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USAID SUPPORT for POLICY CHANGE
in POPULATION, HEALTH, and
SUSTAINABLE DEVELOPMENT

A Catalogue of Selected USAID Projects

June 1996

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Please Note

To keep the catalogue brief and readable, editorial liberties have been taken regarding lists of contacts, titles and degrees, length of project description, and other features. Non-policy elements are generally excluded. Acronyms/abbreviations for the project or the contractor are used interchangeably for ease of identification. Terminology frequently differs from one project to another, but we have adhered to language used by each project as much as possible.

Foreword

Under the terms of its contract, the POLICY Project is required to prepare a catalogue of worldwide policy projects supported by USAID. The purpose of the catalogue is to facilitate the POLICY Project's tasks of pursuing cohesive population, health, and nutrition (PHN) policy strategies and of forging policy linkages with other sectors that significantly affect availability and use of family planning and other reproductive health services.

The activities described in the first chapter, which focuses on projects with a mandate for policy formulation, are drawn from the areas of Population, Health, Nutrition, Women, Gender, Education, Democracy and Governance, Environment, and Economic Growth. The remaining chapters are limited to PHN projects for which policy is only one element.

While the nature and dimensions of USAID policy work must wait for a more analytical document than this catalogue, an effort has been made to organize the contents in a way that illuminates what is meant by policy work and why certain project activities are included. For example, the policy implications of many projects appear to be so closely interrelated as to defy classification; yet when viewed as components of a service delivery system and the surrounding environment, the role of projects in policy change is much clearer, as illustrated in the figure on the following page. Projects have also been grouped together on the basis of the role explicitly accorded to policy in their purpose, goals, and objectives, as follows:

1. The primary purpose of the project is to formulate and reform policies;
2. The primary purpose of the project is to improve service quality and access, but policies are so important to their purpose that the project has either a) explicit policy objectives stated in the agreement that are systematically pursued, or b) important activities that influence policy;
3. The primary purpose of the project is to provide decision-makers with resources and support to strengthen their policymaking capability. This involves projects developed to improve planning and program evaluation, generate sound data, and disseminate information to draw attention to critical issues.

The task of defining policy elements of USAID project activities has been a challenging one, and the input and support of staff of all projects is greatly appreciated. A major objective of the POLICY Project is to develop tools to promote better understanding and effective use of the policy process, which will facilitate future communication and collaboration among USAID projects involved in policy change. For additional information regarding this catalogue contact: Norine Jewell, Inday Feranil, or Elizabeth Mumford at the POLICY Project; or Elizabeth Schoenecker and Barbara Crane at USAID.

Role of Projects in Policymaking

Policy Environment



Formulate and Reform Policies

- Population, Health & Nutrition (POLICY, RAPID, OPTIONS, PHR, DDM/Harvard)
- Women in Development (PROWID)
- Environment (EPAT)
- Governance and Democracy (G-WIP, IPC II)
- Economic Growth (IRIS, ICEG, CAER II, PEDS III)
- Education (ABEL)

Delivery of FP/RH Services



*Improve Access & Quality
while Influencing Operational Policies*

- Expand Service Systems (AIDSCAP, G-CAP, PASCA, EAP, ACCESS, CARE, IPPF, Pathfinder, SEATS, EHP)
- Program Management (FPMD)
- Logistics (FPLM/JSI, FPLM/CDC)
- Training (JHPIEGO, INTRAH)
- Access & Quality in Selected Services (OMNI, Georgetown, MotherCare, BASICS, Wellstart, ADDR)
- Expanded Range of Choice (SOMARC, FHI, Pop Council, AVSC, RPM-MSH, RPM-USP)
- Research (Pop Council, PROFIT, SARA)
- IEC (PCS)
- Young Adults (FOCUS)

FP/RH Institutional Resources



Strengthen Policymaking Capability

- Information Systems (DDM/CDC)
- Data Collection/Analysis (DHS, BuCen, BuCen HIV/AIDS, BuCen WID)
- Studies/Conferences on Selected Issues (NAS, Women's Studies, ICRW, EWCPOP)
- Evaluation Systems (EVALUATION)
- Information Dissemination (PIP, PRB)

**I. PROJECTS FOCUSED PRIMARILY ON POLICY
FORMULATION AND REFORM**

A. POPULATION, HEALTH, NUTRITION

The POLICY Project

Cooperating Agency: The Futures Group International
Project Number: 936-3078
Agreement Number: CCP-3078-C-00-5023-00

Duration: Sept 1995 - Sept 2000
Geographic Scope: Worldwide

Purpose: To help build a supportive policy environment for FP and reproductive health programs. Promotion of a participatory policy process and the development and implementation of population policies that are effective in responding to client needs.

POLICY FORMULATION AND REFORM

Explicit Policy Goals And Objectives: (1) Improved policy dialogue and formulation, (2) increased participation in the policy process, (3) translation of policies into action through improved strategic planning and resource allocation, and (4) effective use of data and research in decision-making in policy processes.

Interventions to Support Policy: Country assessments and development of workplans along USAID missions' strategic objectives; policy research (e.g., use of DHS data in policy, financial analysis of FP programs, market segmentation); presentations on population, family planning, and reproductive health policy issues; advocacy support; technical assistance in participatory policy processes; policy dialogue and formulation; strategic planning and resource allocation of FP programs; development of microcomputer-based policy models; technical assistance to government and NGO sectors in model applications, policy research, advocacy, strategic planning, and participatory skills; evaluation of policy environments and development of policy indicators.

Key Policy Issues: Wider participation in the policy process; provision of high-quality, client-oriented services responding to their reproductive needs; intersectoral policy linkages (e.g., FP effects on health; education impact on contraceptive use); differential impact by gender of intended policy or program goals; status of women; partnerships and wider participation in policy development; capacity building.

Examples of Policy Activities: In India, POLICY assists in the implementation of the Innovations in Family Planning Services Project through strategic planning and resource allocation at the district level and through promoting sustainability, improving the operational policy environment, and planning to scale up successful private sector activities. POLICY will also assist in developing state population policies and strategies for FP and reproductive health, and will carry out policy research on these concerns. In the Philippines, POLICY focuses on the Mission's strategic objectives aimed at strengthening national systems to support the FP/MCH Program, by assisting POPCOM (to build its capability to undertake advocacy, policy formulation, and coordination), the Philippine Legislator's Committee on Population and Development (to generate legislators' support for population policies), and the DOH (to assist in its strategic planning activities and operational policy development). In Guatemala, POLICY will conduct workshops for public/private sector providers and planners on secondary analysis of the DHS and use of data in policy presentations, facilitate consensus-seeking on major family and community health strategies, and provide assistance to develop NGO networks.

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Resources for the Awareness of Population Impacts on Development (RAPID)

Cooperating Agency: The Futures Group International
Project Number: 936-3046
Agreement Numbers: DPE-3046-C-00-1047-00
DPE-3046-Q-00-1048-00

Duration: Sept 1991 - Sept 1996
Geographic Scope: Worldwide

Purpose: To raise leadership awareness of relationships between population growth and development and about the positive socioeconomic and health effects of lower fertility.

POLICY FORMULATION AND REFORM

Explicit Policy Goals and Objectives: (1) Raise awareness among national leaders about population-development relationships and about fundamental demographic and FP trends; (2) strengthen the commitment of national leaders and managers to implement voluntary FP programs; (3) develop a consensus for policies and programs; and (4) institutionalize developing country capabilities to conceive, plan and implement population and development policies.

Interventions to Support Policy: Policy analyses using microcomputer-based simulations that (a) project populations under alternative fertility or AIDS assumptions (using DemProj or AIM software), (b) examine the implications of alternative population scenarios on development (using the RAPID model), (c) assess FP or fertility targets and program implications (using Target-Cost), (d) study the financial costs and benefits of FP programs (using the FamPlan model). High-level seminars and presentations on key population issues, technical training, and study tours. Assist local institutes with strategic planning.

Key Policy Issues: Alternative demographic and health scenarios; implications of population changes on the labor force, environment, education, health, etc.; the financial costs of expanding FP programs and the benefits associated with program expansion like reduced expenditures for health, education, and other social services.

Examples of Policy Activities: RAPID currently works in 17 countries. RAPID led two study tours of Ethiopian high-level population and health officials to Bangladesh and Kenya to observe the functioning of FP programs. A Target-Cost training workshop was held to teach Ethiopian participants to use the model and to evaluate population and fertility targets. An expert group applied the AIM model to estimate the demographic and sectoral impact of HIV/AIDS in Ethiopia. In Kenya, RAPID estimated FP program expenditures and strengthened policy advocacy skills of POP/FP managers and technical staff. RAPID computer workshops have been conducted in many countries like Malawi, Mali, Senegal, Honduras, Nicaragua, and Bangladesh where the results served as inputs in developing action plans. In Bolivia, RAPID provided technical assistance on statistical analysis, Target-Cost and DemProj computer training and worked with subnational leaders to address population, migration, health and development issues. In El Salvador, RAPID trained counterparts in SPSS and GIS. In Bangladesh, RAPID evaluated the current FP and Health Services Project and reviewed options for the follow-on project. Using the FamPlan model, RAPID assisted Bangladesh in assessing the achievements and challenges of the FP program and addressing unmet need. In the Philippines, RAPID works with the Commission on Population to strengthen its policy capabilities and also undertook the pilot decentralization project aimed at strengthening local capabilities to plan and manage population and FP programs in selected local government units.

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Options for Population Policy (OPTIONS II)

Cooperating Agency: The Futures Group International
Project Number: 936-3035
Agreement Number: DPE-3035-C-00-6062-00

Duration: Oct 1990 - Sept 1995
Geographic Scope: Worldwide

Purpose: To help countries formulate and implement policies that address the need to mobilize and effectively allocate resources for expanding family planning services.

POLICY FORMULATION AND REFORM

Explicit Policy Goal and Objectives: Assist USAID to realize its strategy of promoting policy dialogue and institution building. The objectives established to reach this goal are to assist governments to: improve planning to reflect strategic decisions; increase and promote efficient use of public resources; reform legal and regulatory policies; increase private sector participation; and build consensus for population and family planning policies.

Interventions to Support Policy: Training and technical assistance to counterparts in the use of analytical data — including the DHS — to assess the policy environment, set priorities, allocate resources, carry out strategic planning; assistance to governments to conduct economic and financial analyses, efficiently target scarce resources by identifying populations in need of subsidized services, devise cost recovery schemes, and identify alternatives to public sector funding; comprehensive legal and regulatory analyses that draw attention to particular barriers and develop policy reform agendas; assistance to governments to stimulate policies that support, rather than compete with, the private sector; assistance to private sector decision-makers to mobilize funding and to target populations that can afford to pay for services; consensus building through policy dialogue and information dissemination activities; and assistance in building advocacy skills.

Key Policy Issues: Sound data ensure that planning is strategic and carried out in the context of an understanding of the policy environment. Limitation of resources requires increased government investment, greater private sector participation, and improved targeting of resources to achieve impact. Laws and regulations should support access and broaden the range of services and contraceptive methods available. Consensus on key issues is essential to sound policy formulation and implementation.

Examples of Policy Activities: OPTIONS II staff have carried out comprehensive as well as selective assessments of laws, regulations, and policies; conducted analyses of DHS and pertinent data to segment the market; developed strategic plans and applied planning tools in the decision-making process; conducted workshops to strengthen analytical skills; mapped services to identify priorities for future resource allocation; presented results of studies and analyses that have led policymakers to adopt major changes in program direction and financing; and supported major consensus-building processes such as the National Population Symposium in Haiti opened by President Aristide, and efforts to enact a population law in Guatemala.

OPTIONS II was the lead CA and coordinator of the Central Asian Republics (CAR) Reproductive Health Services Expansion Project. To cultivate supportive leadership and create a favorable policy environment for quality reproductive and family health services, OPTIONS organized two study tours for CAR representatives to Turkey and the United States. Together with SOMARC, OPTIONS sponsored delegations from each CAR to attend ICPD. Awareness-raising policy seminars were conducted in all CAR countries. OPTIONS conducted analyses and workshops to identify policies, regulations, and medical practices that impede modern contraceptive use. OPTIONS also assisted CAR MOHs to undertake strategic planning exercises that resulted in the articulation of national program goals, objectives, and strategies to expand contraceptive services.

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Partnerships for Health Reform (PHR)

Cooperating Agency: Abt Associates, Inc.
Project Number: 936-5974.13
Agreement Number: HRN-5974-C-00-5024-00

Duration: Oct 1995 - Oct 2000
Geographic Scope: Worldwide

Purpose: To deliver technical assistance and training, conduct applied research, and provide information services regarding health policy management, health financing and health service improvement in developing countries and eastern Europe. This project serves as the principal USAID technical service resource in health policy reform. Emphasis is on reforms that contribute to meeting USAID strategic objectives for population, child survival, maternal health, and HIV/AIDS activities. The project builds on and expands the scope of its predecessors, the Health Financing and Sustainability (HFS) Project and the Latin America and Caribbean Health, Nutrition, and Sustainability (LAC/HNS) Project.

POLICY FORMULATION AND REFORM

Explicit Policy Goals and Objectives: Health sector policy development and strategies to (1) improve quality of care, access, efficiency, equity, and financial sustainability at all levels of a health system; and (2) increase effectiveness in the allocation of existing health sector financial and human resources.

Interventions to Support Policy: Formulation, regulation, implementation, testing, and monitoring of health sector policies; institutional reform, decentralization, and management capacity building for policy monitoring at central, district, and local levels; economic, demographic, and epidemiological analyses; provider, household, and patient surveys; strengthening NGO financial management; policy analyses (e.g., burden of disease cost-effectiveness studies, assessing the role and potential of the private for-profit and not-for-profit health sectors); social financing and health insurance schemes; improving the organization and management of the delivery of health services; hospital financing and management autonomy; pharmaceutical management; national health accounts; development of indicators.

Key Policy Issues: Incorporating equity, efficiency, and quality of care considerations into resource allocation decision-making; cost recovery policy mechanisms to protect the poor; provider incentives; managed care; separating financing from provision of services.

Examples of Policy Activities: The project has several ongoing and planned activities. In southern Africa, PHR plans to conduct a study aimed at developing a strategy to combat the spread of HIV/AIDS in the region. In Egypt, PHR will assist with the development of a health policy reform agenda. In Morocco, Niger, and Indonesia, PHR will assist USAID missions to design and carry out "exit transition" strategies for assistance to the health sector.

In Ecuador, PHR is assisting in the development of a cost-effectiveness package of primary care interventions. In Bolivia, PHR provided a financial assessment of a major NGO health provider and options to secure financial sustainability. In Paraguay, PHR is providing assistance with strategic planning and demonstrating decentralization policy options through the health sector.

In addition to country-specific work, PHR will study options for NGO health provider sustainability; the design of national health accounts for ongoing and systematic data collection on expenditures and resource allocations; and the development of indicators to monitor progress on key aspects of health systems and the health reform process.

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Data for Decision Making (DDM/Harvard)

Cooperating Agency: Harvard University School of
Public Health

Duration: April 1991 - Sept 1996

Project Number: 936-5991.01

Geographic Scope: Worldwide

Agreement Number: DPE-5991-A-00-1052-00

Purpose: To assist in health sector reform by developing and applying methods and technologies to help decision-makers make informed policy decisions. The DDM/Harvard consortium addresses policy issues from the macro-level while DDM/CDC strengthens the capability of decision-makers to use data for improved policy setting and decision-making.

POLICY FORMULATION AND REFORM

Explicit Policy Goals and Objectives: Support effective policy reform by helping decision-makers gain access to and use appropriate data and sound strategy in health policy development.

Interventions to Support Policy: Collection and analysis of essential health information; development of executive health information systems; development and application of policy and data analysis tools including political mapping, national health accounts, cost-effectiveness analysis, and assessment of private health sectors; analytic presentations, consensus building, and advocacy activities; development of guidelines on policy strategies such as hospital autonomy, resource mobilization, insurance, etc.

Key Policy Issues: Health care reform and public-private sector linkages; data access and data-based decision-making; democracy and health.

Examples of Policy Activities: The project supported policy dialogue between the public and private sector in Zambia as part of the government's program of economic and political reforms aimed at opening the economy to greater competition and the political process to greater public participation. In Egypt, the project conducted surveys on factors affecting utilization of health services, choice of providers and household expenditures. DDM also prepared a policy presentation on the need for a national health policy and strategies including reform of the MOH, preparation of social health insurance to widen population coverage and development of public-private sector partnership. In El Salvador, the project is working on an executive information system aimed at becoming an integral part of the country's health sector reform efforts. DDM was recently asked to assist the government of Poland in its efforts to develop health policies and strategies and strengthen health care systems at various levels.

