



**July 1, 2007
through
December 31, 2007**

Interim Report

**Contraceptive and Reproductive Health
Technologies Research
and
Utilization Program**

**Cooperative Agreement
GPO-A-00-05-00022-00**



Submitted to:
Office of Population and Reproductive Health
Research Technology and Utilization Division
United States Agency for International Development

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Submitted to:
Office of Population and Reproductive Health,
Research Technology Utilization Division
United States Agency for International Development

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ACRONYM LIST

A

| | | |
|---------|---|---|
| ABC | - | Abstinence, Be Faithful - Condoms |
| ACASI | - | Audio Computer Assisted Self-interviewing |
| ADDO | - | Accredited Drug Delivery Outlets |
| AEs | - | Adverse Events |
| AMREF | - | African Medical and Research Foundation |
| APHA | - | American Public Health Association |
| APHIA | - | Population and Health Integrated Assistance Project |
| APROFAM | - | Asociación Pro-Bienestar de la Familia (Guatemala) |
| ARH | - | Adolescent Reproductive Health |
| ARHP | - | Association of Reproductive Health Professionals |
| ART | - | Antiretroviral Therapy |
| ARV | - | Antiretroviral |
| ASTM | - | American Society for Testing Materials |

B

| | | |
|------|---|--|
| BASS | - | Behavioral and Social Sciences (FHI Group) |
| BCC | - | Behavior Change and Communication |
| BG | - | Buffer Gel |
| BIOS | - | Biostatistics (FHI group) |
| BMC | - | BioMed Central |
| BMGF | - | Bill and Melinda Gates Foundation |

C

| | | |
|----------|---|---|
| CAs | - | Cooperating Agencies |
| CBD | - | Community Based Distribution |
| CCC | - | Comprehensive Care Centers |
| CCP | - | Central Contraceptive Procurement |
| CDC | - | Centers for Disease Control |
| CEMICAMP | - | Center for Mothers and Infants (Brazil) |
| CFHC | - | California Family Health Council |
| COC | - | Combined Oral Contraceptive |
| CONRAD | - | Contraceptive Research and Development Program |
| CRD | - | Clinical Research Department (FHI Group) |
| CRF | - | Case Report Form |
| CRTU | - | Contraceptive and Reproductive Health Technologies Research and Utilization Program |
| CS | - | Cellulose Sulfate |
| CSL | - | Commodities, Securities and Logistics |

- CT - Chlamydia Trichomatis
- CTR - Contraceptive Technology and Family Planning Research Program
- CTU - Contraceptive Technology Update
- CV - Contingent Valuation

D

- DAIDS - Division of Acquired Immunodeficiency Syndrome
- DCFs - Data Collection Forms
- DFID - Department for International Development
- DMC - Data Monitoring Committee
- DMPA - Depot Medroxyprogesterone Acetate
- DOH - Department of Health
- DP - Dual Protection
- DRH - Division of Reproductive Health (Kenya MOH)
- DSMB - Data Safety Monitoring Board

E

- ECP - Emergency Contraceptive Pills
- EIS - Electronic Information System
- ERC - Ethics Review Committee (Ethiopia)
- EVMS - Eastern Virginia Medical School

F

- FC - Female Condom
- FCO - Final Cost Objective
- FGD - Focus Group Discussion
- FHI - Family Health International
- FITS - Field, Information and Training Programs (former FHI group)
- FP - Family Planning
- FPAK - Family Planning Association of Kenya
- FPAU - Family Planning Association of Uganda
- FTF - Face-to-Face

G

- GC - Gonorrhea
- GCP - Good Clinical Practices
- GLP - Good Laboratory Practice
- GMP - Good Manufacturing Practices
- GTZ - German Technical Cooperation

H

| | | |
|--------|---|---|
| HBC | - | Home Based Care |
| HC | - | Hormonal Contraceptive |
| HIPNET | - | Health Information and Publications Network |
| HIV | - | Human Immunodeficiency Virus |
| HMSC | - | Health Ministry Steering Committee (India) |
| HSR | - | Health Services Research (FHI group) |
| HSV | - | Herpes Simplex Virus |

I

| | | |
|--------|---|--|
| IBP | - | Implementing Best Practices |
| ICMR | - | Indian Council of Medical Research |
| IDE | - | Investigational Device Exemption |
| IEC | - | Information, Education and Communication |
| IMCL | - | Immunological Markers of Chlamydial Infections |
| IND | - | Investigational New Drug Exemption |
| INTRAH | - | Program for International Training and Health |
| IPPF | - | International Planned Parenthood Federation |
| IRB | - | Institutional Review Board |
| ISO | - | International Standards Organization |
| IT | - | Information Technology (FHI Group) |
| IUD | - | Intrauterine Device |

J

| | | |
|---------|---|--|
| JHU | - | Johns Hopkins University |
| JHU/CCP | - | Johns Hopkins University/Center for Communication Programs |
| JSI | - | John Snow International |
| JWG | - | Joint Working Group |

K

| | | |
|------|---|--------------------------------|
| KATH | - | Komfo Anokye Teaching Hospital |
| KZN | - | KwaZulu Natal |

L

| | | |
|-----|---|------------------|
| LNG | - | Levonorgestrel |
| LOI | - | Letter of Intent |

M

- M&E - Monitoring and Evaluation
- MAQ - Maximizing Access and Quality
- MOH - Ministry of Health
- MOU - Memorandum of Understanding
- MRC - Medical Research Council (South Africa)
- MSH - Management Sciences for Health

N

- N-9 - Nonoxynol-9
- NAFDAC - National Agency for Food and Drug Control (Nigeria)
- NARI - National AIDS Research Institute
- NASCOP - National AIDS & STDs Control Program
- NDOH - National Department of Health (South Africa)
- NGO - Nongovernmental Organization
- NIAID - National Institute for Allergic and Infectious Diseases (NIH)
- NICHD - National Institute of Child Health & Human Development (NIH)
- NIH - National Institutes of Health
- NIMR - Nigerian Institute of Medical Research
- NMIMR - Noguchi Memorial Institute for Medical Research (Ghana)

O

- OCs - Oral Contraceptives
- OD - Organizational Development
- OVC - Orphans and Vulnerable Children

P

- PAHO - Pan American Health Organization
- PATH - Program for Appropriate Technology for Health
- PEPFAR - President's Emergency Plan for AIDS Relief
- PHSC - Protection of Human Subjects Committee (FHI's IRB)
- PI - Principal Investigator
- PLA - Participatory Learning and Action
- PLWHA/PLHA - Person Living with HIV/AIDS
- PMA - Premarket Approval Application
- PMTCT - Prevention of Mother To Child Transmission
- PQC - Product Quality and Compliance (FHI group)
- PSA - Prostate-Specific Antigen/Project Support Association (S. Africa)
- PSI - Population Services International
- PSP-One - Private Sector Partnerships – One (PSP-One)
- PVO - Private Voluntary Organization

Q

QA - Quality Assurance

R

RA/QA - Regulatory Affairs and Quality Assurance (FHI group)
RCT - Randomized Controlled Trial
RETC - Research Ethics Training Curriculum
RFA - Request for Application
RFSU - Swedish Institute for Sexuality Education
RH - Reproductive Health
RHR - Department of Reproductive Health and Research
RTI - Reproductive Tract Infection

S

SA - South Africa
SC - Save the Children
SDM - Standard Days Method
SOP - Standard Operating Procedures
SOTA - State Of The Art
SRM - Sexual and Reproductive Method
STC - Society for Technical Communication
STD - Sexually Transmitted Disease
STI - Sexually Transmitted Infections

T

TA - Technical Assistance
TBD - To Be Determined
TOC - Technical Oversight Committee
TOT - Training of Trainers

U

UNC - University of North Carolina
UNFPA - United National Population Fund
USAID - U.S. Agency for International Development
USFDA - United States Food and Drug Administration

V

- VA - Virtual Access (Ghana)
- VCT - Voluntary Counseling and Testing

W

- WHO - World Health Organization

GLOSSARY

The following table provides key terms that are used in the individual subproject reports:

| | |
|------------------------------------|---|
| Collaborating Agency: | A USAID collaborating agency (CAs), a private or governmental group, or a nongovernmental organization (NGO) with which FHI is working in partnership. Such agencies provide additional technical or financial support to the subproject (e.g. providing related training or funding local costs). CAs that fund FHI directly for an effort are cited as the funding source, not as a “collaborating agency” on the subproject. |
| Final Cost Objective (FCO): | The accounting number assigned by FHI’s Contracts and Grants Office. It indicates a specific source of funding for a particular subproject. This is the key unit for all financial reports. |
| Subgrantee: | Institution(s) or organization(s) designated by FHI as responsible for executing some or all of the activities described in the subproject. A Subagreement generally exists between FHI and the named party. In past FHI reports, the term “implementing agency” was used in the same manner. |
| Subproject: | An activity within the Cooperative Agreement that has specific objectives and outputs. A subproject is generally related to only one FCO number. Multiple FCO numbers are necessary, however, if multiple funding sources are involved. Examples of subprojects are individual clinical trials, survey research studies, workshops or training efforts, major publications and regulatory or management support. |
| Total Approved Budget: | The most recently approved life-of-FCO or life-of-subproject budget. A subproject’s total budget may be supported by one or more FCOs, depending on the number of funding sources. Subprojects often span more than one fiscal year. Therefore, a subproject’s total approved budget figure is likely to be greater than the budget cited for any one year. |

INTRODUCTION

This interim report covers work carried out by Family Health International (FHI) between July 1, 2007 and December 31, 2007 under the Contraceptive and Reproductive Health Technologies and Research Utilization (CRTU) Cooperative Agreement with the United States Agency for International Development. The Agreement No. GPA-A-00-05-00022-00 was awarded to FHI on April 29, 2005 and covers a five-year program of work. We are currently in Year 3 of program implementation.

Since its founding in 1971, Family Health International has worked with USAID to advance and support family planning and reproductive health programs worldwide. The CRTU Program continues this tradition with the goal of increasing the range of available choices and the use of safe, effective, acceptable, and affordable contraceptive methods and reproductive health technologies, including microbicides, delivered through high-quality family planning and reproductive health services in developing countries. A primary focus of the current cooperative agreement is research utilization.

The intermediate results to be achieved through the Agreement are:

- Improved and new contraceptive and reproductive health technologies developed, evaluated and approved;
- Microbicides and microbicides/spermicides developed, evaluated and approved; and
- Use of contraceptives, microbicides and reproductive health technologies optimized and expanded.

The primary purpose of the Interim Report is to provide a brief and readily accessible update to USAID on all the subprojects reported in FHI's 2007-2008 Workplan for the CRTU Program. This interim report is organized under the following strategy headings:

- HIV/AIDS and Contraceptive Services
- Hormonal Methods
- Long-Acting and Permanent Methods
- Barrier Methods
- Microbicides
- Youth

In addition, some subprojects are categorized into two non-strategy groupings:

- Cross-cutting (including Research-to-practice, Field Programs and Monitoring & Evaluation);
- Technical Support

Subprojects in the Technical Support area may extend across the life of the CRTU (e.g. Coordination of CONRAD activities and Regulatory Affairs & Quality Assurance) or may arise at the request of the sponsoring agency or USAID (e.g. WHO Technical Assistance). These technical support activities are differentiated from general programmatic technical assistance due largely to their duration, scope or origin.

Within the strategy areas, individual subproject reports are presented with similar USAID-supported subprojects grouped together. This interim report provides a comprehensive picture of 154 subprojects that were fully or partially funded by the CRTU for the July 1, 2007–December 31, 2007 reporting period. Each subproject is listed only once, under the strategy area to which it is considered to most directly contribute, and each subproject report includes a statement of the subproject’s objective(s); the activities, accomplishments and problems during the past six months; and a summary of plans for the January-June 2008 period. Highlights of key results or outcomes are provided as available and for all those subprojects which ended during this reporting period. Financial information on the total approved budget for each CRTU activity is also provided.

Appendix A, at the back of this report, includes a financial management report with more detailed budget and expenditure information. Appendix B lists the subprojects by region and country so that readers can see the scope of FHI’s activities in each geographic area. Subprojects carried out in multiple countries, and/or whose intent is to respond to global issues, are listed under a “Worldwide” category. Appendix C includes the listing of articles that have been published during the interim report period. Other useful reference tools include: a Report on Staff and Consultant Travel Undertaken: International and Domestic (Appendix D); and a Advisory Committee Rosters (Appendix E). An index at the back of the report provides a listing of all final cost objective (FCO) numbers, subproject titles and affiliated page numbers. This information should assist readers interested in locating any one particular report.

BARRIER METHODS

| GOALS | OUTCOMES |
|---|---|
| <p>I. To bring to market new female barrier methods that are effective for dual protection and are affordable, acceptable, and conducive to widespread uptake and sustained use.</p> | <ul style="list-style-type: none"> A. Female condoms under development evaluated to identify the best candidate, in terms of user acceptability, to be carried forward for safety and effectiveness research. B. At least one lower cost female condom model assessed for safety and effectiveness in accordance with FDA requirements for evidence. C. A new, less expensive female condom submitted to the FDA for marketing approval, if warranted according to the safety and effectiveness findings. D. At least one promising new diaphragm evaluated for contraceptive effectiveness and/or prevention of sexually transmitted infections (STI). Evidence, if favorable, will be used for PMA submission. E. Innovative research methodologies that lower the cost and speed the pace of bringing new products to market developed and validated. |
| <p>II. To increase the use of existing barrier methods, and other risk reduction behaviors, by achieving greater acceptance on the part of users and service providers.</p> | <ul style="list-style-type: none"> A. Cost and effectiveness of alternative ABC delivery models targeting youth (including communication channels, messages, parental/adult involvement, community support, and collaborating partners) evaluated and applied in at least three countries. B. Training and supervision approaches and job aids that heighten family planning or HIV service providers' capacity to promote barrier methods (most immediately, male and female condoms) developed, tested and implemented in at least three countries. C. Evidence-based counseling approaches for male and female condom promotion incorporated into family planning service guidelines, including those used by HIV/AIDS programs in up to three countries. D. Research necessary to effect policy change and acceptance of female condom reuse among providers and local governments completed, with results incorporated into policies and service delivery guidelines, as appropriate. E. Feasibility, cost, and effectiveness of male condom distribution mechanisms assessed. F. Evidence regarding the effectiveness of female barrier methods disseminated to policy makers to influence procurement and programming decisions. G. Evidence-based strategies to increase use of barrier methods for contraception by couples with at least one HIV+ partner developed, evaluated and implemented. H. Approaches for overcoming male resistance to male condom use, informed in part by "exemplars" who succeed in using condoms more often than the norm, documented and replicated. I. Innovative research methodologies that produce more valid information about sexual behavior and barrier method use for programmatic decision making developed and validated. |
| <p>III. To make safe and effective RH products available in an efficient and less costly manner.</p> | <ul style="list-style-type: none"> A. An ISO standard for synthetic male condoms and female condoms established. B. In-country product testing capacity developed and enhanced in up to ten sites in support of family planning and HIV/AIDS prevention programs; documented compliance with local government regulations. |

FHI/NC subprojects fully or partially funded by USAID's CRTU Agreement:

A. Female Barrier Methods

| | |
|------------|---|
| USA: | Structural Integrity of the FC2 Female Condom (FCO 112117) |
| USA: | Female Condom Reuse: Assessing the Efficacy of Dish Detergent in Removing HIV and Chlamydia from the Surfaces of Inoculated FC2 Female Condoms (FCO 132115) |
| USA: | Next Steps for Clinical Research of New Female Condoms (FCO 112111/132114/132142) |
| USA: | Pivotal Effectiveness Study of the PATH SILCS Diaphragm (FCO 2299/112101) |
| USA: | Formative Research to Determine the Feasibility of Recruitment for "True Efficacy" Trials (FCO 116104/116107/116112) |
| Jamaica: | A Randomized Trial Using Prostate-Specific Antigen (PSA) Among STI-Infected Patients (FCO 172008/172009) |
| Kenya: | Improving FP Counseling of Clients (FCO 144102) |
| Worldwide: | International Standards Development (FCO 118100) |

B. Male Barrier Methods:

| | |
|------------|--|
| Worldwide: | Immunological Markers of Chlamydial Infection (IMCI) (FCO 172006) |
| Kenya: | Evaluating the "Young Men as Equal Partners" Project (FCO 114100/114122/114123) |
| Zambia: | Evaluation of the Students Partnership Worldwide (SPW) Model of Peer Education (FCO 116113) |
| Kenya: | ABC Approach for Infection Prevention and Averting Unintended Pregnancies Among Youth in Institutions of Higher Learning (FCO 153110/153111) |
| Tanzania: | Improving Dual Protection Counseling for Youth (FCO 114120) |
| Zimbabwe: | Audio Computer-assisted Self-interviewing (ACASI) vs. Face-to-face (FTF) (FCO 132117/172004/172007) |
| Worldwide: | Production Surveillance of Condoms- Domestic and Off-Shore (FCO 148100) |
| Thailand: | Production Surveillance: Domestic and Off-shore Condoms (Bangkok) (FCO 148104) |

Female Barrier Methods:

USA: Structural Integrity of the FC2 Female Condom (FCO 112117)

Objective(s): To determine the feasibility of reusing the new FC2 female condom. This subproject will compare the test values obtained at baseline and after each wash/bleach sequence (1X, 2X, etc.) with the manufacturer's specifications for water leakage, tensile strength, and air burst testing.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A decision was made in September 2007 to use surplus condoms from the Comparative Study of 3 female condoms (FCO 132114).
- No other activities were conducted under this subproject during the reporting period July 2007–December 2007.

Plans for January 2008 – June 2008

- Study products will be available for testing in April 2008.
- The third structural test will be conducted on the FC2 condoms in May 2008.
- Analyses will be completed in June 2008.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: \$ 43,864

USA: Female Condom Reuse: Assessing the Efficacy of Dish Detergent in Removing HIV and Chlamydia from the Surfaces of Inoculated FC2 Female Condoms (FCO 132115)

Objective(s): To determine whether organisms which cause STIs, and which would be expected to be present on the interior surface of a condom following sexual intercourse with an STI infected male partner can be inactivated after soaking the condom in detergent and bleach solutions for defined periods of time. In this study, the detergent is the experimental substance and the bleach is used as a control.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A decision was made in September 2007 to use surplus condoms from the comparative acceptability study of three female condoms (FCO 132114) in the re-testing.
- No other activities were conducted under this subproject during the reporting period July 2007–December 2007.

Plans for January 2008 – June 2008

- The study product will become available in April 2008.
- Using the same study protocol, we will test the new lot of condoms in May of 2008. Results of this 3rd structural test will determine whether we conduct this microbial testing of the FC2. If the FC2 holds up to the structural testing, we will conduct study FCO 132115.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 24,000

**USA: Next Steps for Clinical Research of New Female Condoms
(FCO 112111/132114/132142)**

Objective(s): To facilitate: (1) the completion of a plan of action to take to the FDA to determine regulatory approval paths for the three new female condom (FC) types; (2) the selection of the best candidate(s) FCs to move through the regulatory process; (3) quality assurance testing and assembly of clinical supplies for the CONRAD-sponsored study of two lengths of the Reddy FC; and (4) the provision of biostatistical input into the development of international standards for FC products.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Monitoring trips were conducted in July and October 2007. All data collection forms were reviewed and errors were corrected.
- Data entry screens were created, test data were written and the data entry system was validated in October 2007.
- Data entry began in November 2007.
- All 180 women were recruited by November 2007.
- A total of 77 women had completed all phases of the study as of December 2007.

