. Qualified technicians conducted visits to institutions possessing such equipment in order to instruct staff in the proper care of laparoscopic systems. During FY'82, ten centers for instruction in the preventive maintenance and care of laparoscopic equipment were functioning with JHPIEGO's support in Brazil, Colombia, Costa Rica, Malaysia, Nigeria, Pakistan, the Philippines, Sudan, Turkey, and Thailand.

In addition to providing equipment, JHPIEGO continued to provide books, models, films, and other teaching materials to individuals trained and to teaching institutions overseas. Educational materials used in JHPIEGO programs were reviewed at a meeting of the educational materials review committee in August 1982. Educational packages underwent further streamlining, and package contents were updated as necessary.

Distribution began in 1982 of the French-language versions of JHPIEGO's two equipment manuals, Laprocateur: MDSoins Preventifs et Entretien and Systems Coelioscopiques Perfectionnes: Soins Preventifs et Entretien. The proceedings of the JHPIEGO conference held in Nyeri, Kenya, Reproductive Health Education in the Developing World, were published and distributed during the reporting period. Also published was a Medical School Directory for developing countries.

JHPIEGO's ability to mobilize support in a wide variety of cultural, social, and economic settings is demonstrated by the existence of JHPIEGO-supported didactic and clinical training centers in 68 different locations in Africa, Asia, Latin America, and the Near East. Flexibility has been a key factor in the success of JHPIEGO programs. Appropriate educational models have been created and implemented through close collaboration with existing infrastructures. The ability to mobilize support in such diverse locales may be attributed to JHPIEGO's willingness to respond to specific regional and national needs. Approaches utilized in JHPIEGO-sponsored projects may vary considerably. One approach has been to assist ministries of health in the development and implementation of training for staff in rural and district health centers. Another approach has been to utilize a medical school or medical teaching institution as a training site for physicians, nurses, and paramedics. Reproductive health education projects (REHEP) have been implemented to prepare students of medicine and nursing to provide reproductive health care. An additional strategy has been the establishment of didactic and clinical educational programs in collaboration with public and private family health and family planning associations. The willingness to adapt to local conditions has enabled JHPIEGO to reach countries in which traditional policies and practices had precluded the improvement of reproductive health services.

The proliferation of collaborative educational projects throughout the developing world has necessitated the development and implementation of more effective systems of management and evaluation. A comprehensive grants management manual was completed during FY'82. It is a guide to the management of all the components of a project, and a considerable amount of time was spent by the grants unit on its creation. This document serves as a tool for use by overseas project directors to facilitate timely and accurate reporting of training activity. The grants management manual is customized in order to be applicable to each agreement.

Another facet in the improvement of project management was the compilation of a glossary of all forms used in overseas programs which comprise the documentation

required by JHPIEGO under the terms of each agreement. The forms glossary, compiled by the program support unit, provides the project director with instructions on completing the forms and information on how to utilize the data on these forms in order to both monitor and improve training efforts. The use of this glossary and the previously mentioned grants management manual is expected to enhance the efficiency and accuracy of data collection and record-keeping. These two documents will be distributed at the meeting of all JHPIEGO project directors scheduled for October 1982.

With the expansion of overseas programs, sophisticated and more effective feedback mechanisms were established between the grants unit, the regional development officers, the resource management office, the information and evaluation services unit, and the equipment unit. Such mechanisms enable the staff to process the ever-increasing volume of documentation required for monitoring educational projects with collaborating institutions overseas. Approximately 10,000 required reports and forms on training activity, equipment, educational materials, and fiscal information were received, processed, and reviewed by the appropriate offices and units.

The information and evaluation services unit (IES) created a computerized document checklist to be used in recording the receipt of the extensive documentation required for in-country projects. This checklist is used by the grants office and represents an important tool in monitoring grantees' compliance with agreement requirements. It also assists in ensuring that trainee and project records are accurate and complete.

The computerized data bases maintained by JHPIEGO were expanded to better serve program needs and refined to eliminate errors and improve efficiency. In addition to the documentation checklist mentioned above, the IES staff developed creative and practical methods for utilization of the computerized data. Computer printouts were designed to list, in various fashions, information on course participants, medical institutions, and equipment distributed. Statistical programs tabulating JHPIEGO's accomplishments were generated and utilized for purposes of data reporting and analysis, including the preparation of the annual report.

Also developed by IES was a questionnaire to assist in the fulfillment of long-term evaluation and short-term monitoring needs of in-country training programs. This questionnaire is to be distributed during FY'83 to participants of regional and national training courses. The information elicited by the questionnaires includes the success of the courses in teaching reproductive health knowledge and skills, a description of professional activities undertaken by the trainees since their attendance of the course, the condition and utilization of equipment donated, and a description of problems or obstacles encountered. It also serves the important objective of maintaining contact with graduates of JHPIEGO courses.

Formal audits were in process for the close-out of 11 subordinate agreements awarded under AID grant pha-G-1064. Approximately 70 hours of staff time and the compilation of a detailed audit-ordering document and a final report of findings are required to execute each close-out. Also, intermittent monitoring checks are carried out on all programs by qualified staff or consultants.

As FY'83 begins, JHPIEGO expects to continue and expand most of its 23 major on-going in-country projects. Furthermore, in keeping with JHPIEGO's emphasis on reaching medically underserved countries of the world, new in-country programs are being established in the Cameroon, Guatemala, Haiti, Honduras, Jamaica, Liberia, Panama, Sierra Leone, Sri Lanka, Tanzania, and Zimbabwe, as well as at new sites in Brazil, Mexico, and Nigeria. This unprecedented expansion of overseas activities is made possible in part by the pioneering efforts of JHPIEGO's director and senior staff in the design of educational models that meet specific needs in the developing world. Of considerable importance, too, is the support provided by the individual and interrelated operating units of JHPIEGO's central organization. The interest and enthusiasm shown by all members of JHPIEGO's staff have served to promote the effective management and efficient monitoring of educational programs. The coordinated efforts of all those concerned have enabled JHPIEGO to succeed in its principal goal - the improvement of reproductive health in the developing world.

SECTION II  
EDUCATION AND TRAINING

## A. SUMMARY OF ACTIVITY

From the time of JHPIEGO's inception through FY'82, a total of 9,716 trainees (Table 1B) from 111 countries have participated in U.S.-based and overseas courses. The total of 9,716 represents course attendees rather than individuals, because on rare occasions an individual may attend more than one course.

Despite the relative recency of the shift in emphasis toward conducting programs overseas rather than in the U.S., the vast majority of JHPIEGO course participants have been trained in regional and national projects. In fact, by the close of FY'82, 7,839 persons, or 81% of the cumulative 9,716 participants, had received training overseas (Table 2B), as compared to 66% of all trainees by the close of the previous fiscal year. Figure 1 demonstrates the dramatic increase in course participation overseas as compared to participation in U.S.-based courses. A significant factor in the increase in regional and national activity has been the last two years' training of 3,174 medical students and student nurses in reproductive health skills.

The past few years have witnessed new developments and directions in training. As discussed above, programs for medical students and student nurses have been proliferating since FY'81. Such training reflects the considerable progress made in incorporating program goals and objectives into medical training institutions. Undergraduate educational projects are expected to increase in number during FY'83. Another initiative during FY'82 was the establishment of an additional center for anesthesiology training in the Near East. Previously, anesthesiology had been taught only in Latin America. As a result, over twice as many persons were trained in anesthesiology during FY'82 as during the previous year. The provision of such training enables service centers in the developing world to offer a safer and more cost-effective approach to women requiring surgical procedures related to reproductive health. Also on the increase was participation in the microsurgery course. More than twice as many persons were trained in microsurgery during FY'82 as during the previous year. In many locales, the availability of procedures for reversal of sterilization allows surgical contraceptive services to be viewed as more balanced and therefore more acceptable.

**Table 1A**

**Number of JHPIEGO Course Participants at All U.S.,  
In-Country, and Regional Training Centers**

**October 1, 1981 - September 30, 1982**

	Clinical Courses for Physicians	Clinical Courses for Nurses	Reproductive Health Administration	Academic Skills	Didactic Update Conference		Undergraduate Training		Total
					for Physicians	for Nurses	Medical Students	Nurse Students	
AFRICA	128	27	31	6		38			230
ASIA	116	84	12	11	65	35			323
LATIN AMERICA	442	149	54	6	153		2,952	160	3,916
NEAR EAST	165	145	2	3	131				446
<b>TOTAL</b>	<b>851</b>	<b>405</b>	<b>99</b>	<b>26</b>	<b>349</b>	<b>73</b>	<b>2,952</b>	<b>160</b>	<b>4,915</b>

Table 1B

Number of JHPIEGO Course Participants at All U.S.,  
In-Country, and Regional Training Centers

Inception through September 30, 1982

	Clinical Courses for Physicians	Clinical Courses for Nurses	Reproductive Health Administration	Academic Skills	Didactic Update Conference		Undergraduate Training		Total
					for Physicians	for Nurses	Medical Students	Nurse Students	
AFRICA	479	160	156	18	16	61			890
ASIA	996	325	59	17	65	35			1,497
LATIN AMERICA	1,288	380	205	14	812		3,001	173	5,873
NEAR EAST	604	330	62	8	452				1,456
TOTAL	3,367	1,195	482	57	1,345	96	3,001	173	9,716

**Table 2A****Number of JHPIEGO Participants at Regional and National Training Centers****(By Participant's Region of Institutional Affiliation  
and Type of Course Attended)****October 1, 1981 - September 30, 1982**

	Clinical Courses for Physicians			Clinical Nursing	Didactic Update		Undergraduate Training		Total
	Advances in Reproductive Health	Microsurgery	Anesthesiology		for Physicians	for Nurses	Medical Students	Nurse Students	
<b>AFRICA</b>	88	—	7	27	—	38	—	—	160
<b>ASIA</b>	101	6		84	65	35	—	—	291
<b>LATIN AMERICA</b>	318	7	35	149	153	—	2,952	160	3,774
<b>NEAR EAST</b>	126	—	28	145	131	—	—		430
<b>TOTAL</b>	<b>633</b>	<b>13</b>	<b>70</b>	<b>405</b>	<b>349</b>	<b>73</b>	<b>2,952</b>	<b>160</b>	<b>4,655</b>

Table 2B

## Number of JHPIEGO Participants at Regional and National Training Centers

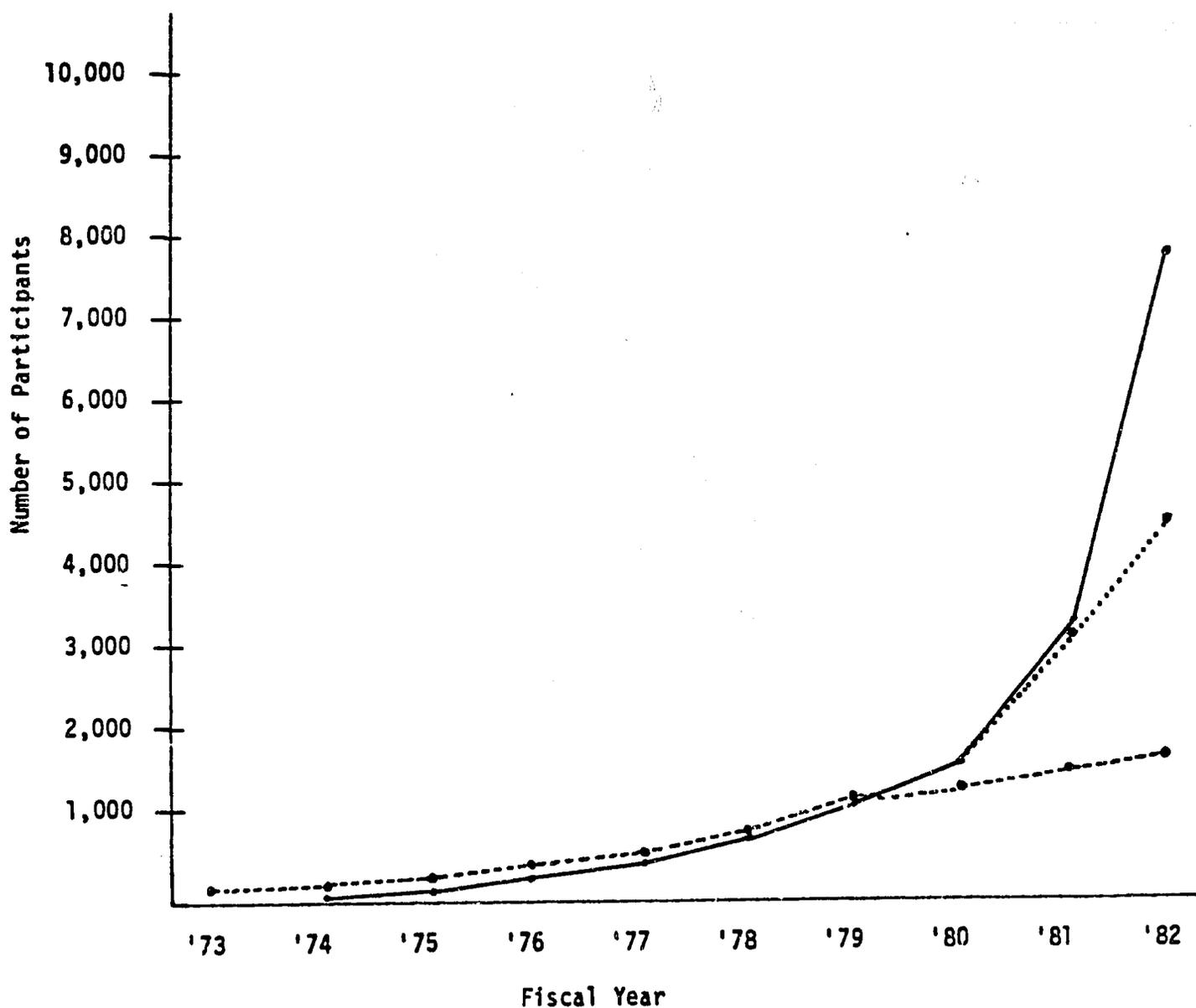
(By Participant's Region of Institutional Affiliation  
and Type of Course Attended)

Inception - September 30, 1982

	Clinical Courses for Physicians			Clinical Nursing	Didactic Update		Undergraduate Training		Total
	Advances in Reproductive Health	Microsurgery	Anesthesiology		for Physicians	for Nurses	Medical Students	Nurse Students	
	AFRICA	282	—		7	126	16	61	
ASIA	688	6	—	274	65	35	—	—	1,068
LATIN AMERICA	593	19	78	370	812	—	3,001	173	5,046
NEAR EAST	426	—	28	327	452	—	—	—	1,233
TOTAL	1989	25	113	1,097	1,345	96	3,001	173	7,839

Figure 1

Cumulative Totals of JHPIEGO Participants by Fiscal Year



- All participants in regional and national training projects
- - - - - All participants in U.S.-based courses
- ..... All participants in overseas courses for physicians, nurses and auxiliary health personnel, excluding medical and nursing students (for whom training began in FY'81)

During FY'82, a total of 4,915 health professionals were trained in JHPIEGO-sponsored courses (Table 1A). Of the total, 95%, or 4,655 persons, were trained overseas (Table 2A). The continued emphasis on team training was reflected in the number of participants in the clinical courses for nurses (405) and for anesthesiologists (70). New countries represented by JHPIEGO trainees during FY'82 were the Congo, St. Martin, and Western Samoa.

