

Advance Africa Quarterly Report – First Quarter FY2005

Advance Africa team (collaborative effort)

1 July 2004 - 30 September 2004

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*Expanding family
planning and
reproductive health
services in Africa*



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**Advance Africa
Quarterly Report
First Quarter FY 2005
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I. COUNTRY PROGRAMS

I.A Implementation Tools for Country Programs

I.A.1. Best Practices / Tools

Accomplishments

During Quarter One (Q1), the Best Practices Unit continued to actively identify, document, and disseminate best and promising practices. In accordance with the promotion and dissemination plan, greater emphasis was placed on awareness and training efforts for the Best Practices Compendium. The Compendium database and best practices methodology was presented at the Flexible Fund Partners Meeting in September 2004. The Best Practices Unit actively collaborated with various cooperating agencies (CAs) for submissions to the Compendium and feedback on use of the information presented in the Compendium. The Best Practices Unit conducted an internal assessment and drafted an Internal Assessment Report, written for USAID and pending submission in Q2.

The Best Practices staff participated in follow-up task teams from the Implementing Best Practices (IBP) country launch in Uganda in June 2004. Ms. Torres explored options for linking the Compendium with the Electronic Communication System (ECS), and worked closely with the INFO project to launch the Best Practices Global Network as a community of practice in the ECS. It is possible for this community to be launched in Q3 after the IBP Strategy Meeting.

Fifteen practices were introduced in the best practice data base. Final revised versions of mini-compendia in adolescent reproductive health, HIV/AIDS, and private sector interventions were produced by the BP intern. A Best Practices Update was drafted on “Improving Livelihoods through Women’s Networks.”

Two promising practices from Advance Africa’s work have been included in the Compendium to date. One is concerned with female genital cutting (FGC) in Senegal and the other one with Advance Africa’s collaboration with the Jane Goodall Institute (JGI) in Tanzania and the Democratic Republic of the Congo (DRC). The focus of BP activities in Q2 and Q3 will be to complete documentation for AA country activities.

Constraints

The unit is staffed by one project officer and an intern that identify, manage review of, and prepare the practices for submission. Advance Africa technical staff review the practices and support the unit. Given the great number of requests for information and practices being submitted and disseminated, the Best Practices staff have to prioritize activities.

I.B. The Democratic Republic of the Congo

Accomplishments

During this quarter in DRC, a detailed implementation plan was developed, and the mini-laparotomy and the performance monitoring workshops were held. In addition, a workshop targeting parliamentarians was conducted to discuss revision of the 1926 reproductive health law and the increase in marriage age for women.

- **Mini-laparotomy and IUD training held**

During this quarter the training tools and curriculum were finalized. Five sites and doctors were selected according to pre-established criteria for the training. Service providers identified clients for training purposes and set appointments for the training period, during which time 53 women received free mini-laparotomies. The training was successfully conducted, mini laparotomy tools were distributed to the doctors who had completed their training, and a training report was produced and disseminated.

The project coordinator, together with trainers assisted by Advance Africa, developed a supervision plan for the identified training areas. A comprehensive document including all aspects of the supervision such as a supervision agenda, supervision tools, feedback tools, and action plan forms, was also developed.

- **Performance monitoring training held**

The country team developed the performance monitoring training agenda and curriculum. One training course was held to train the trainers, and a refresher course was also provided to the trainers in a follow-up meeting. The trainers will be providing larger trainings in all of the SANRU III-Advance Africa supported health zones.

- **Consensus workshop on reproductive health law revision**

Advance Africa worked in conjunction with the Ministry of Health's (MOH) National Reproductive Health Program to organize a workshop involving a group of parliamentarians and decision makers to discuss options for changing the national reproductive health law and legal age of marriage. Participants reached a consensus which lead to the initiation of a reproductive health bill to be introduced to parliament. The workshop produced a draft document on the proposed changes and follow-up needs within the country context.

I.C. Angola

Accomplishments

In Q1, the Advance Africa/Huambo expanded to support family planning services in 17 health facilities. Building renovation and rehabilitation were completed in three facilities, which opened in September.

Training and supervision continue to be the focus in this quarter: 17 supervisors, 97 male nurses, 470 traditional birth attendants (TBAs), and 170 community health workers were

trained. All facilities have at least two trained providers able to provide quality family planning services, and no facility had contraceptive stock-outs.