Plans for January 2008 – June 2008

- A study close-out visit will be conducted in March 2008.
- All data queries will be completed during the January-May 2008 time frame.
- Qualitative data from Part 3 of the study will be analyzed by March/April 2008.
- Preliminary results may be presented at the AIDS conference in Mexico in April 2008.
- Final results will be available in July 2008.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core; USAID - US
Agency for International
Development/USAID:
Microbicides

| | | |
|-------------------------------------|----|----------------|
| Total Approved Budget:112111 | \$ | 65,764 |
| 132114 | \$ | 676,732 |
| 132142 | \$ | 133,504 |
| | \$ | <u>876,000</u> |

USA: Pivotal Effectiveness Study of the PATH SILCS Diaphragm (FCO 2299/112101)

Objective(s): To provide data management, statistical analysis, regulatory audits, and monitoring of four of the six study sites for this pivotal study designed to assess the safety of the SILCS diaphragm and its effectiveness in preventing pregnancy.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Protocol version 5.0 (Amendment #2) was finalized in October 2007.
- Site initiation visits were conducted at five of the six study sites (Baltimore – Sept '07; Houston – Sept '07; Los Angeles – Oct '07; Pittsburgh – Nov '07; Philadelphia – Dec '07).
- The Case Report Forms were finalized, approved and sent for printing in December 2007.
- Research Informatics held an in-house training session for FHI team members on December 12, 2007, on use of the Remote Discrepancy Tool (RDT) that will be utilized for the SILCS study.
- A Contractor Agreement was executed with HDI in December 2007 in order to obtain the NICHD study data.

Plans for January 2008 – June 2008

- The next version of the protocol will be approved (v6.0, Amendment #3).
- The study manual and regulatory binder will be finalized.
- Enrollment will begin.
- Interim site visits will be conducted in six to eight week intervals.
- Research Informatics will provide RDT training for CONRAD and site study staff.
- The data management plan will be drafted, reviewed and approved.
- The data management system will be set up in ClinTrial.
- Data management will prepare data cleaning specs, create test data, and validate the ClinTrial system for this study.
- Data entry and querying will begin.
- The analysis plan will be drafted.

| | |
|------------------------------------|---|
| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: 2299 | \$ 19,805 |
| 112101 | \$ 1,313,190 |
| | <hr/> |
| | \$ 1,332,995 |

USA: Formative Research to Determine the Feasibility of Recruitment for "True Efficacy" Trials (FCO 116104/116107/116112)

Objective(s): To identify characteristics of women who are most likely to participate in a one-month, placebo/no method-controlled contraceptive efficacy or effectiveness trial; and to develop strategies to recruit women willing to join the study.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Focus group discussions began at the U.S. site in August 2007.

Plans for January 2008 – June 2008

Staff will:

- Complete focus group discussions at the NC site.
- Begin focus group discussions at the South Africa and Madagascar sites.
- Complete data collection in all sites.
- Complete data analysis.
- Write the study report.

| | | |
|-------------------------------|---------------|--|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | 116104 | \$ 252,628 |
| | 116107 | \$ 94,260 |
| | 116112 | \$ 44,731 |
| | | \$ 391,619 |

Jamaica: A Randomized Trial Using Prostate-Specific Antigen (PSA) Among STI-Infected Patients (FCO 172008/172009)

Objective(s): To assess compliance with current recommendations for abstinence among women being treated for an STI during the week following treatment. As part of this study, we will compare levels of unprotected intercourse following treatment via PSA evaluation between patients assigned to “abstinence only” messaging and patients assigned to hierarchical messaging of “abstinence backed up by condom provision.”

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Funding was approved and provided by CDC through CRTU Interagency Agreements. In-house approval of the new funding codes was obtained July 1, 2007.

Plans for January 2008 – June 2008

- The protocol will be drafted by June 2008.
- The site will be visited to: 1) prepare a draft budget; and 2) discuss operational aspects of study implementation.

| | | |
|-------------------------------|---------------|--|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | 172008 | \$ 38,659 |
| | 172009 | \$ 11,341 |
| | | \$ 50,000 |

Kenya: Improving FP Counseling of Clients (FCO 144102)

Objective(s): 1) To improve the way in which family planning providers communicate contraceptive concepts and information to clients; 2) to assess the impact of improved counseling on client understanding of key concepts; and 3) to assess the sustainability of the intervention within the constraints of the service delivery system.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Preliminary data were collected from three sites; Nakuru Provincial General Hospital, Naivasha District Hospital, and Uasin Gishu District Hospital.
- Data was transcribed, entered and cleaned.
- A counseling language task force was formed and will guide the design of the intervention.

Plans for January 2008 – June 2008

- Data from the baseline will be analyzed and shared with the counseling language task force.
- The results of the baseline analysis will guide the modification of job aids and training of providers.
- Providers from the three sites will be trained in the use of the counseling job aids and appropriate language with clients.

Findings and Outcomes:

- Immediate outcomes of this subproject will be:
 - 1) a step towards understanding and consolidating the language that best aids in communication with FP clients;
 - 2) revised balanced counseling job aids and training materials that take into account the findings regarding the language used to communicate with clients; and
 - 3) a model of supportive supervision that promotes the use of appropriate language and job aids with clients.
- Longer term outcomes will be indications of:
 - 1) whether the use of acceptable language will increase receptivity to the concept of FP and enhance discussion of this subject for more informed FP decision-making and continuation; and
 - 2) whether balanced counseling and supervision can lead to improved knowledge and is sustainable within the service constraints (available provider time, supplies, and on-site supervision capacity).

| | |
|-------------------------------|---|
| Funding Source(s): | USAID - US Agency for International Development/USAID: Field Support |
| Total Approved Budget: | \$ 200,000 |

Worldwide: International Standards Development (FCO 118100)

Objective(s): To actively participate in international standards organizations to establish new and/or revise existing performance standards for medical devices, pharmaceuticals, and other commodities procured and distributed by USAID.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Carter led the US delegation to the ISO TC 157 annual meeting in Jeju, South Korea; October 13-17, 2007. Progress continued on finalizing international standards for synthetic and female condoms, and guidelines for conducting condom clinical trials. New working groups for the revision of ISO 4074 (Male Latex Condom Standard), guidelines for conducting IUD clinical studies, and standardization of nitrosamine levels in latex condoms were established.
- Carter participated in the ASTM meeting held in Tampa, Florida, December 2-4, 2007.

Plans for January 2008 – June 2008

- An interim meeting of working group 20 (condom clinical trials) will be held in Rockville, Maryland April 21-22, 2008. The next ASTM committee meeting will be held in Denver, CO June 23-25, 2008.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
CSL-Core

Total Approved Budget: Annually Approved

Male Barrier Methods:

Worldwide: Immunological Markers of Chlamydial Infection (IMCI) (FCO 172006)

Objective(s): To examine immunological responses to *Chlamydia trachomatis* (CT) infection over time using existing serum and cervical swab specimens collected from women participating in the HC-HIV study. More specifically, this subproject aims to measure serum immunological markers (*Chlamydia* major outer membrane protein (MOMP) IgG, MOMP-IgA, and *chlamydia* heat shock protein 60 (chsp60) antibodies) at baseline and at the time of *Chlamydia* infection(s) and to evaluate changes over time. *Chlamydia* genotypes from cervical swab specimens will also be evaluated.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Laboratory staff at the sites began pulling the specimens and then storing them in a dedicated location for easy retrieval once testing begins. All Group E specimens have been pulled in both Uganda and Zimbabwe.
- The CDC finalized the Laboratory Standard Operating Procedures manual.
- The CDC developed a study Flow Chart (a visual overview) and a monthly template (a simple form for monthly updates and summaries).
- Training for the Zimbabwe laboratory staff took place in July 2007 by conference call.
- The CDC prepared pilot testing specimens and shipped them along with ELISA kits to Zimbabwe and Uganda.
- Pilot testing took place in Zimbabwe in August 2007. The validation panel had thawed when it arrived at the lab. The CDC sent a new panel to repeat the pilot testing.
- The second round of pilot testing took place in Zimbabwe in October 2007. The results were acceptable and the site began actual testing of Group E specimens and entering test results into the project database.

Plans for January 2008 – June 2008

- IRB approval will be received from the local IRB in Uganda.
- Training for Uganda laboratory staff will take place once IRB approval is granted.
- Pilot testing will take place in Uganda.
- All serologic testing (MOMP-IgG, MOMP-IgA and chsp60) will begin.
- Specimens for IgG QA testing and chlamydia genotyping will be shipped to the CDC from Zimbabwe and Uganda labs.
- Chlamydia genotyping among women with ≥1 chlamydia infection(s) detected by DNA test will begin at the CDC.
- The Zimbabwe IMCI database will be sent to FHI on a monthly basis for data management activities.

Funding Source(s): USAID - US Agency for
International
Development/USAID: IAA
Total Approved Budget: \$ 127,271

Kenya: Evaluating the "Young Men as Equal Partners" Project (FCO 114100/114122/114123)

Objective(s): To measure change among young men 10-24 years of age after the implementation of the Young Men as Equal Partners subproject in the following indicators: 1) sexual and reproductive health knowledge and attitudes; 2) attitudes towards gender equity; and 3) sexual and reproductive health behaviors.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- No activities were conducted by FHI during this period.

Plans for January 2008 – June 2008

- The second round of data collection will occur in June 2008.

Findings and Outcomes:

- Results from the Kenya baseline survey:
 - Young men do not have sufficient knowledge about the value of "zero grazing" as an HIV prevention technique. This is reflected in the high rates of multiple partnerships, particularly among 15-19 year olds, and in the high proportion of married men who report unprotected sex with "other" partners.
 - Knowledge of contraceptive methods among boys 13-24 is not high; only condoms are widely known.
 - Attitudes towards inequitable gender norms, (e.g. women are responsible for contraception but they should not carry condoms) need to be addressed.
 - The majority of 15-24 year olds are sexually active, and thus in need of SRH information and services.
 - Almost all boys and young men listen to the radio at least once a week, making this medium an appropriate source of information for them.
 - Few young men have had exposure to peer education.
- Results from the Uganda baseline study:
 - Few young men mentioned "being faithful" as an HIV prevention strategy and most do not know the time during the menstrual cycle when a woman is most likely to get pregnant.
 - Many young men displayed inequitable attitudes toward gender norms in areas such as the role of women and violence within relationships.
 - The percent reporting very risky behaviors was relatively low (especially compared to the results in Kenya) though there were some who had "other" partners and did not use condoms consistently.

- Few reported having an HIV test even among those who perceive themselves to be at medium to high risk of HIV infection.
- Of those who reported an STI symptom within the past six months, many did not seek treatment.
- Activities in churches or youth clubs, as well as over the radio, appear to be ways to reach large numbers of young men in Uganda.

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|-------------------------------------|----|--|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget:114100 | \$ | 404,835 |
| 114123 | \$ | 119,567 |
| 114122 | \$ | 119,791 |
| | \$ | <u>644,193</u> |

Zambia: Evaluation of the Students Partnership Worldwide (SPW) Model of Peer Education (FCO 116113)

Objective(s): To assess the behavioral impact and costs of the Students Partnership Worldwide (SPW) curriculum-based, school-based model for teaching students about pregnancy and HIV prevention in schools in Central Province of Zambia. Specific research objectives are: 1) to determine if key knowledge, attitude and behavioral outcomes related to pregnancy and HIV prevention are higher among students in SPW intervention schools compared to match comparison schools; 2) among the intervention participants, to determine if outcomes varied by exposure to the specific program elements; and 3) to characterize the cost of implementing the SPW intervention at both the current level of resources as well as at alternative models of scale-up.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Approval to implement the subproject was received in October 2007.
- The study protocol and research instruments received expedited approval from FHI's Protection of Human Subjects Committee on November 11, 2007.
- The Ministry of Education (MOE) in Zambia is currently reviewing the protocol.

Plans for January 2008 – June 2008

- After MOE approval is received in Zambia, the protocol will be submitted to the University of Zambia's Research Ethics Committee for ethical review.
- Once the in-country approvals are received, the team will pre-test the study instruments, train the research staff and conduct the research.

| | | |
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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ | 279,963 |

Kenya: ABC Approach for Infection Prevention and Averting Unintended Pregnancies Among Youth in Institutions of Higher Learning (FCO 153110/153111)

Objective(s): To provide university students with: 1) training to prevent sexually transmitted infections, including HIV, and unintended pregnancy; 2) life skills to better enable them to make healthy sexual and RH decisions; and 3) other activities/opportunities to continuously increase their knowledge, understanding and skill base in these areas.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Two movie nights were held in June and attended by 186 students (109 males and 77 females).
- Two supervision meetings were held on June 7 and 14.
- One movie night took place at Lower Kabete and a poetry night was held at the main Campus in July.
- A reported 95 students participated in 15 BCCG meetings this reporting period.
- Four supervision meetings were held in July between ICL staff and the peer educator supervisors.
- 441 students were screened for HIV and obtained their results.
- A PAC meeting took place on July 26th and was attended by 16 people.
- 49 peer educators were retrained on August 13th, 15th and 24th.
- 238 students attended a talk on reproductive health at Kikuyu campus on August 16.
- 106 students attended a crazy Olympics tournament at Lower Kabete Campus on August 22.
- 500 students watched a play organized by a BCCG at the UON on August 24.
- 21 students attended a talk on reproductive health at the Lower Kabete Campus on September 12.
- 16 students attended two BCCG meetings at the UON on September 12 and 14.
- Three supervision meetings were held between the ICL Staff and the peer educator supervisors on September 6, 13 & 20.
- A contract was signed between ICL and Capital FM for the “Love, Lust and Life” radio series.
- 67 students attended a discussion on reproductive health at Lower Kabete while 228 students attended a similar discussion at the Kikuyu Campus in October.
- ICL made a presentation to First Year students about ABC and reproductive health issues on October 16.
- 92 students (52 males and 40 females) signed up to join BCCG on October 16.
- 862 students attended the launch of a radio show at the UON on October 19.
- Five radio shows were aired on Capital FM to disseminate ABC and reproductive health messages on November 1, 8, 15, 22 & 27.
- BCCG continued to meet in December to de-brief on the radio shows.

Plans for January 2008 – June 2008

- Additional BCCG will be formed in January and February 2008.
- The ABC program will be expanded to two other campuses of the UON in March 2008
- The ABC project will be expanded to the United States International University (USIU) in April 2008.
- Students will be recruited to attend peer education training in May 2008.
- Thematic events and trainings with peer educators and supervisors will be held in June 2008.

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| Funding Source(s): | USAID - US Agency for International Development/PEPFAR |
| Total Approved Budget:153111 | \$ 379,230 |
| 153110 | \$ 260,771 |
| | \$ 640,000 |

Tanzania: Improving Dual Protection Counseling for Youth (FCO 114120)

Objective(s): 1) To design an evidence-based intervention focused on improved dual protection counseling messages and reinforced communication strategies targeting adolescents.
2) To assess the feasibility and effectiveness of training providers to deliver dual protection counseling in accordance with performance guidelines.
3) To assess adolescents' understanding and interpretation of dual protection counseling messages.
4) To assess adolescents' retention of messages and behaviors related to dual protection.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Tanzania was selected as the study site. The technical monitor traveled to Tanzania in October 2007 to advance study planning through discussions with FHI/Tanzania and field partners specializing in adolescent health services.
- A protocol for the formative research phase was drafted and circulated for input from field collaborators.
- The research team identified the Participatory Ethnographic Evaluation and Research (PEER) methodology as a useful qualitative technique for obtaining sensitive qualitative data. The team discussed potential collaboration with the creator of the methodology, Options Consultancy Services Ltd.

Plans for January 2008 – June 2008

- The protocol will be finalized and submitted for ethical and technical approvals.
- Research partner organization(s) will be recruited and subagreement(s) will be negotiated.
- A workshop will be conducted in Dar es Salaam to identify qualitative interview themes.
- The training program for the peer researchers will be developed and implemented.
- Interview guides will be developed and field tested.
- Qualitative field work will be initiated.

Funding Source(s): USAID - US Agency for
International
Development/USAID: Core

Total Approved Budget: \$ 320,142

Zimbabwe: Audio Computer-assisted Self-interviewing (ACASI) vs. Face-to-face (FTF) (FCO 132117/172004/172007)

Objective(s): To compare the validity of reports on sexual behaviors obtained using two interview modes (ACASI and FTF) with prostate-specific antigen (PSA) as a biomarker for unprotected intercourse. Specifically, we will compare the proportion of women in the two groups (ACASI and FTF) who are PSA positive but report they have not engaged in unprotected intercourse (i.e. intercourse without a condom) in the past 48 hours.

Women exiting the MIRA diaphragm trial will be invited to return for this ancillary study. Providing they give informed consent, they will be randomized to either the ACASI or FTF group and asked questions with their assigned data collection method. Following the interview, study staff will collect a vaginal swab that will be tested for PSA.

A sample size of 1,294 women would provide about 80% power to detect a 30% reduction in discordance (reporting no sex in previous 48 hours but PSA positive), assuming the discordance in the FTF group is 20% (two-sided test; alpha 0.05).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Data entry was completed in November 2007.
- Testing of PSA samples at UNC laboratories is on-going.

Plans for January 2008 – June 2008

- PSA testing is expected to be completed in January 2008.
- A draft manuscript will be written by March 2008.
- The manuscript will be submitted to a journal in June 2008.

| | | |
|-------------------------------------|---------------|---|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: IAA; USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget:172004 | \$ | 10,903 |
| | | |
| | 132117 | \$ 64,170 |
| | 172007 | \$ 88,097 |
| | | <hr/> |
| | \$ | 163,170 |

Worldwide: Production Surveillance of Condoms- Domestic and Off-Shore (FCO 148100)

Objective(s): To ensure pre-distribution quality of condoms procured domestically and offshore by USAID for developing country programs.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- 327 condom batches produced by USAID’s domestic supplier (Alatech Healthcare) were evaluated prior to distribution. GMP/contract compliance inspections were performed.

Plans for January 2008 – June 2008

- Assist USAID/CSL develop new procurement strategies and participate in the evaluation of proposals for the 2009-11 contract awards.
- Quality evaluation of all condom batches provided to USAID will be evaluated prior to distribution. Monitoring of production activities will be performed as scheduled or as needed to meet USAID objectives. Results of audits and investigational inspections and recommendations for improvement will be submitted to USAID/CSL.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Field Support |
| Total Approved Budget: | | Annually Approved |

Thailand: Production Surveillance: Domestic and Off-shore Condoms (Bangkok) (FCO 148104)

Objective(s): To ensure pre-distribution quality of condoms procured domestically and offshore by USAID, at FHI's Bangkok laboratory.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- 209 condom batches produced by USAID's offshore suppliers (UNIDUS and Qingdao) were evaluated prior to distribution.