The outputs of the project include (a) publication of "Health Sector Reform in Developing Countries: Making Health Development Sustainable"; (b) "political mapping" software which serves as a tool for analyzing and mapping public policy issues with various applications to health sector reform; (c) the Executive Health Information Systems (EHIS) which provides on-line, interactive access to up-to-date management information for policy and program decision-makers; and (d) multiple publications covering national health accounts, democracy and health, and selection of essential health services using cost-effectiveness analyses.

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**I. PROJECTS FOCUSED PRIMARILY ON POLICY
FORMULATION AND REFORM**

B. OTHER USAID CENTERS

Promoting Women in Development (PROWID)

Cooperating Agencies: International Center for Research on Women (ICRW) and The Centre for Development and Population Activities (CEDPA)
Duration: Oct 1995 - Sept 1999
Project Number: IC-1131
Geographic Scope: Worldwide
Agreement Number: FAO-0100-A-00-5030-00

Purpose: To support, through a grants program, field-based activities which include: (a) pilot interventions that use innovative approaches to enhance women's economic, political, health, and social status; (b) operations research that tests ways to make WID interventions more effective and enhance intended results; and (c) advocacy activities that enhance women's involvement and influence in political, civic, and community life to ensure long-term sustained attention to women's issues in development.

EXPLICIT POLICY OBJECTIVES: Inform the development of policies and programs by demonstrating effective ways to reach and actively involve women in the development process.

Interventions to Support Policy: Pilot projects, operations research, and advocacy.

Key Policy Issues: Enhancing women's status; women's legal and human rights; linkages of women's issues with other development issues, including education, employment, environment, and reproductive health.

Examples of Policy Activities: The project is launching a grants competition to support an array of activities across a broad range of themes related to women's contributions to economic growth and participation in democracy and governance; human capital development through education and training; women's health and nutrition, particularly reproductive rights; and management of the environment and natural resource. Three regional workshops to strengthen the design and implementation of field activities are anticipated during 1996.

Operations research and pilot projects will test the relative effectiveness of alternative interventions (a) to enhance a woman's ability to benefit from emerging economic opportunities or to mitigate the costs of socioeconomic, political, or environmental disruptions encountered by women; and (b) to build and utilize new institutional linkages to implement an activity aimed at improving women's lives.

PROWID will also build upon international momentum defining women's rights as human rights. Activities to be supported include those that better define women's legal rights, especially as perceived by women themselves, and address factors that advance their rights in a wide variety of sectors. The program will support the implementation of advocacy that promotes women's rights, enhances their civic involvement in decision-making and political activity, and ends harmful traditional practices. Other activities might assess the effects of nonformal education for girls, explore ways to help girls pursue nontraditional disciplines, foster linkages between girls' education and employment, identify and promote best practices in reproductive health care, or mitigate the costs of environmental change to women's employment, incomes, and health. Innovative approaches could focus on an intervention addressed to a specific target group (e.g., adolescents) or attend to linkages across sectors (e.g., between economic contributions and human rights).

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Advancing Basic Education and Literacy (ABEL 2)

Cooperating Agency: Academy for Educational Development

Duration: Sept 1994 - Sept 1996

Project Number: 936-5832

Geographic Scope: Worldwide

Agreement Numbers: HNE-5832-C-4075-00
HNE-5832-Q-4076-00

Purpose: To support the improvement of basic education — school-based instruction as well as programs for teacher training, early childhood education, adult education — and educational planning and administration supporting of those efforts.

EXPLICIT POLICY OBJECTIVES: Work with USAID through the provision of: (1) technical assistance for strengthening ministries of education, stimulating policy dialogue, conducting sector assessments, identifying design options and implementing educational activities; (2) pilot projects, applied research, and training related to girls' education, learning technologies, nonformal education and literacy innovations; and (3) information sharing through adapting lessons learned from research and field experiences to specific countries and situations, conducting workshops, and supporting participant training.

Interventions to Support Policy: Assistance by short-term technical assistance to support development, enactment and implementation of educational policy reforms; local capacity building through training; educational policy research; and the development and use of computer-based and other materials for educational policy making and training.

Key Policy Issues: Decentralization and democratization; resource allocation; policy reform; girls' educational access, equity and retention; and NGO participation in delivery of educational services and training.

Examples of Policy Activities: Through ABEL 2, USAID has supported the development of prototype materials, which will be ready for distribution by September 1996, for the training of senior educational policy personnel in the issues of decentralization; for assisting with the design of policy and programs incorporating community involvement in education, for those with a focus on HIV/AIDS and education; and when incentives, especially for increasing girls' attendance in schools, are being considered; and for supporting an integrated approach to educational reform efforts.

Among other activities, ABEL 2 has: (a) assisted the Department of Education of South Africa with developing policy option for school funding and medium-term budgeting; (b) provided training and model building for policy options to the Ministries of Education in Tigray and SEPR Regions of Ethiopia; (c) carried out a study of decentralization of educational management in Tigray Region, Ethiopia for the purpose of developing better policies for decentralization management; (d) suggested procedures for educational policy reform in Malawi; (e) analyzed educational policies in Morocco as they pertained to equity and access for girls and made recommendations for changes that would promote equity; (f) provided USAID/Cairo with program policy options for increasing educational literacy and for developing strategic objectives to support those policies; and (g) commissioned a monograph on adult literacy programming that included policy considerations along with design, implementation and evaluation implications.

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Environment

Environmental and Natural Resources Policy and Training (EPAT)

Cooperating Agency: Winrock International
Project Number: 936-5555
Agreement Number: DHR-5555-Q-00-1085-00

Duration: Sept 1991 - Sept 1994
Geographic Scope: Worldwide

Purpose: To further the adoption of policies by developing countries that promote sustainable uses of natural resources and that preserve or enhance environmental quality.

EXPLICIT POLICY OBJECTIVES: Support the efforts of policy analysts and policymakers in developing countries in their quest to understand connections between economic policy and development choices; and help them to develop policy options for their countries that promote sustainable uses of natural resources and sustainable and equitable development.

Interventions to Support Policy: Development and execution of strategic, long-term, multidisciplinary technical assistance programs that assist countries from policy analysis through various stages of policy formulation, dialogue and implementation.

Key Policy Issues: It is essential that policymakers understand and address the economic, physical, institutional and human resource dimensions of environmental and natural resource policies as well as their inter-relationships in a coordinated, systematic, practical manner that builds on common experiences in other countries and establishes clear indicators for assessing the progress of policy changes and their short-term and long-term impact.

Examples of Policy Activities: State-of-the-art research; applied in-country research, including field visits, and preparation of inventories and assessments of impact of current policies; policy dialogue, including analytic work, presentations, and workshops to support policy formulation and reform; institutional strengthening, including organizational assessments, strategic planning, training and internships; human resource development including assessments of training capability and technical assistance in preparing courses; information dissemination.

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Global Women in Politics (G-WIP)

Cooperating Agency: The Asia Foundation
Project Number: 936-5468
Cooperative Agreement: AEP-5468-A-00-5037-00

Duration: Jan 1996 - Sept 1999
Geographic Scope: Worldwide

Purpose: To increase women's participation in political processes and elections, expand access for women to decision-making positions, and increase solidarity among women.

EXPLICIT POLICY OBJECTIVES: Promote equitable laws, policies and practices, and strengthen capacity to implement and enforce laws, policies and decisions.

Interventions to Support Policy: Collection of resources and establishment of information clearinghouse, regional workshops to facilitate sharing of strategies; pilot projects to develop women's political participation, leadership training.

Key Policy Issues: Women's participation in decision-making processes is key to improving their status in other development sectors; women's integration into the political process requires training in basic leadership skills, campaigning for elected office, advocacy and monitoring, and gender sensitivity; increased political awareness; and education in legal rights and in how politics affect daily life.

Examples of Policy Activities: While the project has just begun, it is intended to work through effective regional partners who will build on such successful activities as hands-on political campaign training for women candidates and their staff; training in advocacy and organization of campaigns such as postcards and petitions, networking, and regional roundtables; and other structured opportunities for information exchange and strategizing.

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Democracy and Governance

Implementing Policy Change (IPC II)

Cooperating Agency: Management Systems
International

Duration: Oct 1995 - Sept 2000

Project Number: 936-5470

Geographic Scope: Worldwide

Contract Number: AEP-5470-I-00-5034-00

Purpose: To provide expert services that will enable host country managers and stakeholders to carry out their roles in the implementation of policy more effectively. (MSI is implementing the project together with ten consortium members.)

EXPLICIT POLICY OBJECTIVES: Support the principles of democratic governance (which include participation, inclusion, accountability, and transparent deliberation and decision-making). Support host country leadership to strategically manage the organizational, financial, political and technological issues associated with policy implementation.

Interventions to Support Policy: Technical assistance; process approaches that include facilitation, organizational development and conflict resolution; management consultation, training and advice. Technical assistance: (1) to government organizations on strategic approaches that enhance policy performance, transparency, and collaboration with other groups in the policy environment; (2) to NGOs on strategic planning to develop consensus on policy issues, a constituency for policy change, and to influence policy processes; and (3) to promote government-NGO interaction.

Key Policy Issues: Policy implementation and democratic governance; policy performance and transparency; effective participation from a broader cross-section of the citizenry; effective government/NGO interaction; policy design with implementation considerations; capacity building; priority of democracy and governance issues; and availability of assistance for all sectors.

Examples of Policy Activities: Activities to strengthen governance and public management include judicial reform in El Salvador and Guinea, assisting South Africa in its transition to a post-apartheid society, civic service decentralization in Mozambique, improving policy formulation and implementation in Honduras and Zambia, reforming social safety nets in Poland, and fiscal policy analysis in Jamaica.

Examples of assistance to improve enabling environments for economic growth include export promotion assistance in the Philippines, export diversification in Ghana, and anti-monopolies policy development in Zimbabwe.

Examples of activities to enhance public-private collaboration include: the Presidential Forum on Private Sector Development in Uganda, the West Africa Enterprise Network, developing lobbying and advocacy skills for private sector organizations in South Africa and implementation of National Environmental Action Plans in Africa.

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Institutional Reform and the Informal Sector (IRIS)

Cooperating Agency: Center for Institutional Reform and the Informal Sector, University of Maryland at College Park
Duration: 1990 - 1997

Project Number: 940-0015
Cooperative Agreement Numbers: DHR-0015-A-00-0031-00
ANE-0015-B-00-1019-00 *basic ordering agreement*

Geographic Scope: Worldwide

Purpose: To help USAID missions create an institutional environment in developing countries supportive of sustainable economic growth and development of democracy.

EXPLICIT OBJECTIVES: Work with USAID to address three central aspects of economic growth and democratization, namely: formation and implementation of institutional reforms to improve governance in support of sustainable economic, social, and political development; creation and implementation of legal infrastructure reforms supportive of secure property and contract rights and accountable government; and development and implementation of policy reforms to strengthen open and competitive markets and participatory political processes.

Interventions to Support Policy: Development assistance by long-term resident advisors and short-term consultancies; local capacity building through training and staffing of advisory centers; policy research; technical support and local partnerships to support development, enactment and implementation of policy reforms.

Key Policy Issues: Economic growth and democratization; policy reform; quality and cost-effective technical support; creating opportunities for economic liberalization.

Examples of Policy Activities: Through IRIS, USAID supported the development, creation and passage of the new Civil Code in Russia, which is called an Economic Constitution aimed at laying out fundamental rules for the emerging market and improving property and contract rules. A new scheme to regulate "natural monopolies" in Russia, which is now being deliberated by the "Duma" (legislative body), also benefited from project assistance.

IRIS also provided assistance to the Interparliamentary Assembly of the CIS in drafting the Model Civil Code to ensure that all states had a say in the Code's creation and to make it easier for foreign and domestic investors to engage in market activity across borders. The project also (a) supports legal reform in Poland, including efforts addressing commercial, banking, insurance fund and copyright laws; (b) assists in improving proposed Ukrainian competition legislation, developing internal agency operating procedures and encouraging public awareness and accountability of agency actions; (c) assists judicial reform in Madagascar, including property and contract rights; (d) helped draft legislation to promote competition in Mongolia's transition economy; (e) assisted Nepal in the deregulation of the airline industry, and fertilizer and petroleum products and in broadening public ownership of companies and firms; (f) assisted in clarifying the nature of commercial law in the West Bank through a democratic mechanism for policy development.

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Economic Growth

International Center for Economic Growth (ICEG)

Cooperating Agency: Institute for Contemporary
Studies

Duration: 1990 - May 1997

Project Number: 940-0404

Geographic Scope: Worldwide

Cooperative

Agreement: PDC-0095-A-00-0061-00

Purpose: To enhance the capability of indigenous policy research institutions to foster the policies and institutional frameworks on which a market economy depends.

EXPLICIT POLICY OBJECTIVES: Focus resources on significant opportunities for reform of policies and institutions in pursuit of sustainable economic growth and human development. Enhance the capacity of indigenous policy research institutes to apply market-based economic analysis to these reform opportunities and to use the results to advocate on behalf of reform and to educate the public. Strengthen the network of market-oriented policy research institutions throughout the world in order to build a base of shared experience and knowledge of reform approaches and techniques.

Interventions to Support Policy: Policy research; technical assistance in project design and implementation; monitoring and advice, expert consultancies, publications with worldwide distribution, training, technical assistance in strategic planning and effective advocacy, inter-institute information exchange through regional conferences, newsletter, and electronic communication.

Key Policy Issues: Policy and institutional reform, sustainable economic growth and human development, local capacity-building, shared experience and knowledge of reform approaches and techniques.

Examples of Policy Activities: ICEG works with a network of 340 correspondent institutes in 117 countries primarily in the developing and transitional world. It targets those institutes that show the greatest promise of influencing policy reform in those countries in which specific policy issues are at a crossroads.

ICEG programs have: (a) fostered direct reform of the policy regime in countries like Mexico, Argentina, El Salvador, Romania, Lithuania, Poland and the ASEAN countries; (b) promoted change in the policy environment in countries such as Costa Rica, Dominican Republic, Philippines, and several countries in South Asia; (c) built policy research capacity in countries such as India, Lesotho, Central America, Mexico, Lebanon, and Central Europe; (d) promoted broader public understanding of critical policy issues in countries such as Ecuador, Panama, Bangladesh, China, Sri Lanka, Uganda, Zimbabwe, Central Europe and Russia.

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Consulting Assistance on Economic Reform (CAER) II

Cooperating Agency: Harvard Institute for International Development (HIID) **Duration:** 1995 - Aug 1997
Project Number: 940-0405 **Geographic Scope:** Worldwide
Agreement Numbers: PCE-0405-C-00-5016-00 *core*
PCE-0405-Q-00-5016-00 *buy-in*

Purpose: To enhance USAID's ability to assist developing countries to introduce and maintain appropriate economic policies at the macro, sectoral and project levels.

EXPLICIT POLICY OBJECTIVES: Increase USAID mission capabilities to design an economic policy reform agenda. Increase capabilities of host countries to manage an economic policy reform agenda. Improve quality and frequency of dialogue between USAID missions and host governments on economic policy issues.

Interventions to Support Policy: Short, medium, and long-term advisory assistance including long-term in-country advisors and short and medium-term training including on-the-job training, workshops, courses and observation tours; developing indicators for monitoring and measuring the performance and impact of economic reform activities; strengthening host country data collection and analysis capabilities; and collaborative policy analysis and dialogue.

Key Policy Issues: Macroeconomic stabilization, fiscal and monetary policy, international trade and investment, public finance, local government finance, financial markets and services, micro and small enterprise development policy, labor markets and income distribution policy, women in development policy, political economics of policy reform, environmental policy, pricing policy, regulatory policy, decentralization.

Examples of Policy Activities: The project is working on six policy research papers with worldwide application on issues related to economic growth and poverty alleviation.

CAER activities are on-going or about to start in a number of countries, including South Africa, Nepal, Ethiopia, Uganda, Egypt, India and Madagascar.

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Private Enterprise Development Support Project III (PEDS III)

Cooperating Agency: Coopers and Lybrand LLP
Project Number: 940-0026
Cooperative: PCE-0026-C-00-3030-00
Agreement Numbers: PCE-0026-Q-00-3031-00

Duration: Aug 1993 - Aug 1998
Geographic Scope: Worldwide

Purpose: To provide market and private enterprise-based solutions to development problems, and assist missions in developing such solutions in pursuing their private sector programs.