The Angola team has conducted their first round of monitoring of community-based activities using LQAS in the communities of 10 of the 14 project-supported facilities. The data showed that more than 80% of people in those communities report increased knowledge and use of family planning methods. The Standard Days Method (SDM) was introduced, and a study of the acceptability of the method is being conducted. A workshop for journalists was conducted to train them in disseminating family planning/reproductive health information.

The National Advocacy Conference was postponed until February.

I.D. Zimbabwe

Accomplishments

The Zimbabwe program developed a detailed implementation plan for this quarter and worked closely with partners for its implementation.

I.D.1. The Expanded Community Based Distribution (CBD) Programme

Data from this quarter showed that CBD referrals totaled 742 for VCT, 654 for STIs/HIV/AIDS, 955 for family planning, and 1,121 for other referrals. Contraceptive distribution reached 301,456 male condoms, 278,123 oral contraceptives, and 3,571 female condoms. CBDs provided 2,123 home-based care visits to terminally ill patients. The project provided refresher training to 58 CBDs and 172 Depot Holders.

In Q1, the following accomplishments were also achieved:

- All Group Leaders (GLs) and CBDs in the 16 districts were trained in supervisory skills within the context of their routine monthly meetings.
- MIS forms were revised, the MIS database was finalized, and the Evaluation and Research Unit (ERU) staff were trained on its use.
- Two trainers were trained (including one Senior Training Officer) in HIV/AIDS Community-Based Care and Support; two ZNFPC trainers were trained.
- The Director of Service Delivery was trained in Management of Community-Based Programs.
- A ZNFPC manager trained two ZNFPC staff and attended the Reproductive Health Priorities Conference in South Africa.

I.D.2. Orphans and Vulnerable Children (OVC) Program

Three CRS/STRIVE partners were identified to work with Advance Africa in the three operational districts. Detailed implementation plans and sub-agreements were developed for each of the identified CRS/STRIVE partners.

Two training workshops were held under the OVC program; 23 partners attended the orientation on ASRH for OVC partners, and 15 participants received the training of trainers (TOT) on ASRH for OVC trainers

I.D.3. Mission Hospital Program

A training needs assessment for hospital staff was conducted and a report produced. Sub-agreements were developed for each of the mission hospitals, and hospital staff identified/recruited the focal person for the integration between Mission Hospitals' FP/HIV/AIDS services and the community.

The mission hospital program conducted a Depot Holder training for 34 participants and a TOT on FP/HIV & AIDS integration for mission hospital trainers for 14 participants.

I.D.4. FAWEZI Program

The existing FAWE ARSH curriculum for youth in school was revised, and a pre-training planning and consultative meeting on TOT was held and meeting report produced. The program conducted 4 trainings for 58 participants as presented below in the table:

PROVINCE/DISTRICT	COURSE	No. of participants
Mash West, Mash Central, Masvingo, Midlands	ASRH Training for FAWEZI and teachers from OVC sites	13
Mash Central, Mash East, Mat North, Mat South, Bulawayo	ASRH Training for FAWEZI teachers	17
Gweru Urban District Teachers	ASRH Training	14
Chinhoyi Urban & Zvimba district	ASRH Training for FAWEZI teachers	14
TOTAL		58

Further information on this program is provided under Repositioning Family Planning through Life Skills Education below.

Constraints

- Hyper inflationary environment – since the exchange rate has been highly unstable over the past 5 years, it has been very difficult to make accurate budgets for project activities.
- Delays in the disbursement of funds for projects – many project partner activities have been delayed by delays in the disbursement of funds. This has however been

corrected as the partners have been oriented on the procedures which should be followed in order to ensure timely disbursement of funds

I.E. Mozambique

Accomplishments

In Q1, the draft of the new family planning policy was developed and submitted to the MOH for consideration. Work in the maternities continues as planned. Renovations are expected to be completed in January 2005.

The Mozambique Country Program closed on August 31. Advance Africa staff and partner NGOs and PVOs presented their accomplishments at an End-of-Project Conference on August 23rd. The KPC survey report was completed and submitted to the Mission. All disposable goods were transferred in accordance with the disposition plan approved by the mission. Three no-cost extensions were approved for World Vision, HAI, and Save the Children to complete their work.