Plans for January 2008 – June 2008

- Evaluation and disposition of condoms produced by offshore suppliers will continue. Factory inspections will be performed as needed.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Field Support

Total Approved Budget: Annually Approved

HORMONAL CONTRACEPTION

| GOALS | OUTCOMES |
|--|---|
| <p>I. To bring to market new hormonal and non-hormonal reversible contraceptives.</p> <p><i>(NB: USAID considers this to be a lower priority goal.)</i></p> | <ul style="list-style-type: none"> A. A more efficient design than the traditional long-term follow-up study for studying the efficacy of methods developed, evaluated and shared with other research organizations, funding agencies, and other interested parties. B. In collaboration with partners, a new, reversible, short term female contraceptive submitted to the FDA, other regulatory bodies, or other interested parties as appropriate. C. In collaboration with partners, a new reversible short term male contraceptive submitted to the FDA, other regulatory bodies, or other interested parties as appropriate. |
| <p>II. To improve uptake, continuation rates and use patterns of existing hormonal contraceptives.</p> | <ul style="list-style-type: none"> A. Self-injection of injectables such as subcutaneous DMPA introduced in at least one country. <i>(NB: USAID says this is not likely to be feasible before 2007.)</i> B. Other strategies and tools to enhance timely and convenient delivery of hormonal methods to women developed and evaluated. C. Strategies to enhance uptake of hormonal methods developed and evaluated. D. Strategies to enhance correct use and reduce discontinuation of hormonal methods developed and evaluated. E. Policies and service delivery guidelines will be changed in at least one country to reflect new research findings. |
| <p>III. To expand the use of newer hormone delivery systems such as rings and patches in developing countries.</p> <p><i>(NB: USAID considers this to be a low priority goal until/unless the cost of such methods becomes substantially less.)</i></p> | <ul style="list-style-type: none"> A. The impact of newer delivery systems on continuation, compliance, and pregnancy rates in developing countries assessed. B. If feasible and cost competitive, newer delivery systems introduced in at least one country. |
| <p>IV. To establish the relative benefits of the currently available short-term hormonal methods.</p> <p><i>(NB: USAID considers this to be a lower priority goal.)</i></p> | <ul style="list-style-type: none"> A. A job aid to assist programs, providers and clients in assessing and balancing competing risks of using different hormonal and non-hormonal methods tested in at least one country. B. Results of these evaluations disseminated via professional literature, outreach, technical assistance, client materials, or other means to service delivery partners, normative bodies, USAID, clients, and other interested parties for incorporation into practice and procurement decisions. |
| <p>V. To answer important questions about positive and negative non-contraceptive effects of currently available hormonal methods.</p> | <ul style="list-style-type: none"> A. Critical questions regarding the long term safety and benefit of hormonal contraceptives identified, and at least one high priority question addressed through research. B. Results of these evaluations disseminated via professional literature, outreach, technical assistance, client materials, or other means to service delivery partners, normative bodies, USAID, clients, and other interested parties for incorporation into practice and procurement decisions. |

FHI/NC subprojects fully or partially funded by USAID's CRTU Agreement:

| | |
|------------------|--|
| Guatemala: | Continuous vs. Cyclic Use of COC Pills (FCO 112118/112130) |
| Jamaica: | Feasibility of Randomized Trial to Evaluate the Effect of DMPA on STI (FCO 112119/112132/112133/112134) |
| South Africa: | Improving Continuation Rates for Injectable Contraceptives (FCO 114102/114126) |
| Africa Regional: | Promoting DMPA Provision by Community Health Providers (FCO 113108) |
| Uganda: | Improving Service Delivery of CBD of DMPA (FCO 114111/114129) |
| Madagascar: | Introductory Trial of Community-based Distribution of DMPA in Rural Madagascar (FCO 114121/124103/144100/144103) |
| Madagascar: | Taking Community-based Distribution of DMPA to Scale: Process, Cost, and Outcome Evaluation (FCO 114134) |
| Madagascar: | Taking CBD of DMPA to Scale (FCO 143109) |
| India: | DMPA Acceptance Uttar Pradesh (FCO 12067/114119/114125) |
| Madagascar: | Assessment of Late DMPA Client Management (FCO 114113/114137) |
| Worldwide: | Analyzing Pregnancy Rates Based on the Injection Interval of DMPA (FCO 112123) |
| Worldwide: | A DHS Analysis of the Effects of Increased Injectable Use on Contraceptive Behavior Worldwide (FCO 114133) |
| Tanzania: | Expanding Access to Hormonal Contraceptives through Drug Shops in Tanzania (FCO 113135) |
| Uganda: | Drug Shops and Private Clinics as Sales Outlets for Injectable Contraception (FCO 114131) |
| Africa Regional: | Do Pregnancy Tests Increase FP Uptake? (FCO 112137/114128) |
| Kenya: | Development and Evaluation of a Campaign to Increase Continuation of Hormonal Methods (FCO 116105/116110) |
| Nigeria: | Evidence-based Child Spacing Intervention Development for Northern Nigeria (FCO 143104/146001) |
| Worldwide: | Pregnancy Provider Checklist & Reference Guide 2005 Update & Implementation (FCO 113107) |
| Madagascar: | Scale Up Norms and Procedures (FCO 143108) |
| Madagascar: | Taking Best Practices Package to Scale (FCO 143107) |

Guatemala: Continuous vs. Cyclic Use of COC Pills (FCO 112118/112130)

Objective(s): To evaluate continuation rates, adherence, and acceptability of combined oral contraceptives (COCs) used by the 21/7 cyclic regimen compared with continuous use.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The site began recruiting and enrolling participants in August 2007.
- Study data have been continuously sent to FHI and captured in DMNet for ongoing review.
- FHI staff conducted an interim monitoring visit in December 2007. During this trip the study interviewer was trained to use NVivo.

Plans for January 2008 – June 2008

- The site will continue to recruit participants.
- FHI staff will monitor study progress including recruitment and consider possible site expansion or closure.

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|-------------------------------------|---|---------|
| Funding Source(s): | USAID - US Agency for International Development/USAID: Core | |
| Total Approved Budget:112118 | \$ | 502,337 |
| 112130 | \$ | 74,355 |
| | \$ | 576,692 |

Jamaica: Feasibility of Randomized Trial to Evaluate the Effect of DMPA on STI (FCO 112119/112132/112133/112134)

Objective(s): To determine whether or not a proposed randomized trial to evaluate the effect of DMPA on STIs is feasible, and if so, to develop a plan for implementing the study.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A paper titled “Hormonal contraception and the risks of STI acquisition: results of a feasibility study to plan a future randomized trial” was submitted for publication.
- A preliminary secondary analysis revealed the need to look at condom use and STI.

Plans for January 2008 – June 2008

- A secondary analysis will be finalized, and a letter will be submitted for publication.
- The subproject will end, and the FCO will be closed in February 2008.

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|-------------------------------------|---|---------|
| Funding Source(s): | USAID - US Agency for International Development/USAID: Core | |
| Total Approved Budget:112119 | \$ | 155,605 |
| 112132 | \$ | 8,545 |
| 112133 | \$ | 21,144 |
| 112134 | \$ | 3,490 |
| | \$ | 188,784 |

South Africa: Improving Continuation Rates for Injectable Contraceptives (FCO 114102/114126)

Objective(s): To improve continuation rates for injectable contraceptives by developing and testing an intervention tool for family planning providers in South Africa that will: 1) reduce the proportion of DMPA/NET-EN clients who discontinue (i.e. do not come back at all); 2) reduce the proportion of DMPA/NET-EN clients who are late for their re-injections; and 3) increase the proportion of late DMPA/NET-EN clients who leave the clinic with a re-injection or another temporary contraceptive method until their next scheduled re-injection.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Initiation of data collection was delayed until July due to a national health worker strike.
- After a few months of data collection, it quickly became apparent that UCT needed an increase in their subagreement budget (new total \$208,948) for multiple reasons: Soon after the study staff were hired, trained and prepared to initiate data collection, there was national health worker strike in South Africa for 26 working days. It was unclear when the clinics would re-open so study staff traveled to the rural clinics regularly during this time to assess the situation. Besides this five week delay, the study coordinator documented slower than expected cohort recruitment rates due to frequent injectable contraceptive stock-outs. Altogether, three additional months of data collection were needed which increased salary, transport, and communication costs as well as the institutional overhead fee to UCT.
- A subagreement amendment was prepared by Finance to extend the end date to June 30, 2008.

Plans for January 2008 – June 2008

- Data collection will be completed in the 3rd quarter (Jan-Mar 2008).
- Data entry and analysis will commence in the 4th quarter (Apr-Jun 2008).

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core | |
| Total Approved Budget: 114102 | \$ | 117,306 |
| 114126 | \$ | 239,166 |
| | \$ | 356,472 |

Africa Regional: Promoting DMPA Provision by Community Health Providers (FCO 113108)

Objective(s): 1) To improve the quality of family planning services offered at selected community health programs in Uganda and one other East African country (Kenya) by providing technical assistance for the expansion of contraceptive options to include injectable contraception; 2) to generate interest in scale-up and replication of DMPA provision by community health workers among policy-makers and community health programs throughout the African continent and other regions; 3) to initiate discussions with Ministries of Health in Uganda and Kenya, which may result in amendment of the National RH Guidelines so that eligibility to provide injections is based upon appropriate training and demonstrated skill; 4) to update FHI's DMPA Checklist in line with the WHO Medical Eligibility Criteria and disseminate it; and 5) to produce and print 500 toolkits or "how-to" guides to enable programs to expand their choice of contraceptive methods to include injectables.

Activities, Accomplishments, and Problems—July 2007 - December 2007

Uganda:

- A CBD of DMPA core team meeting was convened (August).
- Reprints of the Uganda co-branded advocacy kits were sent to Uganda (600 total; cost share 113118).
- Advocacy kits were disseminated at the National Health Assembly Meeting (200 total; October).
- Further support was provided to local champions in Nakaseke and Luwero districts to conclude their planned activities.
- The Implementation Handbook was finalized and sent to production (December; cost-shared 113118).

Kenya:

- A stakeholders sensitization workshop was convened to discuss introduction of CBD of DMPA into Kenya (June).
- Ongoing discussions with JHPIEGO for collaboration and site identification took place (see 113133).
- In July 2007, FHI reprinted 5,000 copies of the Kenya adapted DMPA checklist.
- The Kenya and Uganda branded advocacy kits were re-printed (1500 each) in October.

Global:

- Plans were initiated to host a second educational tour for new partners interested in start-up, including Nigeria, Rwanda and Tanzania.
- July to December 2007, FHI disseminated a total of 950 DMPA checklists in response to requests from India, Bolivia, and the U.S.
- Evaluation of dissemination/utilization of the checklist in the Dominican Republic and Uganda was completed in August 2007.
- In October, the French advocacy kit and English generic version were printed (2000 copies each; FCO 113118) and over 700 copies distributed.
- In November 2007, IntraHealth adapted the DMPA checklist to facilitate its introduction in Senegal under the USAID-funded bilateral: the Maternal, Neonatal, and Child Health project.
- As of December 2007, the development of the Training and Reference Guide for a Screening Checklist to Initiate DMPA was completed and is awaiting production and dissemination in early 2008.

Plans for January 2008 – June 2008

- Advocacy and promotion activities are going very well but additional funding to maintain the momentum and respond to demand is a current challenge. We hope to obtain additional funds in Year 4.

Some activities to be initiated include:

- 1) An Africa-region SOTA on CBD of DMPA for targeted countries, donors, and programs with demonstrated interest in CBD of DMPA.
- 2) Continued dissemination of existing print materials to target audiences, including the launch of the Implementation Handbook.
- 3) A south-to-south study tour to Uganda and/or Madagascar with delegates from Nigeria, Rwanda, Tanzania, and Mali.
- 4) Technical assistance to strengthen district-level supervision via strategy development and logistical support for supervision visits in Uganda's Busia and Bugiri districts.
- 5) An expanded monitoring and evaluation system to assist in evaluating the demonstration CBD of DMPA program to facilitate scale-up developed.

Findings and Outcomes:

- Opportunities to promote CBD of DMPA were pursued in Malawi, Tanzania, Madagascar, Kenya, Rwanda and Nigeria. Kenya signed on as the second country for this subproject. Interest is high for exploring replication for the other countries. Demand exists for a second educational tour and for TA.
- As of 2006, Kenya and Uganda MOHs endorsed the DMPA checklist which was updated using the WHO MEC.
- The January '06 meeting with INFO, Save the Children, USAID, FHI, Pfizer, and JHPIEGO to discuss collaboration and how to support this "best practice" resulted in an informal interest group of some partners.

- The AMREF FP workshop in Tanzania in '06 requested FHI and SC staff to present the feasibility findings (FCO 9327).
- Four hundred DMPA checklists were adapted, translated in Romanian, and disseminated by JSI in September 2006.
- The DMPA training materials and checklists were translated into Lugandan in '07.
- Advocacy kits have been produced in English and French.
- In July 06, 80 Kenyan RH trainers/managers were trained on the DMPA checklist. 5,000 DMPA checklists were printed with the MoH logo.
- As of February 2007, two additional SC districts in Uganda have functioning CBD of DMPA programs with a total of 50 trained CBDs.
- A report of the visit of Kenyan RH professionals March 20-22, 2007 to Uganda was written: "Promoting community-based distribution/community reproductive health worker provision of DMPA. Educational visit to Uganda: summary report" (M2007-19).
- The Mission asked FHI to map all CBD programs in Uganda. In April 2007, a report was written: "Mapping of community based distribution programs in Uganda" (M2007-51).
- Over 5000 DMPA checklists and 3000 advocacy kits have been distributed.
- As an outcome of the Gen e-forum in '07, Nigeria was identified as another country interested in replicating the innovation with TA from FHI.

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|-------------------------------|--|
| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 301,361 |

Uganda: Improving Service Delivery of CBD of DMPA (FCO 114111/114129)

Objective(s): To assess scale-up of a program for service delivery of DMPA in a community-based distribution program.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Stanback and Otterness traveled to Uganda in July 2007 to train data collectors and data entry staff.
- Study staff in three rural districts conducted three separate surveys from August through December 2007.
- Olivia Nakayiza entered and sent to FHI data from the three surveys.

Plans for January 2008 – June 2008

- Otterness and Stanback will analyze the survey data.
- Stanback will draft a final report and an article for publication.

Findings and Outcomes:

- Initial assessment by Stanback revealed that small private clinics, usually operated by unlicensed nurses, were a major provider of health care, including family planning services, in the three rural districts served by Save the Children.

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|-------------------------------|---------------|--|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: |
| | | Core |
| Total Approved Budget: | 114111 | \$ 166,454 |
| | 114129 | 31,323 |
| | | \$ 197,778 |

Madagascar: Introductory Trial of Community-based Distribution of DMPA in Rural Madagascar (FCO 114121/124103/144100/144103)

Objective(s): To assess the feasibility of providing depot medroxyprogesteroneacetate (DMPA) through an existing network of community-based distributors in rural Madagascar, and to determine the programmatic inputs required for successful implementation and scale-up of this service delivery model.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Post-intervention data collection was completed in September 2007.
- Data analysis was completed in November 2007.
- The technical monitor traveled to Madagascar in December 2007 to participate in a results dissemination meetings in Antananarivo and Ft. Dauphin, one of the research sites.

Plans for January 2008 – June 2008

- A short-form final report will be prepared, translated into French, and distributed in Madagascar.
- A manuscript will be prepared and submitted for publication.
- Study results will be presented in Madagascar at the Best Practices Mini-University in March 2008 under FCO 113115.

Findings and Outcomes:

- A total of 62 workers were trained in CBD provision of DMPA in November 2006 and by February 2007, 61 were confirmed by clinical supervisors to be competent to provide DMPA and were providing services. (One agent re-located for family reasons.)
- Post-intervention interviews with CBD agents to assess knowledge and reported practices indicated all were adequately competent to provide DMPA services.
- By August 2007, 1662 clients had accepted DMPA from CBD workers, 41% of whom were new or re-starting family planning users.
- Acceptability among clients was high. Of 303 randomly selected acceptors, all were satisfied with services, and nearly all said that they intended to return to the CBD worker for re-injection and that they would recommend CBD DMPA services to a friend.
- 96% of clients who were eligible for re-injection by the time of the interview had received it; all but one received re-injection from the CBD worker.
- 97% of clients interviewed reported no problem with the injection site.
- Aspects of the CBD DMPA intervention requiring additional attention include CBD workers' ability to apply the pregnancy checklist; assurance of commodity stocks at the district level; and the need to simplify and to standardize reporting procedures to heighten the completeness and accuracy of service statistics.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Field Support; USAID - US Agency for International Development/USAID: GLP; USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: 124103 | \$ | 100,000 |
| 114121 | \$ | 133,827 |
| 144100 | \$ | 139,779 |
| 144103 | \$ | 60,221 |
| | \$ | <u>433,827</u> |

Madagascar: Taking Community-based Distribution of DMPA to Scale: Process, Cost, and Outcome Evaluation (FCO 114134)

Objective(s): (1) To identify the factors contributing to well functioning support mechanisms for CBD of DMPA—training, supervision, logistics, reporting--once responsibility is transferred from the pilot study team to dispersed public sector health authorities; (2) to estimate the economic costs, both financial and non-financial, of adding DMPA provision to the services offered in CBD programs; (3) to monitor the quality and continuity of DMPA service delivery once services are scaled-up; (4) to assess how client demand for CBD of DMPA is influenced by different contraceptive pricing policies; and (5) to evaluate the over-arching factors influencing the success of the scale-up of this reproductive health intervention, including building a constituency, stakeholder involvement, strengthening organizational capacity, information sharing, and resource acquisition.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A concept paper was prepared. An ATI was submitted to USAID for approval in October 2007; approval is pending.

Plans for January 2008 – June 2008

- Provided approval is obtained, the study protocol will be developed in collaboration with the team responsible for the scale-up intervention.
- Data collection instruments and supervisory forms will be developed for a rapid process assessment of scale-up implementation.
- FHI/Madagascar will hire, train, and deploy a field worker who will support supervisors in the collection of performance data and service statistics that will be used for the rapid interim assessment of the scale-up process.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ | 266,456 |

Madagascar: Taking CBD of DMPA to Scale (FCO 143109)

Objective(s): To assist the MOHFP/Madagascar and its partners to institutionalize the CBD of DMPA into their CBD programs. Scale-up activities will take place in the two districts served by phase one of this project, Moramanga and Anosy, and will expand into six new geographic locations, Ihorombe, Sud-Ouest and four additional districts yet to be determined. It is currently envisioned that an additional 124 CBD agents will be trained in the provision of DMPA. (The original sites that were part of phase one of this project will continue to be supported in terms of monitoring and supervision).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- NC staff traveled to Madagascar to present findings from the feasibility study and to meet with stakeholders to define steps for scale-up.