Activity in regional and national programs more than tripled over the previous year. This increase takes into account 2,952 medical students and 160 student nurses trained in Latin America, as well as 51 physicians and nurses who had been omitted from the previous year's counting. Of the total 4,655 overseas trainees during FY'82, 716 attended clinical courses for physicians. These are the courses on advances in reproductive health, microsurgery, and anesthesiology. Another 405 of the trainees attended clinical courses for nurses, during which some or all of the following concepts and skills are presented: operating room techniques, family planning techniques, e.g., IUD insertion, reproductive health counseling, and equipment maintenance. Didactic update courses were attended by 422 physicians and nurses. The remaining 3,112 persons attended undergraduate courses for medical students and student nurses.

Table 3B shows that 1,877 persons have attended U.S.-based courses since the inception of JHPIEGO, or 19% of all persons ever trained. During FY'82, 260 persons were trained at the Johns Hopkins Educational Center, in Baltimore (Table 3A). The courses on the management of infertility and on reproductive health administration had the largest numbers of participants.

Nearly half the countries represented this year at the Johns Hopkins Education Center were African. That fact demonstrates JHPIEGO's continued recognition of Africa's urgent need for training in modern techniques of reproductive health. African participation in such courses has provided the impetus for many of the graduates to organize and implement training efforts in their own institutions. Close to 40% of all participants in the infertility course were from Africa, reflecting JHPIEGO's efforts to

Table 3A

Number of JHPIEGO Participants at the Johns Hopkins Educational Center

(By Participant's Region of Institutional Affiliation  
and Type of Course Attended)

October 1, 1981 - September 30, 1982

	Clinical Courses for Physicians			Reproductive Health Administration	Academic Skills	Total
	Advances in Reproductive Health	Infertility	Microsurgery			
AFRICA	1	29	3	31	6	70
ASIA		9		12	11	32
LATIN AMERICA	45	30	7	54	6	142
NEAR EAST	3	6	2	2	3	16
TOTAL	49	74	12	99	26	260

Table 3B

Number of JHPIEGO Participants at U.S. Training Centers and the  
American University in Beirut

(By Participant's Region of Institutional Affiliation  
and Type of Course Attended)

Inception through September 30, 1982

	Clinical Courses for Physicians			Reproductive Health Administration	Academic Skills	INEP	Total
	Advances in Reproductive Health	Infertility	Microsurgery				
AFRICA	100	85	5	156	18	34	398
ASIA	281	17	4	59	17	51	429
LATIN AMERICA	503	84	11	205	14	10	827
NEAR EAST	109	36	5	62	8	3	223
TOTAL	993	222	25	482	57	98	1,877

address the significant infertility problem in that region and to stress the role that other reproductive health services, such as contraception, may have in preventing or diminishing the problem.

An integral part of JHPIEGO's educational program is the training provided in clinical practice centers located in selected institutions overseas. Clinical practice complements the didactic instruction offered in courses in the U.S. and in the regional and national centers affiliated with JHPIEGO. A clinical practice center provides training in reproductive health techniques, which can include endoscopy, minilaparotomy, IUD insertion, and the use of local anesthesia. In most cases, the physicians who conduct training at the clinical practice centers are JHPIEGO graduates.

Clinical practice centers provide training for participants of the following JHPIEGO courses: advances in reproductive health for physicians, infertility, microsurgery, anesthesiology, clinical courses for nurses, and, on occasion, reproductive health administration and academic skills.

During FY'82, JHPIEGO added 2 clinical practice centers, CAMISP in Brazil and PIEL-VER in Mexico, to its network of clinical practice centers, for a total of 45 centers in the developing world.

Table 4 shows that 1,095 health care professionals were trained at established clinical practice centers during FY'82. This figure represents only the clinical practice activity for which JHPIEGO has received documentation as of the printing of this report. The actual figure may be somewhat higher. Of the 1,095 participants, 985, or 90%, had received the didactic component of their training in regional and national programs. The remaining 110 participants had been trained at the Johns Hopkins Educational Center.

Of the total clinical practice trainees during FY'82, 419 were physicians trained in techniques of laparoscopy. In recognition of the importance of this technique to the provision of reproductive health services worldwide, JHPIEGO has trained since its inception 2,659 physicians in laparoscopy. By region, 318 have been from Africa, 891 from Asia, 936 from Latin America, and 514 from the Near East. Furthermore, during

Table 4

Number of Clinical Practice Participants  
(By Region of Location of Clinical Practice Center)  
October 1, 1981 - September 30, 1982

Africa

Kenya	25	
Somalia	39	
Regional Total		64

Asia

Burma	52	
Philippines	95	
Thailand	6	
Regional Total		153

Latin America

Brazil	229	
Chile	7	
Colombia	141	
Dominican Republic	1	
Guatemala	3	
Honduras	3	
Jamaica	1	
Mexico	145	
Panama	2	
Regional Total		532

Near East

Egypt	155	
Tunisia	86	
Turkey	105	
Regional Total		346
GRAND TOTAL		1,095

FY'82, 342 physicians underwent clinical practice training in such areas as minilaparotomy, microsurgery, anesthesiology, and IUD insertion. Finally, there were 334 nurses who attended clinical practice to improve operating room skills and to learn techniques of contraception.

For FY'83, selected centers for clinical practice will be added as necessary. One new center is expected to be established at the University of West Indies Trinidad Campus.

By the end of FY'82, JHPIEGO had established, through its 9,716 trainees, contact with 2,428 medical institutions in the developing world (Table 5), or an impressive 661 more institutions than had been reached by the close of FY'81. These institutions include all types of major health care facilities providing reproductive health care such as medical schools, hospitals, and maternal and child health centers.

The establishment of contact with medical schools in developing countries through the professionals affiliated with those schools remains an important objective of JHPIEGO. As centers of learning, medical schools represent the opportunity for JHPIEGO to promote the diffusion and institutionalization of education in reproductive health to medical faculty and staff. The personnel resources and facilities at the medical schools and the numerous health care centers affiliated directly or indirectly with the schools can provide great support in the promotion of JHPIEGO's objective of increasing the knowledge and skills of professionals in reproductive health care. Furthermore, the establishment of contact with professionals in medical schools often enhances the ability to reach other groups as well, for example, nurses and paramedics.

Table 5 shows the total numbers of medical schools in each region, as well as the number of medical schools in each region which have been represented by JHPIEGO participants. During FY'82, JHPIEGO staff completed the considerable task of identifying all the medical schools in the developing world in order to compile a directory of medical schools. The discovery of 28 new or previously unidentified medical schools increased the total of 544 reported in the FY'81 annual to 572.

Table 5

Medical Institutions Represented by all JHPIEGO Trainees<sup>1</sup>

(by Region)

Inception through September 30, 1982

	Number of Institutions <sup>2</sup> Represented by JHPIEGO trainees	Total Number of Medical Schools in Region	Number of Medical Schools in Region Represented by JHPIEGO trainees
AFRICA	456	50	36
ASIA	638	215	118
LATIN AMERICA	1,002	214	119
NEAR EAST	332	93	42
TOTAL	2,428	572	315

1. Includes physicians, nurses and administrators.
2. Includes all types of medical institutions providing reproductive health care, e.g., medical schools, hospitals, maternal and child health centers.

The data in Table 5 show that by the end of FY'82, 54% of the medical schools, or 315 out of 572, had been reached, representing a slight increase over the 51% reported last year. If the figures are adjusted according to the number of medical schools in each country, an even higher percentage is shown to have been reached. Of the 111 countries represented by JHPIEGO trainees, 103 have 15 or fewer medical schools. JHPIEGO has reached approximately 65% of the schools in those countries. This percentage is lower than the 70% reported in the FY'81 annual report because many of the medical schools newly added to the directory have not yet been represented by a JHPIEGO participant. Moreover, in countries with a large number of medical schools, such as India (106), Brazil (75), and Mexico (55), it is more difficult to reach as large a proportion of schools as in countries with fewer schools. Nevertheless, the number of schools reached in such countries increased significantly during FY'82, from 37% to 51%.

## B. IN-COUNTRY EDUCATIONAL PROGRAMS

### I. Africa (Introduction)

JHPIEGO's initiatives in training in reproductive health continued to multiply in Africa. The countries here have widely differing social, economic, and political systems. Many African countries have become independent only in the last two decades and many lack well-developed infrastructures for the delivery of health services. Mortality rates in Africa rank among the highest in the world. The needs here are great and so are the challenges. Although progress in bringing projects to fruition may be slow, training efforts continue to expand.

Since its inception, JHPIEGO has trained overseas and in the U.S. a total of 890 physicians, nurses, and administrators from Africa (Table 1B). JHPIEGO has now trained health professionals from every sub-Saharan African country with the exception of Angola, Guinea Conakry, Namibia, and Swaziland.

During FY'82, JHPIEGO continued to recruit health care professionals from Anglophone and Francophone Africa for its programs. A total of 230 participants from Africa were trained during FY'82 (Table 1A), representing one-fourth of all Africans ever trained by JHPIEGO. Just under half of the countries represented by participants at the Johns Hopkins Educational Center this year were African. A participant from the Congo was accepted this year for the first time in a JHPIEGO reproductive health course.

In September 1982, the first reproductive training course for Ugandan district medical officers and the principal nursing officer was instituted in Kampala, at Makerere University. The first anesthesiology personnel from Francophone Africa received instruction in techniques of local anesthesia at JHPIEGO's regional training center in Tunisia. The Congo, Malawi, Togo, and Zimbabwe received their first JHPIEGO-donated laparoscopic equipment this year, following the training of physicians from those countries.

JHPIEGO sponsored participants and/or lecturers at national conferences in Kenya (nurse-midwifery, reproductive health in Africa), Rwanda (reproductive

health programs for that country), and Senegal (29th Congress of the Federation of French-speaking Gynecologists and Obstetricians). In support of such activities and others related to program development, education, and equipment, JHPIEGO staff and consultants made 47 trips to 19 African countries. These figures do not reflect the consultants' visits arranged by project directors of in-country programs.

For FY'83, the training programs in Kenya, Somalia, Sudan, and Uganda will continue their operations. Although the program in Ibadan, Nigeria was inactive during FY'82, it will recommence activities in FY'83.

In regard to new programs, proposals for in-country training have already been developed for Moshi, Tanzania and Harare, Zimbabwe; program activities are expected to be initiated during the coming fiscal year. Proposals have also been developed for in-country training programs in the Cameroon, Liberia, and Sierra Leone, as well as at Ahmadu Bello University and the University of Benin, both in Nigeria. The Central African Republic and Zaire have requested JHPIEGO support for in-country training programs, and site visits will be made to Mauritania, Senegal, and medical schools in Nigeria to assess program possibilities there.

#### U.S.-based Activities

In addition to conducting programs abroad, during FY'82 JHPIEGO trained a total of 70 physicians and administrators from Africa (the same number as during the previous year) at the Johns Hopkins Educational Center, in Baltimore (Table 3A). Countries represented were Benin, Burundi, the Cameroon, Central African Republic, Gabori, Ghana, Guinea Bissau, Ivory Coast, Kenya, Liberia, Madagascar, Mali, Mauritania, Mauritius, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, Sudan, Tanzania, Togo, Uganda, and for the first time ever in any JHPIEGO program, the Congo. There was 1 African participant in the advances in reproductive health course, and there were 29 in the infertility course, 3 in the microsurgery course, 31 in the administrators' course, and 6 in the academic skills course. As an indirect result of such participation, individuals from at

least 5 countries (Central African Republic, Liberia, Nigeria, Sierra Leone, and Uganda) renewed their interest in or actually developed plans for collaborative in-country training projects.

#### In-country Activities

JHPIEGO conducts a number of in-country programs in Africa. Although there is no JHPIEGO clinical practice center in the African region, clinical practice for Francophone African trainees is offered at JHPIEGO-supported clinical practice centers in Tunisia, while Anglophone trainees from Africa may attend clinical practice at the JHPIEGO clinical practice centers in Jamaica or Egypt. Table 4 shows by country the number of health professionals trained at clinical practice centers during FY'82. With the development of new in-country projects planned for Cameroon, Liberia, and Sierra Leone, additional sites for clinical practice and regional training should become operational during the coming years. Instruction in the preventive care and maintenance of laparoscopic equipment was offered at the JHPIEGO-supported repair and maintenance center in Lagos, Nigeria, in Khartoum, Sudan, and at the newly established repair and maintenance center in Accra, Ghana. These centers are expected to continue their operations during FY'83.

Major training programs are conducted in Kenya, Nigeria, Somalia, Sudan, Uganda, and Zaire, and are described below.

#### KENYA

Project Title: University of Nairobi Human Reproduction Training Center  
Grantee: University of Nairobi Faculty of Medicine,  
Department of Obstetrics and Gynecology

The goal of this program is to train physicians and allied health personnel in modern aspects of reproductive health, including high-risk pregnancy, contraception, and the diagnosis of sexually transmitted diseases. During FY'82, a total of 19 physicians and nurses participated in a two-week update course in reproductive health care. The course provided

instruction in pelvic examinations for cervical cancer, the diagnosis and management of infertility, and family planning methods. Also, 6 physicians attended a two-week didactic and clinical endoscopy training course.

In November 1981, JHPIEGO sponsored 38 participants at a nurse-midwives' conference in Nairobi. In February 1982, JHPIEGO sponsored an international conference of obstetricians and gynecologists, in the same city. The theme of the conference was reproductive health in Africa. The monograph of the proceedings of this conference, which addresses the major reproductive health care problems in Africa, is in the editorial phase of development. It will be utilized in training programs in Kenya and other African countries.