EXPLICIT POLICY OBJECTIVES: Conduct policy analysis related to private sector economic growth and constraints, legal and regulatory reform, and fiscal and monetary policy reform.

Interventions to Support Policy: Policy analysis and research; workshops and conferences with public and private sector officials; technical assistance in planning and implementation; policy dialogues.

Key Policy Issues: Private enterprise development; legal and regulatory reform (e.g., property law, commercial law, trade and investment laws and regulations, intellectual property rights law, and insurance law); and commercial policy benchmarks.

Examples of Policy Activities: PEDS will conduct a study to advise Uganda on administrative barriers to investment. A conference will be held with public and private sector officials to discuss the findings and jointly prepare an action plan for determining priority areas of reform and how the reform effort should proceed. Similar activities have been or will be undertaken in Namibia and Tanzania.

PEDS is also assisting USAID in developing a workshop for the Board of Directors of the Ugandan Capital Markets Authority. Issues to be addressed include: appropriate regulatory mechanisms, structure of stock markets, and appropriate financing mechanisms.

PEDS assisted Uganda in resolving issues arising from Financial Sector Adjustment Credit (FSAC), the Financial Institutions Statute of 1993 and related policy changes. PEDS also considered other issues of importance to the long-term development of the banking sector and made recommendations for strengthening policy dialogue within the framework of the National Forum. Focus group meetings were held with the Financial Sector Working Group and other stakeholders.

The project is assisting the governments of Ecuador, Jamaica, and Jordan in analyzing current intellectual property regulations and developing policy actions or activities to respond to country needs. Other assistance in Jordan includes assessment of the country's companies law and providing recommendations in three areas: registration, Controller's authority, and general policy guidance. USAID Poland requested long-term assistance from PEDS in order to assist Poland's Ministry of Industry and Trade to improve the enabling environment for small and medium enterprise growth.

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**II. PROJECTS THAT IMPROVE ACCESS
AND QUALITY OF PHN SERVICES**

A. EXPLICIT POLICY OBJECTIVE

Family Planning Logistics Management (FPLM/JSI)

Cooperating Agency: John Snow, Inc.
Project Number: 936-3038
Agreement Number: CCP-3038-C-00-5028-00

Duration: Sept 1995 - Sept 2000
Geographic Scope: Worldwide

Purpose: To strengthen and institutionalize the capabilities of both family planning and HIV/AIDS organizations in the public and private sectors to manage more effective and efficient contraceptive logistics systems; and to provide support to G/PHN/POP in managing the Population Projects Database (PPD) and the management system for tracking contraceptive orders, shipments and financial accounts (NEWVERN).

EXPLICIT POLICY OBJECTIVES: Strengthen the policy environment to ensure that policymakers and senior program managers accept responsibility for managing contraceptive supplies.

Interventions to Support Policy: Policy dialogue on responsibility for supply management and resource allocation; collaboration with other PHN/POLICY Projects; evaluation and technical assistance and tools; south-to-south interventions including study tours.

Key Policy Issues: (a) Assuring contraceptive supplies (e.g., institutional policies and procedures affecting capabilities for planning, forecasting, monitoring pipeline; sustainability issues such as cost recovery, self-reliance; donor coordination; regulatory barriers; (b) rationalizing contraceptive availability (e.g., range of methods offered, introduction of new methods/brands, short-term forecasting, logistics MIS; and (c) improving logistics bureaucracy (e.g., system design efforts, levels in the systems, relationship of distribution system and administrative structure, relationship to distribution systems for other commodities, centralization/decentralization, privatization of logistics functions, staffing and supervision, resource allocation).

Examples of Policy Activities:

Facilitate self-reliance and/or local procurement (Bangladesh, Chile, Jamaica, Kenya, Mexico, Morocco, Turkey, Zimbabwe); prepare handbook on contraceptive procurement options (by PATH, published and disseminated by UNFPA); formulate policies regarding acceptance of donated commodities — e.g., declining to add additional methods or formulations to public sectors programs (Philippines); policy-level workshops on donor coordination, forecasting long-term contraceptive requirements, planning for contraceptive self-reliance (Bangladesh, Chile Zimbabwe); development and use of Logistics Management Information Systems to provide data for policy level presentation, strategic management decision-making, and donor coordination (Bangladesh, Kenya, Mali, Philippines); in-country initiatives (e.g., pilot testing of using private carriers for public sector contraceptive distribution in Bangladesh); conceptualization of conduct of privatization initiatives (e.g., pilot testing integrating four essential drugs into the contraceptive distribution system in the Philippines); design or redesign logistics systems to shorten pipelines (e.g., Ghana, Morocco), to accommodate introduction of new products (e.g., Depo-Provera in the Philippines, low-dose orals in Bangladesh), and to foster integration and/or health policy reform efforts (Malawi, Nepal, Zambia).

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Promoting Financial Investments and Transfers (PROFIT)

Cooperating Agency: Deloitte and Touche
Project Number: 936-3056
Agreement Numbers: DPE-3056-C-00-1040-00
DPE-3056-Q-00-1041-00

Duration: Sept 1991 - Sept 1996
Geographic Scope: Worldwide

Purpose: To expand the commercial sector's provision of family planning services and product delivery thus contributing to national FP and RH objectives. PROFIT's assistance is targeted to a select number of developing countries with viable commercial markets to support investment opportunities.

EXPLICIT POLICY OBJECTIVES: Reduce trade, regulatory and policy barriers that adversely affect the commercial sector's greater involvement in FP.

Interventions to Support Policy: Legal and regulatory analysis; assessment of the appropriateness and financial viability of commercial FP product/service ventures.

Key Policy Issues: To increase the availability and affordability of FP products and services, and to expand FP services and coverage by private health care groups, HMOs, commercial clinics, and employers.

Examples of Policy Activities: Manila: PROFIT is helping USAID to identify issues and develop a country-wide strategy for the Philippine DOH to increase private sector family planning. Through meetings with representatives of the commercial sector, the project identified issues that constrain specific groups like manufacturers, pharmacists, providers and employers from becoming more involved in FP. The resulting strategy document will generate discussion on the issues identified, and open the dialogue between the private sector and DOH to identify policy barriers that could be reduced. PROFIT and SOMARC are involved in this effort.

Brazil: Established the CEPEO Commodities Procurement Organization in 1994 as a commercial distributor of FP products. CEPEO is also planning to lobby Brazil's public sector authorities to implement the federally mandated women's health program.

Indonesia: Supports BKKBN's policy of increasing the provision of FP through private sector midwives.

El Salvador: Recommended several policy-oriented programs to the Mission, including (1) assistance to the social security agency to develop regulations and guidelines on employer-based clinics; (2) a survey of private providers to identify inefficiencies, support new initiatives and complement demand research in the informal sector; and (3) support for the development of managed care systems and an assessment of related legal barriers.

Zimbabwe: Conducted an assessment identifying areas where obstacles exist to expand private sector activities and recommend areas for regulatory reform and program development.

Romania: Assessed the contraceptive marketing and distribution sector, focusing on regulatory and business constraints to contraceptive availability, and recommended a comprehensive business technical assistance program for distributors and an IEC program to promote the use and knowledge of contraceptives among Romanian women.

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Initiatives in Natural Family Planning and Breastfeeding (Georgetown)

Cooperating Agency: Georgetown University
Project Number: 936-3061
Agreement Number: DPE-3061-A-00-1029-00

Duration: Aug 1991 - Aug 1996
Geographic Scope: Worldwide

Purpose: To improve fertility awareness and the acceptability, availability, and effectiveness of natural family planning (NFP) and breastfeeding (BF) for child spacing.

EXPLICIT POLICY OBJECTIVES: Increase support for BF, NFP and fertility awareness by policymakers, health and FP professionals, and the public.

Interventions to Support Policy: Biomedical, social science, evaluation and operations research (e.g., fertility impact of BF, effectiveness of lactational amenorrhea or LAM, and pilot studies testing different approaches to integrating NFP into the public sector); BF/LAM/NFP advocacy; development of guidelines; review of policies on BF, FP and MCH; promoting partnerships between NFP NGOs and the public sector; development of service statistics for NFP; providing organizations and policy conferences with tools to dialogue with government policymakers about the contributions of NFP and BF.

Key Policy Issues: Expanding reproductive health choices to include breastfeeding, LAM and NFP; cost-benefits of integrating BF/LAM or NFP in a multi-method clinic; BF impact on fertility; NFP use and continuation.

Examples of Policy Activities: The project has been instrumental in effecting policy changes in several countries. As a result of meetings with Georgetown staff, the Philippine DOH crafted a national policy on LAM as a FP method. This policy, implemented in early 1994, established guidelines for LAM/FP service delivery interface, training, advocacy, supervision, IEC and collaboration. The Georgetown BF/MCH division was credited as key in the establishment of the pilot baby-friendly government hospital and eventually led to the national policy change. Chile now includes BF and LAM in its National Health Plan. The MOHs of Egypt, Uganda, Zambia and Sweden have also adopted LAM as a method of FP. The project also works with local organizations including women's groups to strengthen their advocacy skills.

The Breastfeeding Division was also extensively involved in preparations for and participation in ICPD. The Division reviewed the Draft Programme of Action and prepared a coordinated response on behalf of several organizations like Wellstart International, Nurture, WABA, IBFAN. Working with several organizations including USAID CAs and the World Bank, IRH drafted a policy statement on the role of breastfeeding and coordinated sponsorship of this statement for presentation to PrepCom II delegates. IRH prepared country profiles for ICPD based on DHS data and a policy videotape on breastfeeding and FP and made presentations in two ICPD panels. As a result of these efforts, the Programme of Action incorporated BF in several sections of the document.

The FA/NFP Division held a meeting bringing NFP/NGOs together with public sector representatives to explore strategies for "mainstreaming" NFP. One of the successes of the meeting was strengthened collaboration in the Philippines between PFNFP and the DOH. The DOH personnel will be trained in NFP, and NFP will be promoted by DOH nurses. As a result of a pilot adolescent FA Project in Ecuador, the Ministry of Education is incorporating reproductive health and fertility awareness education into the school system.

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Program for Voluntary and Safe Contraception (AVSC)

Cooperating Agency: AVSC International
Project Number: 936-3068
Agreement Number: CCP-3068-A-00-3017-00

Duration: Aug 1993 - Aug 1998
Geographic Scope: Worldwide

Purpose: To introduce, expand, and improve family planning and other reproductive health services.

EXPLICIT POLICY OBJECTIVES: Influence policies relating to access and quality of family planning and reproductive health services.

Interventions to Support Policy: Local partnerships, needs assessments, and planning reproductive health services; policy dialogue during program design and evaluation; policy-oriented and service-based programmatic research; impact evaluation; development and adaptation of service guidelines, training curricula, and quality management approaches (e.g., COPE, site training, and facilitative supervision); workshops and conferences; study tours and south-to-south exchanges; and global initiatives on special issues and neglected areas.

Key Policy Issues: Improving access and quality of sustainable services; incorporating client perspectives; assuring informed choice; assuring clinical safety and effectiveness; linking FP with other reproductive health services; meeting needs of underserved populations; building local commitment for quality and sustainability.

Examples of Policy Activities: AVSC has led in assisting more than 30 countries to develop national service delivery and training guidelines for clinic-based services, including female sterilization and vasectomy, IUD insertion, and counseling. AVSC works with WHO, IPPF, interagency task forces, and donors to develop service delivery and training guidelines and then assists countries to adapt guidelines to local circumstances.

AVSC also addresses country-specific policy needs relating to access and quality of services. For example, in Egypt, AVSC used technical assistance, research, policy dialogue and workshops with local partners to develop a reproductive risk rationale for offering a range of clinic-based FP services (including voluntary sterilization which was previously excluded from the program). In Kenya, AVSC served as catalyst in bringing together the MOH, the National Council on Population and Development, NGOs, key donors including USAID, and cooperating agencies to develop a unified National Implementation Plan for expanding FP services. AVSC has undertaken policy initiatives related to service delivery needs and barriers in countries including Bangladesh, Bolivia, Colombia, India, Mexico, Nepal, Nigeria, Peru, South Africa, Tanzania and Turkey. One area of increased attention is building policy and program frameworks for continuous quality improvement systems through workshops and technical assistance.

AVSC is also working with countries and globally to address policy issues relating to the needs of underserved populations. For example, its Global Men as Partners initiative seeks to direct the attention of policymakers and program managers to improving men's involvement in FP/RH. AVSC is a founding member of the Post-Abortion Consortium and has conducted regional and national workshops to help policymakers and managers address the needs of post-abortion women.

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Training in Reproductive Health II and III (JHPIEGO)

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|--|---------------------------------------|
| Cooperating Agency: JHPIEGO | Duration: May 1987 - Sept 1994 |
| Project Number: 936-3045, 936-3069 | August 1993-Sept 1998 |
| Agreement Number: CCP-3069-A-00-3020-00 | Geographic Scope: Worldwide |

Purpose: To develop host country training capabilities and to train selected health providers in modern reproductive health knowledge and skills, emphasizing voluntary sterilization, IUDs, injectables and implants.

EXPLICIT POLICY OBJECTIVES: Eliminate medical barriers and training policies which limit access to FP and RH services.

Interventions to Support Policy: Review of training policies, development of RH service standards for FP methods, providers and required skills as basis for development of a training policy; development of a prototype on how to develop provider guidelines; training-related data collection for planning; development and application of a training decision-making tool called ProTrain with The Futures Group International.

Key Policy Issues: Ensuring a policy environment where skilled providers form one major basis of sustainable programs. Building sustainable FP and RH care programs by establishing countries' ability to train their own health care personnel to deliver quality services, emphasizing long-term methods.

Examples of Policy Activities: The project applied the ProTrain computer model (which is an extension of the Target-Cost policy model widely used in the strategic planning of family planning programs) to Kenya. The results yielded projections of training needs by varied categories of manpower. The data from the applications were used to plan and implement the training of family planning workers in Kenya.

JHPIEGO was one of the CAs (with AVSC, JHU/PCS, SOMARC and DHS, and OPTIONS as lead CA) involved in the "Reproductive Health Services Expansion Program" (RHSEP) in five Central Asian Republics. During the country assessments, JHPIEGO and AVSC selected several sites to become demonstration clinics for the introduction of new technologies and new modes of family health and contraceptive service delivery. These sites also served as clinical training sites for pre-service and in-service training institutions. JHPIEGO and OPTIONS provided technical assistance to MOHs to develop and revise service delivery guidelines for reproductive health services in Kazakhstan, Kyrgyzstan and Uzbekistan. JHPIEGO also organized and led a study tour to the Philippines for CAR participants to observe how minilaparotomy is an integral component of reproductive health services. Together with OPTIONS, JHPIEGO led an intensive process of reviewing and updating the official medical guidelines and standard operating procedures for service delivery practices in family health in Kazakhstan, Kyrgyzstan and Uzbekistan. Teams of eminent researchers and physicians in-country were brought together in workshops to discuss the content of the guidelines, the revision process, and the production of revised guidelines. AVSC and JHPIEGO reinforced the new standards of practice in the demonstration sites.

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Primary Providers' Education and Training in Reproductive Health (PRIME)

Cooperating Agency: INTRAH, the University of
North Carolina at Chapel Hill

Duration: Jan 1995 - Jan 2000

Project Number: 936-3072

Geographic Scope: Worldwide

Agreement Number: CCP-0372-C-00-5005-00

Purpose: To improve access to and quality of family planning and reproductive health care services.

EXPLICIT POLICY OBJECTIVES: Assist host countries to develop, implement and evaluate national family planning/reproductive health policies and quality standards which will reduce or eliminate service access barriers and establish quality standards; formalize linkages among public sector, NGO and private service providers; provide systematic, uniform guidance for policy application through national service, supervisory and training systems; and integrate reproductive health service elements and coordinate them with child survival and other primary care components.

Interventions to Support Policy: Human resources and service system analysis, assistance to host countries in organizing and implementing operational policy development processes and in promulgating and evaluating policies and quality standards produced by these processes; collaborative evaluation of policy change and the impact of policy applications on service accessibility and quality.

Key Policy Issues: Service accessibility, including client eligibility for reproductive health services, types of service sites and outlets, and service mix; service quality, including provider qualifications, service site requirements, supervisory expectations, and privacy/confidentiality provisions; policy adherence by providers and others to promote consistency of services among public, private, and NGO delivery systems; and formal links among reproductive health service components to promote referrals and easy access for clients.