Plans for January 2008 – June 2008

- A steering committee meeting will be held with key stakeholders in January to draft the scale-up plan. Potential scale-up sites will be selected, negotiations with partners continued, partner financial and implementation contributions identified and the training timeline finalized.
- Training manual and CBD M&E forms revised by the end of February based on study results.
- The first wave of training of trainers events will be held in March and cascade trainings will begin in April. All 124 agents will be trained by June.
- Regular updates will be provided to key stakeholders.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
CSL-FS

Total Approved Budget: \$ 285,752

India: DMPA Acceptance Uttar Pradesh (FCO 12067/114119/114125)

Objective(s): 1) To provide information to design interventions to increase DMPA use in target cities in India; 2) to determine the potential demand for DMPA among clients of reproductive age attending clinics both in and outside of the DIMPA network; 3) to determine the quality of family planning services in these clinics; and 4) to determine the factors that lead to the decision to adopt or reject DMPA.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Data collection and data entry were completed in August 2007.
- Data analysis was completed and a draft report was sent to PSP-One/India for their review and input in October 2007.

Plans for January 2008 – June 2008

- The final report will be finalized and disseminated by Abt Associates through their PSP-One office in India.

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| Funding Source(s): | | Abt Associates/Collab. Agency; USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget:114119 | \$ | 85,823 |
| 12067 | \$ | 59,603 |
| 114125 | \$ | 16,169 |
| | \$ | 161,595 |

Madagascar: Assessment of Late DMPA Client Management (FCO 114113/114137)

Objective(s): To collect information from contraceptive users and family planning service providers in order to develop interventions that will improve injectable continuation rates.

Specific study objectives include:

Client-level study objectives: 1) To assess the prevalence of lateness among injectable contraceptive clients who return to the clinic for follow-up injections, as well as the degree of lateness (e.g. after the scheduled date, but within the grace period, after the grace period) among women who return for re-injection late; and 2) to assess barriers to receiving timely injections.

Provider-level study objectives: 1) To assess medical barriers to timely re-injection posed by current clinical management of clients who receive injectable contraceptives, such as counseling on when to return for re-injection, and how return visits are scheduled; and 2) to assess current clinic practices regarding management of late clients.

Note: In early 2007, the title of this subproject was amended to that provided above. Its former title was identical to a subproject being conducted in South Africa with somewhat different objectives and a distinction was needed.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Madagascar was selected as the new site for this study aimed at improving continuation rates.
- The study protocol was significantly revised in September and October 2007. The current protocol has undergone formal review in NC and been approved, as have the informed consent forms.
- The data collection forms were finalized and submitted for review in December 2007.

Plans for January 2008 – June 2008

- All study documents are being translated into French and Malagasy. Madagascar IRB approval will be sought in January 2008.
- Training for data collectors is anticipated to begin in February 2008, followed immediately by data collection activities, which should be completed by March 2008.
- Data entry and analyses should be completed by May 2008, with a preliminary report complete by the end of June 2008.
- A dissemination meeting will be held in June 2008.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: |
| | Core |
| Total Approved Budget:114113 | \$ 236,768 |
| 114137 | \$ 0 |

Worldwide: Analyzing Pregnancy Rates Based on the Injection Interval of DMPA (FCO 112123)

Objective(s): To analyze existing data and gather new data to support changing current service delivery guidelines for DMPA and routinely allow injection of DMPA up to four weeks beyond the scheduled day for repeat injection (90 days).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The final manuscript was reviewed internally as well as by the authors in December 2007.
- The manuscript, "Injectable Contraception: what should the longest interval be for re-injection?", was submitted to the journal 'Contraception' in December 2007.

Plans for January 2008 – June 2008

- An FHI staff member will attend a WHO meeting in April 2008.
- The subproject will end and the FCO will be closed in June 2008.

Findings and Outcomes:

- The submission of the manuscript presenting the risk of pregnancy for DMPA and COC from the HC-HIV data set has been delayed. A large number of co-authors are involved in the writing of this manuscript. So, receiving all reviews in a timely fashion has been problematic. Completion of this initial manuscript is necessary before we can proceed with the current analysis because we will use the pregnancy intervals calculated in the first manuscript.
- Background: Progestin-only injectable contraceptives continue to gain in popularity, but uncertainty remains about risk of pregnancy among women late for re-injection. WHO recommends a "grace period" of two weeks after the scheduled 13 week re-injection. Beyond two weeks, however, many providers send late clients home to await menses.
- Study Design: A prospective cohort study in Uganda, Zimbabwe and Thailand followed users of depot medroxyprogesterone acetate (DMPA) for up to 24 months. Users were tested for pregnancy at every re-injection, allowing analysis of pregnancy risk among late-comers.
- Results: 2,290 participants contributed 13,608 DMPA intervals to the analysis. The pregnancy risks per 100 women/years for "on time" (0.6; 95%CI 0.33-0.92), "2 week grace" (0.0; 95%CI 0.0-1.88), and "4 week grace" (0.4; 95%CI 0.01-2.29) injections were low and virtually identical.
- Conclusion: Extending the current WHO grace period for re-injection of DMPA from two to four weeks does not increase the risk of pregnancy.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: \$ 61,098

Worldwide: A DHS Analysis of the Effects of Increased Injectable Use on Contraceptive Behavior Worldwide (FCO 114133)

Objective(s): To examine the effects of increasing injectable use on patterns of contraceptive behavior in countries with respect to the variation in their contraceptive prevalence. The study has two specific research objectives: 1) to assess the extent to which gains in injectable use are attributable to new, current, or past users of contraception; and 2) to test whether there is an association between increasing injectable use and increases in method switching, contraceptive discontinuation, method failure, and unintended pregnancy, especially among those wishing to limit births.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The concept proposal was approved by the technical working group in September 2007.
- An ATI letter was sent to USAID and the FCO was opened in September 2007.
- USAID put the concept on hold for Year 4 in September 2007.
- The concept proposal was resubmitted for the Year 4 workplan in December 2007.
- The CRTU Leadership Group elected to wait and resubmit this proposal in Year 5 when new field projects will not be started.

Plans for January 2008 – June 2008

- This subproject is on hold until Year 5.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: \$ 110,000

Tanzania: Expanding Access to Hormonal Contraceptives through Drug Shops (FCO 113135)

Objective(s): To increase access to hormonal contraceptives through drug shops.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In August 2007, USAID approved implementation of this subproject.
- In October 2007, FHI completed a literature review and synthesis of the latest scientific evidence and lessons learned from other similar programs in support of the distribution of OCs through drug shops.
- In October 2007, the evidence informed the development of a letter to the Tanzania Food & Drug Administration (TFDA) to justify a policy change request to allow for non-accredited drug shops

(DLDBs) to re-supply COCs. Constella Futures led the process of getting endorsement from the MoHSW on this letter before submission to the TFDA.

- In November 2007, FHI conducted two focus group sessions involving stakeholders to identify, prioritize, and agree on programmatic and research priorities to meet the need for hormonal contraceptives in Tanzania. The first focus group explored the possible enhanced role of ADDOs as outlets for the distribution of OCs over-the-counter, and DMPA both by prescription and non-prescription. The second group explored the feasibility of introducing non-clinical based approaches to expand access to DMPA, including community-based distribution or through pharmacy and drug shops.
- Also in November, FHI consulted with the TFDA on the recommendations from the two focus group discussions. TFDA suggested that FHI examine the prevalence of contraindications for hormonal contraceptive use among rural women of reproductive age as such evidence would provide convincing information on the safety of distributing hormonal contraceptives by paraprofessionals.
- In December 2007, FHI reviewed information gathered from stakeholders and suggested a change in the proposed research question. It was felt that the revised research question will inform the safety of distributing hormonal contraceptives by non-clinically trained individuals, and in particular inform the roll-out of Sub-Q Depo in 2010.

Plans for January 2008 – June 2008

- Pending approval from CRTU leadership to change the scope of the research question, TM responsibilities will be shifted to HSR in early 2008.
- Remaining RU related activities will include:
- Work with MSH to improve upon current practices and protocols followed by ADDOs in COC provision.
- The literature synthesis on the potential role of drug shops in maximizing access in family planning will be finalized for external distribution.

Findings and Outcomes:

- Given the fact that it seems OCs are currently available in ADDOs both on a prescription basis and for initiation using the community-based distribution framework, it seems the original intent of the project is not needed. However, access to injectable contraceptives outside of the public sector is apparently an important concern, particularly given their popularity. Using ADDO shops to improve access will likely require several different steps, and this process could be enhanced by providing the MOH and TFDA with country-specific evidence. Since one of the greatest concerns preventing a move towards community-based distribution of injectable contraceptives, whether through drug shops or through trained lay workers, is safety, the next step will be to develop a research proposal to help answer the question of whether or not community-based distribution of injectable contraceptives is safe.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 350,000 |

Uganda: Drug Shops and Private Clinics as Sales Outlets for Injectable Contraception (FCO 114131)

Objective(s): To assess the suitability of rural drug shops and private clinics as sales outlets for socially marketed injectable contraceptives.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Stanback and Otterness traveled to Kampala, Nakasongola, and Luwero in Uganda in July 2007 to make initial preparations for this project.
- Stanback returned to Uganda in November 2007 to work with Save the Children on plans and budgets for the training portion of the study, and to discuss controversial aspects of the research with USAID/Kampala, the AFFORD Project, and the Ministry of Health.
- The study protocol, instruments, and amended subagreement were drafted.

Plans for January 2008 – June 2008

- All study documents will be reviewed, finalized and approved.
- An amended subagreement will be approved between Save the Children and FHI.
- Three cohorts of drug shop operators will be trained.
- Follow-up surveys of drug shop operators will be conducted.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: \$ 121,000

Africa Regional: Do Pregnancy Tests Increase FP Uptake? (FCO 112137/114128)

Objective(s): (1) To test whether supplying free pregnancy tests in low resource family planning clinics increases contraceptive uptake. (2) To test whether a demand-generation intervention among new mothers attending immunization clinics increases the likelihood of their using contraception at 9-12 months postpartum. (3) To establish the best approach for managing women seeking depot medroxyprogesterone acetate (DMPA) who “fail” the pregnancy checklist.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Ghana and Zambia were selected as the two sites for the pregnancy test and immunization clinic interventions (also know as “supply and demand side interventions for non-menstruating clients”).
- Stanback and Vance traveled to Ghana in November 2007 to make initial preparations for the research.
- The study protocol and instruments were drafted by the technical monitor.

Plans for January 2008 – June 2008

- Stanback and Vance will travel to Lusaka, Zambia to make initial preparations for the study there.
- Study instruments and the protocol will be reviewed, finalized, and approved.
- Data collection will commence in March 2008.

Funding Source(s): USAID - US Agency for
International
Development/USAID: Core
Total Approved Budget:
112137 \$ 274,992
114128 \$ 100,008
\$ 375,000

Kenya: Development and Evaluation of a Campaign to Increase Continuation of Hormonal Methods (FCO 116105/116110)

Objective(s): To develop and evaluate the effect of a communication campaign designed to increase contraceptive continuation among FP users, particularly injectable users.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Burke traveled to Kenya the week of July 2, 2007 to conduct a five-day training with the field staff (9 RAs and 2 supervisors) from TICH prior to the initiation of recruitment and data collection activities. The training covered research ethics using the FHI curriculum and the study-specific protocol. Burke also met with PATH/Kenya during this trip to discuss future activities.
- The first round of focus group discussions (FGD) was conducted by TICH.
- The FGD data were analyzed by FHI and a report was written based on the data.
- The report was delivered to PATH/Kenya December 3, 2007. PATH/Kenya will use this report to develop preliminary messages for the communication campaign.
- A baseline pre-test component was added to the study to measure discontinuation rates in two study sites before the campaign is implemented in the intervention site.
- An amendment was submitted to PHSC and KNC-ERC in December 2007 reflecting the addition of the baseline pre-test component.
- A revised subagreement was sent to TICH in December 2007 reflecting the addition of the baseline pre-test component.
- A contact tracking system was developed to track study participants for the pretest and will also be used later for the posttest evaluation.
- Data entry programs were developed in Epi Info for entering the baseline questionnaire data.
- The FGD guide for Round 2 was finalized by study partners.
- FGD Round 2 guide and pretest questionnaires were translated.

Plans for January 2008 – June 2008

- FHI and PATH/Kenya will develop the preliminary messages based on the data from the first round of focus groups.
- Twenty new, female RAs will be recruited by TICH to conduct the baseline pretest activity.
- Staff from the FHI-Nairobi office, including the local PI Constance Ambasa, will train the returning RAs, supervisors, and new RAs from January 7-11, 2008 on the FGD Round 2 guide and the baseline pretest activity.
- TICH will conduct the second round of FGDs to test the preliminary messages with each target group.
- FHI will analyze the second round FGD data and write a report based on the data for PATH/Kenya.
- FHI and PATH/Kenya will develop the preliminary products for the campaign based on the FGD Round 2 data.
- TICH will recruit 500 new injectable users from each of the two study sites for the pretest activity.
- TICH will conduct baseline and the first of three follow-up interviews with each of the participants in the pretest activity.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: |
| | | Core |
| Total Approved Budget: 116105 | \$ | 175,605 |
| 116110 | \$ | 161,381 |
| | \$ | 336,986 |

Nigeria: Evidence-Based Child Spacing Intervention Development for Northern Nigeria (FCO 143104/146001)

Objective(s): 1) To conduct an assessment: (a) to understand the barriers to the uptake of FP methods in northern Nigeria; and (b) best practices in promoting family planning in this region, and similar areas (e.g. Sahel countries); and 2) to collect information on young married couples that would identify promising interventions to improve family planning uptake in this region of Nigeria. Note: Funds were insufficient to launch an intervention; so this work is preliminary to an intervention.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A draft was provided to the Mission which requested more work on the recommendations.
- A Nigeria consultant was hired (Dec. 2007) to review the report as well as prominent individuals in the family planning field in Nigeria.
- GHAIN organized a meeting of in-country experts to review the draft final report. Their suggestions were incorporated.
- The draft report was prepared and reviewed extensively by FHI staff in NC and Nigeria and the subcontractor. Revisions were made.
- It was submitted to GHAIN and the Mission Jan. 4 2008. We are awaiting Mission response on the report.
- The USAID Mission asked Dr. Kale to review the report. We are awaiting his comments.
- At the request of the USAID Mission, the dissemination meeting was postponed and moved into the first quarter of 2008 (Jan.-March).

Plans for January 2008 – June 2008

- When we get suggestions for the draft final report from the USAID Mission and the reviewer, Dr. Kale, we will incorporate them into the final report.
- FHI will continue carrying out qualitative data analysis in order to prepare at least one paper for publication.
- A presentation will be made at the Psychosocial Workshop on study results (April 15 2008)
- dRPC and FHI will organize a data interpretation workshop with key stakeholders from participating communities to discuss findings and identify promising interventions and messages (now anticipated Jan.-March 2008).
- Through the FHI/Nigeria office, FHI will disseminate results and discuss findings with USAID/Nigeria. The meeting will provide a forum to interpret the results and translate the information into practical recommendations for a model program intervention to increase the uptake of child spacing methods in the region.

Findings and Outcomes:

- This Nigerian study examined barriers and facilitators to family planning and child spacing (F/CS) among young married men and women, age 15-30 years, in Kano and Zamfara States.
- Qualitative methods (Participatory Learning and Action methods, in-depth interviews, and FGDs) generated information from young married people, community members, and key stakeholders.
- The report emphasizes respondents' thoughts in their own words, quoting from 35 Participatory Learning and Action (PLA) exercises with young men and young women; 43 in-depth interviews with adult stakeholders, and 20 FGDs with adults in the communities.
- Fertility norms (what is meant by a "large", "medium", and "small" family and what is an ideal family size) remain high, especially for men and for rural men.
- Most young married men and women held positive attitudes towards FP because they understood it to contribute to child spacing (CS). They perceived CS as beneficial for MCH, particularly to avoid "kwanika" – when a woman becomes pregnant before she has finished weaning her child.
- Regarding key sources of information on FP/CS, young married men and women identified radio, peers, health talks, and modern health care providers.

- Regarding communication and decision making on FP/CS, many young married women perceived their husband's attitudes to be negative so they did not talk to them about practicing FP or CS. Men and women believed the husband had the most influence on a couple's decision to practice FP.
- Regarding knowledge and attitudes toward FP methods, young married men and women identified these FP methods: natural: breastfeeding, periodic abstinence, and withdrawal (azi); traditional: guru, karhu, laya, rubutu, local herbs and seeds, goyon ciki; and modern: oral contraceptive pills, injectables, and male condoms. Young married men and women had mixed attitudes towards these methods. They thought modern methods more effective but traditional methods safer and more convenient.
- Although the majority of health care providers perceived FP to be beneficial to MCH, several expressed ambivalence about delivering FP services.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Field Support |
| Total Approved Budget: | 143104 | \$ 162,129 |
| | 146001 | \$ 89,871 |
| | | \$ 252,000 |

Worldwide: Pregnancy Provider Checklist & Reference Guide 2005 Update & Implementation (FCO 113107)

Objective(s): 1) To update the FHI Pregnancy Checklist in accordance with WHO's 2004 Medical Eligibility Criteria; 2) to revise pregnancy checklist reference materials and to produce and disseminate 2,000 reference guides and 9,000 pregnancy checklists; and 3) to promote the pregnancy checklist to CAs and PVOs, and provide technical assistance for its implementation and use in at least three in-country programs, in an effort to reduce medical barriers and increase access to FP.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- During June to December 2007, FHI disseminated a total of 1,542 Pregnancy checklists in response to requests from India, Bolivia, Ghana, Mali, and the U.S.
- In July 2007, FHI reprinted 5,000 copies of the Kenya adapted Pregnancy checklist. In October 2007, MoH/Kenya requested Kiswahili versions of the Pregnancy checklist. This version has been finalized and is a waiting production in early 2008.
- In November 2007, IntraHealth adapted the Pregnancy checklist to facilitate its introduction in Senegal under the USAID-funded bilateral: the Maternal, Neonatal, and Child Health project.
- As of December 2007, the development of the training and reference guide for a screening checklist to identify women who are not pregnant has been completed and is awaiting production and dissemination in early 2008.
- Evaluation of dissemination/utilization of the checklist in the Dominican Republic and Uganda was completed in August 2007.

Plans for January 2008 – June 2008

Staff will:

- Re-print 3,000 additional pregnancy checklists for Uganda.
- Launch the Training and Reference Guide for a Checklist to Identify Women Who Are Not Pregnant.
- Continue global and country level dissemination of the checklist throughout the life of the sub-project.
- Finalize a general report to describe the dissemination and utilization process of the checklist based on global dissemination reports, and evaluation reports from Uganda, the Dominican Republic, and Kenya.

- Cost-share training on job aids for orientation sessions planned under WHO SPP Tanzania and Nigeria (FCO 113134).

Findings and Outcomes:

- The pregnancy checklist has been endorsed and co-branded by the Ministries of Health in Uganda, Kenya, Madagascar, Senegal, Tanzania, and Romania.