In FY'83, the program in Kenya will be continued. Activities projected include a maintenance workshop, an endoscopy course, and four update courses. The update courses will be held at four provincial hospitals, in order to accelerate the regionalization of training.

#### NIGERIA

Project Title: University of Ibadan Endoscopic Training Project  
Grantee: University of Ibadan Faculty of Medicine,  
of Obstetrics and Gynecology

The goal of this program is to train gynecologists, general surgeons, and graduating residents in endoscopy and reproductive health, with an emphasis on diagnostic and therapeutic uses of endoscopic techniques. During FY'82, training activities were suspended temporarily due to construction and renovation at the training hospital. Training will resume and continue through FY'83. It is anticipated that 20 physicians from government and university hospitals will be trained in this program.

#### Other In-country Activities

During FY'82, the Femope Marketing Company continued its activities as a repair and maintenance center for JHPIEGO laparoscopic equipment in Nigeria. A site visit by a JHPIEGO staff member was made to Nigeria in August 1982, at which time proposals were developed for in-country training programs with the Ahmadu Bello University and the University of Benin Teaching Hospital. These programs should become operational in FY'83.

Also, other Nigerian medical schools have expressed an interest in developing training programs; site visits to develop proposals for these projects are planned for FY'83.

### SOMALIA

Project Title: Somali Reproductive Health Program  
Grantee: Benadir Hospital, on behalf of the Ministry of Health and the Ministry of Higher Education

This was the second year of a three-year project whose purpose it is to provide pragmatic education in reproductive health to primary care physicians staffing district and regional health care facilities in rural Somalia. It is intended also to upgrade the teaching skills and knowledge in reproductive health of educators of nurses. During FY'81, the program's first year of operation, a total of 39 physicians and 15 nurses received training at Benadir Hospital, in Mogadishu. In FY'82, the two courses offered for physicians were attended by 39 persons, bringing to 78 the total of physicians trained under this program.

This program will be continued in FY'83. Primary care physicians from rural Somalia will receive didactic and practical training in high-risk pregnancy, infertility, gynecologic infection, child spacing, and pediatrics. In addition, a similar type of program will be introduced to fourth-year medical students during their rotation at the Benadir Maternity and Children's Hospital. The third year of the program is intended to complement the service and training projects which are being developed and implemented by USAID, UNFPA, WHO, and INTRAH for Somali public health nurses, nurse-midwives, and community health workers.

### SUDAN

Project Title: Continuing Education in Reproductive Health for Medical Officers  
Grantee: Ministry of Health

The purpose of this project is to develop for medical officers in rural Sudan a program of continuing education in maternal and child health, reproductive health care, and other relevant health topics. Due to some in-country administrative problems during FY'82, the

training program was temporarily discontinued. However, the repair and maintenance center in Khartoum was fully operational.

Funding for the training program has been awarded for FY'83. It is anticipated that a total of 140 trainees will attend 8 different courses given in Khartoum, Medani, and Port Sudan. Also, activity at the repair and maintenance center will be continued.

#### UGANDA

Project Title: Uganda Reproductive Health Training Program for Health Professionals

Grantee: Makerere University, Kampala, Uganda

The purpose of this new project is to support the development within Uganda of a pilot postgraduate training program for approximately 20 health professionals from government, public, and private institutions, in order to improve the reproductive health of women and the health of children in Uganda. The program will provide didactic training in reproductive health, including administration of family planning programs and curriculum development for the training of health personnel. In September 1982, the program's first course was held, with a total of 11 physicians in attendance.

During FY'83, another session of the program will be held in order to complete the training activity. The program will be expanded in FY'83 and FY'84 to include training for nurses and medical students from the various districts of Uganda.

#### ZAIRE

Project Title: Zaire Reproductive Health Training Program for Nurses

Grantee: Evangelical Medical Center of Nyankunde, on behalf of the Ministry of Health

The purpose of this project was to provide pragmatic education in reproductive health to trained nurses staffing 8 hospitals and 15 clinics and dispensaries located in Upper Zaire, a region which is primarily rural. The program was designed to further knowledge in family planning techniques and the provision of services, through a structured program of didactic

lectures, demonstrations, management seminars, and clinical practice tutorials. During FY'81, a two-week course was attended by 61 nurses. It covered all phases of reproductive health, with an emphasis on family planning services. During the FY'82 program year, no further courses were held, however, 31 site visits to the institutions of nurses who had participated in the training course were conducted for follow-up and evaluation. It was reported by the project director that many of the sites are actively involved in family planning and the provision of contraceptive services and that the seminar and visits were a tremendous boost to the morale of the nursing staff in the region of the Upper Zaire. The project director emphasized that the positive influence of the training would continue for many years.

#### Other In-country Activities

During FY'82, the JHPIEGO regional development officer for Africa was a member of a design team to assess needs for training and services in government and private hospitals throughout Zaire. Fifty-six institutions in this central African country were visited, and JHPIEGO, during FY'83, will assist in meeting the in-country training needs.

## 2. Asia (Introduction)

Because of the large population within its confines, Asia represents an important region in terms of JHPIEGO's initiatives in reproductive health education. Generally speaking, the countries here tend to be more sophisticated in regard to established health infrastructures and the consideration given to reproductive health as a national priority. Since many countries here already have well-defined programs or policies relating to fertility management, JHPIEGO's programs in Asia may place greater emphasis on controlling population growth than do its programs in other regions. However, the relationship of fertility management to other aspects of reproductive health is presented also.

In light of the relative sophistication of health systems and service delivery, the activities organized by JHPIEGO in Asia place some emphasis on complementing existing programs. The training of teams (physician plus nurse, paramedic, or technician) is emphasized. Training is directed toward paramedics and nurses who staff service centers that feed into the larger teaching centers.

Since its inception, JHPIEGO has trained a total of 1,497 physicians, nurses, and administrators from this region (Table 1B). Of this cumulative total, 1,068 persons, or 71%, were trained in national and regional programs (Table 2B). The remainder were trained in U.S.-based centers.

During FY'82, there were 323 health professionals from Asia trained in JHPIEGO programs (Table 1A), approximately 50% more than during the previous fiscal year. The vast majority, or 291 of the 323 participants, were trained overseas, in regional and national programs (Table 2A). Nurses represented over 40% of all overseas trainees from Asia, reflecting the heightened emphasis on the team approach and on the training of auxiliary personnel. For the first time, a participant from Western Samoa attended a JHPIEGO-sponsored course. In support of such training and other activities related to program development, education, and

equipment, JHPIEGO staff and U.S. and international consultants made 43 trips to 11 countries in Asia. As a result of some of these trips, new programs for Burma, India, Sri Lanka, and the South Pacific are under active development. These travel figures include trips arranged for the JHPIEGO International Council meeting in Bangkok, but do not reflect consultants' visits arranged by project directors of in-country programs.

In February and March, the JHPIEGO International Council held its 1982 meeting in Bangkok, Thailand. JHPIEGO supported the attendance of 19 participants at the six-day meeting, including members of the JHPIEGO staff, board of trustees, and international council. Presentations were made by each council member about activities and trends in reproductive health in his or her country, and one entire session was devoted to presentations by guest speakers on reproductive health and family planning in Thailand.

During FY'83, it is expected that training will continue in Malaysia and the Philippines, as will the national training in Burma and other activities in India. In Indonesia, a program will be conducted to provide training in family planning techniques and service administration to hospital teams of non-Ob/Gyn physicians, administrators, and nurses. Expected to participate are teams of 3 persons each from 35 hospitals. A training program in laparoscopy will be conducted in Sri Lanka and in Thailand, in an effort to increase interest and utilization of this important technique.

#### U.S.-based Activities

In addition to conducting programs abroad, during FY'82 JHPIEGO trained 32 physicians and administrators from Asia at the Johns Hopkins Educational Center, in Baltimore (Table 3A). This figure represents an increase of about 50% over the previous year's Asian trainees. Countries represented were Bangladesh, Burma, Fiji, India, Indonesia, Malaysia, Papua New Guinea, the

Philippines, and Thailand. As shown in Table 3A, there were 9 Asian participants in the infertility course, 12 in the administrators' course, and 11 in the academic skills course.

#### In-country Activities

JHPIEGO conducts a number of in-country programs in Asia. Clinical practice centers, which provide surgical training in minilaparotomy or laparoscopy, are located in Korea and the Philippines. Table 7 shows by country the number of health professionals trained during FY'82. Repair and maintenance centers, which provide instruction in preventive maintenance and care of laparoscopic equipment, were functioning are located in Malaysia, Pakistan, the Philippines, and for the first time, Thailand.

Major training programs are conducted in Burma, Malaysia, Pakistan, the Philippines, and Thailand. They are described below.

#### BURMA

Project Title: Burma Laparoscopy Training Program  
Grantee: Government of Burma

This special project was the second laparoscopic training program to be offered by JHPIEGO in Burma. The purpose of the project is to train the qualified obstetricians and nurses of Burma in the use of laparoscopic equipment in conjunction with local anesthesia. In FY'81, a total of 25 physicians and nurses from the principal medical institutions in Burma received team training in laparoscopy. That course was so successful that another course was requested for the following year. During FY'82, more than twice as many persons (28 physicians, 24 nurses) attended the two-week course, which provided didactic and clinical training in the team approach to laparoscopy. As a result of this training, enthusiasm for laparoscopy and other family planning approaches appears to be increasing, especially among the health professionals in Burma.

A third and possibly final laparoscopy course was recommended for FY'83 in order to extend training to medical personnel in the regional hospitals outside Rangoon.

#### MALAYSIA

**Project Title:** Malaysian Reproductive Health and Endoscopy Training Program for Physicians and Nurses

**Grantee:** National Family Planning Board  
Government of Malaysia

FY'82 was the first year of training activity in this three-year program. The program is intended to provide postgraduate training in reproductive health and endoscopy to physicians and nurses in Malaysia who staff rural district hospitals and outpatient family planning facilities of the National Family Planning Board and the Federation of Family Planning Associations. During FY'82, a total of 25 persons (15 physicians and 10 nurses) received training, with particular emphasis on interval sterilization. During the reporting period, clinical practice and field visits by JHPIEGO consultants for installation of equipment were completed for the physicians and nurses trained in the previous fiscal year.

During FY'83, it is expected that funding will be continued for the training program and the repair and maintenance center, in Kuala Lumpur. Also, plans are under way for the creation of a diploma program in family planning for general practitioners.

#### PAKISTAN

**Project Title:** National Endoscopy, Surgical Contraception, and Reproductive Health Program

**Grantee:** Ministry of Health

During FY'82, JHPIEGO continued support of a repair and maintenance center for endoscopic equipment in Pakistan. Plans for FY'83 include support of a maintenance center and training of Pakistani physicians.

## THE PHILIPPINES

Project Title: Philippines Endoscopy Training Program

Grantee: Mary Johnston Hospital

The JHPIEGO-sponsored project at the Mary Johnston Hospital has been in existence since FY'79. This major training program has been national as well as regional in scope with participants coming from the Philippines as well as other Asian countries. FY'82 was the second year of a three-year project to train gynecologists in the diagnostic and therapeutic use of the laparoscope and related techniques. During the program's first year of operation, a total of 83 physicians and nurses took courses with a clinical component. During FY'82, training activity increased substantially, with a total of 107 health professionals attending clinical courses. These individuals included 57 physicians who received didactic and clinical instruction in the use of laparoscopic equipment and 50 nurses who learned the techniques of assisting with laparoscopic procedures and maintenance of equipment. Of the total 107 trainees in clinical courses, 16 were regional participants from Fiji, Nepal, Papua New Guinea, Solomon Islands, Sri Lanka, Tonga, and Western Samoa. An additional 65 physicians and 35 nurses attended a program evaluation conference for Philippine graduates of the Fertility Care Center of Mary Johnston Hospital to discuss and evaluate their posttraining endoscopy activities.

### Other In-country Activities

During FY'82, a reproductive health education project (REHEP) was developed for students at the School of Medicine of the University of Philippines. This project will result in more comprehensive instruction in reproductive health as well as family planning at the medical student level, in order to institutionalize such concepts and instill them prior to graduation. Two technicians from Thailand were trained by JHPIEGO at the repair and maintenance center in Manila, which is directed by the Ministry of Health.

For FY'83, the clinical endoscopy project at Mary Johnston Hospital will continue its operations, and the REHEP program at the University of Philippines will commence training activity.

## THAILAND

**Project Title:** The Standardization of Curriculum in Family Planning for Medical Schools in Thailand

**Grantee:** The National Family Planning Program, in collaboration with the Faculty of Medicine, Chulalongkorn University Hospital and Faculty of Medicine, Siriraj Hospital, Mahidol University.

The purpose of this program was to conduct a three-day workshop meeting of university officials to discuss and standardize curriculum in family planning in the seven medical schools in Thailand and to hold a day-long follow-up meeting later in the year to assess the progress in implementation of the workshop's recommendations. The agreement for this program was finalized in FY'81; the workshop was held in FY'82. It was agreed to hold the follow-up meeting one year later, during FY'83.

**Project Title:** Workshop in Gynecologic Microsurgery for Reversal of Sterilization

**Grantee:** Department of Obstetrics and Gynecology, Faculty of Medicine, Chulalongkorn University

This project was intended to increase the availability of gynecologic reversal of sterilization by providing two weeks of didactic and clinical instruction to gynecologists or surgeons from major medical institutions in Thailand. The program was initiated in response to the increasing numbers of Thai women requesting sterilization. The increase of such requests is attributed to the enormous popularity of voluntary sterilization, coupled with certain changes (divorce, remarriage, death of a spouse or child) in the demographic profile of Thai women. A total of six physicians received training in this program during FY'82.

### Other In-country Activities

Plans are under way to develop a training program to increase interest in and utilization of techniques of laparoscopy in many regional and provincial centers across that country.

### 3. Latin America (Introduction)

In terms of policies and programs pertaining to the fertility control aspects of reproductive health, the countries in the Latin American region range from the relatively advanced to the transitional. Even in countries with limited official authority in the area of fertility management, the majority of medical institutions and health care providers are able to provide at least some type of service.

For countries actively involved in the control of population growth, the in-country programs organized by JHPIEGO are similar to those organized in Asia. By emphasizing the team approach to the delivery of service and the institutionalization of training of health professionals at all levels, such programs complement the training activities already in existence. In other countries, those with a less clearly defined orientation toward fertility management, JHPIEGO programs are designed to actually help develop a health infrastructure. In these programs, training is directed toward the health professionals such as physicians, nurses, nurse-practitioners, and paramedics who will eventually staff the primary, secondary, and tertiary health care facilities of those countries. Reproductive health education programs (REHEP) have been instituted or planned in a number of schools of medicine and nursing in Latin America.