II. REPOSITIONING FAMILY PLANNING

II.A. Implementation of Demonstration and Operations Research Projects in Selected Countries as a Strategy for Repositioning Family Planning

II.A.1. Integration of Family Planning and HIV/AIDS Interventions

II.A.1.a. Columbia University PMTCT+ Program

Accomplishments

Advance Africa provided technical assistance in the training of health workers in Chelston Clinic, Lusaka, Zambia, and in Mozambique. In Chelston, 25 nurses were trained while 28 providers from 10 provinces were trained as trainers in Mozambique.

A supervisory checklist was prepared for both Mozambique and Zambia.

Constraints

Translation of training materials into Portuguese for the Mozambique training was difficult.

II.A.2. Optimal Birth Spacing Project in Mozambique

Accomplishments

Save the Children and World Vision completed the data collection for phase one of the "Optimal Birth Spacing (OBS) Project." Thirty focus groups were conducted in three communities. Analysis is being completed and reports were prepared of each site. Advance Africa is developing a report summarizing and comparing the findings of the three sites. Data from the Zambezia site was analyzed first because it is the site chosen for intervention.

In September, the project Deputy Director traveled to Mozambique and discussed the findings with the local District Health Team and MOH partners. The result was a joint plan for intervention. Advance Africa developed a new sub-award for World Vision to implement the second phase and work with local social networks to promote OBS messages. An operations manual was developed and translated into Portuguese.

Dr. Beracochea also introduced the Standard Days Method (SDM) to expand the method mix and target non-users, and trained local providers and 25 community health workers. The SDM insert was expanded to include a 5-year calendar and to mark the "planned date of birth" of the next child. Over 1,000 cycle beads were shipped for World Vision to distribute. Information, education, and communication handouts and job aides were developed, translated into Portuguese, and shipped to World Vision. World Vision hired a Project Coordinator that will start in October.

II.A.3. Repositioning Family Planning through Life Skills Education among Adolescents

Accomplishments

Efforts have been underway in both Mozambique and Zimbabwe to further the cascade training of trainers in adolescent sexual and reproductive health (ASRH) for in-school adolescents.

In Zimbabwe, as described above, the existing FAWE ARSH curriculum was revised and put to use in 4 trainings for 58 participants as presented below in the table:

PROVINCE/DISTRICT	COURSE	No. of participants
Mash West, Mash Central, Masvingo, Midlands	ASRH Training for FAWEZI and teachers from OVC sites	13
Mash Central, Mash East, Mat North, Mat South, Bulawayo	ASRH Training for FAWEZI teachers	17
Gweru Urban District Teachers	ASRH Training	14
Chinhoyi Urban & Zvimba district	ASRH Training for FAWEZI teachers	14
TOTAL		58

The FAWEZI planning meeting was very effective. Advance Africa oriented the three core trainers and the new National Coordinator with the adult learning principles, effective training, and facilitation techniques. The FAWEZI training team worked closely with Ms. Dube and Uchechi Obichere to finalize the handouts and prepare sessions from the *Integrating ASRH into FAWE Programmes Curriculum*. The meeting included coordination and planning of various modules, strengthening of participatory learning tools, and clarification of logistics for Advance Africa, FAWEZI core trainers and participants for the two TOTs and two cascade trainings.

Based on the trainers' needs expressed, Advance Africa provided on-site IT and technical materials: computer, printer, and ASRH manuals/curricula for each training. FAWEZI identified rapporteurs and secretaries to assist with reporting and administration at each training venue.

The Training of Trainers covered the following core modules contained in the *Integrating ASRH into FAWE Programmes Curriculum*: An Introduction to Adolescent Sexual and Reproductive Health, Adolescent Issues, Life Skills Development, Strategies for Developing Adolescent Friendly Reproductive Health Services and Training of Trainers. The Training of Trainers module was conducted in the first two TOTs and omitted from cascade trainings to allow for additional ASRH sessions. A new session Adolescent Counseling and Group Talks was added to the program to further equip teachers with how to deliver ASRH friendly services.

In Mozambique, a revised project proposal and budget with FAWEMO was approved to train trainers in reproductive health education and life skills. FAWEMO conducted the training on 22-30 July under the oversight of the MOH and Ministry of Education. The training is taking place in Maputo Province and includes teachers from Maputo, Cabo Delgado, Nampula, and Zambezia. Trained teachers are expected to replicate training and support peer-to-peer education.