Funding Source(s): USAID - US Agency for International Development/USAID: Core
Total Approved Budget: \$ 150,680

Madagascar: Scale Up Norms and Procedures (FCO 143108)

Objective(s): To develop and disseminate practical tools and materials to help health care providers navigate and apply the revised, national recommendations. USAID/Madagascar has allocated field support funds to FHI to respond to this request. FHI will also assist the MOHFP ensure utilization and scale-up of these tools/materials by: developing of a training curriculum to roll out the provider tools/materials, supporting the training of 200 providers through training of trainers events (TOTs) in three regions (10 districts total) and convening stakeholders to garner support for, and roll-out of, the tools/materials in additional regions in Madagascar.

Plans for January 2008 – June 2008

- FHI staff will meet with the MOHFP in April to finalize the overall sub-project approach and to identify partner involvement.
- A partner’s steering committee meeting will be held in May to refine the overall plan and lay out partner roles and responsibilities.
- A consultant will be identified and hired to assist with sub-project activities.
- An implementation strategy and training timeline will be drafted in May and finalized in June.
- Focus regions will be selected for subproject activities and negotiations with regional and district MOH staff will be complete by the end of June.

Funding Source(s): USAID - US Agency for International Development/USAID: CSL-FS
Total Approved Budget: \$ 200,000

Madagascar: Taking Best Practices Package to Scale (FCO 143107)

Objective(s): USAID/Madagascar has allocated field support funds to FHI to assist the MOHFP and Santénet institutionalize the BPP into regular service delivery in appropriate sites. Scale-up activities will target 90 percent of health facilities in the three districts served by phase one of this project, Alaotra Mangoro, Analamanga and Amoron’l Mania, and 50 percent of health facilities in three additional districts, yet to be determined, in the same regions. It is currently envisioned that an additional 60 providers and

program managers will be trained in the implementation and support of the BPP. (The original sites that were part of phase one of this project will continue to be supported in terms of monitoring and supervision).

Plans for January 2008 – June 2008

- A subproject steering committee will be formed and regular coordination meetings held. The scale-up plan will be drafted with input from key stakeholders. The plan will include scale-up sites and district, regional and national MOH roles and responsibilities for scale-up.
- The training manual and provider tools will be revised based on study results and pilot exercise.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: |
| Total Approved Budget: | CSL-FS \$ 314,247 |

HIV/AIDS AND CONTRACEPTIVE SERVICES

| GOALS | OUTCOMES |
|---|---|
| <p>I. To improve understanding of safety and effectiveness of contraceptive methods for women at high risk of HIV and HIV infected including women on ART</p> | <p>A. At least two clinical studies of the safety and effectiveness of hormonal contraceptives and ART completed.</p> <p>B. At least two studies on the safety, effectiveness, and health benefits of contraceptives for women at high risk of HIV or HIV infected women completed.</p> |
| <p>II. To increase access, improve quality and expand use of contraceptives to safely prevent unintended pregnancies among people at high risk of HIV and HIV infected, including women on ART</p> | <p>A. At least two scalable and appropriate models given the CPR, HIV prevalence, and available services for integrating family planning and HIV services designed, evaluated and introduced in up to five countries.</p> <p>B. At least three strategies to meet demand of specific populations identified, implemented by HIV and/or FP providers and evaluated, and introduced into programs in five countries.</p> <p>C. Research evidence provided to at least four countries to inform policy reviews and strengthen policies focused on increasing contraceptive use in HIV programs to avert HIV-positive births.</p> <p>D. International recommendations for contraceptive use by people at risk of HIV and HIV-infected, including women on ART changed or strengthened; and international recommendations used in country guidelines and program documents.</p> <p>E. Evidence-based technical assistance, curricula and tools provided to at least three field programs per year to implement, expand and improve integrated FP and HIV programs.</p> |

FHI/NC subprojects fully or partially funded by USAID's CRTU Agreement:

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| Haiti: | FP/VCT Extension Project (FCO 153108/153109/153120) |
| Haiti: | Increase Family Planning Uptake in Designated Locations (FCO 143105) |
| Haiti: | OVC Support for South and South East Departments (FCO 153116) |
| Haiti: | FP/VCT Integration in the South Department (FCO 153114) |
| Haiti: | Integrating FP into an HIV Care & Prevention Program—Technical Assistance (FCO 153115) |
| Haiti: | Institutional Strengthening and Capacity Development of Nou Pa Ka Ret Konsa (FCO 153117) |
| Haiti: | Operations Support and Capacity Building for the Community Transit House Jacmel (FCO 153118) |
| Tanzania: | Implementing and Evaluating FP and VCT Services Integration (FCO 114115) |

- DRC: Integration of FP Services into Counseling and Testing Sites (FCO 143106)
- Kenya: Improving Use of Family Planning in VCT (FCO 114104/153103)
- Kenya: Understanding Fertility Desires and Demand for Contraceptive Use of Women on Antiretroviral Therapy in Comprehensive Care Centers (FCO 156100)
- Kenya: Integration of Family Planning into Comprehensive Care Centers (FCO 114114/124104)
- South Africa: Family Planning & HIV Service Integration: South Africa Network of Champions (FCO 113127/153130)
- South Africa: Strengthening Linkages between FP, HBC and ARV Services (FCO 153105/153112/153113)
- South Africa: Expansion of Strengthen Linkages Between HBC, FP, ARV (FCO 153128/153129)
- South Africa: Developing and Testing Interventions to Serve the Family Planning Needs of PMTCT Clients (FCO 114103/114127)
- South Africa: Enhancing PMTCT Performance (FCO 153104)
- Kenya: FP/PMTCT Integration Assessment (FCO 144101/154101)
- Worldwide: Country Assessments: Documenting Promising Family Planning-HIV Integration Models (FCO 114124/114135/124106/124107/124108)
- Uganda: Support to MoH to Increase Access to FP (FCO 143110)
- Madagascar: Increasing Access to Postpartum Family Planning Services (FCO 114116/114132)
- South Africa: Integrated Community Palliative Care Project (ICPC) (FCO 153122/153123/153124/153125/153126/153127)
- Worldwide: Prospective Evaluation of Contraceptive Dynamics in Women (FCO 112127)
- Kenya: Examining the Family Planning Needs of Women Traditionally Targeted for HIV/STI Services (FCO 124100/124105)
- Africa Regional: Assessing Provision of Family Planning and Reproductive Health Services in Commercial Sector HIV/AIDS Programs (FCO 124102)
- Worldwide: Tool Kit to Increase Access to Appropriate and Effective Contraception for Clients with HIV (FCO 113106)
- Worldwide: Providing Global Leadership to Family Planning and HIV Integration Efforts (FCO 113104/123100)
- Worldwide: Scale-up and Global Dissemination of Kenya's FP/VCT Integration Package (FCO 113126/123102)
- Africa Regional: FP in Context of HIV: Supporting Evidence-Based and Promising Practices (FCO 113131)
- Africa Regional: Hormonal Contraception and HIV Research: Dissemination through Africa Regional and In-Country Meetings (FCO 3703/172005)
- Worldwide: Interactions between Hormonal Contraceptives and Antiretroviral Therapies (FCO 112139)
- Kenya: Safety of Implant Use among Women on ARVs (FCO 112136/112141)

- Kenya: Risk of HIV and Feasibility Research Among House Girls in Nairobi (FCO 154100/154102)
- Kenya: Youth Integrated FP and HIV Service Delivery Models (FCO 114130)
- South Africa: Hormonal Contraception and HIV Acquisition Analysis of the Carraguard Dataset (FCO 112138/132129)

Haiti: FP/VCT Extension Project in Haiti (FCO 153108/153109/153120)

Objective(s): 1) To offer VCT services to 100% of individuals who desire to be tested and visit one of the three dispensaries during the subproject; 2) To integrate family planning services (education and select method provision) into VCT services, within the cadre of services already provided by the dispensaries; 3) To educate 30% of the population in Labordes and Port-au-Prince on the methods for preventing the transmission of HIV/AIDS, the advantages of knowing one's HIV status, and community responsibility for supporting those infected/affected by HIV; and 4) To provide psychosocial support to 80% of people living with HIV/AIDS by establishing post-test clubs, community support groups, and an association for PLWHA.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The key challenge for the subproject's two subreipients was to meet targets within a very limited timeframe. According to the final statistical report, most of the targets were met, and some were surpassed.
- Both subreipients successfully surpassed their new acceptor targets. Over the life of these two subprojects, a combined total of 1284 new FP acceptors were enrolled, surpassing the original target of 1000 new acceptors.
- Both subreipients also surpassed their FP counseling targets. Over the life of these two subprojects, a combined total of 7618 people were counseled in FP.
- Both subprojects struggled to meet the target for supervision visits. In future, strategies to strengthen the ability to conduct effective visits should be considered in future FP initiatives.

Findings and Outcomes:

- The subproject successfully met most of its targets.
- **FCO #153108 accomplishments:**
 - 660 new FP acceptors identified (165% of target).
 - 3 FP consensus meetings (200% of target).
 - 1 FP training curriculum prepared (100%).
 - 11 personnel trained in FP (110% of target).
 - 2 sites, Ti Décayette et de Campeche dispensaries, funded by CDPEP, were equipped with FP products (100%).
 - 6329 people counseled in FP (127% of target).
 - 6 FP supervision visits completed (75% of target).
 - 1 training session in FP held for field agents (100%).
 - 10 field agents trained in FP (125%).
 - An indicator for "# of FP educational materials distributed" was never defined; there is no data on this indicator. Consideration should be given to explore how to address this information gap.
- **FCO #153109 accomplishments:**
 - 624 new FP acceptors identified (104% of target).
 - 3 FP consensus meetings held (150% of target).
 - 1 FP training curriculum prepared (100%).
 - 2 personnel trained in FP (100%).

- 1 site, Laborde dispensary, run by DCCH, was equipped with FP products (100%).
- 1289 people counseled in FP (129% of target).
- 8 FP supervision visits conducted (67% of target).
- 8 field agents trained in FP (100%).

The number of FP acceptors and the number of people counseled in FP both surpassed their targets, an important achievement. On the other hand, supervision visits, which included monitoring and reinforcing of the referral system between dispensaries and the local hospital, as well as oversight of FP commodity procurement, did not occur as frequently as planned. To ensure quality and sustainability of FP services, these activities should be strengthened. Further assessment of overall sustainability of these initiatives should be done, if possible. A remaining question is whether these FP services can be sustained, or expanded, beyond the life of this subproject.

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|-------------------------------|---------------|--|
| Funding Source(s): | | USAID - US Agency for International Development/PEPFAR |
| Total Approved Budget: | 153109 | \$ 177,999 |
| | 153108 | \$ 72,001 |
| | 153120 | \$ 56,846 |
| | | \$ 306,846 |

Haiti: Increase Family Planning Uptake in Designated Locations in Haiti (FCO 143105)

Objective(s): 1) To establish collaborative project teams at the four designated subproject sites; 2) To conduct training for designated providers on family planning technology, counseling skills, and new acceptor protocols; 3) To increase availability of quality family planning services within the target facilities; and 4) To sensitize the communities living within the subproject sites' catchment areas about the availability of family planning services.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- This subproject met or surpassed many of its Family Planning (FP) targets. Significantly, the subproject contributed to community awareness about FP services offered within the project catchment area. It also trained more personnel than originally projected.
- However according to the final narrative report, it was not able to meet its target number of new FP acceptors.
- This subproject ended on September 30, 2007.
- The final narrative report was received from the FHI/Haiti Office on October 22, 2007.

Findings and Outcomes:

- This subproject successfully introduced a family planning component—specifically provision of FP methods, including Norplant and voluntary surgical sterilization for men and women, and FP promotion—onto ongoing services offered in the Département du Sud and the Département de Sud-Est. This subproject enlisted an impressive number of new FP acceptors, 1119 to be exact—within the tight time constraints of a 6-month long project. However, this achievement does fall somewhat short of its target. It will be important to assess the factors that contributed to this challenge, in order to inform future efforts to expand quality FP services. Finally, a potential future research question is whether these FP services can be sustained, or expanded, beyond the life of this subproject.
- 50,000 people were sensitized about FP methods. This is a significant achievement, and one that will likely contribute to increased demand for FP.
- 1119 new FP acceptors were enlisted. While this is an important achievement, it unfortunately falls short of our target of 3000 enrollees (only 37% of target).

- 61 community health workers were trained in FP technology (100%).
- Seven physicians, 17 nurses, and 10 licensed practical nurses were trained in FP technology and procurement.
- 20 supervision visits were conducted by a team consisting of the FHI Project Monitor, representatives from the Département Sanitaire du Sud and Sud-Est, and site personnel (160% of target)
- 12 follow up meetings were conducted.
- Four consensus meetings were conducted with Health Systems 2007 Project (HS2007), the Département Sanitaire du Sud and the Département Sanitaire du Sud-Est.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Field Support

Total Approved Budget: \$ 200,000

Haiti: OVC Support for South and South East Departments (FCO 153116)

Objective(s): To improve the well-being of Orphans and Vulnerable Children (OVC) in the South and South-East Departments through increasing accessibility to school, immunization, birth registration services, and psychosocial support, and integrated a family planning component for adult caregivers of OVC.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- This subproject ended on September 30, 2007.
- The final narrative report was received from the FHI/Haiti Office on October 22, 2007.

Findings and Outcomes:

- This subproject successfully introduced a family planning component—specifically, FP counseling for adult caregivers of OVCs—into ongoing OVC services in the Département due Sud and the Département du Sud-Est. A total of 175 adult caregivers of OVCs were sensitized and counseled about FP methods. In addition, it also achieved its overall objective of improving the well-being of OVCs in these localities. It would be useful to evaluate the impact of FP counseling on FP prevalence among this population, and to determine whether any of those counseled actually were referred for and ultimately adopted an FP method. It will be useful to assess whether FP counseling can be sustained, or expanded, beyond the life of this subproject.

Funding Source(s): USAID - US Agency for
International
Development/PEPFAR

Total Approved Budget: \$ 100,000

Haiti: FP/VCT Integration in the South Department (FCO 153114)

Objective(s): To extend VCT services to four additional sites in the South Department while also integrating FP counseling into those services.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- By the end of this subproject:
- 273 people were counseled in FP.
- 119 people were enlisted as new FP acceptors.
- Designated project sites required significant renovation before family planning (FP) activities could begin, which caused some delay. The sites were inadequately equipped to deliver integrated FP/HIV services, because of the long-standing lack of national-level investment in family planning in general. In order to address the inadequate facilities, a subcontractor was identified to undertake required construction/renovations. Renovations were completed at all project sites.
- Coordination meetings were conducted to establish the Departmental Steering Committee (Conference de Coordination Departementale).
- This subproject ended on September 30, 2007.
- The final narrative report for this subproject was received from the FHI/Haiti Office on October 22, 2007

Findings and Outcomes:

- This subproject succeeded in introducing FP services—specifically counseling and method provision—to ongoing VCT services within the sites in the Department du Sud. A total of 273 people were counseled in FP, and 119 new acceptors were enlisted, within the limits of the 6-month project duration. In addition, the infrastructure of five health centers was upgraded, an investment that can contribute to programmatic efficiency and service quality. It will be important to assess factors that influenced demand and enlistment, in order to inform future efforts to expand quality FP services. Finally, a potential future research question is whether these FP services can be sustained, or expanded, beyond the life of this subproject.

Funding Source(s): USAID - US Agency for
International
Development/PEPFAR

Total Approved Budget: \$ 340,311

Haiti: Integrating FP into an HIV Care & Prevention Program— Technical Assistance (FCO 153115)

Objective(s): To provide technical assistance to integrate family planning into an HIV Care and Prevention Program in Haiti.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The TM provided technical assistance to in-country staff as needed to initiate subagreement and program implementation.
- This subproject was closed on September 30, 2007.

Findings and Outcomes:

- This FCO is the parent FCO for technical assistance under the “Integrating FP into an HIV care and Prevention Program”, which is the larger PEPFAR funded Project, including FCOs 153114, 153116, 153117 and 153118. Please refer to those subprojects for findings.

Funding Source(s): USAID - US Agency for
International
Development/PEPFAR

Total Approved Budget: \$ 314,608

Haiti: Institutional Strengthening and Capacity Development of Nou Pa Ka Ret Konsa (FCO 153117)

Objective(s): To support Nou Pa Ka Ret Konsa (NPKRK) by providing operational support and assistance that strengthened educational and outreach activities, including a family planning component. Specific objectives were: 1) to educate NPKRK members on FP methods; 2) to strengthen the operational capacity of the association; 3) to strengthen skills of 50 individuals, or 80% of the members of the association; 4) to educate People Living with HIV & AIDS (PLWHAs) and their families about HIV/AIDS; 5) to train PLWHAs in the community to conduct activities that provide psychosocial support; and 6) to promote the use of FP service, specifically FP education and condom distribution, among members of the association.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- This subproject ended on September 30, 2007.
- Final narrative report was received from the FHI/Haiti Office on October 22, 2007.
- The key challenge for this subproject was to meet its programmatic targets within a very tight 6-month timeframe.
- Overall, an FP component was incorporated into and promoted within NPKRK's services.
- 10 sensitization workshops on FP were conducted for People Living with HIV/AIDS (PLWHA) (100% of target).
- 62 PLWHAs were sensitized in FP.
- 810 condoms were distributed to PLWHA.
- 33 PLWHAs were enlisted as new condom acceptors.
- 10 radio ads about HIV/AIDS were broadcast (100%).
- Seven meetings of the PLWHA association were held.
- 10 PLWHAs participated in literacy course.
- Six hospital monitoring visits were conducted.
- 14 home based visits were conducted.
- A system for referring PLWHAs to St Michel Hospital for FP was established.

Findings and Outcomes:

- This subproject successfully integrated a family planning component—specifically condom promotion and distribution—into the ongoing activities of the Nou Pa Ka Ret Konsa (NPKRK), an association for PLWHAs in the Jacmel, Cayes-Jacmel and Marigot counties. It also achieved its larger objective of strengthening NPKRK operations. Regarding FP targets, a total of 62 PLWHAs were sensitized in FP methods, and of those 33 became condom users. Given that at the time of project launch, NPKRK had only 60 members, the subproject surpassed its original sensitization target, which is an accomplishment, especially given the very tight 6-month timeframe. It will be very useful to know if integration of FP education and condom provision can be sustained, or expanded beyond the life of this subproject.

Funding Source(s): USAID - US Agency for
International
Development/PEPFAR
Total Approved Budget: \$ 33,841

Haiti: Operations Support and Capacity Building for the Community Transit House Jacmel (FCO 153118)

Objective(s): To improve services offered to People Living with HIV/AIDS (PLWHAs) who receive care at the Community Transit House of Jacmel, in Haiti's South East Department. This facility is operated by the Mouvement Haïtien Pour le Développement Rural (MHDR). In addition to ongoing HIV/AIDS care and support, this subproject also integrated a family planning component. Specific objectives were: a) to support and strengthen MHDR's Community Transit House operations; b) to strengthen psychosocial support for PLWHAs who seek services at MHDR's Community Transit House; and c) to integrate family planning education, condom promotion (and for those who wish methods other than condoms) and family planning referral into the palliative care services provide at MHDR's Community Transit House.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- This subproject ended on September 30, 2007.
- The final narrative report was received from the FHI/Haiti Office on October 22, 2007.