Since its inception, JHPIEGO has trained overseas and in the U.S. a total of 5,873 physicians, nurses, administrators, medical students, and student nurses from Latin America (Table 1B). Of the total, 85% were trained in regional and national training projects in Latin America (Table 2B). The remainder were trained in U.S.-based centers.

During FY'82, training was extended to an unprecedented 3,916 persons from Latin America (Table 1A). This figure includes 51 physicians who took endoscopy training in Colombia during the previous fiscal year but were not recorded in that year's training figures. Of the total shown above, 3,774 participants, or 96%, were

trained in in-country courses (Table 2A). Among these trainees were 3,112 medical and nursing students from Brazil and Mexico who participated in reproductive health courses designed especially for undergraduates. FY'82 was the first year of undergraduate training activity in Mexico, while in Brazil, two more R3HEP projects became active. Such undergraduate training is intended to improve the skills, knowledge, and practices of the health care practitioners of the future. A unique program to disseminate family planning literature to physicians in 32 medically underserved areas in Mexico was initiated in FY'82. The program created an extraordinary demand for reproductive health training. It is anticipated that clinical training of the physicians from that program will continue in FY'83.

Represented for the first time in any JHPIEGO course was the island nation of St. Martin.

A special microsurgery course was offered in Chile. In Colombia, a special project provided training to Mexican anesthesiologist-and-nurse teams. JHPIEGO-donated laparoscopic equipment was installed for the first time in the Caribbean countries of Guadeloupe, Martinique, and St. Martin. In support of such activities and others related to program development, education, and equipment, JHPIEGO staff and consultants made 49 trips to 25 Latin American countries. As a result of these visits, new programs for Brazil, Colombia, Costa Rica, Ecuador, Mexico, Panama, and the Caribbean region are under active consideration. These travel figures do not reflect the consultants' visits arranged by project directors of in-country programs.

In addition to the JHPIEGO trainees described above, an additional 79 deans and medical instructors participated in two coordinating meetings which were held in Mexico prior to the actual implementation of training under the agreement with the Association of Mexican Medical Schools (AMFEM)). These individuals are not reported in the tables showing training activity because they did not actually receive training. They did, however, participate in the JHPIEGO-sponsored project with AMFEM.

For FY'83, activity in the Mexican, Colombian, and Brazilian programs is expected to increase. In Mexico, due to changes brought about by recent elections, training activities will be shifted to newly formed or reconstituted organizations. For Colombia, plans are under way to offer a program which will provide training in the techniques of fertility management to students of all the medical schools in that country. In addition, the PROFAMILIA organization in Colombia will be utilized as a regional center for training professionals from the Latin American region in the techniques of reproductive health. REHEP projects are planned for the federal universities in the Brazilian states of Fortaleza, Para, Parana, and Pernambuco, and in Bolivia, Costa Rica, Ecuador, Honduras, and Panama. Surgical training programs are planned for Honduras, Guatemala, and Panama.

In the Anglophone and Francophone areas of the Caribbean, a project entitled, "The Jamaican Clinical Family Planning Training Program", was developed during FY'82. Nearly 200 physicians and nurses are expected to be trained during FY'83, the first year of this three-year project. The clinical practice program at the University of the West Indies, in Jamaica, will be expanded to the University of the West Indies campus in Trinidad in order to provide an additional training site for physician-nurse teams from the Lesser Antilles Islands. Plans are under way for the development of an in-country training program in Haiti.

#### U.S.-based Activities

In addition to conducting programs abroad, during FY'82 JHPIEGO trained 142 physicians and administrators from Latin America at the Johns Hopkins Educational Center, in Baltimore (Table 3A). Countries represented were Argentina, Bolivia, Brazil, Colombia, the Dominican Republic, Ecuador, El Salvador, Guadeloupe, Guatemala, Haiti, Honduras, Jamaica, Mexico, Panama, Paraguay, Peru, Trinidad, Uruguay, and for the first time in any JHPIEGO course, St. Martin. As shown in Table 3A, there were 45 Latin American participants in the advances in reproductive health course, 30 in the infertility

course, 7 in the microsurgery course, 54 in the administrators course, and 6 in the academic skills course.

#### In-country Activities

JHPIEGO conducts a number of in-country programs in Latin America and the Caribbean. Clinical practice centers, which provide surgical training in minilaparotomy or laparoscopy, were located in Brazil, Colombia, Dominican Republic, Guatemala, Honduras, Jamaica, Mexico, and Panama. French-speaking trainees from the Caribbean may attend clinical practice at JHPIEGO-supported centers in Tunisia. Table 4 shows by country the number of health professionals trained at clinical practice centers during FY'82. Repair and maintenance centers, which provide instruction in preventive maintenance and care of laparoscopic equipment, are located in Colombia, Costa Rica, and El Salvador.

Major training programs are conducted in Brazil, Chile, Colombia, and Mexico, and are described below.

#### BRAZIL

Project Title: Brazilian Family Planning Training and Development Center  
Grantee: Centro de Pesquisas de Assistencia Integrada a Mulher e a Crianca (CPAIME)

This is a national training program implemented in FY'80 by a private nonprofit organization. Its purpose is to provide continuing education in surgical techniques and fertility management to physicians, nurses, and anesthesiologists throughout Brazil. Initially, interest was developed by concentrating on laparoscopy training for specialists. During FY'82, however, as part of an effort of institutionalization and regionalization, minilaparotomy training for nonspecialists was begun at regional training centers staffed by past JHPIEGO participants. During FY'81, there were 141 health professionals trained in this program. During FY'82, the program's third year of operation, a total of 287 persons were trained. This figure includes 69 physicians who attended 4 endoscopy courses, 41 physicians

who attended 7 minilaparotomy courses, 29 physicians who attended 7 anesthesiology courses, 48 nurses who attended 8 clinical courses in endoscopic assistance, as well as 100 physicians who attended a didactic update conference held in December 1981. The courses were conducted at the 12 clinical practice centers maintained by CPAIMC in Rio de Janeiro and other cities throughout Brazil.

For FY'83, a total of 220 physicians, nurses, and anesthesiologists are to be trained; approximately 80 of these trainees are to be regional. A coordinating meeting is expected to be attended by 40 persons. Field visits will be made to trainees of the past year. It is anticipated by the close of FY'83 that a significant proportion of service centers in both the more urban southeast as well as the underserved northeast will have been reached.

Project Title: Santa Maria Reproductive Health Education Program

Grantee: Santa Maria Institute of Reproductive Health (SMIRH)

The purpose of this REHEP project is to train medical students, house officers, and nursing students in the provision of services relating to maternal and child health, family planning, and preventive gynecology. The team approach to such care is emphasized. Offered in conjunction with such programs as CPAIMC, this project provides a continuum of training from the level of the student to that of the postgraduate and is supported in order to increase the impact of reproductive health services. During FY'81, a total of 63 persons were trained in this program. During FY'82, the number of trainees increased to 120. This figure includes 36 medical students, 80 student nurses, and 4 nurses who took a clinical endoscopy course.

For FY'83, approximately 100 medical and nursing students are expected to participate in this project. Moreover, the SMIRH project director will continue to actively pursue approaches to introducing the REHEP concept of reproductive health training to a larger number of medical schools in Brazil.

Project Title: Belo Horizonte Reproductive Health Education Program  
Grantee: Centro de Estudos e Pesquisa Clovis Salgado (CEPECS)

FY'82 was the first year of training activity in this new REHEP program. Its purpose is to provide reproductive health education to medical, nursing, and auxiliary nursing students from the Federal University in the Brazilian state of Minas Gerais, the capital of which is Belo Horizonte. The program is intended to improve the knowledge, attitudes, and practice in reproductive health of future health professionals, in order to ultimately provide improved services in reproductive health. Students received didactic and clinical training in the 120-hour format, which is standard for REHEP projects. During the reporting period, a total of 221 students were trained: 141 medical students and 80 student nurses.

For FY'83, training will be extended to approximately 300 students.

#### Other In-country Activities

JHPIEGO arranged to provide a consultant to participate in a microsurgery course which was funded privately by another organization. Also, JHPIEGO staff visited Brazil in the summer of 1982 in order to review existing programs in Belo Horizonte, Rio de Janeiro, and Santa Maria, and to discuss the possibility of providing assistance for the implementation of REHEP programs at the universities in Recife and Teresina.

#### CHILE

Project Title: Third Latin American Course in Tubal Microsurgery  
Grantee: Hospital del Salvador, University of Chile

This special project was intended to train 7 physicians from Chile and other Latin American countries in tubal microsurgery and the management and treatment of infertility. Objectives were to mobilize additional microsurgery training centers in Latin America and to promote further education by preparing instructors for reanastomosis and the treatment of infertility. The course, held in November 1982, was attended by 7 participants: 3 from Chile, 3 from Brazil, and 1 from Guatemala.

Since the provision of training, which allows for the potential reversal of sterilization in exceptional instances, is felt to enhance the acceptability of permanent contraception in this country, it is expected that a similar project will be undertaken again, during FY'83 or FY'84.

### COLOMBIA

Project Title: Colombian National Program of Pelvic Endoscopy  
and Surgical Techniques

Grantee: PROFAMILIA

This is a national training program administered by a private, nonprofit institution which is the IPPF affiliate in Colombia. The programs provide training in endoscopy, minilaparotomy, operating room techniques, and use of local anesthesia to physicians and nurse-technicians in Colombia. The FY'81 annual report shows that 98 persons received training in this program. In fact, an additional 51 physicians and nurses had received training during that reporting period, for an amended total of 149 trainees. During FY'82, an additional 57 physicians were trained in the techniques of minilaparotomy, one physician was trained in laparoscopy, and 47 nurses were trained in techniques of assisting during minilaparotomy procedures. For the most part, training was conducted in teams. Under this agreement, therefore, a total of 105 health professionals received training. In a special regional project, detailed in a separate agreement, 5 physicians and 4 nurses from Mexico participated in team training as part of a course on the use of anesthesia during surgical procedures for reproductive health. The 12 clinical practice centers which served as sites for minilaparotomy training and the 8 clinical practice centers for laparoscopy continued their operations. Due to the skill and experience of PROFAMILIA, during FY'83 JHPIEGO will continue to support the training program in reproductive health with an emphasis on minilaparotomy and will increase its activity in the regional training of health professionals.

#### Other In-country Activities

JHPIEGO continued support of a repair and maintenance center in Bogota, which services through one main center and seven satellite centers the more than 200 laparoscopic

systems donated to Colombia by AID. Support for this center will continue during FY'83.

An initiative planned for FY'83 is the creation of a medical school project in which educational materials dealing with reproductive health will be distributed to virtually all the medical schools in Colombia. If conditions permit, the expansion of this initiative to a REHEP project will be seriously considered.

#### MEXICO

Project Title: Fertility Management Education - A Special Course for Mexican Medical Schools

Grantee: Association of Mexican Medical Schools (AMFEM)

The objective of this three-year project is to train medical students from the Mexican schools of medicine in the techniques of fertility management. This program differs somewhat in concept from a REHEP project in that family planning is presented in the context of meeting the students' personal needs rather than, initially, the needs of a service population. It is hoped, by enhancing the interest in and acceptability of family planning, that the student-acceptors of today will become the physician-promoters of tomorrow, and that the importance of fertility management will be enhanced on the individual as well as the national level. FY'82 was the first year of training activity in this project, and despite some delays in implementation, a full 26 medical schools participated in the program. A preliminary coordinating conference was attended by 53 professors and instructors. Undergraduates who participated in the special courses themselves numbered an impressive 2,775. To date, this program represents the most extensive effort by JHPIEGO to effectively introduce family planning programs at the level of the student rather than that of the graduate. It is appropriate that this effort is being undertaken in a country of high priority for JHPIEGO's types of endeavors. By the end of this three-year project, it is anticipated that students from all 55 schools of medicine in Mexico will have been reached.

**Project Title:** Mexican Urban Clinic Physicians Program  
**Grantee:** Institute for Family Planning Development and Research (DIPLAF)

The purposes of this project are two-fold. The first is to assist the Coordinacion in the dissemination of 5,000 kits of family planning literature to private physicians who serve the underprivileged in 32 major urban areas. In fact, during FY'82, this project distributed over 8,000 Ministry of Health family planning packets, which created a enormous demand for training. It is expected that this training activity will continue in FY'83.

The second purpose is to provide didactic and clinical instruction in minilaparotomy and IUD insertion to physicians in small clinics of hospitals in Mexico. This training is to be directed by the National Family Planning Coordinating Council of Mexico (the Coordinacion) and sponsored by DIPLAF, the grantee. FY'82 was the first year of training in this program. The first year's goal was to train 120 physicians, but that goal was surpassed, with 140 physicians trained.

In addition to the projects described above, a separate, special course for Mexican anesthesiologist-nurse teams was conducted in Colombia during the reporting period. Participating in this course were 5 anesthesiologists and 4 clinical nurses.

During FY'83, due to changes brought about by recent elections, new or revitalized organizations may be selected for the implementation of in-country initiatives.

#### 4. Near East (Introduction)

The Near East presents a multifaceted challenge in terms of JHPIEGO's efforts to provide medical education in reproductive health and to facilitate the improvement of service delivery in that field. Although the major religion here is Islam, the individual countries uphold varying interpretations of Koranic law concerning the management of fertility, infertility, and population growth. Furthermore, there is wide variation in the availability and delivery of health services, particularly in the rural areas. In certain locales, therefore, JHPIEGO's target group may be specialists in obstetrics, gynecology, or surgery, while in other locales, training may be directed toward medical students, nurses, and paramedics. Also, in an effort to encourage the promotion of reproductive health in the region and other African countries, JHPIEGO utilizes certain educational facilities in Egypt, Morocco, and Tunisia as regional training centers.

Since its inception, JHPIEGO has trained 1,456 physicians, nurses, and administrators from the Near East (Table 1B). A full 1,233, or 85%, were trained overseas, at national and regional training centers (Table 2B). During FY'82, there were 446 persons trained from this region at U.S. and overseas centers (Table 1A), representing an increase of nearly 60% over the previous year's training. Over one-third of the 446 participants attended clinical courses for physicians, and nearly as many persons attended clinical courses for nurses. In addition, 75 persons attended an international conference, the JHPIEGO-sponsored First Reproductive Biology Conference, in Egypt, and 56 recent trainees attended a graduate workshop there. In support of this training and other activities related to program development, education, and equipment, JHPIEGO staff and consultants made 28 trips to 10 Near Eastern countries. As a result, regional training efforts in Tunisia were expanded and the long delayed program in Morocco is scheduled to begin soon. Not reflected in these travel figures are the consultants' visits arranged by project directors of in-country programs.