Constraints

Due to environmental difficulties in Zimbabwe, some of the FAWEZI activities have been difficult to schedule, however, the presence of a Ms. Obichere, a Paul Alexander Memorial Fellow, enabled activities to move forward as quickly as possible.

The Mozambique office officially closed on 31 August. The program staff continue to work on final documentation and will provide Advance Africa headquarters with the final results of this activity as soon as possible.

II.A.4. Repositioning Family Planning through Conservation Programs – Advance Africa/Jane Goodall Institute (JGI) Collaboration

Accomplishments

Advance Africa provided technical assistance on the finalization of the health component of JGI's overall project strategy. Advance Africa also developed a detailed plan for the implementation of the family planning/reproductive health component of the project. Advance Africa reviewed existing training materials and curricula in order to obtain an appropriate training curriculum tailored to identify needs.

Constraints

Occasional outbreaks of insecurity in eastern DRC prevented regular interaction with the project site.

II.B. Repositioning Family Planning through Advocacy

In addition to the specific accomplishments outlined in the activities below, Advance Africa worked with USAID, the POLICY Project, and the BRIDGE Project to finalize the design of the Repositioning Family Planning Ribbon Pin. This pin formed the basis of a small advocacy campaign built around the design of the other ribbon campaigns (i.e. HIV/AIDS and safe motherhood). Based upon the pilot of these pins at the IBP Uganda launch, the pins were refined and a postcard was developed in three languages to be disseminated at repositioning family planning, family planning/reproductive health, HIV/AIDS, and other health events.

Seven thousand pins and postcards were produced. One thousand of the pins were sent to WHO/AFRO for distribution at the Regional Committee for Africa meeting at which

Ministers of Health endorsed the Framework for Repositioning Family Planning. The pins will also be introduced at a number of meetings throughout this year, including the Repositioning Family Planning Working Assembly and the Repositioning Family Planning in West Africa conference planned by Advance Africa.

II.B.1. Regional Advocacy Conference for Repositioning Family Planning

Accomplishments

During this quarter Advance Africa strived to ensure all final approvals from USAID, WHO, and MOH/Ghana. The Government of Ghana gave clearance for the conference to be held in Ghana. Advance Africa is working with the conference planning committee to draft the goal and objectives, agenda, and list of presenters for the conference. Materials are being identified for dissemination to conference participants.

Advance Africa traveled to Accra, Ghana, in September to initiate higher-level planning for the technical and logistical elements of the conference. Staff met with technical partners, venue and events vendors, and materials preparation businesses to further discuss the details of the conference and ensure that the various components are in place for the conference scheduled for November.

The call for presentations / participation / posters was sent to a wide range of local, regional, and international partners. Partners were invited to present results-oriented examples of innovative approaches to revitalizing FP/RH services. Currently, advocacy materials are under development.

Constraints

Communication with partners was slow and difficult at times.

II.B.2. Collaboration with WHO/AFRO and World Bank on the Second Regional Meeting of Reproductive Health Program Managers

Accomplishments

During this quarter the Project Director attended *The 2nd bi-annual Regional Meeting of RH program managers 6-9 July 2004* for Francophone countries and *The Regional Course on Adapting to Change Learning Program on Population, Reproductive Health and Health Sector Reform 5-12 July 2004* in Benin. The Deputy Director attended the RH Program Managers workshop held for Anglophone countries in Johannesburg in July.

Advance Africa's achievements include:

- The introduction of Advance Africa Strategic Mapping tool, in collaboration with the RH training institutes network, into the French version of the WBI's regional course on Adapting to Change Learning Program on Population, Reproductive Health and Health Sector Reform
- The presentation to the 2nd regional meeting of the RH program managers on the AA's approach to best practices and the project computerized BP compendium.

A total of 28 participants and more than 40 participants had respectively participated to the Adapting to Change course and to the 2nd bi-annual meeting of the RH program managers. All of them have trained and or familiarize with the various concepts and strategies discussed in these two meeting including Strategic Mapping and Best Practices. Specific recommendations in direction to WHO/AFRO, to the countries, and to the participants have been drawn from the topics discussed to ensure effective application of what the participants have learned and exchange from these two meetings.