Findings and Outcomes:

- This subproject successfully introduced a family planning component—specifically, condom promotion and distribution—to ongoing services for PLWHAs at the Community Transit House of Jacmel. A total of 50 new acceptors were enlisted, and 3600 condoms were distributed, achieving 72% of the target within the very short 6-month timeframe. This number, while very impressive, does fall short of this target. An assessment could help clarify conditions influencing condom use and promotion. In addition, it will be very useful to know if condom promotion and provision can be sustained, or expanded beyond the life of this subproject.

Funding Source(s): USAID - US Agency for
International
Development/PEPFAR
Total Approved Budget: \$ 76,241

Tanzania: Implementing and Evaluating FP and VCT Services Integration in Tanzania (FCO 114115)

Objective(s): To implement and evaluate the integration of FP and VCT services on FP uptake in selected ANGAZA (AMREF's VCT program) sites in Tanzania.

The overall study objectives are:

- 1) to measure the level of unmet need for contraception among VCT clients;
- 2) to determine the effectiveness and cost of adding FP to VCT;
- 3) to determine the effect of adding FP on quality of care for VCT; and
- 4) to measure FP uptake among VCT clients with unmet contraceptive need.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Finalizing selection of study clinics and the basic integration intervention strategy did not occur until the TM visited Tanzania in November 2007. It was anticipated that these decisions could be made over email and conference calls with AMREF but this was not the case.
- The development of the study protocol began.
- Muhimbili University of Health and Allied Sciences (MUHAS, previously MUCHS) was selected as the implementing partner.

Plans for January 2008 – June 2008

- The study protocol will be finalized and submitted to PHSC and MUHAS for ethical approvals in the 3rd quarter (Jan-Mar 2008).
- A subagreement with MUHAS will be negotiated.
- Interviewer training and baseline (pre-intervention) data collection will be conducted.
- AMREF will implement the intervention in the study sites in preparation for the follow-up evaluation in 08-09.

Funding Source(s): USAID - US Agency for
International
Development/USAID: Core

Total Approved Budget: \$ 329,716

Tanzania: Facilitated Referrals to Promote FP Access Among HIV-Positive Women at HIV Care and Treatment Centers (FCO 114136)

Objective(s): To evaluate the feasibility and effectiveness of “facilitated referrals” on the uptake and continuation of FP among female clients attending CTC sites who have unmet need for contraception.

Plans for January 2008 – June 2008

- The ATI was approved in Jan 2008.
- The TM will develop a study protocol in consultation with FHI/Tanzania office.
- The TM will identify an implementing agency and begin drafting a subagreement.

Funding Source(s): USAID - US Agency for
International
Development/USAID: Core

Total Approved Budget: \$ 376,729

Democratic Republic Congo: Integration of FP Services into Counseling and Testing Sites (FCO 143106)

Objective(s): 1) To incorporate family planning content into the existing CT counseling services supported by FHI/DRC; 2) to provide limited family planning methods and/or refer for initiation/re-supply in CT sites; 3) to promote family planning as an effective HIV prevention strategy; 4) to create an enabling environment that supports family planning/CT integration; and 5) to improve the future expansion of family planning into current and future CT sites in the DRC.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Staff reviewed existing DRC FP policies and training curricula.
- Conducted field visits (Drs. Yacobson and Dulli/FHI/NC and Mr. Tegang, FHI/AFRO/Nairobi) in December 2007.
- Held meetings with key stakeholders in-country along with CO staff.
- Developed the draft 2008 work plan.
- Developed the draft protocol for the Baseline Assessment.

Plans for January 2008 – June 2008

Staff will:

- Finalize the protocol for the Baseline Assessment.
- Finalize data collection instruments.
- Obtain IRB and PHSC approvals.
- Develop subagreements.
- Recruit staff, conduct training and initiate the baseline assessment.
- Complete analysis of baseline assessment.
- Disseminate findings of the assessment.
- Review and update the national guidelines (Contraceptive methods only).
- Translate training materials into French.
- Train CT staff in contraceptive methods.
- Initiate FP at CT centers in two cities: Matadi and Lubumbashi.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Field Support

Total Approved Budget: \$ 1,164,923

Kenya: Improving Use of Family Planning in VCT (FCO 114104/153103)

Objective(s): 1) To determine the effect of adding a strengthened (or “full”) family planning intervention to VCT centres compared to control facilities on the intention to use a method among female VCT clients at risk of unintended pregnancy; 2) to determine the added value of training providers and conducting supportive supervision compared to advocacy and sensitization and introduction of a monitoring and evaluation (M&E) tool alone; 3) to calculate the incremental costs and cost-effectiveness ratios of scaling up the M&E and full models; 4) to determine the difference in VCT session length, client waiting time, and VCT counseling content between intervention groups and the control group; and 5) to assess men’s fertility desires and providers’ ability to address men’s fertility desires.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Two additional trainings held by APHIA with FHI participation took place in July and August, 2007 (43 participants total in 30 facilities)
- For the M&E data, orientations were conducted in August 2007 with 47 participants, implementation began in October 2007, and monitoring in 12 sites occurred in November 2007.
- Data collection instruments were drafted in August 2007.
- An M&E orientation tool was developed in September 2007.
- The supportive supervision tool was approved by the MOH in October 2007.

Plans for January 2008 – June 2008

- A data entry template for the M&E forms will be developed and implemented in January 2008.
- Supportive supervision will occur in January 2008.
- The costing instrument will be adapted from an existing one in January 2008 and implemented after all the intervention activities have been completed.
- Collection of M&E data is ongoing through May 2008.
- Data collection instruments will be finalized, training of research assistants, and data collection will occur in May 2008.
- A data analysis plan will be drafted in May 2008.
- Data entry will occur in June 2008.

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| Funding Source(s): | | USAID - US Agency for International Development/PEPFAR; USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | 153103 | \$ 52,900 |
| | 114104 | \$ 393,339 |
| | | <hr/> \$ 446,239 |

Kenya: Understanding Fertility Desires and Demand for Contraceptive Use of Women on Antiretroviral Therapy in Comprehensive Care Centers (FCO 156100)

Objective(s): 1) To investigate the prevalence and reproductive decisions of fertility desire, contraceptive use, and condom use of HIV+ women on ART, compared to reference groups of HIV+ women not on ART and HIV- women; 2) to explore provider attitudes on reproductive desires of HIV+ women, their perceptions of contraceptive methods for HIV+ women, and the acceptability of providing FP services in an ART setting; and 3) to use findings to inform the development of a training module for ART providers to offer FP services.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The study training and pre-testing of data collection instruments occurred from June 18-22, 2007.
- Data collection took place from June 25, 2007 to December 7, 2007. It was extended by 4 weeks in order to reach a larger sample size due to low recruitment issues.
- This subproject was granted a continuation of funds for COP07 to train an additional 100 CCC providers.
- After discussions in Nov. 07, this study will be integrated with the FP-CCC Evaluation study to better leverage information, staff resources, and funds. This study will be used to inform the FP-CCC intervention development.
- Preliminary data on fertility desires and contraceptive need of female CCC clients were presented at the CRTU Management Meeting on December 7, 2007 to showcase one of the FP/HIV integration projects.
- Key contacts for DRH (Dr. Kigen, FP Manager) and NASCOP (Margaret Gitau) were identified in Dec. 07 to begin communication with the MoH on developing a module on FP-ART integration for the Kenya National ART Curriculum.

Plans for January 2008 – June 2008

Staff will complete:

- Analysis of quantitative and qualitative data to inform FP-CCC training module and intervention development.
- Production of a final report on the study findings.
- A study dissemination and stakeholder workshop will be held with DRH and NASCOP partners to gain their support on FP-CCC module and intervention development.
- Training of CCC providers in partnership with APHIA II and the FP-CCC Evaluation projects will be conducted.

Funding Source(s): USAID - US Agency for
International
Development/PEPFAR

Total Approved Budget: \$ 200,000

Kenya: Integration of Family Planning into Comprehensive Care Centers (FCO 114114/124104)

Objective(s): 1) To test whether family planning services in Comprehensive Care Centers (CCCs) increase female clients' use of family planning methods over time; 2) to measure whether CCC providers are more likely to provide family planning services as a result of the intervention; 3) to measure the effect of the intervention on how CCC services are delivered; 4) to understand how CCCs can better support male CCC clients with their and their partners' family planning needs; and 5) to determine if the intervention is worth scaling up.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The protocol was approved by Kenyatta National Hospital's Ethical Review Committee in July 2007.
- A protocol amendment was submitted in December 2007 to include a pre-intervention CCC assessment.

Plans for January 2008 – June 2008

- The data collection forms for this activity will be developed and undergo review in January 2008.
- The pre-intervention CCC assessment will take place in Jan-Feb 2008.
- Baseline data collection is expected to take place in March-April 2008.
- The intervention is expected to be implemented immediately following baseline data collection.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core; USAID - US
Agency for International
Development/USAID:
GLP

Total Approved Budget: 114114 \$ 234,490
124104 \$ 134,000
\$ 368,490

South Africa: Family Planning & HIV Service Integration: South Africa Network of Champions (FCO 113127/153130)

Objective(s): To establish and provide technical support to a network of individuals in the South African Department of Health who are working to advance the integration of family planning and HIV service delivery.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Between July and September 2007, the baseline assessment survey was completed in Mpumalanga, Northwest, and Limpopo Provinces.
- A provincial project launch was held in Gauteng Province in July 2007. FHI staff met with HIV/AIDS and Maternal, Child, Womens, Youth Health (MCWYH) program coordinators and managers, conducted focus group discussions, and visited two facilities.
- In August 2007, FHI staff presented the champions network at a quarterly NDOH meeting on FP/HIV integration for multidisciplinary managers. The purpose was to present the rationale for and discuss current activities on integration, and obtain feedback from the provincial NDOH representatives.
- By September 2007, activity plans for strengthening FP and HIV integration were developed in 5 provinces (Limpopo, Free State, Gauteng, Northern Cape and Mpumalanga).
- An MOU agreement between FHI and Western Cape Province for subproject activities was signed in August 2007.
- In November 2007, FHI staff completed a baseline assessment report for Northwest Province.
- Kwazulu Natal and Eastern Cape provinces had management changes and slow communication that made it difficult to start activities in these provinces. Several discussions with the managers were held and concrete activities are planned for 2008 as there is interest in obtaining the technical support from FHI and NDOH.
- Gugu Shongwe (FHI-SA) became the Technical Monitor after Kirsten Krueger temporarily performed this role.

Plans for January 2008 – June 2008

Staff will:

- Conduct a national Network of Champions workshop.
- Provide technical assistance to the NDOH and facilitate the process of developing national integration guidelines.
- Provide technical assistance to the provinces and ensure that integration activities are planned for, implemented, and monitored.
- Assist in the review and revision of the Sexual and Reproductive Health (SRH) curriculum in all provinces.
- Train service providers using the updated SRH curriculum.
- Monitor utilization of the latest available CRTU literature and tools.
- Document successes and lessons learned.
- Attend relevant conferences/workshops to present the latest evidence on integration.
- With additional PEPFAR funds received in Nov 2007, the subproject will expand scope to train 450 service providers to provide integrated services.

Findings and Outcomes:

- Baseline survey reports on FP and HIV integration were completed for the four provinces.
- Five provincial activity plans were developed and are to be used for strengthening FP and HIV integration.

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| Funding Source(s): | USAID - US Agency for International Development/PEPFAR; USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget:113127 | \$ 129,005 |
| 153130 | \$ 250,000 |
| | \$ 379,005 |

South Africa: Strengthening Linkages between FP, HBC and ARV Services (FCO 153105/153112/153113)

Objective(s): 1) To build communication and referral skills of Home-Based Care (HBC) volunteers regarding pregnancy prevention as an effective PMTCT approach; 2) To build clinical counseling skills of family planning providers and ARV providers, regarding pregnancy prevention as an effective PMTCT approach and contraceptive methods that are safe for HIV-infected women and HIV-infected women on ARVs; 3) To build the skills of HBC volunteers to provide basic information about VCT, the availability of and access to ARV services, and to assist HBC clients to adhere to the treatment regimen; 4) To strengthen referral mechanisms between HBC programs and FP, VCT, and ARV services; 5) To conduct a process evaluation of the subproject; and 6) To increase access to integrated HIV and RH services through four mobile service units (MSU) in Mpumalanga (MP), Kwa-Zulu Natal (KZN) and the Limpopo (LP) Provinces, services to be provided will include (family planning, VCT, STI diagnosis and referral, and ARV referral).

Note: FHI received additional PEPFAR funding for this activity from Country Operational Plan 06 (COP 06). The funding will support the continuation of activities that fall within the objectives above. Objective #6 was added to this subproject in October 2006.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In July 2007, FHI and PSA-SA completed the MIS for the MSU to facilitate reports to the SA government, FHI and PEPFAR, and to measure the uptake of FP services and the cost of the provision in a mobile clinic.
- In June—September 2007, additional funds were used through PSA to conduct household-based VCT in 22 project sites. This activity has provided HIV counseling and testing for about 240 clients.
- Beginning in May and running up until September 2007, PSA-SA and FHI trained 99 service providers have been trained on FP/HIV integration, and 50 CD ROMs on contraceptives for HIV infected couples were distributed.
- FHI provided support to all 63 subproject sites on M&E and palliative care supervision.
- While the MSU began services in April 2007, it only had commodities for some of the HIV services (VCT kits) and not FP services. Only counseling and referral for FP was provided. FHI and PSA-SA are still waiting for the FP commodities from the DOH and in the meantime are providing FP counseling/referral services.
- FHI worked with PSA-SA to prepare plans for COP 07, which is an expansion of this program (see FCO 153128/153129).

Findings and Outcomes:

- At the end of the COP 05 portion of the subproject (October 2005—September 2006), FHI trained 681 HBC volunteers in: risk-reduction communication; how to identify FP, VCT and ARV needs among clients, caregivers and their families; how to refer clients to FP, VCT and ARV clinics; and how to track

referrals. As a result of this activity, 216 FP referrals, 300 VCT referrals, and 295 ARV referrals were made from HBC projects. Additionally, 38 DOH and private FP nurses and 9 DOH and private ARV doctors were trained on appropriate contraception for HIV-infected women of childbearing age and HIV-infected women on ARVs.

- Both project partners – SACC and PSA-SA – experienced a major challenge regarding the completion of referral forms at the clinics. The PSA-SA/SACC referral forms are to help volunteers direct clients to VCT, ARV and FP services and track the completion of services. Clinic nurses are often reluctant to fill out a referral form from an HBC NGO. PSA-SA and SACC project staff have addressed this by returning to clinics to explain the program to the staff, and by having higher-level provincial DOH meetings to secure buy-in among project managers.
- During the COP 06 period (October 2006—September 2007) 925 HBC care supporters were trained on HBC linkages, referrals and communication; 1363 clients were referred for VCT, 3547 clients were referred for FP; and 1033 clients were assisted to get into the ARV program. The activities under this subproject led to improved overall care services by PSA-SA, benefiting over 10,000 clients in their project sites. Also, FHI trained 17 FP DOH service providers on how to counsel HIV-positive clients for FP, including those on ARVs.
- During the April – December 2007 period, the MSU services resulted in: 1,396 total clients visiting mobile unit; 586 clients counseled, tested and receiving HIV test result; and 599 clients receiving counseling on family planning. Additional statistics are documented in a separate report provided by PSA-SA.

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| Funding Source(s): | | USAID - US Agency for International Development/PEPFAR |
| Total Approved Budget:153105 | \$ | 550,583 |
| 153112 | \$ | 364,417 |
| 153113 | \$ | 119,791 |
| | \$ | <u>1,034,791</u> |

South Africa: Expansion of Strengthen Linkages Between HBC, FP, ARV (FCO 153128/153129)

Objective(s): 1) To build the communication and referral skills of HBC volunteers regarding family planning as an effective PMTCT approach; 2) to build the skills of HBC volunteers to provide basic information about and referrals for VCT and ARV services, and to assist HBC clients to adhere to the treatment regimen; 3) to strengthen referral mechanisms between HBC programs and FP, VCT, and ARV services; and 4) to increase access to integrated HIV and RH services through four mobile service units (MSU) in Mpumalanga (MP), Kwa-Zulu Natal (KZN) and the Limpopo (LP) Provinces.

Plans for January 2008 – June 2008

FHI and PSA will:

- Provide technical assistance to HBC volunteers to identify FP, VCT, and ARV needs in the household and to refer to appropriate services;
- Leverage government and partner resources by building/strengthening formal referrals between HBC projects and FP clinics, VCT sites and nearby ARV providers;
- Train HBC volunteers to assist clients in initiation of ARV therapy and to monitor client adherence;
- Support select HBC programs through financial assistance, reporting, and supportive supervision TA; and
- Conduct trainings for FP and ARV providers on appropriate contraception for HIV-infected couples, including those on ARVs.
- Continue to support the MSU initiated in FY 2006 which serves 10 HBC projects;

- Purchase and set up three additional MSUs;
- Select new remote HBC sites of which the program participants and immediate community will have access to the MSU;
- Hire and supervise MSU staff (two professional nurses and one counselor in each MSU) to provide FP, VCT, STI services and ARV referrals;
- Train MSU staff on and oversee the quality of family planning services and counseling, VCT, STI testing, and ARV screening;
- Train MSU staff on couples counseling and gender awareness, and ensure MSU is staffed by both men and women health professionals;
- Work with HBC volunteers in MSU service sites to provide referrals to their area MSU for FP, VCT, STI and ARV referrals services; and
- Conduct outreach to HBC projects and communities through household visits and the use of IEC materials.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: GLP |
| Total Approved Budget:153128 | \$ | 434,578 |
| 153129 | | 765,426 |
| | \$ | <u>1,200,004</u> |

South Africa: Developing and Testing Interventions to Serve the Family Planning Needs of PMTCT Clients in South Africa (FCO 114103/114127)

Objective(s): 1) To explore with providers and clients the feasibility and acceptability of alternative strategies for linking FP services to PMTCT services; and 2) to measure how such linkages affect FP uptake among women who have completed PMTCT services.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The Phase I report was prepared and circulated for technical review.
- The team identified promotion of long-acting and permanent methods (LAPM) as an important need warranting testing in Phase II operations research.
- Permission to conduct CRTU research in Western Cape was secured from USAID. Provincial authorities have expressed interest in revitalization of LAPM.
- The technical monitor traveled to South Africa in November 2007 to collaborate with FHI/South Africa and WHRU on plans for Phase II operations research.
- The Phase II protocol was drafted.

Plans for January 2008 – June 2008

- Sites for Phase II operations research will be identified in collaboration with provincial officials and FHI/South Africa staff managing PEPFAR-funded PMTCT-Family Planning technical assistance.
- The protocol for Phase II operations research will be finalized and submitted for ethical and technical approvals.
- The PEPFAR-funded curriculum for training providers in PMTCT and family planning will be reviewed and supplemented as necessary to include information on promotion of the IUCD and sterilization.
- Technical support will be provided to Western Cape province for developing a refresher training course on IUCD insertion.

- The intervention for clinic-based promotion of LAPM use, particularly among PMTCT clients, will be designed and implemented.