Examples of Policy Activities: The following are examples of policy activities as carried out collaboratively by INTRAH and host country colleagues in Tanzania, Togo, Uganda, Cameroon, Burkina Faso, Ghana, Botswana, Mali, and other countries: (a) Identifying existing de facto service delivery guidelines (e.g., standing orders, imported or outdated policies, references or other documents from CAs or international agencies) currently in circulation and assessing their impact on providers and the service delivery environment. (b) Stimulating a demand for change and a multi-sector commitment to co-sponsorship of the policy and standards development processes. (c) Supporting the appointment and activities of a joint INTRAH-host country team which plans and leads the development process in an open, intellectually legitimate and practical examination of a broad range of policy factors. (d) Drafting, pre-testing and revising policy and standards guidelines by and informed, influential and broadly representative host country group. (e) Promoting official sanctioning of the new policy and standards, supporting dissemination (in organized dissemination conferences and seminars, and also through training and integration into service delivery and human resource strategies, clinical practice guidelines and supervisory checklists), evaluating impact, and installing a mechanism for periodic updates.

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Focus on Young Adults (FOCUS)

Cooperating Agency: Pathfinder International
Project Number: 936-3073
Agreement Number: CCP-3073-A-00-6002-00

Duration: Nov 1995 - Nov 2000
Geographic Scope: Central America

Purpose: To improve the health and well-being of young adults through promotion of responsible behavior, delay of exposure to sexual activity and sexually transmitted diseases including HIV/AIDS, and prevention of unwanted pregnancies; and through promotion of positive behaviors including breastfeeding and child spacing.

EXPLICIT POLICY OBJECTIVES: Create an improved policy environment for youth by decreasing the regulatory and legal barriers that limit availability of information and services to young adults.

Interventions to Support Policy: Information collection and identification of key issues through country assessments; analysis of policies, laws, medical and other institutional barriers to implementing reproductive health for youth (RHY); awareness-raising and consensus-building on importance of focusing on RHY; strengthening USAID's and their partners' (local counterparts, CAs, international donors) capability to advocate for RHY; facilitation of formulation of appropriate policies; help in the implementation of policies through strategic planning and resource mobilization.

Key Policy Issues: The presence and absence of laws and policies governing health care, education, and other aspects of life that influence the reproductive health behavior of young adult males and females and that affect the degree to which they have access to needed information and services.

Examples of Policy Activities: Policy tools are being developed and tested for carrying out country assessments and identifying priority legal and regulatory issues, and for analyzing and evaluating cost information to guide decisions about program expansion and institutionalization. These tools will serve as a basis for offering such technical assistance as policy seminars, advocacy presentations, and workshops to generate and analyze data for strategic planning, development and implementation of a policy agenda. Other tools will be developed and tested for use by policymakers and advocates.

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AIDS Control and Prevention Project (AIDSCAP)

Cooperating Agency: Family Health International
Project Number: 936-5972.31
Agreement Numbers: DPE-5972-A-00-1031-00
DPE-5972-C-00-4001-00
DPE-5972-Q-00-4002-00

Duration: May 1991 - Sept. 1997
Geographic Scope: Worldwide

Purpose: To provide technical, research and policy leadership in the worldwide efforts against HIV/AIDS.

EXPLICIT POLICY OBJECTIVES: Help create a supportive policy environment with comprehensive prevention interventions; examine the impact of AIDS; and identify effective policy responses. AIDSCAP has a Policy Unit, with regional staff responsible for working with national collaborators to identify existing policies that can enhance AIDSCAP's strategies and fill gaps in the policy framework, and to avert policies that obstruct AIDS prevention efforts.

Interventions to Support Policy: Analysis of policies/procedures to identify problems and options for a supportive policy framework; technical assistance to local collaborators to build skills and organizational capability in policy development and advocacy; social and economic impact assessments, including impact on women and households; modeling of short and long-term trends; policy presentations and dissemination of results; STD/HIV intervention and NGO/PVO activities.

Key Policy Issues: Vulnerability of women; funding for prevention; private sector businesses and HIV/AIDS prevention; legal and ethical aspects; development and implementation of effective STD diagnosis and treatment approaches; migration and spread of disease into rural areas; individual and public rights; development options in the face of AIDS.

Examples of Policy Activities: AIDSCAP has developed training and reference materials for promoting HIV/AIDS prevention policy and program responses in the workplace. In Kenya, an AIDSCAP policy assessment in 1994 identified the legal, ethical, organizational, programmatic, and political nature of the problem and key issues under each. Organizational issues include the vague mandates of HIV/AIDS advisory committees and perceived inability of national AIDS councils to accept new ideas or permit NGOs to be involved in planning and implementation. The results are being used in policy dialogue. AIDSCAP supported studies in Kenya, Malawi, Ivory Coast, Guinea, Honduras, Guatemala, El Salvador, and Nicaragua assessing an individual's productive life years lost from AIDS. The project also undertook studies on the impact of AIDS on households. Findings point to interventions that can sustain households and provide evidence on how AIDS contributes to the impoverishment of women. Addressing costs to the health care system, AIDSCAP has provided training to measure the cost of treatment to teams from Mexico, Honduras, Guatemala, El Salvador, Nicaragua, Barbados, Kenya and Malawi. Estimates from the Kenya study are regularly cited by policymakers and business leaders seeking to expand prevention interventions. Assessments in Honduras and the Dominican Republic contributed to legal reforms to protect the rights of people with HIV. A condom assessment in Brazil was used by advocates to convince federal and state authorities to remove the condom taxes. In Thailand, AIDSCAP is supporting an NGO AIDS secretariat offering advocacy and information sharing to NGO member organizations.

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Central American AIDS Action Project (G-CAP, PASCA)

Cooperating Agency: Academy for Educational
Development
Project Number: 596-0179
Agreement Number: 596-0179-A-00-5127-00

Duration: Sept 1995 - May 2000
Geographic Scope: Central America

Purpose: To improve the regional policy environment to support HIV/AIDS policies and programs, and to improve the ability of NGOs to deliver HIV prevention programs.

EXPLICIT POLICY OBJECTIVES: Objectives include policy formulation through sound research, development of public and private leaders who actively support effective policies, and increased general public support for effective policies.

Interventions to Support Policy: Implementation of workshops and key informant interviews to develop policy research agenda, carry out research, and disseminate findings; assessment of potential collaboration and assistance to intersectoral leaders to become more involved in policy dialogue; implementation of opinion polls of key policy issues and carry out public awareness to increase support.

Key Policy Issues: Although the HIV/AIDS epidemic in Central America has become well established in the general population, there is as yet no systematic, coherent formulation of policies within which comprehensive prevention and control measures could be pursued. Actions of key policymakers do not reflect an understanding of the potential for an enormous jump in the size of the epidemic.

Examples of Policy Activities: The project has just begun and policy work will involve comprehensive legal-regulatory assessments in each of the countries, with efforts to learn lessons across countries in the region with respect to the methodology as well as findings.

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Rational Pharmaceutical Management (MSH)

Cooperating Agency: Management Sciences for Health

Duration: Jan 1993 - Dec 1997

Project Number: 936-5974.08

Geographic Scope: Worldwide

Agreement Numbers: HRN-5974-A-00-2059-00
HRN-004-A-00-5002-00 (*for Russia*)

Purpose: To develop, implement, and evaluate the impact of a variety of technical approaches — including the use of state-of-the-art tools, methods, and software — designed to reduce financial waste, improve resource allocation and use, promote managerial efficiency, and foster sustainable reforms in developing country pharmaceutical systems.

EXPLICIT POLICY OBJECTIVES: Support country officials, educational institutions, local NGOs and other donors in identifying and implementing policy options that will result in improved systems of drug selection and procurement, rational drug use by providers and consumers, automated information management and performance monitoring, and the enhanced viability of pharmaceutical privatization efforts.

Interventions to Support Policy: RPM's strategy emphasizes technology transfer and capacity building by engaging local counterparts as active partners in problem identification and analysis, and intervention design and implementation. This collaboration creates stakeholders in the reform process and integrates rational pharmaceutical management concepts into the health planning process through indicator-based pharmaceutical sector assessments, policy options analysis and dialogue, specialized training, continuing education programs, curricular training in educational institutions, and use of innovative computer software programs, leading to concrete, immediate improvements in pharmaceutical systems.

Key Policy Issues: Financial resource allocation and cost containment; requirements for effective decentralization of pharmaceutical services; delineation of more effective public-private sector roles in pharmaceutical systems; introduction of modern procurement practices and procedures; promotion of rational drug use through cost effective drug selection, drug use review, and standard treatment guidelines; and use of software tools for more efficient management, monitoring and accountability.

Examples of Policy Activities: In Russia, the projects accomplished the following through technical assistance: restrictive drug formularies introduced; official formulary, procurement, and drug use review committees established; curricular changes supporting rational drug use implemented in medical/pharmacy schools; formal business plan acceptance for privatized community pharmacies; RPM concepts included in state health plans. In Nepal, a drug formation network was established for regulators, care providers, and consumers; the rational drug use strategy was implemented in PHC facilities; and a major feasibility study was conducted for implementing community-based drug cost recovery. In Ecuador, the project addressed decentralized pharmaceutical management operations, including needs quantification, procurement, and private sector supply delivery. In Mozambique, RPM provide technical assistance to the implementation of the drug management strategy for human resource development at the national, regional, and local levels.

Concrete project outputs include manuals for indicator-based pharmaceutical assessments and formulary development; operational computer software for needs quantification, procurement, inventory management, drug use review and formulary management; drug management training materials and manuals in Portuguese, Russian and Spanish.

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Rational Pharmaceutical Management Project (RPM/USP)

Cooperating Agency: United States Pharmacopeia
(USP)

Duration: Sept 1992 - Sept 1997

Project Number: 936-5974-09

Geographic Scope: Worldwide

Agreement Number: HRN-5974-A-00-2052-00

Purpose: To promote public health and rational drug use in developing countries through access to and effective application of unbiased and current drug and therapeutics information.

EXPLICIT POLICY OBJECTIVES: Build on existing in-country resources and programs to create sustainable programs for drug information development, dissemination, and use. Develop in-country capability to maintain repositories of country-specific unbiased drug information reflecting current knowledge and local product availability, and to effectively disseminate and apply the drug information created in support of priority health care initiatives (e.g., maternal and child health, nutrition, family planning).

Interventions to Support Policy: Identification of and collaboration with in-country counterparts to determine local needs, access existing resources, and define priorities. Creation of a central site within each country to serve as focal point for local development, adaptation, and maintenance of country-specific drug and therapeutics information. Identification of key populations needing targeted information and development and implementation of dissemination and educational strategies to support rational drug use.

Key Policy Issues: Promoting rational drug use through access to unbiased, current drug and therapeutics information that is country-specific and locally-controlled. Developing standard treatment guidelines and proactive information dissemination programs, including rational drug use training for physicians and pharmacists and improved patient and consumer information access for more appropriate and cost-effective use of medications.

Examples of Policy Activities: Nepal: Creation and maintenance of a Nepal drug information database by the MOH's Department of Drug Administration. A four-center Drug Information Network has been established to facilitate the provision of unbiased information on rational use issues to specific target audiences: public health administrators, pharmacists and pharmacy shop workers, physicians and health workers, and patients and consumers. Each center also sponsors proactive information dissemination activities, most notably newsletters, bulletins, and other publications and educational outreach programs, including workshops, continuing education, and other training initiatives.

Russian Federation: Drug information activities in the Russian Federation have been initiated at both central and regional levels. Centrally-based initiatives include the translation and adaptation of the USP Drug Information (USP DI) database, an All-Russia Drug Information Network, patient drug use education programs, and the creation of drug information training modules for medical and pharmacy training programs. Regional initiatives have focused on the establishment of drug information centers in three Russian oblasts, information outreach, and educational initiatives.

Mozambique: Based on a Portuguese translation of the USP DI database, a Mozambique-specific drug information database is being created by the Ministry of Health. Concurrently, a drug information center that will maintain this database and provide information and educational outreach has been established.

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Breastfeeding and Maternal and Neonatal Health, MotherCare Subproject (MotherCare)

Cooperating Agency: John Snow, Inc.

Project Number: 936-5966.07

Agreement Numbers: HRN-5966-C-00-3038-00

HRN-5966-Q-00-3039-00

Duration: May 1991 - Sept 1997

Geographic Scope: Worldwide

Purpose: To improve pregnancy outcomes by strengthening and improving service delivery, influencing behaviors that affect the health and nutritional status of women and infants, and enhancing policy formulation at the regional and national level for maternal and neonatal health care.

EXPLICIT POLICY OBJECTIVES: Improved policies and increased public and private sector resources and capacity to deliver key reproductive health services.

Interventions to Support Policy: Policy dialogue to build commitment at all levels; promotion of legislation and budget allocations for maternal and neonatal health and nutrition; establishment of protocols and standards for obstetric and neonatal management with complementary standards for facilities (including drugs and supplies) to support these functions; policy analyses; applied research; demonstration projects; information dissemination; creation of national committee to monitor progress of project activities.

Key Policy Issues: Safe pregnancy, women's nutrition, FP and other RH services; lack of awareness of safe motherhood issues and options; legal and regulatory barriers to safe motherhood; legislation, standards and community participation to support enactment of policies and strategies; health care financing and sustainability.

Examples of Policy Activities: MotherCare provides assistance to countries like Bolivia, Guatemala, Honduras, Guinea, Indonesia, Malawi, and Russia to develop standards for the management of obstetrical and neonatal care and management. National policies are being developed in Guatemala and Bolivia for first and second-level management of obstetrical and neonatal care. Bolivia is also developing protocols for integration of detection and treatment of maternal anemia and maternal syphilis, and prenatal services and postpartum FP. The project trained health providers including obstetricians, general practitioners, nurses and auxiliary nurses on these protocols. MotherCare currently provides technical assistance to Indonesia in updating standards and practice of skills of auxiliary midwives at primary levels of care. In Russia, MotherCare works with the SEATS FP Project in two *oblasts* (regions) to promote early and extensive breastfeeding and rooming-in policies in local maternity centers. This activity is in support of the national breastfeeding policy. MotherCare and PATH are working with a lead NGO in Guinea to address the problem of female genital mutilation. MotherCare will support qualitative and quantitative research, dissemination and policy meetings. MotherCare will assist the Ministry of Health in Honduras to develop standards for reproductive health care.

MotherCare uses a community diagnostic process to define women's needs in many countries. After awareness-raising efforts, MotherCare provided technical assistance to draw strategies and reach consensus on appropriate interventions and required resources.

Project staff have actively helped in the development and promotion of RH, neonatal, and STD indicators, including policy-related indicators in these areas. MotherCare staff headed the subcommittees on Safe Motherhood and Women's Nutrition under the EVALUATION Project's Reproductive Health Indicators Working Group.

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Basic Support for Institutionalizing Child Survival (BASICS)

Cooperating Agencies: The Partnership for Child Health Care, Inc., AED, JSI, MSH
Duration: Sept 1993 - Sept 1998
Project Number: 936-6006.01
Geographic Scope: Worldwide
Agreement Numbers: HRN-6006-C-00-3031-00
HRN-6006-Q-00-3032-00

Purpose: To continue and sustain reductions in morbidity and mortality among infants and children in developing countries; and to increase and institutionalize the effective, efficient and sustainable delivery of EPI, CDD, ARI, malaria, and other child survival services.

EXPLICIT POLICY OBJECTIVES: Assist USAID missions, regional bureaus, and USAID-assisted countries in meeting the dual challenges facing child survival programs in the 1990s: extending access to and use of child survival interventions, and institutionalizing those interventions through strengthened health service delivery systems, sustained behavior change, and policies that support child health and child survival.

Interventions to Support Policy: Country assignments; policy research (e.g., cost-benefit analysis, evaluation); operations research and model projects; information dissemination; technical assistance in dialogue, review, and formulation of child survival policies at the national level (e.g., national policy on nutrition) and at the operational level (e.g., immunization guidelines, ARI treatment protocols); technical assistance in strategic planning and resource allocation; partnerships with indigenous private and nongovernmental organizations; evaluation of current programs to refine policy and management practices; assistance to policymakers to implement and support the integrated treatment of childhood illnesses; development of child survival advocacy programs.

Key Policy Issues: Access, quality, and use of child survival interventions; sustainability; critical inputs to child survival programs.