The Project Director also attended the WHO/AFRO Regional Committee for Africa meeting held 31 August – 3 September in Brazzaville. At this meeting, the *Repositioning Family Planning within Reproductive Health Services: Framework for Action 2005-2014* was endorsed by 46 Ministers of Health. Advance Africa provided technical assistance to WHO/AFRO on the development of this Framework. Endorsement by all of the Ministers of Health was a great accomplishment for WHO/AFRO.

II.B.3. Repositioning Family Planning Working Assembly Meeting (formerly the Experts' Group Meeting)

Accomplishments

Advance Africa is planning the Repositioning Family Planning in Africa Working Assembly for October 2004. The goal of this meeting is to bring together FP/RH experts from Africa to identify the means of strengthening and sustaining family planning in the region.

Participants are invited from key organizations that provide family planning and reproductive health technical assistance in Africa: African Reproductive Health Task Force, IPPF/ARO, Network of RH Training Institutes, SANRU III, USAID, WAHO, WHO, WHO/AFRO, World Bank). A small number of cooperating agencies will also be invited to represent very specific technical areas identified as important within Repositioning Family Planning (Advance Africa, CATALYST, DELIVER, POLICY Project, RPM+, SARA Project, and YouthNet).

The achievements for this quarter are:

- a. The agenda and objectives for two-day meeting included the following topics: birth spacing, contraceptive security, youth-friendly services, capacity building, policy and advocacy, funding, sustainability, and partnership.
- b. Preparation of invitations and logistic arrangements for experts traveling to Washington DC to participate in meeting.

II.B.4. Repositioning Activities at the National Level

Accomplishments

Advance Africa participated in a collaborative development of the reproductive health component for the DRC's new World Bank health project as part of the follow-up to their

national advocacy conference on repositioning family planning. The project director traveled to DRC to work with WBI staff in design of the health program, specifically on the family planning component, incorporating repositioning activities.

Constraints

Angola postponed because the MOH had conflicting activities. The conference is anticipated for Q3.

III. SUPPORT FUNCTIONS

III.A. Project Dissemination

Accomplishments

During the first quarter of FY2005, the Dissemination Team completed a number of products and prepared for several large activities and products. The following are the main accomplishments in Q1:

- **Workplan** – the Advance Africa FY2005 Workplan was edited and reproduced in July.
- **Cyclebeads** – Advance Africa worked with the Georgetown Institute for Reproductive Health to produce the Portuguese version of the Standard Days Method’s Cyclebeads inserts: instructions for use and calendars for spacing. These Cyclebeads were then used in our programs in Mozambique and Angola.
- **MSH Website Homepage** – in August, Advance Africa’s program in DRC was highlighted on the Management Sciences for Health homepage. The Dissemination Team produced the story, results, and links to the Advance Africa website for this piece.
- **Repositioning Pins Postcards** – After the IBP Launch in June and the success of the Repositioning Ribbon Pins, Advance Africa tallied the results of the survey to find that the pins were well-received. The Dissemination Team worked together with partners to refine the pins and develop the text and graphic design for postcards that expressed the meaning of the Repositioning Ribbon Pins. The pins and postcards were produced in English, French, and Portuguese.
- **Technical Brief** – French and Portuguese versions of the Technical Brief “Using the Birth Spacing Perspective to Launch Family Planning in IDP Sites” were finalized.
- **Best Practices Mini-Compendium Updated** – Updated versions of the Adolescent Reproductive Health, HIV/AIDS, and Private Sector Mini-Compendia were produced (edited, formatted, printed, and disseminated).
- **Translation of PAC in Action Newsletter** – Advance Africa worked with CATALYST Consortium to produce the French translation of the PAC in Action Newsletter for this quarter.
- **Repositioning Family Planning Working Assembly and Regional Conference** – The Dissemination Team worked with technical staff to prepare materials for both of these important meetings.

Constraints

In preparation for activities that were scheduled for Q2, dissemination staff were asked to work on materials that were not finalized in Q1. In addition, the Dissemination Team lost a half-time dissemination coordinator, and some staff were pulled from dissemination activities to work on other activities, so some products were delayed in completion. In response, Advance Africa hired an additional editor/web coordinator to assist with the many dissemination activities planned for FY2005.

As is often the case, July and August are slow months as many people are out of the office. Therefore, some dissemination activities that were in process during Q1 were delayed.