In addition to the JHPIEGO trainees described above, a total of 17 persons attended two coordinating meetings which were held in Turkey with the GDPP to review and evaluate the physician and nurse programs there.

#### U.S.-based Activities

In addition to training health professionals abroad during FY'82, JHPIEGO provided reproductive health education in a wide variety of contexts to 16 physicians and administrators from the Near East at the Johns Hopkins Educational Center, in Baltimore (Table 3A). The countries represented were Egypt, Jordan, Morocco, Tunisia, Turkey, and Yemen Arab Republic. There were 3 Near Eastern participants in the advances in reproductive health course, 6 in the infertility course, 2 in the microsurgery course, 2 in the administrators' course, and 3 in the academic skills course.

#### In-country Activities

JHPIEGO conducts a number of in-country programs in the Near East. Clinical practice centers, which provide surgical training in minilaparotomy or laparoscopy, are located in Egypt, Tunisia, and Turkey. Table 4 shows by country the number of health professionals trained at clinical practice centers during FY'82. A repair and maintenance center, which provides instruction in preventive maintenance and laparoscopic equipment care, was established in Ankara, Turkey during FY'82.

Major training programs are conducted in Egypt, Morocco, Tunisia, and Turkey, and are described below.

#### EGYPT

Project Title: Reproductive Health Training Center, Al Azhar University  
Grantee: International Islamic Center for Population Studies  
and Research, Al Azhar University

The objective of this three-year program is to improve maternal and child health and welfare in Egypt and in other African, Asian, and Arab countries, through the training of

physicians and support nursing personnel in modern aspects of reproductive health and in endoscopy. The principal locale for recruitment is the area immediately around Cairo, although recruitment is also carried out elsewhere in Egypt. An unique aspect of this particular program is the participation of an Islamic religious leader, who offers a liberal interpretation of the Koran in regard to family planning.

During FY'82, the program's second year of operation, a total of 59 persons were trained, only three less than in the previous year. The three courses for physicians consisted of didactic training and clinical practice. These were attended by 29 physicians, three of whom were regional trainees from Lesotho, Liberia, and Sudan. The 2 courses for nurses consisted of instruction in reproductive health and maintenance of laparoscopic equipment. They were attended by 30 nurses, four of whom were regional trainees from Yemen Arab Republic. Field visits to the previous year's trainees were completed and laparoscopic equipment was installed.

It is expected that training in this in-country program will continue in FY'83, in light of the on-going demand for this type of training.

Project Title: Shatby University Hospital, Human Reproduction Training Center  
Grantee: Department of Obstetrics and Gynecology, Shatby University Hospital, Alexandria University

This project is intended to teach physicians and paramedical personnel the current concepts of human reproduction, in order for them to participate more effectively in national programs for the improvement of maternal and child health. While recruitment for this project is carried out primarily in the northern portion of Egypt, non-Egyptians are trained as well.

During FY'82, a total of 219 physicians and nurses were trained in this program; the 4 clinical courses for physicians were attended by 40 persons, including 7 non-Egyptians, and the 4 clinical courses for nurses were attended by 48 persons, including 8 non-Egyptians. Countries of the non-Egyptian, or regional, trainees were Jordan, Kenya, Lebanon, Malawi,

Nigeria, Saudi Arabia, Uganda, Yemen Arab Republic, and Zimbabwe. JHPIEGO also supported in Alexandria a follow-up workshop and an international conference on obstetrics and gynecology; they were attended by 131 physicians. Excluding these 131 participants, the clinical trainees numbered only four less than the previous year's total. Including these 131 participants demonstrates a more than twofold increase in training during FY'82.

During FY'83, this program will continue its operations. Moreover, due to increased interest on the political level in meeting the demand for family planning, the program will be expanded to include 5 courses to teach techniques of IUD insertion to nurses.

#### MOROCCO

Project Title: Moroccan National Educational Program:  
Reproductive Health, Endoscopy, and Laparoscopy

Grantee: Ministry of Public Health

The purpose of this program is to provide didactic and clinical training in the techniques of reproductive health to qualified obstetricians and gynecologists, surgeons, nurses, and nurse-midwives. Instruction includes diagnostic and therapeutic laparoscopy, reproductive health care, and management of fertility and infertility. Although during FY'81, 11 Moroccan nurses and nurse-midwives attended a 3-week workshop in reproductive health which provided clinical practice in family planning techniques, further training activities were delayed through the end of FY'82, due to delays in the opening of the National Training Center in Rabat. This center will be officially opened, however, early in FY'83, and the training center is expected to be operational at that time. Planned for FY'83 are a total of 4 courses in reproductive health and laparoscopy for physicians, 4 courses for operating theatre nurses, and 4 courses for nurse and nurse-midwives. Once it has proven to be effective, the educational program will be expanded to function also as a center for regional training.

## TUNISIA

Project Title: Tunisian National Education Program in Reproductive Health, Endoscopy, and Laparoscopy

Grantee: National Office for Family Planning and Population (ONPFP), Ministry of Health

FY'82 represented the fourth year of collaboration between the JHPIEGO and the ONPFP for in-country training activities, which began in June 1978. The purpose of this program is to continue support of didactic and clinical training in the techniques of reproductive health. The program is intended for practicing surgeons, recently graduated obstetric/gynecologic surgeons, nurses, anesthesiologists, and anesthesiologists from the Tunisian government's health system and from other Francophone countries in Africa, the Caribbean, and the Near East. The objectives of training are to improve maternal and child health care and reduce maternal mortality and morbidity in these countries. This program represents the first major training effort in reproductive health for Francophone Africa and has served as a catalyst for the development of other projects, such as those in Morocco and Zaire.

A total of 98 health professionals received training in Tunisia during FY'82. In addition to the 60 Tunisians trained under this program, a total of 38 regional health professionals were trained from Algeria, Burundi, Congo, Gabon, French Guiana, Haiti, Madagascar, Mali, Martinique, Mauritania, Niger, Senegal, Togo, Upper Volta, and Zaire. Trainees included 40 physicians, 22 nurses who assist with laparoscopic procedures in the operating theater, as well as the 36 anesthesiologists and anesthesiologists who participated in a new and highly successful component of the program: the courses organized for anesthesia personnel.

During FY'83, the program will be continued and expanded to provide 10 sessions of training to a total of 185 health professionals from Tunisia and Francophone African, Caribbean, and Near Eastern countries. Trainees will include physicians and residents in obstetrics/gynecology and surgery, general physicians, anesthesiologists, anesthesiologists, and nurses in fields related to reproductive health. New courses projected for this fifth program year will include family planning courses with emphasis on training in techniques of

contraception, for physicians and nurses. Also in FY'83, JHPIEGO will assume responsibility for supporting the Tunisian repair and maintenance center which is presently under the auspices of the ONPFP.

### TURKEY

Project Title: Turkish National Endoscopy Program: A Program for Obstetricians and Gynecologists and Nurses

Grantee: General Directorate of Population and Planning,  
Ministry of Health

The purpose of this project is the support of a 3-year in-country program for the training of government obstetricians, gynecologists, nurses, and technicians in techniques related to reproductive health. The program evolved from the initial U.S.-based training of key project staff, which was followed by a special administrators' course for Ministry of Health personnel from the main provinces of Turkey. During FY'82, a total of 40 physicians were trained under this program, and 65 nurses received didactic and clinical training in the delivery of endoscopic services and the care and maintenance of endoscopic equipment. In April 1982, a coordinating meeting for physicians and administrators was held in Ankara to discuss the training program and various aspects of laparoscopic activity in Turkey. This meeting was attended by a JHPIEGO regional development officer. Also, a repair and maintenance center was established in Ankara, at the General Directorate of Family Planning and Maternal and Child Health.

During FY'83, support for the training program and the maintenance center will be continued. Furthermore, since the liberalization of family planning laws is expected to come about shortly, the demand for trained personnel to provide expanded services is expected to increase.

C. U.S. EDUCATIONAL PROGRAMS (The Johns Hopkins University School of Medicine)

The Johns Hopkins Educational Programs for JHPIEGO

The continuation of training in the U.S. assists JHPIEGO staff in identifying key leaders in the field of reproductive health from developing countries. Such individuals, after meeting with JHPIEGO's regional office staff, often formulate strategies for the development of JHPIEGO-supported programs in their own countries as a result of their U.S. training. During FY'82, for instance, the training of key personnel from the Cameroon, Liberia, Nigeria, Uganda, and Zimbabwe has resulted in the development of new programs for the African region. Similar examples may be cited for other regions of the world, as well.

Under a tuition agreement with JHPIEGO, the Department of Gynecology and Obstetrics of the Johns Hopkins University School of Medicine organizes courses for physicians and other health personnel from developing countries. These courses are conducted at the Johns Hopkins Educational Center in Baltimore. JHPIEGO maintains a small staff known as the JHPIEGO International Training Center, which serves as a focal point for the trainees during their participation in the courses provided by Johns Hopkins. The JHPIEGO training officer monitors the courses provided by Johns Hopkins and coordinates with faculty of the medical school's Department of Gynecology and Obstetrics for the development and presentation of these courses.

This year, 260 trainees (Table 3A) from 63 countries participated in U.S.-based programs. Nearly half of those countries were African. New countries represented by U.S. trainees were the Congo and St. Martin. For the first time, participants were from the Congo and Fiji represented in the JHPIEGO course for administrators. That course continues to serve the important purpose of mobilizing national support in the countries of the participants for the development of strategies to improve reproductive and maternal and child health care.

During FY'82, the following courses were conducted at the Johns Hopkins Educational Center:

- "Advances in Reproductive Health for Physicians",  
(offered twice, in Spanish, for a total of 49 participants)
- "Management of the Infertile Couple",  
(offered once each in French, Spanish, and English for, a total of 74 participants)
- "Microsurgery for Tubal Reanastomosis",  
(offered twice, in English, for a total of 12 participants)
- "Advances in Reproductive Health for Administrators of Family Health and Family Planning Programs",  
(offered once each in English, French, Spanish, and Portuguese, for a total of 99 participants), and
- "Academic Skills for Medical School Faculty in Reproductive Health",  
(offered twice, in English, for a total of 26 participants).

The major objective of all JHPIEGO courses is the improvement of reproductive health. To achieve this objective, there has been developed a core curriculum which addresses:

- The concept of reproductive health and the management of fertility,
- Critical issues in maternal and child health,
- Population growth and its relationship to health, economic welfare, social well-being, and
- Recent advances in the prevention and management of reproductive health.

Each of the courses listed above has been described in past annual reports and will not be described in detail here. The reader may refer to the annual report for FY'81 for a more detailed description of these courses.

Course content for all educational programs is continuously revised to reflect suggestions from trainees and current developments in the field. This year, for example, sessions were added on postpartum contraception and contraceptive prevalence surveys. Also, in the academic skills course, sessions were added on "Practical Applications of Obstetrics and Gynecological Research". The sessions allowed an informal exchange

between faculty and course participants regarding the design and application of research that faculty members have published in major journals. Such sessions not only highlighted practical problems in conducting research but also gave participants further insight into how the appropriate application of well-designed research can provide answers to many pragmatic questions relative to the provision of reproductive health care.

Field visits were reinstated in most courses which permitted participants to observe outpatient reproductive health care and infertility centers. For example, a visit was made to the Women's Health Care Center East, a maternity center located adjacent to the Johns Hopkins Hospital. This visit enabled participants to better understand the community-based orientation to maternal and child health and family planning services and to see a working demonstration of the team approach to the delivery of health care. Other state and local facilities were visited also.

With specific regard to the administration of courses, the pretest and posttest for each course were revised and updated, and an increasing number of lecture outlines and summaries were translated for distribution in the foreign language sessions. Course materials were developed and distributed to participants regarding the activities of many of the other AID donor agencies, including Family Planning International Assistance, the Pathfinder Fund, and the International Fertility Research Project. Services and educational materials offered by these and other organizations were discussed, and linkages were encouraged. Such activities are believed to maximize the value of the participants' time spent in the United States and to build upon and supplement the efforts being made by JHPIEGO.

During the latter part of the fiscal year, an in-depth review of the curriculum was made in planning activities for FY'83. Regarding course content, it was decided to increase the emphasis on male fertility control and natural family planning, and to revise the section on administration present in the JHPIEGO course for administrators. In the matter of scheduling courses for the coming fiscal year, it was decided not to offer the

general clinical course, "Advances in Reproductive Health for Physicians", since this course is now being conducted in many overseas centers. A microsurgery course in French will be developed in order to make the technique more widely available in Francophone Africa. Also, because of the increasing world-wide recognition of reproductive health problems related to sexually transmitted diseases and the lack of attention to this topic, a course entitled, "Promoting Reproductive Health Through the Management of Sexually Transmitted Diseases" (STDs) will be offered. Emphasized in the course will be the role of family planning as a possibly preventive measure for STDs. The course will be offered twice during the next fiscal year, with the first session taught in French and the second in English. Participants in the first session would participate also in a special program, "Reproductive Health in the 1980's", to be co-sponsored by JHPIEGO and the American College of Obstetricians and Gynecologists. The special program is to be offered immediately following the Tenth World Congress of Obstetricians and Gynecologists, which is to be held in San Francisco, in October 1982. A brief description follows of the STD course planned for FY'83.

#### Promoting Reproductive Health Through the Management of Sexually Transmitted Diseases

Sexually transmitted diseases are an important public health problem in both the developed and the developing world. Recent studies have suggested that certain methods of family planning may have a preventive effect on sexually transmitted diseases. Nevertheless, few treatment programs for STDs have integrated the provision of family planning into their services. The two-week course on STDs to be offered by JHPIEGO will:

- Provide an in-depth review of recent data indicating that certain family planning methods may serve to prevent sexually transmitted diseases,
- Review the role of family planning services in the detection and treatment of STDs,
- Review strategies for integrating family planning into programs of STD control, and

- Emphasize the promotion of reproductive health through the detection, management, treatment, and prevention of STDs.