Examples of Policy Activities: The project operates long-term and periodic programs in 20-30 developing countries and assists USAID missions with short-term programs in additional countries. The project's Operations Division plans and implements all BASICS country and regional activities. Field activities are staffed with long-term advisors and locally hired staff and consultants. Technical assistance is provided to the country operations through three regional offices in Almaty, Kazakhstan; Dakar, Senegal; and La Ceiba, Honduras; and from headquarters in Arlington, Virginia. BASICS' country and regional programs reflect the project's six priority areas: sustaining immunization programs, integrating effective case management of childhood illnesses, strengthening the link between nutrition and health, promoting and sustaining healthy behaviors, improving techniques for monitoring and evaluation, and establishing public/private partnerships.

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**Expanded Promotion of Breastfeeding Program:
Breastfeeding and Maternal and Neonatal Health
(Wellstart)**

Cooperating Agency: Wellstart International
Project Number: 936-5992
Agreement Number: DPE-5992-A-00-0050-00

Duration: April 1990 - Nov 1996
Geographic Scope: Worldwide

Purpose: To test, expand, refine, and monitor proactive and successful approaches to promoting and supporting optimal breastfeeding practices.

EXPLICIT POLICY OBJECTIVES: (1) Assist programs to expand services which enable women to follow optimal breastfeeding practices for their own health and for their infants' health and nutritional status, and survival; (2) support activities of a worldwide policy nature that will further breastfeeding efforts globally; (3) support global efforts to establish standardized breastfeeding indicators for collection of data on breastfeeding analysis of economic benefits and cost-effectiveness studies; and (4) document costs of breastfeeding interventions through analysis of economic benefits and cost-effectiveness studies.

Interventions to Support Policy: Short and long-term technical assistance, training, workshops, and applied research support through central funds. Mission add-ons are available to all developing countries upon request, for activities within the following focus areas: assessment of infant feeding practices; national strategy formulation, program design, and implementation; community-based support for lactating women, (e.g., mother-to-mother support systems, strategies for working women, and improving maternal nutrition); policy and cost analysis; communication and social marketing; training; and evaluation and impact appraisal.

Key Policy Issues: Women, work, and breastfeeding; breastfeeding and HIV/AIDS; breastfeeding and the environment; the economic value of breastfeeding; breastfeeding as a women in development issue; breastfeeding and family planning; the marketing of breastmilk substitutes; breastfeeding in emergency humanitarian assistance; breastfeeding as a food security issue.

Examples of Policy Activities: Preparation of various policy pieces on all of the key breastfeeding-related issues cited above. The project also supported preparations and drafting of language supporting breastfeeding in recent UN conferences like the Conference on Environment and Development, the International Conference on Population and Development, and the Fourth World Conference on Women.

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Support for Analysis and Research in Africa (SARA)

[Under USAID umbrella project entitled Health and Human Resource Analysis for Africa (HHRAA)]

Cooperating Agency: Academy for Educational
Development

Duration: Oct 1993 - Sept 1998

Project Number: 936-0483

Geographic Scope: Sub-Saharan Africa

Agreement Number: AOT-0483-C-00-4200-0

Purpose: To ensure wide dissemination of new and existing research and analysis (R & A) on health and human resource issues; promote African participation in R & A and dissemination; and assist African participation in advocating policy changes on the basis of R & A activities.

EXPLICIT POLICY OBJECTIVES: Improve the link between decision-makers and researchers in Africa, thereby providing a channel for existing research findings to inform policy planning and for policy information needs to be recognized by the research community.

Interventions to Support Policy: Participatory identification of research issues; support to research, both primary and secondary, on health and human resources issues; strategic dissemination of generated information to decision-makers in Africa and among the donor community with the explicit goal of modifying policy and improving programs; support to policy advocacy activities; provision of new information tools to African institutions to allow exchanges and interaction in areas of mutual interest and access to each other's findings.

Key Policy Issues: Reproductive health; girls' education; HIV/AIDS participation; integration of population/health services; pre-service training of health staff; maternal and child health and nutrition; the use of DHS data for policy guidance; decentralization; health-care financing and sustainability; emerging disease threats and crisis response.

Examples of Policy Activities: SARA has supported basic research on reproductive health and adolescent needs; facilitated the growth of research networks in education and reproductive health; and facilitated information linkages among African information centers. Networks include the reproductive health network in Senegal and the Society of African Gynecologists and Obstetricians in Cameroon. After extensive consultations in Africa, SARA developed and published strategic frameworks (for health, population, nutrition, and basic education) to guide AFR policy in ten priority areas (e.g., in setting priorities in HIV/AIDS, STDs, POP/FP, reproductive health and safe motherhood, child nutrition, child survival, malaria, and health-sector financing and sustainability). SARA also published the monograph, entitled "Knowledge Utilization and the Process of Policy Formation," which provides a framework for understanding the policy process and how to affect it.

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Equitable Access Project (EAP)

[Still in formative stage.]

Cooperating Agency: Pan American Health Organization (PAHO), Abt Associates, Harvard University
Duration: 1996 - 2001
Project Number: 598-0831
Geographic Scope: LAC Regional
Agreement Number: to be determined

Purpose: To support in-country capability to assess health sector problems and to design, implement, and monitor reforms.

EXPLICIT POLICY OBJECTIVES: Supports USAID's LAC regional strategic objective, "Sustainable country health sector reforms in effect" (designed to increase equitable access to high-quality, efficiently delivered basic health services). The project will be USAID's regional response to the Summit of the Americas health initiative.

Interventions to Support Policy: (1) development and testing of methodologies and tools for analysis and design, implementation, and monitoring of country health sector reforms; (2) collection and dissemination of information on health reform efforts and experience; (3) monitoring and provision of feedback on health reform processes and outcomes; and (4) creation of opportunities and means for sharing of health reform experiences between and among countries.

Key Policy Issues:

Examples of Policy Activities: *Still in formative stage.*

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Environmental Health Project (EHP)

Cooperating Agency: Camp Dresser & McKee
International, Inc.

Duration: Sept 1993 - Sept 1998

Project Number: 936-5994.01

Geographic Scope: Worldwide

Agreement Numbers: HRN-5994-C-00-3036-00
HRN-5994-Q-00-3037-00

Purpose: To help missions and bureaus and other development organizations to address both pre- and post-industrial transition environment-related health problems.

EXPLICIT POLICY OBJECTIVES: Promote improved policies and increased global, national, and local resources for appropriate maternal and child health interventions with a preventive focus.

Interventions to Support Policy: Development of new tools, approaches, and preventive interventions to complement clinical case management; technical assistance to influence the policies and resources allocation decisions of international and national-level institutions that work in environmental health; provision of technical support (a) to households and communities so that people's exposure to environmental health risks is reduced, and (b) to institutions so that they will be more effective in carrying out environmental health programs; increased research on acute respiratory infections.

Key Policy Issues: (1) Increased attention to sanitation, including excreta disposal, wastewater treatment, solid waste disposal, and drainage; (2) incorporation of environmentally-based preventive activities in child survival activities; (3) increased attention to urban environment-related health problems, including malaria; (4) use of community-based approaches and promotion of demand-led strategies.

Examples of Policy Activities: The project prepared guidelines for sanitation programming applicable in all countries. EHP conducted risk assessments and other research to help policymakers identify priorities (e.g., in India and Zambia). EHP works with international organizations and influenced policies of CARE and other External Support Agencies to allocate more attention to sanitation. It also developed new curricula in environmental health for central European countries. EHP designed a computer tool ("WAWTTAR") to aid excreta disposal technology choice.

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Opportunities for Micronutrient Interventions (OMNI) (Field Support)

Cooperating Agency: John Snow, Inc.
Project Number: 936-5122.01
Agreement Numbers: HRN-5122-C-00-3025-00
HRN-5122-Q-00-3026-00

Duration: Sept 1993 - Sept 1998
Geographic Scope: Worldwide

Purpose: To assist governments, donor agencies, and the private sector to implement expanded, more effective and sustainable programs and policies to reduce micronutrient deficiencies.

EXPLICIT POLICY OBJECTIVES: This portion of the OMNI Project will assist USAID missions and host country collaborators to develop integrated programs and strategies and eliminate major micronutrient deficiencies.

Interventions to Support Policy: Assist host countries in designing, implementing, and evaluating multi-faceted, micronutrient intervention programs; organization and implementation of workshops, seminars, and conferences to raise awareness of micronutrient deficiency problems and potential strategies and programs for problem elimination; increase knowledge of scientific information on micronutrient deficiencies through management of the international micronutrient consultative groups; and strengthen institutional capacity and improve skills of public and private sector health, agriculture, education, food industry, and microenterprise development providers as well as policymakers, PVOs, and NGOs through training.

Key Policy Issues: Improvement of child survival by ensuring adequate vitamin A status; anemia control in infants, children, and adolescents; monitoring and evaluation of micronutrient programs, including iodine deficiency prevention measures; supporting sustainability through behavior change, use of the private sector and food-based approaches.

Examples of Policy Activities: Adoption of national micronutrient action plans. Moving research and development from the laboratory to field trials and then into policy. Ensuring micronutrient prevention and control activities continue at the community level after decentralization of health services.

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Access to Family Planning Through Women Managers (ACCESS)

Cooperating Agency: The Centre for Development
and Population Activities

Duration: Aug 1991 - Aug 1996

Project Number: 936-3059

Geographic Scope: Worldwide

Agreement Number: DPE-3059-A-00-1022-00

Purpose: To improve access to quality family planning services by utilizing the resources of trained women managers in developing countries.

EXPLICIT POLICY OBJECTIVES: Increase participation of women in reproductive health and reproductive rights to help ensure that women's concerns are incorporated in the design and management of programs and in policy development.

Interventions to Support Policy: Strengthening local advocacy capabilities of LDC women leaders and tapping an extensive network of nearly 4,000 alumnae in 100 countries in local and community-level advocacy and in promotion of accessible and quality services and reproductive rights.

Key Policy Issues: Women's empowerment, leadership, grassroots participation and community mobilization.

Examples of Policy Activities: The ACCESS Project trained women leaders and network members who participated in workshops to identify key issues and learn advocacy skills in preparation for the PrepCom for the 1994 ICPD in Cairo. CEDPA alumnae participated in pre-ICPD country-level meetings and regional caucuses to develop recommendations on key issues in the draft Programme of Action which were subsequently forwarded to the ICPD Secretariat. CEDPA alumnae trained under ACCESS and mostly funded by the project undertook substantial international advocacy roles during the ICPD and NGO Forum in 1994. Many CEDPA alumnae who were active in preparatory and actual ICPD activities have taken lead roles in supporting efforts to develop country-specific strategies following the ICPD. Post-Beijing conferences and dissemination activities (including mass media) were also part of CEDPA alumnae activities. CEDPA/Nigeria organized the meeting "Beijing and Beyond" in which Nigerian participants to the Beijing conference presented their reports on women in relation to political participation, media, the girl-child, reproductive health, and poverty. CEDPA also collaborated with a Nigerian NGO, Gender and Development Action, to organize a "summit meeting" in February 1996. The meeting's recommendations included addressing policies that disenfranchise women and strategies to increase women's empowerment through community mobilization, coalition building, and civil participation. In Nepal, CEDPA worked in collaboration with the U.S. Ambassador and women's NGOs in projects pre and post-Beijing to address problems like girls' trafficking, violence against women, safe motherhood, and HIV/AIDS prevention. Immediately after Beijing, a post-conference advocacy meeting was held in India wherein CEDPA/Washington, USAID/India officials, and local NGOs called for a comprehensive plan for women's advocacy. A training program for women's leadership development is being developed collaboratively by the Innovations In Family Planning Services Project, local NGOs, and CEDPA in Uttar Pradesh.

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**II. PROJECTS THAT IMPROVE ACCESS
AND QUALITY OF PHN SERVICES**

B. IMPORTANT POLICY-RELATED ACTIVITIES

Population Communication Services (PCS)

Cooperating Agency: Center for Communication
Programs, The Johns Hopkins
University

Duration: Nov 1995 - Nov 2000

Project Number: 936-3052

Geographic Scope: Worldwide

Agreement Number: CCP-3052-A-00-6001-00

Purpose: To support host country organizations in communicating appropriate information, promoting healthy behavior with respect to FP and RH to a wide range of audiences, and evaluating the effectiveness of these activities.

IMPORTANT POLICY ACTIVITIES: Stimulate policy dialogue and promote specific policy changes that ensure more effective use of IEC approaches; secure commitment of decision-makers to policies supportive of FP/RH services through development of national IEC strategies, now in place in over 20 countries with PCS assistance; and encourage both public and personal advocacy to create an environment for positive policymaking in FP/RH. Of particular importance to these policy activities are subcontracts with AED (expertise in health communication) and CEDPA (training women for larger program role).

Examples of Policy Activities: Bolivia now has a National IEC Strategy focused on RH which incorporates policy commitment to integrated FP and MCH services; programs to reduce abortion, promote breastfeeding, and support safe motherhood; and use of radio and TV to convey messages. ■ In the "Steps to Behavior Change" conceptual framework that guides PCS efforts, advocacy for FP policies and programs is the final step in personal behavior change and the first step in developing community support. ■ Training in IEC includes skills in strategic planning, review of existing policies, identification of policy changes needed to achieve desired results, and policy implications derived from audience research and communication planning. Through Advances in Family Health Communication workshops (400 "graduates" from 56 countries), the SCOPE (Strategic Communication Planning and Evaluation) software disseminates this policy-oriented approach worldwide. ■ Encouragement of supportive media policies, crucial to promotion of specific contraceptive methods and messages about AIDS and FP/RH, is a key part of many PCS projects. Success is reflected in Kenya's weekly *Youth Variety Show*, Bolivia's TV magazine show on gender issues, and Nepal's two complementary radio serials (for the general public and for health workers) on the "well-planned family." PCS also works with DHS to incorporate questions that show policymakers that there is public support for FP messages in broadcast media. ■ Supportive RH policies are effectively promoted by incorporating AIDS and STD prevention, safe-motherhood related MCH, and family planning in many PCS programs. ■ Policies supportive of women's issues, male involvement, and youth issues: PCS uses media and other communication opportunities to reinforce the need for policy changes and to create a new and stronger image of women, to reinforce men's roles and responsibilities in FP and family health, and to influence policies that increase young people's access to FP/RH information and services. ■ Sustainability: PCS encourages policies and programs that provide for public-private collaboration such as commercial sponsorship of Enter-Educate activities and collateral materials, promotion of professional fee-for-service providers and facilities, and encouragement of community mobilization with volunteer support.

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Family Planning Logistics Management (FPLM/CDC)

Cooperating Agency: Centers for Disease Control and
Prevention Division of
Reproductive Health
(DRH/CDC)

Duration: April 1991 - Aug 1996

Project Number: 936-3038

Geographic Scope: Worldwide

Agreement Number: DPE-3038-X-HC-1015-00

Purpose: To improve the management and operation of FP programs in developing countries through the use of more effective and efficient contraceptive logistics systems, the collection and analysis of demographic data, and the use of targeted epidemiological activities.

IMPORTANT POLICY ACTIVITIES: Inform operational policy dialogue on effective logistics systems and clinic management (together with FPLM/JSI). Stimulate discussion and provide the bases for planning, resource allocation, and evaluation regarding contraceptive knowledge and use and epidemiological issues related to FP and reproductive health.

Interventions include logistics management training and research; conduct of contraceptive prevalence and reproductive health surveys; national and regional conferences or seminars to disseminate data to high-level decision-makers and national and local program officials, PVOs and NGOs; epidemiological training and research; clinic management tools including Patient Flow Analysis to measure the efficiency of clinic operations; and development of management information systems.

Examples of Policy Activities: FPLM /CDC provided technical assistance in the development, implementation, analysis and dissemination of findings of the contraceptive prevalence survey of Jamaica together with the National Family Planning Board; the family planning and child survival survey of Ecuador led by the Centro de Estudios de Poblacion y Paternidad Responsable (CEPAR) and the Ministry of Health; and a national reproductive health survey conducted in Romania.

To give greater visibility to contraceptive logistics issues, a slide show and computerized presentation have been developed for policymaker audiences. This has been widely disseminated, and Spanish and French versions are being developed. The Family Planning Logistics Guidelines were published jointly with JSI.

The project contributed to improving knowledge about family planning through the publication of Family Planning Methods and Practices in Africa. A revised, updated version is nearing completion. The project also provided an Ob-Gyn expert to the government of Bangladesh to assess IUD-string detachment. This was in response to local questions and issues on contraceptive and reproductive health that may have broad political ramifications.