Findings and Outcomes:

- The majority of HIV+ women interviewed at antenatal care (ANC), delivery, and child health services (CHS) reported that their most recent pregnancy was not planned, and most reported they were not interested in another pregnancy.
- Among 62 HIV+ Child Health Service Clients, half were currently using a family planning method. Of those not using a method, 61% said they would like to start.
- Fewer than half of all clients interviewed believed injectables, oral contraceptives, IUD, or female sterilization could be safely used by HIV+ women.
- The majority of clients reported being interested in more information on family planning and willing to spend an extra half hour at services to receive such counseling.
- Most clients expressed interest in receiving a family planning method at delivery and contraceptive services within CHS.
- Of 26 ANC, CHS, delivery, and family planning providers interviewed, 10 reported prior training in contraceptive services.
- Only seven of 26 providers believed oral contraceptives are safe for HIV+ women, 17 believed injectables are safe, nine thought emergency contraception is safe, and six thought the IUD is safe.
- Half the providers were familiar with the term “dual protection,” and all of those provided an appropriate definition. Nine of 26 providers indicated there are cases in which they would recommend condom use on its own as a family planning method.
- Results underscored the need for the following intervention: training providers to assess the reproductive health needs of HIV-positive women and counsel on the full range of methods that are safe and effective for this population; reorganizing service delivery to permit individual, private consultations about contraceptive service needs; strengthening referral systems to ensure providers are able to direct clients to convenient, responsive services; and broadening the range of contraceptive options, including long-acting and permanent methods.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | 114103 | \$ 151,289 |
| | 114127 | 103,068 |
| | | \$ 254,357 |

South Africa: Enhancing PMTCT Performance in South Africa (FCO 153104)

Objective(s): 1) To provide technical assistance to 30 sites in South Africa (SA) to design, develop, and implement high quality, comprehensive and cost effective PMTCT programs, with an emphasis on strengthening family planning counseling and referral; 2) to expand upon lessons learned from previous FHI projects in PMTCT and FP/HIV integration (FCOs 3449, 9403, and 3447); and 3) to assist the provincial departments of health as needed with the development and finalization of provincial PMTCT protocols. Note: Objective 3 was separated out from the general technical assistance as the DOH has directly asked FHI for this support.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI hired two consultants to provide TA/training to NC, FS and LP provinces on FP/PMTCT integration. Provinces continued to use the training manual, developed by FHI and endorsed by the NDOH in May 2007, which emphasizes FP counseling and proper referral to strengthen PMTCT services.
- FHI gave feedback to NCape province on the assessment results conducted in April 2007.
- In NCape, FHI worked with the DOH to select 10 PMTCT sites to receive TA. In September and October 2007, FHI visited 7 NP sites to provide TA to providers on FP/PMTCT integration.
- In September 2007, in NCape FHI trained 31 health service providers on FP/PMTCT integration. During this training FHI worked with four DOH trainers on their facilitation and training skills, with an aim towards developing a pool of trainers for this program.
- In November 2007, FHI conducted FP/PMTCT training for 32 providers in NCape, and an additional two DOH trainers were mentored as facilitators for this training.
- In LP province, FHI in conjunction with Provincial PMTCT management selected 13 PMTCT sites in 5 districts for the program.
- A rapid assessment was conducted in the 13 sites during September 2007. FHI compiled the information and provided a report to the province.
- In FS province, FHI held several meetings with the province and selected 10 sites that are representative of all 5 districts (2 sites per district).
- FHI conducted a rapid assessment of 6 of the sites. A report will be compiled and be available the 1st week of January 2008.
- As part of the National PMTCT steering committee, FHI gave TA and guidance to national DOH staff on FP/PMTCT service improvement. The group is currently involved in the process of reviewing guidelines and protocols related to improvement of FP/PMTCT integration.
- FHI received additional PEPFAR funding to continue to provide TA to the three provinces, and to expand into Western Cape (WC) and North West (NW) province.

Plans for January 2008 – June 2008

- FHI will provide feedback to the provinces on the rapid assessment results to LP and FS provinces.
- FHI will develop a budget and workplan to continue assistance to LP, FS, and NCape provinces, and to expand into WC and NW provinces, covering 53 districts. FHI will prepare a variance letter for signature by USAID describing how the new PEPFAR funds will be applied.
- FHI will begin negotiation for PMTCT site selection in WC and NW provinces.
- FHI will conduct needs assessments in NW and WC provinces.
- FHI will organize trainings on FP/PMTCT with provincial DOH managers for health providers working at the selected PMTCT sites as per provincial training needs.
- FHI will continue to work closely with the NDOH on the review of the PMTCT training manual and guidelines and ensure utilization of these guidelines at the service level.
- FHI will prepare a semi-annual report for PEPFAR.

Findings and Outcomes:

- By the end of March 2007, FHI's technical assistance and training facilitated the integration and/or strengthening of family planning counseling and provision/referral in 97 PMTCT sites in NCape province (July 06-March 07).

Funding Source(s): USAID - US Agency for
International
Development/PEPFAR

Total Approved Budget: \$ 425,000

Kenya: Kenya FP/PMTCT Integration Assessment (FCO 144101/154101)

Objective(s): To conduct a formative assessment in order to better understand the program opportunities for and potential barriers to the successful integration of FP into the wider scope of PMTCT plus services for both fecund and recently postpartum HIV+ women. This subproject also aims to develop or modify existing training materials as needed on the provision of FP services for HIV-positive women.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- PHSC approved the protocol in July and Kenyatta approved it in August 2007.
- Data collection forms were developed and reviewed in December 2007.

Plans for January 2008 – June 2008

- Research Assistant recruitment and training, and DCF piloting is expected to take place in January 2008.
- Data collection is expected to take place in February 2008.
- Data analysis will take place in March 2008.
- Dissemination will take place in April 2008.
- Final Report writing will take place in May-June 2008 and the FCOs/subproject will then be closed.

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| Funding Source(s): | USAID - US Agency for International Development/PEPFAR; USAID - US Agency for International Development/USAID: Field Support |
| Total Approved Budget: | 144101 \$ 49,958 |
| | 154101 \$ 199,436 |
| | \$ 249,394 |

Worldwide: Country Assessments: Documenting Promising Family Planning-HIV Integration Models (FCO 114124/114135/124106/124107/124108)

Objective(s): 1) To describe the range of integrated or linked FP/HIV activities being carried out in the PEPFAR focus countries, including the approach to integration for each activity, scale of implementation, and evaluation results; and 2) to gather rigorous, in-depth information about FP-VCT, FP-ART, and HIV-FP integration models in five countries (Kenya, Uganda, South Africa, Ethiopia and Rwanda) to describe how these models are being implemented, their impact on client intentions to use (or in FP clinics, who are using) contraception, their cost-effectiveness in reaching HIV-positive women with FP services, and their potential for scale-up.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Protocol and data collection instruments for Phase II were finalized and submitted to FHI's PHSC in August 2007.

- The protocol for Phase II was reviewed by local IRBs in Uganda and South Africa in September 2007, in Kenya in October 2007, and submitted for review in Ethiopia in December 2007. A presentation of the protocol was made to the National Committee for the Fight against AIDS in Rwanda in December 2007.
- Instruments were pre-tested in August 2007.
- In-depth interviews of key informants took place in Kenya and Uganda in October-November 2007.
- Training of the data collection team in Uganda took place in October 2007, and data collection at 22 sites was completed in mid-November 2007 (FCO114135).
- Training of the data collection team in Kenya took place in October-November 2007, and data collection at 30 sites was completed on December 1, 2007.
- Data coding and data entry occurred in Uganda in November-December 2007.
- In-depth interviews and fieldwork planning took place in South Africa in November 2007, including developing a subagreement with a local data collection firm (FCO 124107).
- In-depth interviews, field work planning and budget preparation took place in Rwanda in December 2007.

Plans for January 2008 – June 2008

- Presentation of the proposal will be made to the MOH Ethics Review Board in Rwanda in January 2008. Training of the field team will also occur in January, and data collection will begin immediately thereafter.
- Data entry will take place in Kenya in January 2008.
- Field staff training and data collection will take place in February-March in South Africa.
- Data cleaning and preliminary analysis for both Uganda and Kenya will take place in the first quarter of 2008, and work on the Rwanda and South Africa data will proceed as they become available.
- Data collection, coding and data entry will begin in Ethiopia in January 2008 (FCO 124108).
- Analysis of the qualitative data will take place during the first quarter of 2008.
- Preliminary analysis results will be presented at the May 2008 meeting of the International Working Group on Integration in Washington, DC, and at the PEPFAR Implementers meeting in Kampala, Uganda in June 2008.

Funding Source(s):

USAID - US Agency for
International
Development/USAID:
Core; USAID - US Agency
for International
Development/USAID: GLP

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| Total Approved Budget:114124 | \$ | 280,049 |
| 114135 | \$ | 69,951 |
| 124106 | \$ | 300,000 |
| 124107 | \$ | 60,373 |
| 124108 | \$ | 157,239 |
| | \$ | <u>867,612</u> |

Uganda: Support to MoH to Increase Access to FP (FCO 143110)

Objective(s): To improve access to and use of FP services in Uganda by providing technical assistance (TA) to the MoH to: 1) Strengthen national training for family planning; 2) Enhance coordination and oversight of the FP program in Uganda; and 3) Expand the CBD of DMPA innovation.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The ATI was approved by USAID on February 4, 2008.

Plans for January 2008 – June 2008

Staff will:

- Convene FPRWG Advisory Group.
- Convene FPRWG Team Building Meeting.
- Hold a quarterly FPRWG meeting.
- Facilitate 2 program update meetings to partners.
- Establish FPRWG membership list.
- Prepare concept note for development of FP training strategy.
- Discuss concept note with the MoH.
- Begin writing the FP training strategy.
- Convene consensus and validation meeting to discuss the draft FP training strategy.
- Meet CTPH and MIHV to draw up scale up plans.
- Hold district stakeholder consensus meetings in planned districts.
- Select CRHWs for training.
- Conduct training for the CRHWs.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: CSL-FS |
| Total Approved Budget: | \$ 200,000 |

Madagascar: Increasing Access to Postpartum Family Planning Services (FCO 114116/114132)

Objective(s): To increase use of postpartum family planning by women. To achieve this goal, this subproject proposes to conduct an assessment of immunization services to generate strategies to reach postpartum women with family planning messages, services and/or referral. Specifically, this study will show: 1) how immunization services are typically organized in a country with high levels of immunizations; 2) the characteristics of mothers and infants attending immunization services, particularly contraceptive use, breastfeeding practices, and HIV status (as appropriate); and, 3) provider and client perspectives on the feasibility and acceptability of a strategy to link mothers to family planning services.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Study documents were finalized and received approval from both FHI and Madagascar ethics committees in August 2007.
- Data collector training took place in September 2007 and data collection began the same month.
- Data entry began in October 2007.
- The majority of data was collected as of December 2007. Scheduling and holiday interruptions resulted in the study teams having to revisit a few sites to finish up data collection.

Plans for January 2008 – June 2008

- Data entry will be complete by the end of January 2008 and analyses completed by the end of March 2008.
- An initial report and a meeting with MOH and partners will be completed by April 2008 to discuss intervention strategy development based on study findings.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget:114116 | \$ | 125,980 |
| 114132 | \$ | 64,124 |
| | \$ | <u>190,104</u> |

South Africa: Integrated Community Palliative Care Project (ICPC) (FCO 153122/153123/153124/153125/153126/153127)

Objective(s): 1) To improve access to comprehensive palliative care services including family planning (FP) for clients and family members receiving palliative care in select communities in all the four ICPC sites; and 2) to improve the provision of integrated palliative care and family planning in Johannesburg Hospital through the expansion of the Palliative Care Team (PCT) and through education in palliative care and family planning (FP).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Funds for the larger PEPFAR funded subproject were obligated on June 1, 2007. The concept paper is entitled "South Africa Integrated Palliative Care Project". The ATI was submitted to USAID on August 1, 2007.

Plans for January 2008 – June 2008

- Follow-up with contracts and grants will take place, remaining subagreements will be approved, and project implementation will begin.
- FHI staff will mentor and coach all IA's and strengthen referral systems.
- Training content for the service providers on PC and FP/HIV integration will be reviewed. Training plans will be developed and conducted.
- FHI staff will facilitate and assist during capacity building at all sites for program implementation and good reporting.
- FHI staff will conduct ICPC site visits to improve project management, monitoring and support.
- To participate in NDOH & stakeholders meetings' in relation to palliative care and FP/HIV issues.

Findings and Outcomes:

- A baseline assessment was conducted in all ICPC sites; a report is available.

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| Funding Source(s): | | USAID - US Agency for International Development/PEPFAR |
| Total Approved Budget:153122 | \$ | 787,871 |
| 153123 | \$ | 32,464 |
| 153124 | \$ | 197,949 |
| 153125 | \$ | 53,868 |
| 153126 | \$ | 36,091 |
| 153127 | \$ | 71,757 |
| | \$ | <u>742,129</u> |

Worldwide: Prospective Evaluation of Contraceptive Dynamics in Women (FCO 112127)

Objective(s): 1) To describe patterns and dynamics of hormonal contraceptive use including discontinuation, method switching, and dual use using prospective data collected across countries and regions (Africa, Asia); 2) to examine the relationship between method discontinuation or switching and baseline reproductive health characteristics, reasons for method discontinuation, and condom use and sexual partnership characteristics over time; and 3) to examine, in a prospective study, the effect of HIV diagnosis (and possibly need for antiretroviral (ARV) treatment) on hormonal contraceptive discontinuation, initiation, switching, and dual use patterns.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The analysis plan was finalized.

Plans for January 2008 – June 2008

- Data analysis will begin and will be completed.
- FHI staff will draft a manuscript based on results.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

Total Approved Budget: \$ 100,846

Kenya: Examining the Family Planning Needs of Women Traditionally Targeted for HIV/STI Services (FCO 124100/124105)

Objective(s): To identify strategies for heightening sex workers consistent use of highly effective family planning methods by: exploring sex workers fertility desires, knowledge, attitudes and practices related to contraception; examining obstacles sex workers face in accessing family planning services; and gathering sex workers views on how family planning services could be adapted to optimally meet their needs.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In August 2007, a subagreement was established and signed with International Center for Reproductive Health (FCO 124105). Research Assistants were trained and the study launched simultaneously in the two study sites (Changamwe and Naivasha).
- In August-December 2007, data collection continued in both sites and data entry began.

Plans for January 2008 – June 2008

- Data collection is expected to end in late January 2008.
- In January, data cleaning will take place and the data analysis plan will be finalized.
- Preliminary data analysis will take place in February-March 2008.
- Dissemination meetings are expected to take place in March-April 2008.
- A final report/manuscript will be completed and the FCO closed by June 2008.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: GLP | |
| Total Approved Budget:124100 | \$ | 189,518 |
| | 124105 | \$ 79,784 |
| | \$ | <u>269,302</u> |

Africa Regional: Assessing Provision of Family Planning and Reproductive Health Services in Commercial Sector HIV/AIDS Programs (FCO 124102)

Objective(s): 1) To assess if commercial sector workplace HIV/AIDS programs also provide family planning, reproductive health and child health services; 2) to document how family planning, reproductive health and child care services are paid for (private insurance, services contracted out or work-based clinics) and the beneficiaries of them; 3) to document obstacles to providing these services; and 4) to prepare one or more case studies that highlight the commercial sectors interest in the provision of family planning as an HIV/AIDS prevention tool. These studies will highlight commercial sector HIV/AIDS programs that also provide family planning, reproductive health and child health services or those programs that could be easily expanded to include these services.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In August, FHI staff made the decision to not have their names listed as authors on the final report. Rather, FHI's role in this research would just be mentioned in the acknowledgement section.
- FHI staff verified the data presented in the country specific fact sheets.
- The person at Abt in charge of this project has left the country. We are awaiting copies of the some of the deliverables, including the country fact sheets and case studies to disseminate in Kenya.

Plans for January 2008 – June 2008

- The deliverables from Abt on this project will be available in May 2008.
- A research utilization plan will be drafted with RU and dissemination activities will occur by May 2008.
- This FCO and subproject will be closed.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: GLP | |
| Total Approved Budget: | \$ | 114,599 |

Worldwide: Tool Kit to Increase Access to Appropriate and Effective Contraception for Clients with HIV (FCO 113106)

Objective(s): 1) To synthesize information on current practices and interventions being used in integrated programs to address the RH/FP needs of women and couples with HIV; and 2) to develop a Toolkit that will include a tailored training package and other tools and job aids to increase access to contraception for women and couples with HIV.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The Toolkit was again circulated to EngenderHealth and final changes to the Toolkit were made.
- The collateral materials to be included in the Toolkit were finalized.
- The CD-ROM layout and cover were designed and the Toolkit materials were copy-edited, including curriculum, facilitator guide, participants' handbook and flip chart.

Plans for January 2008 – June 2008

Staff will:

- Finalize the CD-ROM layout.
- Order and print 5000 copies of the Toolkit CD.

Findings and Outcomes:

- To inform the development of the Toolkit, quick needs assessment was conducted in Kenya, Thailand and Zimbabwe. The assessment offered providers' perspective on integration activities in their countries and identified what type of information, training materials, job aids, tools, client materials, or other items would be useful to providers as they offer integrated FP/HIV services. As a result of this assessment, following needs were identified:
 - Simple education materials (for providers).
 - Check lists for contraindications of each contraceptive method.
 - Risk and benefits of contraception for HIV+ patients.
 - Education materials on the safety/needs of HIV infected clients (for clients).
 - Updated information on FP methods and ARVs.
 - Manual on contraception for clients with HIV that is suitable for non-medical person/volunteer.
 - Pamphlets or flip charts for clients explaining FP methods.
 - Training and reference materials.
 - AV materials for clients to promote safer sex, responsibility, knowledge about contraception and prevention of HIV transmission.
 - Update on contraceptive methods suitable for HIV-infected clients
 - Training on FP/HIV counseling.
 - Pamphlets, flip charts to give simple information on FP methods and promote self-esteem and responsibility.
 - Short and simple information for clients on contraceptive methods and need for contraception and condom use.
- Many of these items were addressed in the Toolkit. No formal report was generated as this assessment was done solely for the development purposes.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 360,972 |

Worldwide: Providing Global Leadership to Family Planning and HIV Integration Efforts (FCO 113104/123100)

Objective(s): 1) To strengthen support for family planning as an HIV prevention intervention; 2) to promote dissemination and utilization of the latest scientific evidence and programming tools on FP/HIV integration and contraception for HIV-infected and at-risk women; 3) to establish partnerships and

collaborations with other organizations working on HIV and contraception activities; and 4) to facilitate strategic placement of new HIV and contraception research and programs in the field.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Staff continued to provide input into the UN-led “Global Strategy for Accelerating PMTCT Scale-Up,” including supporting the development of an FP M&E indicator. As part of these efforts, in September 2007, the TM participated in a technical meeting sponsored by UNFPA on strengthening prong 2 of PMTCT.
- In September 2007, the TM organized a videoconference between FHI and EngenderHealth to discuss opportunities for collaboration in FP/HIV integration.
- In October 2007, the TM participated in a meeting sponsored by the Center for Strategic and International Studies entitled, “Integrating Reproductive Health and HIV/AIDS services: Lessons from the field for PEPFAR Reauthorization.” This subproject supported the participation of FHI/India’s Deputy Country Director and FHI/Kenya’s Regional Medical Advisor, who were invited speakers.
- FHI staff established a collaboration with CEDPA to integrate content on contraception for HIV+ women into the “Africa Regional Workshop: Women’s Leadership in HIV/AIDS.”
- Staff developed a presentation on FP as an underutilized HIV prevention intervention, which FHI’s President for Research presented at the ISSTDR meeting in July 2007.
- The TM began drafting a manuscript based on the ISSTDR presentation for submission to STI.
- In December 2007, FHI/Tanzania staff hosted a technical meeting on FP/HIV integration to discuss how to take the integration agenda forward in Tanzania. As a result of the meeting, the MOH formed a technical working group and appointed FHI the secretariat.
- In December 2007, FHI staff hosted a meeting with representatives from the World Bank to discuss opportunities for collaboration in FP/HIV integration.
- Also in December, FHI/Kenya staff attended the 5th African Conference on Population in Tanzania and chaired a session on RH/HIV integration.
- The TM established quarterly conference calls between FHI’s Research and PHP groups to accelerate getting FP/HIV evidence into the HIV programs supported by PHP.