Discussions will be held on the mechanisms by which barrier methods of contraception and oral contraceptives may decrease the risk of sexually transmitted diseases by either providing a toxic effect on the STD-causing agent (barrier methods) or decreasing the ascent of organisms to the upper genital tract (oral contraceptives). The impact of STDs on maternal mortality and on human reproduction and fertility will be reviewed. Also covered will be current treatment modalities, including an emphasis on the development of programs of STD prevention, including family planning.

The overall goal of the program is to provide those attending with the skills and attitudes necessary to enable them, upon return to their home institutions, to effectively develop programs focusing on the promotion of reproductive health through the integration of STD management and fertility management.

## D. SUPPORT OF EDUCATION AND TRAINING

### 1. Repair and Maintenance Centers

JHPIEGO continued to emphasize the development abroad of repair and maintenance centers for laparoscopic equipment. In FY'81, JHPIEGO supported existing repair and maintenance centers in Colombia, Costa Rica, Malaysia, Nigeria, Pakistan, the Philippines, Sudan, Thailand, and Turkey, and new centers in Brazil and Ghana. In El Salvador, a maintenance center for which no agreement has been signed continues to be supported by JHPIEGO at the request of AID.

Planned for FY'83 is the establishment of a repair and maintenance center in Tunisia.

### 2. Site Visits and Meetings

In order to provide support for training activities, JHPIEGO staff and consultants make site visits to developing countries for the purposes described below. During FY'82, JHPIEGO arranged for staff and consultants to make 167 trips to 65 different countries. A total of 47 trips were made to 19 countries in Africa, 43 trips to 11 countries in Asia, 49 trips to 25 countries in Latin America, and 28 trips to 10 countries in the Near East. Not reflected in these figures are the consultants' visits arranged by project directors of in-country programs. Also arranged were visits to JHPIEGO by 9 health professionals from developing countries who were already in the U.S. on other business.

#### Program Development and Monitoring

Site trips for program development provide technical assistance, consultation, and advice. JHPIEGO staff and consultants make such trips in order to meet with key officials of ministries of health, medical institutions, and medical and nursing schools, to coordinate efforts with the USAID mission, to meet with key fiscal personnel to determine program requirements and costs, and to discuss with educational leaders the design and curriculum of courses.

Part B of Section II provides specific examples of how such site visits have

resulted in the development of new or on-going in-country educational initiatives.

Site visits for monitoring are made to review the status of the program to determine that its goals and objectives are being met, to resolve difficulties, and to review or revise curriculum of courses and educational materials.

#### Installation and Instruction in Use of Laparoscopic Equipment

Field training visits made for this purpose are provided by JHPIEGO consultants to trainees who have completed clinical practice. The majority of consultants have been trained in JHPIEGO's U.S. didactic, regional, or national programs. Increasingly, consultants from less developed countries carry out these field visits to the institutions of trainees. Consultants instruct hospital staff in the care and maintenance of laparoscopic equipment and safe operative management. Upon completion of the consultant's field visit, the laparoscopic team is fully capable of carrying out laparoscopic procedures. The utilization of consultants from less developed countries demonstrates the institutionalization of JHPIEGO's efforts. The system has been adopted in most in-country programs because it has proven to be effective in providing the adequate training of skilled personnel and a reduction of the maintenance costs of sophisticated equipment.

#### Participation in International Conferences and Meetings

Such participation is undertaken to support the advocacy of reproductive health, to provide authoritative speakers for disseminating updated information in reproductive health, to provide momentum to existing programs by the presence of distinguished experts, and to lend support to programs in the developmental stage so that ministries of health and other groups may become more favorable to the objectives of the programs.

In addition to the annual meeting of the International Council, described elsewhere in this report, JHPIEGO schedules other meetings to review and make recommendations regarding various aspects of its program. The report of

the Educational Materials Committee appears in Section III. During FY'82, plans were under way to schedule a meeting of all JHPIEGO project directors immediately following the FIGO meeting in October 1982. The project director's meeting is intended to evaluate the progress of in-country training and to review curriculum materials and content, teaching methods, and training strategies.

When asked to do so, JHPIEGO offers to ministries of health, Ob/Gyn societies, and other professional organizations assistance in the form of staff and consultant participation in conferences and meetings which be regional, national, or international in scope. During FY'82, JHPIEGO staff and consultants participated in the major conferences and meetings shown below.

#### Africa

- First Midwives' Conference (Nairobi)
- Conference of the Obstetrics and Gynecology Society of Kenya (Nairobi)
- Twenty-ninth Congress of the Federation of French-speaking Gynecologists and Obstetricians (Dakar)

#### Asia

- Eighth Asian and Oceanic Congress of Obstetricians and Gynecologists (Melbourne)
- JHPIEGO International Council Meeting (Bangkok)

#### Latin America

- Martinique AEGOM Association of Gynecology-Oncology (Fort de France)
- Tenth Latin American Congress of Obstetricians and Gynecologists (Santo Domingo)

#### Near East

- Annual Meeting of Moroccan Gynecologic Society (Marrakech)
- First Reproductive Biology Congress (Alexandria)

#### United States

- American Public Health Association Meeting (Los Angeles)

3. Equipment

JHPIEGO continued to provide medical equipment (laparoscopic systems, teaching attachments, spare parts, microsurgery kits, compact light sources, and medical kits for minilaparotomy) to its affiliates overseas. Activity in the area of equipment is described more fully in Section III.

4. Educational Materials

Since appropriate educational materials are frequently unavailable in developing countries, JHPIEGO continued to complement its training efforts by providing books, audiovisual materials, and teaching models to its programs, and by developing pertinent educational materials. Activity in the area of educational materials is described more fully in Section III.

**SECTION III**  
**REVIEW OF OPERATIONS**

## A. ADMINISTRATION OF THE CORPORATION

### 1. Structure and Organization

The affairs of the JHPIEGO Corporation are managed by a Board of Trustees. The officers of the corporation are the chairman and vice-chairman of the board, the president, the treasurer, and the secretary of the corporation.

The Board of Trustees is responsible for the management of the corporation. Its members are appointed by the president of the Johns Hopkins University. The trustees serve voluntarily, without salary, reimbursement, or consultant fees from the corporation. There are at present 8 trustees serving on the Board (Figure 2).

### 2. Officers of the Corporation

The president of the corporation, Dr. Theodore M. King, is chief executive officer. He is responsible for administering the business and the affairs of the corporation. The president is selected by the Board of Trustees.

The treasurer, W. Thomas Barnes, has charge and custody of and is responsible for all funds and securities of the corporation.

The director of the corporation, Dr. Ronald T. Burkman, is chief operating officer. He is responsible directly to the president for program development and implementation.

### 3. International Council

An International Council of outstanding professionals from other countries is selected by the Board of Trustees and appointed by the president of JHPIEGO to provide advice and guidance on matters of program and policy. During FY'82, the International Council was comprised of the 17 experts listed in Figure 3.

In February and March 1982, the International Council met in Bangkok. That meeting provided the opportunity to exchange information on the previous year's activities and trends in the area of reproductive health in the countries of the

Figure 2

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council members. Also presented was a review of JHPIEGO's educational efforts in Thailand, specifically, an evaluation of the laparoscopic training program and a report on the program for standardization of the family planning curriculum for the medical schools of Thailand. The council members formed study groups to consider various topics in the field of reproductive health. They participated also in a site visit to the Maternal and Child Health Center, in Rajaburi.

## B. OPERATING DIVISIONS OF THE CORPORATION

### 1. Director and Staff

The director of JHPIEGO is responsible for the development and implementation of JHPIEGO programs. He directs a line operation with supporting functional units, which provide operational and programmatic support. An organizational chart (Figure 4) is provided for reference on the following page.

#### Donor Support

During the fiscal year, a number of meetings were held with various donor organizations in order to discuss outside funding for JHPIEGO. These organizations included the United Nations Fund for Population Activities (UNFPA), the Educational Foundation of America, the International Planned Parenthood Federation (IPPF), the Kaiser Foundation, the Commonwealth Fund, and the Hewlett Foundation. These efforts are expected to culminate in the probable award by the Hewlett Foundation of funds for the training of physicians from the People's Republic of China sometime in FY'83.

Donor support in the form of educational materials for reproductive health was received from the American College of Obstetricians and Gynecologists, the Center for Population and Family Planning of Columbia University, P-W Communications, and other organizations.

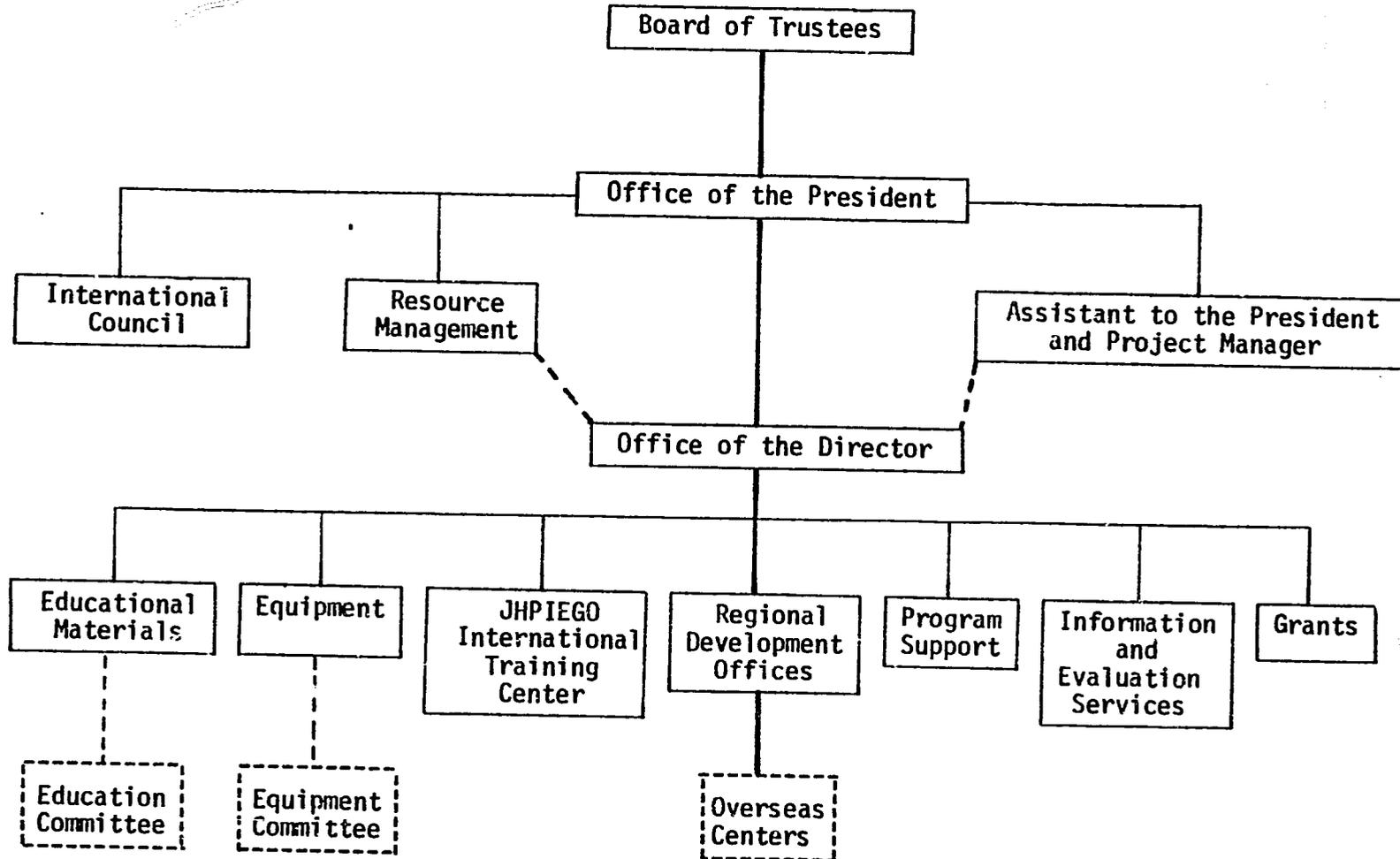
JHPIEGO was approached by the American College of Obstetricians and Gynecologists to conduct a postgraduate course following the October 1982 meeting of the International Federation of Gynecology and Obstetrics, in San Francisco. Tuition monies from this course would allow JHPIEGO to accumulate a small amount of "outside" funds that would be nonrestrictive in nature. Preparations for this course were being finalized at the close of the fiscal year.

#### Coordination with Other Agencies

JHPIEGO established coordinating meetings with other AID intermediaries in order to review program objectives, avoid duplication of efforts, and discuss

Figure 4

JHPIEGO Organizational Chart



priorities. Meetings have been held with Development Associates, the International Project Association for Voluntary Sterilization (IPAVS), the Pathfinder Fund, as well as the Program for International Training in Health (INTRAH). It is anticipated that regular meetings of this nature will continue to be held during the upcoming fiscal year.

#### Coordination of Overseas Activities

The JHPIEGO International Council met in Thailand in February 1982. At this meeting, JHPIEGO's goals and objectives were reviewed. Issues relative to anticipated needs and funding constraints were discussed in some detail.

Preparation were under way to schedule a meeting of JHPIEGO's project directors. Such a meeting would allow a review of new AID requirements for overseas agreements. It would provide an opportunity to further acquaint project directors with monitoring responsibilities and to discuss issues of mutual concern. New and potential project directors from a number of countries will also be asked to participate.

#### Sophistication of Monitoring Capabilities

A systematic review of JHPIEGO's policy and proceedings was undertaken, with the intent of generating an up-to-date policy and procedures manual for use within the organization.

Following AID approval, an audit program with Peat, Marwick, Mitchell was initiated overseas. This audit will be interrelated with the on-going monitoring process within JHPIEGO.

The process of monitoring program activity, in which the grants unit and the information and evaluation services unit play a significant role, was modified to facilitate rapid utilization and computerization of information on trainees and medical institutions. This modification allows regional development officers ready access to pertinent data needed to evaluate

continuing program activity and to establish priorities for future training initiatives. Furthermore, JHPIEGO's publication during FY'82 of a directory of medical schools in the developing world will aid in the more effective targeting of program activities overseas.

2. Assistant to the President

The assistant to the president relates directly to the president and the director of JHPIEGO, and is concerned with policy direction and program management, especially as they relate to the requirements of AID and the JHPIEGO Board of Trustees. In addition to exercising oversight functions and developing corporate plans and requirements, efforts focused on refining within JHPIEGO information systems for program and grant management. The maturing of programs demanded careful monitoring of overseas agreements. The assistant to the president worked closely with the office of resource management, the grants unit, and information and evaluation services to develop the numerous linkages in the system for evaluating, monitoring, and planning programs. Furthermore, the assistant to the president coordinated efforts relating to the 1982 meeting of the International Council, held in Thailand.