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Family Planning Management Development (FPMD)

Cooperating Agency: Management Sciences for
Health
Project Number: 936-3055
Agreement Number: DPE-3055-A-00-5000-00

Duration: Sept 1995 - Sept 2000
Geographic Scope: Worldwide

Purpose: To promote institutional development and strengthen the management capabilities of public and private (non-profit) family planning organizations in less developed countries.

IMPORTANT POLICY ACTIVITIES: Promote operational policies and approaches that support effective management.

The project works with Policy Boards of various countries to help strengthen policies that affect sound management. Interventions include training, evaluation, strategic and operational planning, financial management planning, marketing, client surveys, MIS, supervision, quality of care, service delivery, etc.; study tours; development and application of quality improvement tools, production and dissemination of *The Family Planning Manager* for continuing management education.

Examples of Policy Activities: In Mexico, a needs assessment of the management issues of the state level policy boards (under FPMD I) serves as a basis for assisting CONAPO in strengthening the management capability of these boards. In Jamaica, the project will provide computer skills training to follow up assistance to the Family Planning Board in the development of its MIS. In Kenya, the project coordinated the development of a national implementation plan for FP and will facilitate plan implementation. Intensive technical assistance was also provided to the National Population Council to design and manage a computerized information system and process national POP/FP statistics regularly. Continued assistance on these activities is expected under the new project.

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Population and Family Planning Expansion (CARE)

Cooperating Agency: Cooperative for American Relief
Everywhere (CARE)

Duration: May 1991 - May 1996

Project Number: 936-3058

Geographic Scope: Worldwide

Agreement Number: DPE-3058-A-00-1011-00

Purpose: To lower fertility by increasing the use and availability of voluntary FP services. CARE is the largest private non-sectarian development and relief agency worldwide; however, rapid population growth undermines its development work. The integration of voluntary family planning services into its activities helps to slow the growth rate, while at the same time providing an excellent resource to reproductive health programs in the form of active community development efforts.

IMPORTANT POLICY ACTIVITIES: Inform policy discussions on the advantages of integrated, community-level approaches and promote operational policy changes to ensure access and local participation in FP information, supplies and services.

Project interventions that could enter into policy discussions include testing new models and participatory approaches to providing FP information and services to rural/hard-to-reach populations in low contraceptive prevalence countries. Models include using agricultural extension agents to promote FP, working with cooperatives and local groups to increase FP demand and supply, tap CARE's existing village-level development activities as a base for extending FP access, adoption of existing trucking and logistics systems to ensure contraceptive supply.

Examples of Policy-Related Activities: CARE's Population Unit developed and disseminated a series of guidelines to support project staff and guide implementation of the agency's population program, including guidelines for training, assessment of NGO management capacity, developing successful IEC programs, service statistics, monitoring, and evaluation.

Capitalizing on CARE's expertise in logistics and distribution of food commodities, CARE supported nationwide implementation of a pilot distribution system designed by JSI's FPLM Project in the Philippines. In less than three years, logistics guidelines were developed and tested, and contraceptive supplies improved all over the country. In Bolivia, the main operational policy issue involved which providers could perform pap smears and insert IUDs. Traditionally, only doctors are allowed to do these although their basic training on these specific services is not any different from that of nurses. CARE trained doctors, nurses, and auxiliaries to perform pap smears and also trained some nurses on IUD insertion. Results indicate that nurses and auxiliaries provided more pap smears and IUD services than doctors and at the same level of quality. Although MOH is aware of these results, policy and protocols have not changed at the national level. CARE/Bolivia is currently designing operations research studies to replicate and expand the above initiatives into new areas, as well as participating in advocacy to expand reproductive health services through both the public and the private sectors. Eventually, these will have the effect of de-medicalizing services to make them more accessible. In Nepal, CARE participates with the NGO Coordination Council which pools advocacy efforts into a single voice to address operational policies that govern the provision of services. In Honduras, CARE spearheaded activities that effectively advocated rational use of natural resources based on projected population growth scenarios that had the effect at the national policy level of developing environmental education programs in public schools. Both CARE Honduras and Guatemala are working on issues related to land title, which is explosive but basic to CARE's household livelihood security paradigm. In Haiti, CARE has participated in national workshops which resulted in the development of the country's five-year population plan and the Grand'Anse region's five-year plan.

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International Planned Parenthood Federation (IPPF)

Cooperating Agency: IPPF
Project Number: 936-3071
Agreement Number: CCP-3071-G-00-3013-00

Duration: Aug 1993-Aug 1998
Geographic Scope: Worldwide

Purpose: A grant to enable the International Planned Parenthood Federation (IPPF) to introduce, expand, and improve family planning and reproductive health information and services through its extensive affiliated network of indigenous family planning associations. USAID contributes to the general IPPF fund which in turn supports FP and RH activities worldwide.

IMPORTANT POLICY ACTIVITIES: Stimulate policy dialogue and promote the removal of political, legal and administrative barriers to the provision of FP and reproductive health services.

IPPF is the leader in the family planning movement in the NGO sector. Over time, the organization has recognized challenging policy-related issues and addressed these concerns through strategic thinking, planning and management and actively supporting its network of FPA members all over the world.

• **Examples of Policy Activities:** The IPPF recently identified the most important issues, goals and challenges that need to be addressed by the Federation in the document *Vision 2000: Strategic Plan*. This reaffirms the challenge to strengthen IPPF's resolve to ensure that women's equality and right to FP and reproductive health remain a priority in national and international development policies. International/regional activities that are to be addressed under this plan include: (a) analysis and monitoring of obstructive and coercive national policies and practices; (b) advocacy for policy reform; (c) wide information dissemination of the benefits and rights of the individual to reproductive and sexual health care; (d) active participation in the development of international standards pertaining to the protection of sexual and reproductive rights; (e) protection of women's right to health against the pressures of imposed demographic goals; (f) increasing access of young people to FP and RH information and services; (g) joining forces with parliamentarians concerned with FP, population and development issues and participate in the implementation of substantive and positive government policies addressing these issues; (h) educating government policymakers on the need for a national commitment to FP and sexual and reproductive health; and (i) using IPPF's position in international and national fora to actively contribute to national and international FP and population policy formulation.

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Family Planning Services (Pathfinder)

Cooperating Agency: Pathfinder International
Project Number: 936-3062
Agreement Number: CCP-3062-A-00-2025-00

Duration: Sept 1992 - July 1997
Geographic Scope: Worldwide

Purpose: To introduce voluntary family planning services, information, and training in developing countries and to make existing family planning service systems more effective in both public and private sectors.

IMPORTANT POLICY ACTIVITIES: Inform decision-makers about the benefits of FP. Provide assistance aimed at resolving policy issues relating directly to FP services, particularly in advocating for the removal of legal and regulatory barriers that impede service delivery.

Interventions aim at influencing policy through demonstration projects; study tours for policymakers; advocacy (e.g., through networks); policy research; data dissemination (national media, fact sheets, etc.); conferences and workshops for policymakers and opinion leaders; working with local NGOs, including women's groups, unions and religious groups.

Examples of Policy Activities: Pathfinder works in several African countries, particularly in sub-Saharan Africa, conducting activities both at the national level and with the local community. In Liberia and Sierra Leone, the agency worked with the RAPID Project to assist government officials in developing national population policies. In Tanzania, Pathfinder was part of the comprehensive Arusha Planning and Village Development Project which demonstrated the value of local-level involvement and population planning in the development process. In Kenya, Pathfinder assisted in establishing a CBD program. Pathfinder also worked in several African countries to help describe the current nature and extent of adolescent reproductive behavior and define what policies and programs are required to address their needs. The agency worked with FHI in developing the first systematic KAP studies relating to adolescent fertility in Africa.

Pathfinder also works with women's groups, younger populations and Islamic organizations in Indonesia in order to inform policymakers, providers, Islamic leaders and the public about the health and social implications of early marriage and childbearing. Pathfinder assisted the national confederation of trade unions in Turkey to adopt a population policy statement and in turn help in the expansion of FP programs throughout the country. In Bangladesh, Pathfinder expedited the use of contraception through the promotion of community-based service programs employing mostly women in selected municipal areas.

In Latin America, Pathfinder assisted Brazil in developing a national population policy and mobilizing support for an FP program. Activities in Bolivia supported efforts to gather facts about the population/development situation and to create public discussion of population programs. Pathfinder supported an analysis of census data for mortality and fertility. This analysis was used to incorporate important demographic findings into the planning process in the country.

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Family Planning Service Expansion and Technical Support (SEATS)

Cooperating Agency: John Snow, Inc.
Project Number: 936-3048
Agreement Numbers: DPE-3048-Z-00-9011-00
CCP-3048-C-00-4004-00

Duration: Jan 1995 - Jan 2000
Geographic Scope: Selected countries in
Africa, Asia, Near East
and the New
Independent States

Purpose: To expand the development of national FP and RH programs; increase access to, and use of quality FP services in currently underserved populations; and ensure that the unmet demand for these services is addressed through the provision of appropriate financial, technical, and human resources.

IMPORTANT POLICY ACTIVITIES: SEATS policy efforts are focused on activities and strategies aimed at expanding FP/RH services to a national scale.

SEATS works alongside country partners — in both public and private sectors — to improve their program and strategic planning capabilities. For example, SEATS provides technical assistance in sustainability planning, user fees, quality, training strategy development, short and long-term planning, local level advocacy, and cost analysis. In countries where policies impede the delivery of FP services or the expansion of services, SEATS uses a combination of small special studies, planning or training workshops, and other approaches such as leveraged funding to encourage policy change.

Examples of Policy Activities: In Turkey, an analysis of the cost-effectiveness of FP services to the Social Security Administration (SSK) successfully led to major policy changes, including convincing SSK to assume responsibility for commodity procurement. Since the best means of encouraging policy change is by example, SEATS supports activities which have the potential to be used as local or regional models to encourage change nationwide. Finally, through its "Special Initiatives," SEATS seeks to broaden a "best practices" approach to the delivery of FP services. Both the MAPS initiative (Midwifery Association Partnerships for Sustainability), which strengthens midwifery associations and their regional and national partnerships, and the Urban Initiative (Maximizing Urban Resources), which strengthens advocacy at the municipal government level, concentrate on activities that have a strong policy focus.

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Contraceptive Social Marketing III (SOMARC)

Cooperating Agency: The Futures Group International
Project Number: 936-3051
Agreement Numbers: CCP-3051-C-00-2016-00
CCP-3051-Q-00-2017-00

Duration: Sept 1992 - Sept 1997
Geographic Scope: Worldwide

Purpose: To increase the availability and use of contraceptives among low and middle income groups using commercial marketing techniques. To establish realistic cost recovery schemes and targets in all sales programs.

IMPORTANT POLICY ACTIVITIES: Making regulatory changes in commercial distribution channels, cost-recovery schemes, inclusion of new contraceptives in a country program, and marketing of FP services.

Project tools include country assessments, cost-benefit analysis and studies of policies and regulations on licensing and other social marketing-related concerns by collaborating with projects like OPTIONS and PROFIT.

Examples of Policy Activities: Constrained by a ban on public advertising of prescription products in Morocco, SOMARC worked with OPTIONS to address legislation/registration constraints to FP social marketing. In Senegal, the project is still limited to pharmaceutical outlets although the policy prohibiting sale of condoms in hotels, restaurants, department stores and other "appropriate" sales outlets was officially lifted in 1994. SOMARC is proposing a plan to the MOH to expand distribution into selected non-pharmaceutical outlets. In Uganda, as well as in the other countries, SOMARC assists local associations of midwives and other women's groups supportive of FP/MCH by facilitating the approval and implementation of rules regarding the active involvement of these groups. In the Philippines, SOMARC made recommendations on regulatory barriers that do not need legislation and presented these to the appropriate regulatory agency for consideration (e.g., to the Bureau of Food and Drug to incorporate Couple's Choice logo on the contraceptive's package design and the Bureau of Product Standards which sets quality standards for commercial condoms). In Madagascar, SOMARC has initiated a dialogue with key MOH officials on regulations on service provision and discussing current official limitations to FP service expansion. The next steps could be a request for a waiver for certain activities or a pilot project. In Turkey, SOMARC is looking at ways in which the MOH can provide training opportunities for the private sector, obtaining commercial registration of alternative methods [Depo-Provera and Norplant®], working with the Turkish Medical Association to lower its pricing minimums, and facilitate the private health industry's movement into FP coverage.

In the CAR, policy initiatives contributed to assisting MOHs to develop guidelines for FP service delivery. SOMARC adapted guidelines (previously developed by JHPIEGO and OPTIONS) for the introduction of Depo-Provera into the region. The guidelines aimed at a consistency in provider training, motivational and instructional messages to consumers, and a rational framework for marketing and promoting contraceptives through the private sector. SOMARC also facilitated the creation of social marketing advisory boards serving as reproductive health advocates and liaison between the public and private sectors. These advisory boards in turn facilitated OPTIONS' policy work in the region. SOMARC also contributed to developing the Uzbekistan Association of Physicians as a network for advocacy, service delivery, and quality assurance. The objective was to create a professional organization in the private sector that would promote the expansion and interests of private sector delivery of FP services.

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Strategies for Improving Service Delivery: Operations Research/Technical Assistance (OR/TA)

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|---|------------------------------------|
| Cooperating Agency: The Population Council | Duration: Sept 1998 (AFR) |
| Project Number: 936-3030 | Jan 1998 (ANE) |
| Agreement Numbers: CCP-3030-C-00-3008-00 (AFR) | March 2000 (LAC) |
| CCP-3030-Q-00-3009-00 (AFR) | |
| CCP-3030-C-00-0022-00 (ANE) | Geographic Scope: Worldwide |
| CCP-3030-Q-00-0023-00 (ANE) | |
| CCP-3030-C-00-5007-00 (LAC) | |

Purpose: To improve the quality, accessibility, and cost-effectiveness of FP, reproductive health, and MCH delivery systems through operations research (OR) and technical assistance (TA); and to strengthen developing country institutional capabilities to use OR as a management tool to diagnose and solve service delivery problems.

IMPORTANT POLICY ACTIVITIES: Stimulate discussions and help guide operational policy and appropriate program responses on service delivery operations.

The main OR approaches are diagnostic/needs assessments, experimental pilot studies, and intensive technical assistance.

Examples of Policy Activities: The Africa OR/TA Project developed a protocol and guidelines for implementing a family planning situation analysis study. Situation analysis studies have been used in many countries all over the world and have served as inputs for operational policy dialogue and program planning. For example, OR/TA's situation analysis study in Zimbabwe in 1991 by the National Family Planning Council led to: incorporation of most of study's recommendations into the Five-Year Strategy; compilation of a service delivery policy and development of protocols and standards; revision of procedures manuals for clinical and CBD training courses and the basic FP curriculum; (other Africa OR/TA experimental studies have focused on integration of FP and STDs, CBD Pill distribution in Mali and Burkina Faso, and post-abortion counseling and services). In Ghana, Burkina Faso, The Gambia and Kenya, OR studies demonstrated the feasibility of training TBAs as FP information and service providers and led MOHs to accept the principle that TBAs should be incorporated within the national FP program.

The main objectives of the OR Project in Latin America and the Caribbean are sustainability and serving the underserved. The INOPAL III initiative focuses on identifying variables not under the control of family planning program managers, especially in the context of integrating FP and other reproductive health programs, and devising strategies whereby such variables are made manipulable by program managers. One of OR's major strategies is to influence policymakers through the results of research findings. Research issues that have been addressed include sustainability, evaluation of capacity-building activities and the prevalence of STDs and related reproductive health problems among Latin American FP clients. Dissemination activities target decision-makers, policy formulators, government administrators, professional groups, politicians, local governments, NGOs and PVOs. Research results are also disseminated regionally and in the U.S.

The Asia ANE OR/TA Project has worked with service delivery organizations on determining the cost of reproductive health services in India; Norplant quality of care in Indonesia; improved post-abortion counseling in Egypt; and numerous other FP and RH studies in the Philippines, Bangladesh, Turkey, and Jordan. The ANE OR/TA also has extensive OR activities in Uttar Pradesh, India.

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The Population Council Programmatic Grant (PopCouncil)

Cooperating Agency: The Population Council
Project Number: 936-3050
Agreement Number: DPE-3050-A-00-4013-00

Duration: Sept 1994 - Sept 1999
Geographic Scope: Worldwide

Purpose: To develop and appropriately introduce contraceptive technology; to expand contraceptive choice in family planning programs; to provide technical information on contraceptive methods to the international population and family planning community; and to provide technical assistance to institutions in developing countries for research, evaluation, and training.