III.B. Monitoring and Evaluation

Accomplishments

- **Detailed Implementation Plan (DIP) development and update**

During this first quarter, Advance Africa developed for each activity a Detailed Implementation Plan (DIP). Each DIP encompasses the detailed tasks with their related outputs and products, start date (planned and actual), and end date (planned and actual). Also it includes each task's status and notes and comments for more descriptive events. This tool is both a guide for technical staff and also a monitoring tool for the management team. All DIPs were updated at the end of the quarter.

- **KIX database update and reports generation**

The KIX database was upgraded during this quarter, allowing the application to generate more specific reports upon request. Also, all DIPs were entered into the KIX data base. Different reports were generated for different purposes such as to check the level of the overall activity implementation, quarterly report writing, and next quarter planning.

- **Mozambique end line survey report writing**

In Mozambique, a baseline survey with data on the key project indicators (CPR, knowledge relating to FP/RH issues) was conducted in 2001 and a follow-up survey was conducted in 2004.

- **Angola: Lot Quality Assurance Sampling (LQAS) implementation**

To address data needs of the Angola country program, Advance Africa used the LQAS method for community based surveys and a quick facility-level assessment. During this quarter, Advance Africa adapted the LQAS methodology to collect community and facility based data. The LQAS will provide data to measure the progress of community-based activities.

- **Senegal country report produced**

A country report is being produced, encapsulating all achievements in the country. Advance Africa's technical assistance in Senegal related to strengthening family planning through performance monitoring and improvement (using health coverage measurements

and tools developed by Advance Africa at the district level) and school-based programs for the eradication of FGC.

- **Zimbabwe M&E**

Owing to the size of Zimbabwe program, an independent M&E plan was developed to monitor the program's overall implementation. This plan includes the collection strategy of key indicators for the end of project report; it also includes the methodology for data gathering within the OVC and the FP/PMTCT components.

A mid term M&E progress report was initiated and will be updated regularly with incoming data. The Zimbabwe M&E Specialist provided technical assistance to ZNFPC to collect, analyze, and use the CBD project MIS data. During this quarter, Advance Africa developed a draft of the ZNFPC Expanded CBD Programme endline survey.

IV. ANNEX 1: Summary of Travel for Q1

July – September 2004

Staff and Consultants Travel

Traveler	Purpose of Travel	Destination	Start Date	End Date
Berengere de Negri	Supervise the expanding training of Relais Communautaire/Social Network Approach in the remaining 22 zones	DR Congo	22-May-04	5-July-04
Youssouf Ouedraogo	Provide M&E and technical assistance to SANRU III, collect project data and get ready for end of project	Kinshasa, DR Congo	11-June-04	6-July-04
Armand Utshudi	Manage and carry out performance monitoring and the minilaparotomy & IUD insertion training of trainers	Kinshasa, DR Congo	24-June-04	21-July-04
Kwaku Yeboah	Provide technical assistance in the finalization of assessment	Kinshasa, DR Congo	26-June-04	4-July-04
Kwaku Yeboah	To attend the World HIV/AIDS Conference	Thailand	9-July-04	17-July-04
Elvira Beracochea	To attend the WHO Regional Managers Meeting	Johannesburg	10-July-04	2-Aug-04
Issakha Diallo	To work with the World Bank in DRC on donor coordination & oversee the transition of country coordinators	DR Congo	25-July-04	5-Sept-04
Kwaku Yeboah	To provide technical assistance in the training of health care workers in FP/PMTCT Integration	Lusaka, Zambia	24-Aug-04	9-Sept-04
Nina Pruyn	Planning for Regional Repositioning Conference	Accra, Ghana	10-Sept-04	18-Sept-04
Angela Gould	Planning for Regional Repositioning Conference	Accra, Ghana	10-Sept-04	18-Sept-04
Samantha Ender	Planning for Regional Repositioning Conference	Accra, Ghana	10-Sept-04	18-Sept-04
Elvira Beracochea	Monitoring progress of optimal birth spacing intervention	Mozambique	15-Sept-04	24-Sept-04
Elvira Beracochea	Provide technical assistance and oversight, and assist with project close out activities	Angola	24-Sept-04	7-Oct-04
Kwaku Yeboah	To attend a workshop on “Making Pregnancy Safer” organized by WHO/AFRO for partner in RH Task Force	Nairobi, Kenya	27-Sept-04	2-Oct-04