3. Office of Resource Management

The office of resource management is responsible for the fiscal and administrative management of the JHPIEGO Corporation. In order to ensure fiscal independence and the integrity of corporate fiscal activities, this office reports directly to the president of JHPIEGO.

During FY'82, the resource management office continued to play an integrated role in most affairs of the Corporation, offering administrative and fiscal support, as needed. Specific areas of accomplishments are described below.

Contracts

The major agreement with the Johns Hopkins University to provide administrative management services and support to JHPIEGO was renewed.

The training agreement with the Johns Hopkins School of Medicine was renegotiated. The Brethren Services Center contact for shipping and warehousing was renewed. A new service contract for audit services was negotiated with Peat, Marwick, Mitchell and Company. Numerous smaller service contracts were negotiated, as needed.

#### Monitoring

A major part of the support provided by this unit is the monthly reporting to each JHPIEGO office of financial activity for subgrants and contracts. These budget and fiscal status reports, instituted during the previous year, have proven to be a valuable tool to the JHPIEGO staff.

#### General Administration

The office continued to be the focal point for the Johns Hopkins University administrative affairs. Since all JHPIEGO staff are Johns Hopkins University employees, the personnel management functions provided by this office continued to be a particularly important activity.

#### Subgrant Support

Another major function of resource management is the ongoing support of activity within training agreements. The review of training proposals requires verification of costs, as well as participation in the review and approval process. This office prepares the budget and justification of agreements, and reviews the actual agreement document.

#### Audit

The audit of qualifying subordinate agreements was coordinated by this office and will become an ongoing responsibility.

#### 4. Regional Development Offices

Regional development offices for Africa, Asia, Latin America, and the Near East are responsible for all JHPIEGO activities and projects in those regions. These activities include the stimulation and development of in-country programs, program

implementation and analysis, and the monitoring of programs, follow-up activities, and former trainees.

Each office is headed by a regional development officer and an assistant regional development officer. Broadly speaking, responsibility for activities in the various regions is divided along linguistic lines. For example, all Spanish-speaking countries in Latin America and the Caribbean fall within the purview of the Latin American Regional Office, while Francophone Caribbean, and Near Eastern countries fall within the purview of the African regional office. The majority of English-speaking countries in the Near East, and Asia, and some in Africa fall within the purview of the regional development office for Asia and the Near East.

#### 5. Program Support

The program support unit is responsible primarily for the admissions and travel activities of JHPIEGO, as well as assistance in the organization of national and international conferences and meetings.

The admissions component of the program support unit assists regional development officers in recruiting candidates, processing applications, and scheduling and assigning participants to courses in the U.S. and overseas. During FY'82, recruitment was directed toward medical schools and teaching hospitals, with an emphasis on African countries. New countries reached through recruitment efforts were in the Congo, St. Martin, and Western Samoa. Recruitment was accomplished by coordinating with regional development officers and with other donor organizations. In order to select participants for 22 courses, 15 meetings of JHPIEGO's Selection Committee were convened during FY'82. More than 675 applications were processed through the admissions office during the year. Of these, 400 applications from candidates in 70 countries were presented at the meetings of the Selection Committee.

The travel component of the program support unit is responsible for planning and processing travel arrangements for all U.S. and overseas trainees, as well as all JHPIEGO staff and consultants. The travel office maintains curricula vitae for both

U.S. and overseas consultants, and provides assistance in identifying consultants suitable for specific assignments as well as new consultants appropriate to training activities. During FY'82, more than 500 trips were processed for trainees, consultants, and staff. Nearly 40% of these trips were made for program development and other educational initiatives overseas.

6. Grants

The grants unit is responsible for writing and processing agreements with overseas institutions, for developing procedures relating to the agreements, and for providing support to regional development officers in the monitoring of the agreements. Other responsibilities include keeping abreast of changes required by the Office of the President and AID in the provisions and language of overseas agreements, and modifying such languages, as appropriate.

During FY'82, this unit developed or helped write 22 new agreements, 11 major amendments, 53 simple amendments, and 8 letters of intent. A total of 73 agreements with overseas institutions were monitored, and the recently developed monthly status report for on-going activities was issued for 44 agreements. The grants unit participated in 91 proposal review meetings during the year. The review meetings for the numerous second-year continuations of overseas programs required extensive analysis of first-year activities. Furthermore, the unit collaborated in the final close-out process of 32 agreements under the previous funding instrument, grant AID/pha-G-1064.

A procedure initiated by the grants unit this year was the institution of implementation meetings. During these brief meetings convened and conducted by the grants unit, the appropriate JHPIEGO staff reviews the basic format and documentation requirements of agreements. Implementation meetings were held for 22 new agreements immediately prior to the mailing of these agreements to the grantees for signature. Another initiative taken by the unit was the development of a grant management manual, to be provided to the project director of each in-

country program. The manual clarifies reporting requirements and facilitates program implementation as well as the grantee's compliance with the conditions of the agreement.

7. Information and Evaluation Services

The information and evaluation services unit (IES) entered a new period of development and sophistication during FY'82. IES was established the previous year to meet JHPIEGO's rapidly growing need for collection, maintenance, and analysis of data. The staff of IES continued to expand and refine existing computer data files, while developing some new ways to maintain data. In addition, the staff researched and evaluated new and sophisticated methods of data analysis and presentation.

During FY'82, IES computerized data on over 2,000 U.S. and in-country trainees, and incorporated the documentation on these trainees into the central records filing system. A medical school directory, providing information on all medical schools around the world, was published after extensive research and editing. This directory will be utilized to facilitate recruitment of individuals from such institutions for in-country or U.S.-based courses. The final copy of a survey designed to evaluate the in-country training projects was completed during FY'82. This survey, to be administered annually to in-country and regional trainees, will allow the assessment of the results of training from a number of perspectives. In conjunction with this survey, an instruction guide was produced for the in-country project directors, describing procedures for administration of this survey. As a result, beginning in FY'83, JHPIEGO should have available more comprehensive information on the outcomes of its in-country training efforts. During the fiscal year, data from the surveys that had been sent to U.S. trainees continued to be collected and analyzed. Furthermore, IES published its annual report for FY'81, which provides an analysis of data from these surveys.

A significant amount of activity in IES centered around conducting computer projects that provide programmatic information for the regional development officers. These projects included:

- A reorganization of several computer files, in order to more effectively meet JHPIEGO's evolving data needs. These recoding projects have reduced errors and allowed quicker retrieval of information for use in planning or in the field.
- The development of statistical programs to analyze data on trainees, institutions, and equipment, and to allow rapid access to and printing of information from the computer files.
- A substantial expansion of the equipment data base so that it now includes pertinent information on all equipment shipped by JHPIEGO, even those items shipped for other donor agencies.
- The development and distribution of several different printouts describing the shipment and placement of equipment. Each printout was designed to meet a specific information need.
- The creation of a computerized monitoring system to facilitate monitoring of in-country documentation by making the recording and cross-referencing of documents more efficient.
- The computerization of demographic data on all countries of the world.

IES will continue to devise new, innovative ways to maintain, retrieve, and present computerized data. The IES directory of trainees, a printout which lists JHPIEGO trainees by institution, will be improved and expanded during FY'83. A survey insert will be designed to evaluate the course initiated in FY'83, "Promoting Reproductive Health through the Management of Sexually Transmitted Diseases". A computer listing will be developed of site visits made by JHPIEGO staff and consultants. IES is establishing a library of journals and reference materials on family planning and population programs. Finally, IES staff will continue to explore

ways to evaluate the accomplishment and institutionalization of program goals and objectives.

8. Equipment

The equipment unit continued during FY'82 to carry out functions in the areas of procurement, shipment, maintenance, and repair of medical equipment utilized in JHPIEGO programs. It also provided certain of these services for the International Project Association for Voluntary Sterilization (IPAVS) and other AID-supported organizations. The Brethren Service Center (BSC) continued to serve as a warehousing and shipping facility. The equipment unit monitored the BSC subcontract and made the necessary shipping arrangements. Transfer of Title for equipment provided by JHPIEGO to recipient institutions was documented by this unit. The equipment unit also provided the necessary repair service, spare parts, or modernized components, at either cost or no cost, whichever would best achieve the purpose of a program. Another aspect of service was the coordination of arrangements for training technicians overseas in the maintenance and repair of equipment, when JHPIEGO was requested to do so by a national organization, ministry of health, or USAID mission. Distribution logs were maintained on all equipment and spare parts.

The unit continued to coordinate for JHPIEGO and the AID-funded donor agencies procurement requirements for the coming year for all major laparoscopic systems, microsurgery kits, and spare parts. Laparoscopic systems and spare or replacement equipment for continued maintenance were procure through the GSA (Table 6).

Toward the middle of the fiscal year, JHPIEGO requested AID to establish a procurement procedure with the General Services Administration (GSA) for laparoscopic systems, spare parts, and medical kits. Several orders were processed subsequently and are pending receipt.

The equipment unit participated in site visits to JHPIEGO-supported repair and maintenance centers in Colombia (Ministry of Health), Costa Rica (Caja Costarricense de Seguro Social), Malaysia (National Family Planning Board), the Philippines (Mary Johnston Hospital), and Thailand (National Family Planning Program). It also assessed the in-country repair and maintenance program in San Salvador which is supported by JHPIEGO and administered by the Ministry of Health of El Salvador.

The equipment unit continued to assume the responsibility of procuring, warehousing, and shipping educational materials for use in JHPIEGO's training programs.

During the reporting period, major portions of activity in this unit were directed toward meeting the maintenance requirements of the equipment previously provided and in use in developing countries, as well as shipping the new equipment described in Table 7. Table 8 shows cumulative total of all equipment shipped by JHPIEGO for its programs, as well as for other AID-sponsored programs.

Institutions in Nigeria, Congo, Fiji, St. Martin, Western Samoa, and Yemen were supplied laparoscopic equipment this year for the very first time. A total of 97 countries in the developing world are now utilizing the 1,408 JHPIEGO-donated laparoscopic systems.

It should be noted that the total dollar value of spare parts shipped during FY'82 for JHPIEGO and other donor agencies amounted to :

<u>JHPIEGC</u>	<u>IPAVS</u>	<u>OTHERS</u>
\$132,810.49	\$40,757.43	\$2,560.04

These figures represent a 68% reduction of spare parts costs since FY'80. The reduction is most likely due to reduced maintenance costs of laparoscopic systems, more efficient utilization of maintenance centers, and phase-out of electrocautery equipment.

Table 4

Laparoscopic Systems  
Shipped by JHPIEGO

October 1, 1981 through September 30, 1982

	JHPIEGO	IPAVS	OTHER
AFRICA	20	-	-
ASIA	43	-	-
LATIN AMERICA	87	72	-
NEAR EAST	93	29	-
TOTAL	243	101	-

Table 7

Laparoscopic Systems Shipped for  
JHPIEGO and Other Aid-Supported Programs

Inception through September 30, 1982

	JHPIEGO	ISTP	USAID	OTHER
AFRICA	150	-	2	6
ASIA	370	22	246	207
LATIN AMERICA	595	11	48	314
NEAR EAST	293	8	6	68
TOTAL	1,408	41	302	595

Table 8

Purchase Orders Placed for Equipment  
for JHPIEGO

October 1, 1981 through September 30, 1982

1.	<u>Maintenance Support</u>	
	Spare Parts	\$ 86,099.13
2.	<u>Teaching Attachments (12 ea.)</u>	27,540.00
3.	<u>Damaged Equipment/Spare Parts Repaired</u>	- 0 -
4.	<u>Microsurgery Kit (19 Kits plus spares)</u>	36,768.64
5.	<u>Compact Light Source (50 ea.)</u>	25,980.00
6.	<u>Major Equipment</u>	
	Laprocator <sup>TM</sup> Systems (100 ea.)	410,000.00
	CC <sub>2</sub> Supply Systems (300 ea.)	<u>92,341.18</u>
	TOTAL	<u>\$678,728.95</u>

A meeting of the ad hoc Equipment Committee is scheduled for early FY'83, during the meeting of JHPIEGO's project directors in Baltimore. At this meeting, held every other year, new or on-going problems encountered with any aspect of the equipment provision program will be discussed.

#### 9. Educational Materials

In addition to providing training and equipment, JHPIEGO donates and develops educational materials in support of its initiatives in the promotion of reproductive health care throughout the developing world. These materials include books, audiovisual aids, and anatomical models. Were it not for JHPIEGO, many of these items would not be available to complement training efforts abroad. In fact, the provision of such materials to institutions overseas often represents the only recent reference sources in reproductive health available in many locales.

The educational materials unit has two broad functions. First, it coordinates with regional development officers to review and update the components of the in-country educational packages for institutions, physicians, nurses, and medical and nursing students. With programmatic information provided by regional development officers, inventory-related information provided by the equipment unit, and fiscal information provided by the resource management office, the educational materials unit projects the needs and the resources available for educational materials. Second, this unit is responsible for editing and/or supervising the production of various educational materials in English, French, and Spanish. The unit generates the JHPIEGO Newsletter and the JHPIEGO Corporation's annual report. The educational materials unit provides in-house editing and translation support as well.

A description follows of JHPIEGO's activity in the area of educational materials.

##### Educational Packages

Educational materials, arranged in educational packages, are normally provided to JHPIEGO-affiliated medical centers, teaching hospitals,

and nursing and medical schools. The packages are available in English, French, and Spanish and are sent to trainees or to a trainee's institution, upon request of a JHPIEGO regional development officer. In cases where the provision of a complete educational package may not be required, regional development officers may request the shipment of specific items only.

During FY'82, JHPIEGO shipped to affiliated institutions and trainees educational materials valued at \$151,643, more than twice as much as shipped during FY'81.

#### Educational Materials Committee

The contents of each educational package are reviewed on a regular basis by the Educational Materials Committee, consisting of JHPIEGO's director, regional development officers, training officer, special consultants, and the editor/coordinator of educational materials. The Committee last met in August 1982. The meeting resulted in the deletion of certain items from some packages, and inclusion of more recent or comprehensive items. As was done during FY'81 with the Spanish-language packages, the English- and French-language packages were reduced in number to three: the basic institutional package (plus optional nurse supplement or audiovisual supplement), the individual physician's package, and the individual nurse's package. The creation of optional supplements permits greater customization of institutional packages and will result in increased cost-effectiveness. Participants in the various courses offered by the Johns Hopkins Educational Center receive different packages of educational materials, depending on course content.