IMPORTANT POLICY ACTIVITIES: Inform policy analysis and discussions on contraceptive choice. Policy dialogue is organized around activities which are undertaken to broaden the range and availability of contraceptive options.

Thus, field-based research, technical assistance, and development of assessment tools for examining specific issues surrounding FP all provide opportunities to inform policymakers regarding the critical need to broaden contraceptive options.

Examples of Policy Activities: Current research in the contraceptive development area is heavily focused on activities related to developing and testing new contraceptive and reproductive health technologies, including vaginal rings, microbicides, implants and long-acting hormonal methods for male contraception. Contraceptive introduction involves the interrelated processes of extensive research, technical assistance and policy dialogue. The purpose is to expand contraceptive choice by broadening the range and availability of contraceptive options for women and men. Policy-relevant issues that are addressed involve the impact on quality of care as new contraceptive methods are incorporated into family planning programs. Research on these issues have been conducted with local experts in various countries with technical assistance from the Population Council. Research and technical assistance have also been undertaken in related family planning concerns such as postpartum family planning, post-abortion counseling and services, breastfeeding promotion, and development of assessment tools for examining specific issues surrounding family planning for young adults.

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Family Health International Contraceptive Technology and Family Planning Research (FHI)

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| Cooperating Agency: Family Health International | Duration: Sept 1990 - Aug 1996 |
| Project Number: 936-3041, 936-3079 | Aug 1995 - Aug 2000 |
| Agreement Numbers: DPE-3041-A-00-0043-00 CCP-3079-A-00-5022-00 | Geographic Scope: Worldwide |

Purpose: To develop, evaluate and introduce a range of safe, effective and acceptable methods of family planning, and to enhance the capability of family planning researchers and programs in developing countries to evaluate and provide these methods.

IMPORTANT POLICY ACTIVITIES: Inform policy dialogue and formulation through the provision of scientific data and information to those who have the authority to approve or disapprove contraceptive methods, or to make changes in service delivery policy to improve accessibility and quality of care.

FHI works closely with a worldwide network of scientists, health providers, government and private sector and community groups and international organizations to undertake: contraceptive development, evaluation and approval; introduction of new methods into country programs and evaluation; research to improve service delivery and quality, addressing issues like integration and provider practices; assessment of non-contraceptive benefits and risks (e.g., STDs); and contraceptive technology communication, dissemination and capacity-building worldwide (e.g., publications like Network).

Examples of Policy Activities: In Zambia, the project assessed long-term use of male and female condoms and vaginal contraceptive film among couples at high risk for HIV and STDs. In Bangladesh, the project estimated the cost per CYP for various combinations of methods and delivery systems and determined reasons for variations. In Bolivia, FHI assessed the quality of care provided by PROSALUD staff and OC compliance by PROSALUD clients. Another study evaluated various aspects of the introduction of Depo-Provera, such as continuation, side effects, impact on use of other methods and cost-effectiveness vis-à-vis OCs. In Senegal, FHI measured access to FP services for young adults and identified ways to improve service delivery. Assistance was provided to the government of Nepal to strengthen its institutional capacity to develop and implement policies and strategies to increase the availability of access to quality FP and child survival services.

FHI co-sponsored with INTRAH and JHPIEGO a 1995 conference on "Increasing Access and Improving the Quality of Family Planning and Reproductive Health Services in Francophone Sub-Saharan Africa" where action plans were developed by 10 participating countries. A conference on maximizing access and quality of care was held with participants from 33 countries to raise the commitment of IPPF affiliates and draw action plans addressing important MAQ issues. FHI also provided technical and financial support to the XIV Bi-annual Meeting of the Latin American Association of Research on Human Reproduction in 1995.

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Applied Research on Child Health (ARCH)
(Formerly the Applied Diarrheal Disease Research — ADDR)
(Child Health Research)

Cooperating Agency: Harvard Institute for
International Development
(HIID)

Duration: Feb 1991 - July 1996

Project Number: 936-5986.04

Geographic Scope: Worldwide

Agreement Number: DPE-5986-A-00-2010-00

Purpose: To support multi-disciplinary research and evaluation for improved child health, and dissemination of research results in less developed countries.

IMPORTANT POLICY ACTIVITIES: Emphasis is placed on translating research results into institutional, local, national, and global policy and improving measurement of child morbidity and mortality.

Research projects are designed by country researchers and reviewed and revised with the assistance of ARCH/HIID staff and consultants. ARCH provides assistance, mostly through a workshop format, in proposal development and implementation, data collection and analysis, and dissemination of research results. Dissemination activities include assistance in oral presentation, preparation of executive summaries, and manuscript preparation.

Examples of Policy Activities: Building on the results of the ADDR-sponsored study that evaluated three diets for treatment of severely malnourished children with chronic diarrhea, the Minister of Health in Mexico adopted the maize-milk formula as a model for the treatment of malnourished children, and later as an intervention to prevent malnutrition. About 1,100 community-based health care providers were trained in the preparation of the maize-milk formula; the number of trainees was later expanded to 14,600. The formula is now used throughout Mexico as a weaning and supplemental food. Approved and endorsed by the nutrition community of Mexico, the formula also has the endorsement from the President of Mexico, who has publicly stated that the government is launching a program to prevent and treat malnutrition. This formula is the centerpiece of that program.

A multi-center study, jointly funded by ADDR and WHO, has evaluated a new algorithm based on diet for the treatment of persistent diarrhea. The results of the study carried out by teams from Bangladesh, India, Mexico, Pakistan, Peru, and Vietnam have led to the new recommendations that are being promulgated by WHO for the treatment of persistent diarrhea. This dietary treatment will save millions of dollars in ineffective treatments and decrease the use of unnecessary antibiotics that were previously given as a part of standard therapy for this condition.

"Linking Applied Research with Health Policy" was the subject of a recent workshop held in Mexico last month, sponsored by ADDR/HIID and cosponsored by a number of international research donor and research policy organizations. Attending the conference were representatives of WHO, PAHO, COHRED, directors of health research institutes from around the world, journalists, and policymakers from governments and foundations. Presentations and working group discussions included how to sensitize policymakers to the information source resulting from quality research. A set of guidelines to improve the research-to-policy link will be drawn up and distributed to key participants in the research/policy arena in developing countries.

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**III. PROJECTS THAT STRENGTHEN
POLICYMAKING CAPABILITY**

Demographic and Health Surveys III (DHS)

Cooperating Agency: Macro International, Inc.
Project Number: 936-3023
Agreement Numbers: CCP-3023-C-00-2012-00
CCP-3023-Q-00-2013-00

Duration: Sept 1992 - Sept 1997
Geographic Scope: Worldwide

Purpose: To improve the information base for family planning and health management programs through sample surveys.

STRENGTHEN POLICYMAKING CAPABILITY: Stimulate policy dialogue at the national or regional level on the basis of sound demographic and health data.

Interventions to Support Policy: Standard data analysis, trends report and dissemination activities to raise awareness about key policy issues; use of DHS findings for a country's population and health programs, including focusing attention on the existence of substantial unmet need for family planning in many countries; research communication manual, media coverage of DHS findings, production and wide distribution of wall charts; country-specific further analysis and activities designed to increase utilization of the DHS results; global and regional analysis and dissemination activities through publications of *Comparative Studies* and *Comparative Analysis* reports.

Examples of Policy Activities: For global activities, the DHS prepared for ICPD a chartbook entitled *Women's Lives* which gave a comparative overview of key population and reproductive health issues. DHS data have also been crucial in raising awareness about key policy issues and broaden support for strong population policies. In many sub-Saharan African countries, DHS results were used to raise awareness of women's needs and FP use and to increase the commitment of many governments in the region to FP programs. The project also plans to undertake a further analysis workshop on the role of men in FP/RH in sub-Saharan Africa where researchers will present their findings to policymakers and program managers in order to consider ways in which men can be more effectively targeted by RH programs.

Country activities included the DHS assisting (a) Kenya's National Council for Population and Development to conduct district-level seminars to inform local officials as well as service delivery personnel of the government and NGOs about the demographic/health situation in their area; (b) the Philippine devolution process by working with the National Statistics Office, POPCOM, DOH and University of the Philippines to develop a strategy for informing regional and local officials about key FP and MCH regional indicators; (c) Turkish researchers in further analysis of DHS data on topics which are intended to help inform the RH policies.

DHS data has also been used for program planning and performance monitoring. For example, after the DHS-1 in Morocco highlighted a comparatively low level of utilization of maternity care, the government responded by strengthening its maternal health care programs. Subsequent rounds of the DHS Project in Morocco have helped monitor the success of such efforts. Many countries also turn to DHS results to improve strategic planning and resource allocation. Sample sizes for DHS surveys have increased over time in response to the need for subnational differentials in key PHN indicators. In Indonesia, for example, the DHS sample allowed provincial estimates to enable the government to effectively assess the country's increasingly decentralized program.

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East-West Center Program on Population (EWCPOP)

Cooperating Agency: The East-West Center Program
on Population

Duration: Aug 1993 - Aug 1997

Project Number: 936-3046

Geographic Scope: Asia-Pacific Region

Agreement Number: CCP-30468-A-00-3015-00

Purpose: To strengthen the capability of institutions in the Asia-Pacific region to analyze and use demographic and family planning data in population policy and family planning program applications.

STRENGTHEN POLICYMAKING CAPABILITY: Inform and strengthen population and health policy development in the Asia-Pacific region through an extensive network of collaborating agencies and key policymakers, program administrators and researchers developed throughout the region during the last two and a half decades.

Interventions to Support Policy: Technical assistance (research, design and data analysis); training at EWCPOP and in developing countries in Asia with policymakers, program managers and researchers as participants; collaborative research with local Asian institutions; and dissemination through conferences and publications for policymakers, program managers and researchers. The substantive themes addressed by EWCPOP are all policy-relevant issues that include understanding the nature and determinants of fertility and mortality decline, assessing the benefits of FP programs and lowered population growth for national objectives, and improving FP and MCH programs.

Examples of Policy Activities: EWCPOP is leading the multi-country project "Population and the Asian Economic Miracle" to assess the economic impact of rapid fertility decline among Asia's demographic leaders (Indonesia, Japan, Singapore, South Korea, Taiwan and Thailand) and thus provide valuable lessons for LDC population policy development.

In Bangladesh, EWCPOP collaborated (a) with the Planning Commission to evaluate 1991 Census fertility and mortality estimates, and review evidence of substantial out-migration of young adult women to India; and (b) with the ICDDR and local research institutes to study and disseminate the impact of infant mortality on fertility, assess FP/MCH programs, field worker effectiveness, regional variations in FP use and method choice, husband-wife FP attitudes, etc. In India, EWCPOP works with Macro International and International Institute for Population Sciences to strengthen 18 Population Research Centers through involvement in the National Family Health Survey which aims to provide policymakers and program managers with needed information for evaluating and improving FP and MCH programs, and the causes and consequences of demographic change. NFHS national and state reports have been published and a national seminar was held for top officials of the national and the state departments of health and family welfare. The follow-on collaborative research phase will come out with policy briefs on topics identified by USAID and MOHFW. In the Philippines, EWCPOP collaborated with lead institutes and the National Statistics Office in the extended analysis of the 1993 National Demographic Survey and Safe Motherhood Survey. A two-day dissemination seminar in December 1995 was attended by policymakers and program managers, donor agencies, etc. Reports and policy briefs are being issued. EWCPOP also provided technical assistance to the University of the Philippines Population Institute and the Health Research Network on the design, implementation and analysis of the 1994 Young Adult Fertility and Sexuality Survey. Two press conferences in 1995 disseminated early findings to the media and policymakers. Policy briefs are forthcoming.

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Evaluating Family Planning Program Impact (EVALUATION)

Cooperating Agency: Carolina Population Center,
University of North Carolina

Duration: Sept 1991 - Sept 1996

Project Number: 936-3060

Geographic Scope: Worldwide

Agreement Numbers: DPE-3060-C-00-1054-00
DPE-3060-Q-00-1055-00

Purpose: To strengthen the capability of USAID and host-country institutions to evaluate the impact of population programs on fertility.

STRENGTHEN POLICYMAKING CAPABILITY: Focus on evaluating population programs and in turn stimulate policy discussion on alternative program strategies.

Interventions to Support Policy: Research and technical assistance to and training of USAID, cooperating agency and country program personnel in areas relevant to program evaluation. Key project activities aim at improving evaluation capability, particularly the evaluation of FP program impact on fertility and reproductive health. The project provides assistance in developing evaluation strategies, including identification of appropriate indicators of program performance and impact, and the data support systems needed to measure the indicators. The Project has a both a Technical and a Policy Advisory Group (TAG and PAG) consisting of representatives from international and national agencies, research organizations, and donors. The advisory groups provide a forum for discussion and review of project activities relevant to resource allocation decisions and coordination across the donor community.

Examples of Policy Activities: The project mapped the pathways through which programs achieve results and developed a conceptual framework articulating the role of policy inputs and other program functions, and how these are linked to behavioral outcomes. The area of political will, leadership and policy support is one of the areas identified for studies aimed at measuring and evaluating the effects of these factors on development of program infrastructures, operations, and subsequent changes in contraceptive practice and fertility. Using the conceptual framework as a guide, the project organized working groups around key program functions, including one focused specifically on policy, to propose a set of evaluation indicators for each functional area. Working group meetings critically analyzed and built consensus on indicators. Feedback from the working groups was incorporated into the project publication *A Handbook of Indicators for Family Planning Program Evaluation*. A short list of indicators aimed at fieldwide standardization of key indicators was developed in response to feedback from the TAG and PAG and is now being field tested.

Implementation of the project's research agenda generated a series of studies aimed at advancing methodology and improving the design of impact evaluation studies. Measurement issues are also addressed, including measurement of policy, program and financial inputs. One example is an impact study done in Tanzania estimating the impact of the FP program on contraceptive use and fertility over the 1969-91 period. Other analytical and methodological studies focus on quality, quantity and cost of services, unmet need, testing statistical estimation procedures, or address evaluation issues centering on efficiency and cost-effectiveness.

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Population Information Program (PIP)

Cooperating Agency: Population Information Program
Center for Communication
Programs, The Johns Hopkins
School of Public Health

Duration: July 1990 - July 1997

Project Number: 936-3052

Geographic Scope: Worldwide

Agreement Number: DPE-3052-A-00-0014-00

Purpose: To support effective delivery of appropriate FP/RH communication and services to developing country populations by meeting needs of service providers, policymakers, program planners, trainers, communicators, and other population and FP/RH professionals for accurate, timely, and relevant scientific, technical, and programmatic information and sample materials.

STRENGTHEN POLICYMAKING CAPABILITY: Improve the quality of policymaking concerning FP/RH and related issues by providing a factual foundation for decision-making.

Interventions to Support Policy: Publication of journals, management of an updated, comprehensive database on population and FP-related issues, and dissemination of materials worldwide through a clearinghouse, to serve information needs of policymakers.

Examples of Policy Activities: (a) Journals: *Population Reports* publishes comprehensive and authoritative reviews of selected topics in the population/family planning/reproductive health fields. Recent topics of special importance to policymakers include the crucial role of family planning programs to fertility decline, key lessons on making family planning programs work, avoiding barriers to access and improving regulatory and service delivery policy for specific contraceptive methods, and the role of reproductive choice in empowering women. Among the 130,000-plus readers of *Population Reports* are nearly 15,000 "key persons" — policymakers, program directors, unit chiefs, chairpersons, and executives. *International Family Planning Perspectives*, published quarterly by the Alan Guttmacher Institute under a subcontract, selects and presents the most relevant and recent scientific information on family planning and reproductive health issues that is useful to program managers and policymakers in developing countries. With a circulation of about 30,000, *International Family Planning Perspectives* is a major conduit for developing country researchers and analysts to publish their findings for a worldwide audience of decision-makers. (b) Database: The POPLINE computerized bibliographic database currently offers about 250,000 citations and abstracts of the world's published and unpublished scientific literature on population, family planning, and related health matters — the most extensive source for policy-relevant factual information. (c) Clearinghouse: The Media/Materials Clearinghouse (M/MC) disseminates sample IEC materials to communication planners and materials designers worldwide from a collection of over 30,000 items. Such sample materials have helped convince reluctant policymakers that appropriate materials on family planning could be disseminated in their countries with positive, not negative, political impact.

Often in collaboration with PCS, PIP has developed *Population Reports* issues and special publications and has helped organize participation in the last four major UN conferences — the Rio environment summit, the Cairo ICPD, the Beijing women's conference, and the Istanbul Habitat II cities summit. An indication of impact is that, in parliamentary debates, *Population Reports* has been cited in successful efforts to keep IUDs in the Philippines national family planning program and to add voluntary sterilization to the Peruvian national program.

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Population Reference Bureau Cooperative Agreement (PRB)

Cooperating Agency: Population Reference Bureau
Project Number: 936-3046
Agreement Number: CCP-3046-A-00-3018-00

Duration: Sept 1993 - Sept 1997
Geographic Scope: Worldwide

Purpose: To disseminate population research and information to policymaking audiences.

STRENGTHEN POLICYMAKING CAPABILITY: Present population, family planning, and reproductive health information to policymakers in developing countries and the donor community in ways designed to facilitate the use of such information for policy decisions.

Interventions to Support Policy: Produce the widely used annual *World Population Data Sheet* and up to three specialized publications per year for policy and non-specialist audiences; provide information to the media worldwide through journalist networks and a number of regular services (i.e., press releases, wire service articles, and news packs); maintain the Policy Files, a developing-country database and files on population trends, programs and policy issues; and conduct training in policy communications for developing country nationals. PRB's field support is geared toward helping organizations develop strategies and produce materials for advocacy and data dissemination efforts.

Examples of Policy Activities: Publications: Recent specialized publications include *The World's Women 1995* and *The World's Youth 1996* data sheets, as well as a forthcoming chartbook entitled *Men and Family Planning in Africa*, which highlights the results of male demographic and health surveys in Africa.

Media: PRB produced two radio programs in 1995-96: *The World of Women*, which provides highlights of 13 interviews with women leaders from around the world; and *Male Responsibility in Today's Africa*, a discussion of male roles and views about family planning in sub-Saharan Africa. PRB coordinates the *Women's Edition* project, which brings together a network of women's magazine editors and fosters south-to-south collaboration. A *Women's Edition* seminar on Adolescent Health and Sexuality was held in New York in 1995. Also in 1995, the *PRB Media Guide to Women's Issues* presented data on a wide range of women's issues and was distributed to journalists attending the Fourth World Conference on Women in Beijing.

Field Support: PRB assisted in the production of wallcharts summarizing DHS surveys and census data in India and Madagascar, and of a policy booklet on reproductive health needs in Nicaragua based on the 1993 CDC survey. The objective of these efforts is to communicate key survey findings to policy audiences to generate support for family planning and other reproductive health efforts.

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Expert Studies of Population Issues (NAS)

Cooperating Agency: The National Academy of Sciences (NAS)

Duration: Sept 1995 - Sept 2000

Project Number: 936-3078

Geographic Scope: Worldwide

Agreement Number: DPE-3078-A-00-5000-00

Purpose: To support the Committee on Population in conducting research on population issues of special interest to the international population community. The Committee was established by the NAS to bring the knowledge and methods of the population sciences to bear on major issues of science and public policy. Through the Committee, USAID can call on foremost experts in POP/RH in the U.S., developing and other developed countries.

STRENGTHEN POLICYMAKING CAPABILITY: Inform international population and health policy.

Interventions to Support Policy: Authoritative research synthesis and assessments; presentation of consensus views on key policy issues, (e.g., the effects of population changes on development and the effects of contraception and reproduction on the health of women and children); and organization and production of reports addressing key questions for policy implementation, particularly on effective FP programs, measurement and evaluation designs and resource allocation.

Examples of Policy Activities: The Committee establishes working groups and regularly undertakes meetings and workshops that bring together researchers, policymakers, and program managers of a particular field. A working group evaluated the operational effectiveness of FP programs and published its assessment in 1987 on the relation of FP program impact to the social and political environment, logistics systems, supervision and training of FP workers and types of client-provider interactions. Recent workshops dealt with evaluation methods, access to FP services and resource allocation. The Committee also sponsored workshops dealing with policy and research aspects of urbanization and aging in developing countries. In 1988, the Committee sponsored a conference on the demographic and programmatic consequences of contraceptive innovations. One panel reviewed the status of knowledge on the health risks and benefits of contraceptive methods, the influences of reproductive patterns on women's and children's health, and the health effects of reproductive patterns in the developing world. In 1989, the Committee formed a Panel on Population Dynamics in Sub-Saharan Africa. The report addressed the demographic effects of economic reversals; factors affecting contraceptive use; the effects of health programs on child mortality; adolescent fertility; and case studies of population dynamics. The endeavor was lauded because it presented data challenging the widespread skepticism about the possibility of rapid fertility decline in Africa. In 1994, the Committee on Population organized a meeting to assess research knowledge about the interconnected themes of program costs, effectiveness, and financing, and to point out major knowledge gaps in the context of the 1994 ICPD Programme of Action. A report of the meeting was published in 1995. The Committee also established the Panel on Reproductive Health in 1994 to assess the state of knowledge about RH problems in LDCs and propose research and program priorities for USAID, other international agencies and governments. In early 1996, the Panel published its report of a *Meeting on Reproductive Health Interventions*, which focused on (a) estimating the costs and effectiveness of interventions and issues related to quality and integration, and (b) the impacts on reproductive health of efforts outside the structure of health services (e.g., sexual coercion, mass communication and education). Two workshops are currently being organized that address (a) mortality and fertility decline and (b) education and fertility decline. These will explore the relevance of new research for policies aimed at reducing fertility.

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Women's Studies Project (WSP-FHI)

Cooperating Agency: Family Health International
Project Number: 936-3060
Agreement Number: CCP-3060-A-00-3021-00

Duration: Sept 1993 - Sept 1998
Geographic Scope: Worldwide

Purpose: To conduct a program of research on the impact of family planning on women's lives.

STRENGTHEN POLICYMAKING CAPABILITY: Improve family planning and related reproductive health policies and programs through increased knowledge of the needs and perspectives of women.

Interventions to Support Policy: Social and behavioral research on the immediate and long-term consequences for women of FP programs and methods.

Examples of Policy Activities: Multiple research projects are under way in each of the six emphasis countries: Bolivia, Brazil, Egypt, Indonesia, the Philippines, and Zimbabwe. Single studies are being conducted in Jamaica and Mali, and secondary analysis of data has been completed in Bangladesh, Nigeria, and Malaysia. Research projects were planned after needs assessment visits, which included visits with USAID missions, government officials, NGOs, women's advocates, health providers and researchers. In-country Advisory Committees have been established in each emphasis country to guide research and planning for dissemination of project results. Among the topics to be explored in the Women's Studies Project are the impact of family planning on women's work and income; the impact of family planning on women's roles in the household and the family; the use and non-use of family planning by adolescents; the impact of sterilization on women's lives; women's roles as family planning providers; women's perceptions of male attitudes about family planning; and the psychosocial impact of family planning for women.

Research papers published as part of the project include *The Impact of Family Planning on Women's Lives: Toward a Conceptual Framework and Research Agenda* and *From Rhetoric to Reality: Delivering Reproductive Health Promises through Integrated Services*. Forthcoming research papers include a conceptual framework for the impact of family planning on women's work and a report on male involvement in family planning programs. Three case studies on women-centered health programs are planned, highlighting programs in Jamaica, the Philippines, and Bolivia. The Women's Studies Project periodically publishes a newsletter, which provides an update on research and results.

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International Center for Research on Women (ICRW)

Cooperating Agency: International Center for
Research on Women

Duration: June 1994 - Sept 1997

Project Number: 936-9572

Geographic Scope: Selected countries

Agreement Number: DPE-5972-A-00-0036-00

Purpose: To conduct a research program to evaluate unmet need for FP from the perspective of women, men, and adolescents; to assess the current definition of unmet need, especially in light of recommendations to expand the definition; and to investigate the economic, sociocultural and service-related barriers people face in regulating their fertility. Support is provided by the Office of Population and the Office of Women in Development.

STRENGTHEN POLICYMAKING CAPABILITY: Inform policy analysis on the meaning and underlying causes of unmet need and suggest policy modifications to reduce barriers to use of FP and reproductive health services.

Interventions to Support Policy: Evaluation of the current definition of unmet need and its underlying causes; recommendations for improving the measurement of unmet need; and suggestions for policy and program modifications that will reduce the barriers that women, men, and adolescents face in limiting and spacing births and in using reproductive health services. Using qualitative and quantitative methods, the research looks at this important concept from the perspective of individuals defined to have an unmet need.

Examples of Policy Activities: As of May 1996, the first country study, Guatemala, is nearing completion; India, the second site, is beginning the collection of qualitative information; and in the third site, Zambia, the research protocol is currently being developed. Each study is guided by an in-country Technical Advisory Group that includes experts and policymakers, and each study will be presented at a policy conference in-country. ICRW staff will prepare a synthesis paper. A short information bulletin is available on request.

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Demographic Data Initiative (BuCen)

Cooperating Agency: U.S. Bureau of the Census
Project Number: 936-3046
Agreement Number: CCP-3046-P-00-4012-00

Duration: Sept 1994 - Sept 1997
Geographic Scope: Worldwide

Purpose: To strengthen the capability of developing countries to collect and use population information for designing, implementing, and evaluating policies and programs; and to raise awareness among national leaders of population structure and growth and their impact on development.

STRENGTHEN POLICYMAKING CAPABILITY: Support the policy environment by providing worldwide population data and demographic analyses and by strengthening the capability of developing country institutions to collect and use data for sound policymaking, planning and program design.

Interventions to Support Policy: Provision of data on national and world population trends and on impact of major demographic variables. Technical support for all phases of a census process.

Examples of Policy Activities: To help insure that policy decisions at all levels are based on accurate and reliable data, BuCen collects, assesses, and analyzes demographic, health, and family planning information by country. BuCen estimates and projects population size for USAID countries and combines these results with other BuCen research to produce a worldwide population perspective on demographic issues and on other factors such as maternal, infant and child mortality. These data are disseminated in the biennial volume *World Population Profile*, in ad hoc reports such as *Adolescent Fertility and Contraceptive Use in the Developing World*, and in an on-line database. For high priority countries, BuCen prepares *Population Trends* reports that summarize demographic trends, review contraceptive use and unmet need, and consider other demographic factors such as the impact of AIDS. To support the activities in this project, BuCen country specialists maintain files, databases and reference collections of statistical materials. The materials are shared with USAID staff and other cooperating agencies.

The project also provides technical assistance for all phases of the census process. Censuses are a very effective tool for creating a nationwide awareness of population issues, and the final three years of the 1990s are particularly critical in fostering increased availability of population information because a substantial number of the developing countries in Africa, Asia and Latin America will take a turn-of-the-century population census. Many of these countries need flexible technical support for one or more phases of the census process, from initial planning through the analytical transformation of the data into useful information, to the dissemination of the results to key decision-makers.

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AIDS Technical Support Project (BuCen)

Cooperating Agency: U.S. Bureau of the Census
Project Number: 936-5972.49
Agreement Number: HRN-5972-R-CA-4004-00

Duration: 1994 - 1997
Geographic Scope: Worldwide

Purpose: To compile an epidemiological database on HIV and AIDS on national and subnational populations in developing countries and provide important background and baseline information for the subsequent projection and analysis of the impact of AIDS on countries.

STRENGTHEN POLICYMAKING CAPABILITY: Support the development of Country AIDS Control and Prevention Programs by providing all available information on HIV seroprevalence trends and status and on impact of major demographic variables.

Interventions to Support Policy: Provision of information on HIV seroprevalence trends and status and on impact of major demographic variables.

Examples of Policy Activities: To ensure that policy decisions at all levels are based on accurate and reliable data, BuCen collects, assesses, and analyzes all available HIV seroprevalence information on developing countries. BuCen compiles and continually updates this information in the HIV/AIDS Surveillance Data Base which is distributed to researchers and policymakers worldwide. The database is regarded as essential to the surveillance, forecasting and impact analysis of the former WHO/Global Programme on AIDS and the new UNAIDS program. Since 1989, the information has been used to describe HIV seroprevalence levels and trends globally and by country in USAID's annual report to Congress. The AIDSCAP Project makes significant use of the database: to produce briefing materials for AIDSCAP teams making design visits and to prepare country plans, semi-annual reports, and quarterly country updates. The database will also be helpful to AIDSCAP in priority country monitoring and evaluation of the effectiveness of AIDSCAP interventions. BuCen also provides data on HIV seroprevalence to other USAID cooperating agencies like the Population Council, International Center for Research on Women and the Centers for Disease Control and Prevention.

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Women in Development (BuCen)

Cooperating Agency: U.S. Bureau of the Census
Project Number: 930-0100
Agreement Number: FAO-0100-P-00-CA-3054-00

Duration: Aug 1993 - Aug 1997
Geographic Scope: Worldwide

Purpose: To provide sex-disaggregated information that can be utilized in policy decisions. To strengthen the capability of developing countries in gender analysis and dissemination of sex-disaggregated data in support of development planning.

STRENGTHEN POLICYMAKING CAPABILITY: Support development planning by analyzing and disseminating sex-disaggregated data. Strengthen the capacity of developing countries in evaluation of the quality and relevance of sex-disaggregated data and also in analyzing and disseminating the data to policymakers.

Interventions to Support Policy: Provision of sex-disaggregated data on the national and subnational levels and analytical reports on gender issues. Technical assistance in developing national capabilities in using gender statistics in policy formation.

Examples of Policy Activities: Activities center on analysis and presentation of sex-disaggregated data to raise awareness of important gender issues within a country. Using statistics to clarify the situation of both women and men is useful when identifying priorities in terms of policy. These statistics can also be used to evaluate the gender-related impact of a policy. BuCen collects and analyzes sex-disaggregated data for USAID-WID priority countries. These data are provided to the WID Office and to USAID missions in short profiles or longer reports.

BuCen has provided technical assistance and training on women in development issues in the following areas:
Data Inventory: BuCen provided technical assistance to Albania, Jordan, Senegal, and Turkey to develop an inventory of the existing sex-disaggregated data and to help develop a plan of action for collection of statistics in the future. **Gender Statistics Workshop:** BuCen teaches a workshop on gender statistics which provides training on how to evaluate the quality and relevance of gender data and how to produce a brief report using these data that will be used to assist policymakers in decision-making. This workshop served as a "training of trainers" course in Albania in the fall of 1995.

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Data for Decision Making (DDM/CDC)

Cooperating Agency: Centers for Disease Control and Prevention

Duration: April 1991 - Sept 1996

Project Number: 936-5991.02

Geographic Scope: Worldwide

Agreement Number: DPE-5991-x-HC-1038-00

Purpose: DDM/CDC is committed to building the capabilities of in-country decision-makers (from national ministry staff, through regional and district, to local health officials) to use sound and valid data for improved public health policy setting and decision-making. (The Harvard Consortium addresses policy issues from the macro-level.)

STRENGTHEN POLICYMAKING CAPABILITY: Enable public health officials and professionals to formulate policies and set priorities on the basis of available, valid epidemiological information.

Interventions to Support Policy: Strategies and tools to increase the use of data by public health decision-makers, including training modules on epidemiology, public health surveillance, applied program management, economic evaluation, etc., supervised application of skills in solving public health problems; development, application and effectiveness-testing of tools to increase availability of and access to public health data (e.g., EpiInfo and EpiMap); country assessment, workplan preparation and implementation; guidelines for evaluating public health systems; managerial tools to translate policy into action.

Examples of Policy Activities: In Mexico, the project aimed to (a) increase at national and subnational levels the availability of and access to surveillance and other public health data; (b) increase the capability of the General Directorate of Epidemiology (DGE) to advocate for anti-smoking legislation and health policy by using a computer tool for analysis and presentation of data on smoking-attributable mortality, morbidity and economic cost; (c) increase DGE capability to assist state health departments in data-based formulation of health policies; (d) test the effectiveness of the Public Health Leadership Institute in improving use of data for decision-making.

In Zambia, DDM/CDC is providing technical assistance in the assessment of data needs and creation of a national health management information system. A second phase will be the revision of training curricula for clinical and information officers in order to assure the appropriate analysis and use of data by decision-makers at the newly decentralized health district level.

In the Philippines, the project worked with the DOH to provide timely and useful information to decision-makers at the central and subnational levels of the public health system and other affiliated agencies. Technical assistance was provided to the DOH to strengthen its capability to collect, process, analyze and use data to set health policies and manage public health programs in the environment of decentralization.

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