During FY'83, new items for inclusion in educational packages will be reviewed on an on-going basis. The educational materials will again be evaluated by the Educational Materials Committee. Finally, a session of the JHPIEGO project directors' meeting scheduled early in FY'83 will also be devoted entirely to the review of educational materials.

### The Manual of Human Reproduction

In 1978, JHPIEGO assumed responsibility for the distribution of the three-volume teaching aid, The Manual of Human Reproduction, edited by Dr. Howard C. Taylor. The results of a survey analyzing the effectiveness of this manual were published in 1981, in the International Journal of Gynecology and Obstetrics. The survey found that,

"In summary, all responses seem to indicate that The Manual of Human Reproduction has been a successful teaching tool in conveying current information regarding family planning and reproductive health for medical students and other health personnel in countries throughout the world, and that a new edition would be of important assistance in promoting the teaching of reproductive health and family planning in medical schools in developing countries".

During FY'82, JHPIEGO continued to seek additional funding for publication of an updated edition of this manual.

### Development of Educational Materials

During FY'82, JHPIEGO began distribution of the French-language version of its two equipment manuals, Laprocator:™ Preventive Care and Maintenance, and Advanced Laparoscopic Systems: Preventive Care and Maintenance. The manuals are provided to operating theater personnel as a guide to the preventive care and maintenance of laparoscopic equipment in order to assure proper utilization and longevity of equipment. Copies of either manual accompany any laparoscopic equipment donated by JHPIEGO and have been sent to previous recipients of laparoscopic equipment, as well.

By the close of FY'82, the Spanish-language manuals were in the final stages of the publication process and will be distributed during FY'83.

The proceedings of the 1980 meeting of JHPIEGO's International Council, held in Nyeri, Kenya, were published during FY'82 in a

monograph entitled Reproductive Health Education in the Developing World. This publication sets forth the presentations, deliberations, and recommendations of the participants of that meeting, and provides insight into and suggests strategies for improving reproductive health in developing countries.

Editing began during FY'82 of the monograph Reproductive Health in Africa. The monograph is based in part on the proceedings of a meeting of Kenya's Obstetrics and Gynecology Society, which was held in Nairobi. Once published, it will be one of the most comprehensive manuals addressing reproductive health issues in Africa and should prove to be invaluable in the support of many of JHPIEGO's training efforts.

A manual for nurse-midwives, entitled An Introduction to Reproductive Physiology and Contraceptive Methods: A Programmed Instruction, was in the final stages of production and is expected to be placed in distribution during FY'83.

At the close of FY'82, AID approval had been granted for the production of an instructional film entitled Principles of Gynecologic Microsurgery. This film, which demonstrates the application of microsurgical principles for tubal reanastomosis using simplified instrumentation, will be available mid-way through the fiscal year.

#### JHPIEGO Newsletter

This publication continues to be an important tool in communicating information on reproductive health to the JHPIEGO-trained network of health professionals around the world. The Newsletter is published in English, French, and Spanish. During FY'82, JHPIEGO was directed by AID to cut Newsletter production costs by half. Subsequently, production has been cut back from four to three times a year, and total circulation per issue has been reduced from 3,300 to 2,500.

### JHPIEGO Library

The JHPIEGO International Training Center maintains a library of materials pertaining to reproductive health. The library has over 1,100 books and journals, as well as numerous films, slides, and audio and video cassettes. The library is used by participants of JHPIEGO's U.S.-based courses and by JHPIEGO's staff, consultants, and visitors.

### JHPIEGO Exhibit

This portable visual exhibit, frequently carried to international conferences, provides information on the many ways in which JHPIEGO has been and can be of assistance in promoting reproductive health throughout the world. The exhibit was updated during FY'82 to reflect the dramatic increase in JHPIEGO's accomplishments in the areas of educational resources, training programs, surgical equipment and preventive maintenance, and project development.

**SECTION IV**  
**FISCAL REPORT**

RECAP A

AID/pha-G-1064 and DSPE CA-0083

	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81/ 09-30-82	Proj. Disbursements & Unliquidated Obligations 10-01-82/09-30-83	TOTAL
Central Costs	\$7,666,051	\$1,550,920	\$1,885,674	\$11,102,645
Planning/Development	277,331	267,985	712,876	1,258,192
Equipment Cost	9,395,810	77,102	1,767,010	11,239,922
Training Cost	11,371,545	3,202,071	5,151,595	19,725,211
<b>TOTAL</b>	<b>\$28,710,737</b>	<b>\$5,098,078</b>	<b>\$9,517,155</b>	<b>\$43,325,970</b>

RECAP B

AID/pha-G-1064 and DSPE CA-0083

CENTRAL CGSTS

	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Proj. Disbursements and Unliquidated Obligations 10-01-82/09-30-83	TOTAL
Salaries	\$3,717,024	\$892,196	\$1,048,935	\$5,658,155
Fringe Benefits	621,849	173,212	220,277	1,015,338
Consultants	113,582			113,582
Supplies	264,646	37,690	49,500	351,836
Travel	706,666	8,206	8,700	723,572
Office Equipment	77,942	(1,686)	5,700	81,956
Telecommunications	491,855	113,518	143,000	748,373
Space Cost	246,132	90,610	106,000	442,742
Audit Fees	5,518			5,518
Conference Cost	64,271			64,271
Other Direct	294,801	46,104	72,000	412,905
Indirect Cost	1,061,765	191,070	231,562	1,484,397
<b>TOTAL</b>	<b>\$7,666,051</b>	<b>\$1,550,920</b>	<b>\$1,885,674</b>	<b>\$11,102,645</b>

RECAP C

AID/pha-G-1064 and DSPE CA-0083

PLANNING AND DEVELOPMENT

	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Proj. Disbursements and Unliquidated Obligations 10-01-82/09-30-83	TOTAL
Consultants	\$9,500	\$10,400	\$4,600	\$24,500
Travel	176,788	180,174	223,866	580,828
Audit Fees			310,000	310,000
Conference Cost	9,458	10,060	15,270	34,788
Publications	47,510	34,457	72,164	154,131
Indirect Cost	34,075	32,894	86,976	153,945
<b>TOTAL</b>	<b>\$277,331</b>	<b>\$267,985</b>	<b>\$712,876</b>	<b>\$1,258,192</b>

RECAP D

AID/pha-G-1064 and DSPE CA-0083

EQUIPMENT COSTS

	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Proj. Disbursements and Unliquidated Obligations 10-01-82/09-30-83	TOTAL
Procurement	\$8,533,393	(26,678)	\$1,603,267	\$10,109,982
Repairs	216,284	12,984	25,000	254,268
Freight	329,299	45,648	114,789	489,736
Warehousing	225,341	36,941	4,384	266,666
Indirect Cost	91,493	8,207	19,570	119,270
<b>TOTAL</b>	<b>\$9,395,810</b>	<b>\$77,102</b>	<b>1,767,010</b>	<b>\$11,239,922</b>

RECAP E  
AID/pha-G-1064 and DSPE CA-0083  
TRAINING COSTS

	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Proj. Disbursements and Unliquidated Obligations 10-01-82/09-30-83	TOTAL
Participants Cost	\$2,574,360	\$789,315	\$964,878	\$4,328,553
Field Training	653,000	112,894	80,506	846,400
Educational Materials	467,994	156,971	348,252	973,217
Maintenance Agreements	35,923	56,735	92,707	185,365
National/Regional Progs.	1,731,702	1,379,133	2,446,725	5,557,560
Clinical Practice	281,404	114,538	149,229	545,171
U.S. Training Centers	5,288,156	355,766	445,128	6,089,050
Direct Support	336,107	200,141	563,605	1,099,853
Special Projects	2,899	36,578	60,565	100,042
	<b>\$11,371,545</b>	<b>\$3,202,071</b>	<b>\$5,151,595</b>	<b>\$19,725,211</b>

RECAP F  
AID GRANT pha-G-1064

	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Unliquidated Obligations as of 08-31-80	TOTAL
CENTRAL COST	\$6,152,554	\$13,819		\$6,166,373
EQUIPMENT COST	9,130,574	21,381		9,151,955
TRAINING COST	9,877,993	(17,556)	\$118,804	9,979,241
TOTAL	\$25,161,121	\$17,644	\$118,804	\$25,297,569

RECAP G  
 AID GRANT pha-G-1064  
CENTRAL COSTS

	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Unliquidated Obligations as of 08-31-80	TOTAL
Salaries	\$2,869,237			\$2,869,237
Fringe Benefits	463,691			463,691
Consultants	113,582			113,582
Supplies	224,729	(575)		224,154
Travel	700,441	2,262		702,703
Office Equipment	70,407			70,407
Telecommunications	369,604			369,604
Space Cost	151,923	10,520		162,543
Audit Fees	5,518			5,518
Conference Cost	64,271	(295)		63,976
Other Direct	242,440			242,440
Indirect Cost	876,711	1,807		878,518
<b>TOTAL</b>	<b>\$6,152,554</b>	<b>\$13,819</b>		<b>\$6,166,373</b>

RECAP H  
 AID Grant pha-G-1064  
EQUIPMENT COSTS

	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Unliquidated Obligations as of 08-31-80	TOTAL
Procurement	\$8,365,854	\$6,580		\$8,372,434
Repairs	200,940	12,984		213,924
Freight	292,432			292,432
Warehousing	187,165			187,165
Indirect Cost	84,183	1,817		86,000
<b>TOTAL</b>	<b>\$9,130,574</b>	<b>\$21,381</b>		<b>\$9,151,955</b>

RECAP I  
AID GRANT pha-G-1064  
TRAINING COSTS

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	Disbursements 07-01-74 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Unliquidated Obligations as of 08-31-80	TOTAL
Participant Cost	\$1,805,296	\$621		\$1,805,917
Field Training	579,536	2,461		581,997
Educational Mats.	321,880	16,074		337,954
Maintenance Agreements	26,493			26,493
National/Regional Pgms.	1,309,747	(38,243)	118,804	1,390,308
Clinical Practice	223,054	(9,883)		213,171
U.S. Training Centers	5,288,156	6,614		5,294,770
Direct Support	323,831	4,800		328,631
<b>TOTAL</b>	<b>\$9,877,993</b>	<b>(17,556)</b>	<b>\$118,804</b>	<b>\$9,979,241</b>

RECAP J  
AID GRANT DSPE CA-0083

	Disbursement 09-01-80 thru 09-30-81	Disbursement 10-10-81 thru 09-30-82	Proj. Disbursement and Unliquidated Obligations 10-01-82 thru 09-30-83	TOTAL
CENTRAL COST	\$1,513,497	\$1,537,101	\$1,885,674	\$4,936,272
PLANNING AND DEVELOPMENT	277,331	267,985	712,876	1,258,192
EQUIPMENT COST	265,236	55,721	1,767,010	2,087,967
TRAINING COSTS	1,493,552	3,219,627	5,032,791	9,745,970
TOTAL	\$3,549,616	\$5,080,434	\$9,398,351	\$18,028,401

RECAP K  
AID GRANT DSPE-CA-0083

CENTRAL COSTS

	Disbursements 09-01-80 thru 09-30-82	Disbursements 10-01-81 thru 09-30-82	Proj. Disbursements and Unliquidated Obligations as of 10-01-82 thru 09-30-83	TOTAL
Salaries	\$847,787	\$892,196	\$1,048,935	\$2,788,918
Fringe Benefits	158,158	173,212	220,277	551,647
Supplies	39,917	38,265	49,500	127,682
Travel	6,225	5,944	8,700	20,869
Office Equipment	7,535	(1,686)	5,700	11,549
Telecommunications	122,251	113,518	143,000	378,769
Space Costs	94,209	79,990	106,000	280,199
Other Direct	52,361	46,399	72,000	170,760
Indirect Cost	185,054	189,263	231,562	605,879
<b>TOTAL</b>	<b>\$1,513,497</b>	<b>\$1,537,101</b>	<b>\$1,885,674</b>	<b>\$4,936,272</b>

RECAP L  
 AID GRANT DSPE CA-0083  
PLANNING AND DEVELOPMENT

	Disbursements 09-01-80 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Proj. Disbursements and Unliquidated Obligations as of 10-01-82 thru 09-30-83	TOTAL
Consultants	\$9,500	\$10,400	\$4,600	\$24,500
Travel	176,788	180,174	223,866	580,828
Audit Fees			310,000	310,000
Conference Cost	9,458	10,060	15,270	34,788
Publications	47,510	34,457	72,164	154,131
Indirect Cost	34,075	32,894	86,976	153,945
<b>TOTAL</b>	<b>\$227,331</b>	<b>\$267,985</b>	<b>\$712,870</b>	<b>\$1,258,192</b>

RECAP M  
 AID GRANT DSPE CA-0083  
EQUIPMENT COSTS

	Disbursements 09-01-80 thru 09-30-81	Disbursements 10-01-81 thru 09-30-82	Proj. Disbursements and Unliquidated Obligations as of 10-01-82 thru 09-30-83	TOTAL
Procurement	\$167,539	(33,258)	\$1,541,047	\$1,675,328
Repairs	15,344		25,000	40,344
Freight	36,867	45,648	114,789	197,304
Warehousing	38,176	36,947	66,604	141,721
Indirect Cost	7,310	6,390	19,570	33,270
<b>TOTAL</b>	<b>\$265,236</b>	<b>\$55,721</b>	<b>\$1,767,010</b>	<b>\$2,087,967</b>

RECAP N  
AID GRANT DSPE CA-0083  
TRAINING COSTS

	Disbursements 09-01-80 thru 09-30-81	Disbursements 10-10-81 thru 09-30-82	Proj. Disbursement and Unliquidated Obligations 10-01-82 thru 09-30-83	TOTAL
Participant Cost	\$769,064	\$788,694	\$964,878	\$2,522,636
Field Training	73,464	110,433	80,506	264,403
Educational Materials	146,114	140,897	348,252	635,263
Maintenance Agreements	9,430	1,417,376	92,707	1,519,513
Natl./Regional Programs	421,955	124,421	2,327,921	2,874,297
Clinical Practice	58,350	349,152	149,229	556,731
U.S. Training Centers		195,341	445,128	640,469
Direct Support	12,276	36,578	563,605	612,459
Special Projects	2,899	56,735	60,565	120,199
<b>TOTAL</b>	<b>\$1,490,552</b>	<b>\$3,219,627</b>	<b>\$5,032,791</b>	<b>\$9,745,970</b>