Plans for January 2008 – June 2008

- The TM will submit an invited manuscript on contraception as HIV prevention to STI.
- Staff will submit abstracts on FP/HIV to the 2008 International AIDS Conference.
- Staff will help plan and participate in the next meeting of USAID’s Family Planning and HIV/AIDS Integration Working Group, currently scheduled for May 2008.
- Findings from the FP/HIV assessment of FHI’s programs will be synthesized and packaged for dissemination.
- Staff will organize mini-SOTA meetings around HIV and contraception for the MOH, USAID, and other USG partners in countries with an emerging interest in this topic, such as Rwanda and Tanzania.
- The TM will liaise with FHI country directors and PHP staff to identify opportunities to strengthen FP integration into PHP HIV programming.
- The TM will liaise with USAID regarding the programming of FP/HIV GLP funds.

Findings and Outcomes:

- The following publication was supported by this subproject: Reynolds HW, Wilcher R. Best kept secret in PMTCT: contraception to avert unintended pregnancies. Glob AIDSLink 2006 May-Jun; (97): 8, 16. (FHI Pub 2006-30).

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core; USAID - US Agency for International Development/USAID: GLP |
| Total Approved Budget:113104 | \$ | 360,721 |
| 123100 | \$ | 175,000 |
| | \$ | <u>535,721</u> |

Kenya: Scale-up and Global Dissemination of Kenya's FP/VCT Integration Package (FCO 113126/123102)

Objective(s): 1) To finalize and launch within Kenya, MOH-approved documents and tools to support the integration of family planning services into VCT centers; 2) to package, disseminate, and promote utilization of the Kenyan FP/VCT integration documents and tools by other countries and programs interested in integrating FP and VCT services; and 3) to provide technical assistance to the Ministry of Health in Kenya to roll-out the integration of family planning services into VCT sites.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In July 2007, an FP/VCT advocacy and sensitization meeting was held in Nairobi province and attended by 33 participants, including provincial and district managers and APHIA II partners. FHI and MOH staff delivered joint advocacy presentations.
- Also in July, FHI/Kenya staff oriented a visiting delegation from the MOH in Nigeria to the FP/VCT integration process and disseminated the materials to them.
- Proofs of the national FP/VCT integration strategy and the FP/VCT training manuals were copy edited and submitted for printing.
- In September 2007, FHI/Kenya staff presented on the Kenyan FP/VCT research to practice process at the First Regional Forum on Best Practices in Health Care in Arusha, Tanzania.
- In October 2007, FHI/Kenya staff oriented a visiting delegation from the Capacity Project (IntraHealth) in Rwanda to the FP/VCT integration process and disseminated the materials to them.

Plans for January 2008 – June 2008

- The national FP/VCT integration strategy and FP/VCT training manuals will be printed.
- In early 2008, a national meeting with stakeholders will be held to officially launch the FP/VCT package of materials. The meeting will be co-chaired by the DRH and NASCOP, and participants will include APHIA II partners, provincial- and district-level MOH representatives, and private sector providers.
- Pending availability of funds, follow-up interviews will be conducted with a sample of in-country partners to assess how the FP/VCT materials are being utilized.
- The FP/VCT materials will be shared and promoted with other countries/programs interested in expanding FP/VCT integration efforts, such as Rwanda and South Africa.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core; USAID - US Agency for International Development/USAID: GLP |
| Total Approved Budget:123102 | \$ | 88,628 |
| 113126 | \$ | 146,001 |
| | \$ | <u>234,629</u> |

Africa Regional: FP in Context of HIV: Supporting Evidence-Based and Promising Practices in Africa (FCO 113131)

Objective(s): (1) To promote family planning (FP) services as central to HIV prevention efforts, (2) to improve the knowledge and attitudes of key HIV program decision-makers worldwide regarding the role of FP in preventing vertical transmission of HIV, (3) to compile and disseminate information on integration of FP into HIV programs, and (4) to provide technical assistance to Ministries of Health and/or other implementers in increasing access to family planning services for HIV-infected and at-risk women and couples in three target countries, with the aim of facilitating policy and program change.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Staff used systematic methods, including PubMed and internet searches, and analyses of speeches and conference presentations, to identify 500+ key HIV stakeholders.
- Staff met with T. Mastro/CDC, J. Wasserheit/UW, and the USAID Management Review team to refine methodologies for stakeholder analysis, field involvement, project outcomes, and impact indicators.
- A PowerPoint and a project summary were developed and presented to FHI/US staff; a descriptive paper on the project was begun.
- Staff wrote letters to the Boston Globe (Aug.) and the Raleigh News & Observer (published, Oct.); encouraged Daniel Halpern to include the topic in his Washington Post article (Oct 22, 2007); and worked with Craig Timberg, whose piece was published in the Washington Post (Dec. 16, 2007).
- Staff directed advocacy at J. Sachs, P. Farmer, A. Wakhweya, K. Hill, and M. Dybul, and sent advocacy letters to the Global Fund, the Gates Foundation, PEPFAR, UNICEF, and the World Bank; Gates was encouraged to mention the topic in their Global HIV Prevention Working Group Report.
- Staff submitted a proposal to the Hewlett Foundation to expand subproject activities in Nigeria or India, and wrote to the Gates Foundation in response to a similar interest.
- Staff worked with in-country staff and key stakeholders to generate support for integration efforts and identify Tanzania as a project country; an introductory integration meeting was held in Dec. with key stakeholders (covered by 113104) who discussed the evidence and how to move the integration agenda forward. A MOH-sponsored technical working group was established with FHI-Tz to serve as the Secretariat.
- Negotiations with in-country staff and key stakeholders were held to ascertain Rwanda's interest in involvement. FHI/Rwanda hosted a partner integration meeting in Dec. where Dr. Maggwa presented a synthesis of the impact of FP on HIV prevention, the experience from Kenya, and integration at different service/facility levels.

Plans for January 2008 – June 2008

Communications:

- The descriptive paper will be submitted for publication.
- A strategy for FHI field office involvement (Kenya, Uganda, and Rwanda or Tanzania) will be developed and implemented.
- The HIV stakeholder list will be analyzed by using Malcolm Gladwell's Tipping Point paradigm.
- A strategy and protocol will be developed to conduct key informant interviews; interviews will begin.
- The communications strategy will be developed based on the results of key informant interviews.

Tanzania:

- FHI will support and facilitate the new Integration Technical Working Group.
- A larger SOTA will be planned.
- An integration strategy for the country will be developed with partners.
- FHI will provide technical assistance and leadership to prioritize and implement activities from the country strategy.

Rwanda:

- Contingent on the outcomes of the meeting in December, a working group will be formed, a country strategy for advancing the integration agenda will be drafted, and priority activities for FHI TA will be identified and implemented.

Third-country:

- Continued assessment of regional needs and opportunities will be conducted.

Findings and Outcomes:

- Kent Hill included FP in his Oct 2007 presentation on PEPFAR and Global AIDS Response, following our contact with him regarding the importance of mentioning contraception for PMTCT as an HIV-prevention strategy.
- Articles in the Washington Post by Halperin and Timberg reached millions of readers, including many influential individuals in DC. Timberg's piece was replicated over allafrica.com, reaching 350,000 readers primarily in Africa, and was reprinted over UN Wire, the United Nations's electronic newsletter, reaching key individuals interested in health and development.
- The newsletter of the German donor agency (HESP-News & Notes 24/2007) reprinted an issue of FHI's Family Health Research newsletter on FP/HIV integration which highlighted contraception for PMTCT.
- As a result of the introductory meeting in December, a MOH-sponsored technical working group was established with FHI/Tanzania to serve as the Secretariat, thereby promoting the topic at the policy level in one CRTU enhanced country.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 470,858 |

Africa Regional: Hormonal Contraception and HIV Research: Dissemination through Africa Regional and In-Country Meetings (FCO 3703/172005)

Objective(s): To promote evidence-based discussion and decision-making regarding hormonal contraceptive use and to consider its possible relationship with HIV acquisition. The dissemination campaign aims to bring together researchers, policymakers, program managers, and women's advocates working in the HIV and reproductive health fields to learn about the relevant scientific data and discuss the possible

programmatic and policy implications. It also will serve as an opportunity to highlight the importance of family planning in the HIV/AIDS era.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Zimbabwe and Uganda were reimbursed for their dissemination expenses.
- This subproject was completed and the FCO was closed on December 31, 2007.

Findings and Outcomes:

- Results of the Exemplars study were disseminated on two Luganda language radio talk shows. Luganda is the most widely spoken language in Uganda after English. The lack of health information available in the local language is a problem. FHI-produced articles about the findings were published in both English and Luganda newspapers.
- Results of the study on the association between hormonal contraception and HIV acquisition was published in the Jan. 2, 2007 issue of AIDS. It has been available online since Dec. 8, and news reports of the study have reached over 5 million people worldwide. Four print media sources have covered the story: the Cleveland Plain Dealer, the San Diego Union-Tribune, the Kampala Monitor and the East African Standard. In addition, the news has appeared in the following websites: Reuters, UPI, EurekAlert, the online version of Scientific American, Aidsmap, Yahoo News, Yahoo News Mexico, All Africa.com, PharmaLive.com, What's Next in Health, PhysOrg.Com, NIH News, Science Daily, HULIQ, Doctor's Guide, Kansas City InfoZine, BioCompare, SpiritIndia, Med Page Today, TheAdvocate.com, the US Federal Government News Blog, the French blog Les nouvelles qui m'intéressent, Medscape Today, Medical News Today, and both the English and Spanish versions of the INFO Project's Pop Reporter. Finally, several listservs featured news of the study in their email announcements: the Development Gateway listserv, the Yahoo Sexual and Reproductive Health listserv, the Interagency Gender Working Group listserv, the IBP Knowledge Gateway listserv, the Procaare listserv, the PUSH journal listserv, Kaiser Daily Women's Health Policy Report and the Kaiser Daily HIV/AIDS Report.
- Results of the HC-HIV study were disseminated in Uganda and Zimbabwe to the MOH, media (TV, print, and radio journalists) and study participants.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: IAA |
| Total Approved Budget: 3703 | \$ 100,000 |
| 172005 | \$ 33,240 |
| | <hr/> |
| | \$ 133,240 |

Worldwide: Interactions between Hormonal Contraceptives and Antiretroviral Therapies (FCO 112139)

Objective(s): 1) To evaluate the effects of common ARV regimens on COC effectiveness; 2) to validate a new method of detecting ovulation suitable for low-tech settings; and 3) to evaluate possible effects of hormonal contraceptives on safety and effectiveness of common ARV regimens.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In October 2007, USAID granted approval to implement the study.

Plans for January 2008 – June 2008

- Study sites will be identified.
- The protocol will be finalized and submitted to PHSC.
- We will determine whether a validation study is needed for verification of blood spot testing for progesterone levels and ovulation.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

Total Approved Budget: \$ 476,807

Kenya: Safety of Implant Use among Women on ARVs (FCO 112136/112141)

Objective(s): To monitor changes in CD4 counts (a common indicator of the effectiveness of ARV therapy) among two groups of ARV patients: those using implants and those not using hormonal contraception. Pregnancies will also be monitored and compared across groups.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI staff made a site visit to Kenya to select the site and draft the protocol.
- The protocol was submitted and approved by FHI's PHSC on November 9, 2007.
- The protocol was submitted to the Kenya IRB for review on December 11, 2007.

Plans for January 2008 – June 2008

- A subagreement with University of Nairobi Institute of Tropical and Infectious Diseases (UNITID) will be executed.
- Protocol amendments will be filed/approved.
- Data collection forms will be finalized, translated and printed.
- Recruitment will begin.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

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|-------------------------------|--------|----|----------------|
| Total Approved Budget: | | \$ | 144,779 |
| | 112136 | | 76,000 |
| | 112141 | \$ | <u>220,779</u> |

Kenya: Risk of HIV and Feasibility Research Among House Girls in Nairobi (FCO 154100/154102)

Objective(s): In the first phase of the study: 1) to map knowledge of HIV/AIDS, sexual experiences, behaviors and sexual networks of house girls; 2) to determine the feasibility of conducting an intervention study with house girls and/or their sexual partners; 3) to use the information gathered to develop an appropriate intervention to be implemented with the same population; and 4) to develop a protocol for an add-on intervention study, if one is deemed feasible.

In the second phase: 1) to implement a program to raise awareness among members of the Bahati PCEA Church, Nairobi community about the vulnerability of house girls to HIV and unwanted pregnancies; 2) to implement a training/education program and support for a group of house girls from the same community; and 3) to conduct a baseline survey of house girls in Bahati.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- July 5: Formative phase report circulated.
- July 15, 2007: Survey of 153 housegirls completed.
- July – December 2007: Consultative meetings continued with church committee members for: 1) awareness creation, 2) consolidation of training topics, 3) mobilization of housegirls and 4) progress update.
- August 2007: Data entry/cleaning completed. Data transferred to analysts in FHI/NC.
- August 2007: Abstract submitted for The International Union for the Scientific Study of Population (IUSSP) Conference of February 2008 (Abstract not selected).
- September 2007: Social support reference guide for housegirls revised.
- September 2007: Abstract submitted for 3rd African Conference on Sexual and Health Rights Conference of February 2008 (Awaiting feedback).
- September – October 2007: Training curriculum and timelines harmonized.
- October 2007: Report of on-site counselor (research phase) submitted to PHSC.
- October – November 2007: 1) 28 of target 50 housegirls recruited for First Aid classes; 2) St John's Ambulance First Aid training curriculum reviewed and adopted and their trainers confirmed. NB: (First Aid classes are run with 25 trainees maximum. Another First Aid class will be held in June 2008 after completion of other trainings outlined above).
- October – December 2007: Recruitment of housegirls for training ongoing.
- November 1, 2007: Intervention launch pullout included in Church Bulletin. Announcement for trainers from congregation posted on Church notice board.
- November 4, 2007: First session of First Aid Class was held.
- November 21, 2007: First meeting held with Kameme FM Radio to discuss outreach campaign plans.
- December 9, 2007: Last session and practical exam day of First Aid class held (20 house girls successfully took practical exams).
- December 2008: Abstract submitted for the University of Nairobi Annual Collaborative Meeting for January 2008.

Plans for January 2008 – June 2008

- January 2008: 1) Recruit 28 more housegirls to make the target of fifty (50) for the training; 2) Finalize radio outreach plan; 3) Issue certificates to 1st First Aid class; 4) Complete First Aid training report.
- January – March 2008: 1) Design follow-up media campaign; 2) Conduct 6 Radio outreach sessions; 3) Develop Church awareness activities.
- January – April 2008: 1) Complete intervention curriculum/ materials and identify trainers; 2) Conduct TOT.
- January – June 2008: 1) Conduct remainder of intervention (training); 2) Develop community awareness activities; 3) Develop and distribute IEC materials.
- Continue to collect project outputs and to report on progress.

Findings and Outcomes:

- Formative assessment from Phase I results indicate that:
- House girls are at significant risk of acquiring HIV/AIDS and unintended pregnancies because of: 1) their socioeconomic background; 2) isolation and lack of social support; 3) the low status of their work; and 4) their previous experiences with sexual coercion and violence.
- House girls have some knowledge of modes of transmission and prevention of HIV/AIDS, but knowledge and use of contraception and condoms is low.
- House girls would like to be involved in training, and feel that the best time and place for this is Sundays after church.

- Employers were generally favorable about an intervention with house girls, but they would need to have all of the information about the program first. Furthermore, they were not sure other employers would agree.
- Finally, the Presbyterian Church of East Africa (P.C.E.A.) in Bahati has expressed its interest in being part of such an intervention.
- Results of the cross-sectional survey conducted in 2007 corroborate those of the preceding qualitative study conducted in 2005.
- About two-thirds (64.5%) of the girls had attained only primary education. The girls had worked for an average of two years and earned an average monthly salary of Ksh. 1627.6 (approximately \$25).
- The level of knowledge of reproductive health was low, despite half of the girls ever having had sex in their lifetime. Less than 15% of the girls were aware of the period of the menstrual cycle when they are most at risk of conceiving and that they could get pregnant the first time they had sex.
- Use of condoms was reported by 75% of sexually active girls (n=80) among whom 6.5% reported to have experienced a symptom of an STI in the last 12 months.
- Forced sex within the employer's house was reported by 6.5% of the sexually active girls.

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| Funding Source(s): | | USAID - US Agency for International Development/PEPFAR |
| Total Approved Budget: | 154100 | \$ 411,478 |
| | 154102 | \$ 70,522 |
| | | \$ <u>482,000</u> |

Kenya: Youth Integrated FP and HIV Service Delivery Models (FCO 114130)

Objective(s): To test whether youth seeking VCT in a youth center model are more likely to start using family planning by three months compared with youth who seek VCT at integrated FP-VCT centers.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The approval to implement letter was signed by USAID on July 26, 2007.
- Staff assigned to this project in Kenya sought information about the type of youth VCT services available in an effort to identify the high performing youth clinics. This information will inform protocol development.

Plans for January 2008 – June 2008

- Staff will conduct site visits to ensure appropriateness of sites to include in the study.
- A protocol will be drafted.
- We will work with APHIA and Ministry of Health partners to obtain buy-in for the study.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | | \$ 264,101 |

South Africa: Hormonal Contraception and HIV Acquisition Analysis of the Carraguard Dataset (FCO 112138/132129)

Objective(s): Primary Objective: To evaluate the effect of combined oral contraceptives (COC), DMPA and NET-EN on the risk of HIV acquisition.

Secondary Objectives: 1) To examine whether the relationship between hormonal contraception and HIV acquisition is altered by the age or by the risk status of women. 2) To evaluate the effect of combined oral contraceptives (COC), DMPA and NET-EN on the risk of acquisition of chlamydial and gonococcal infections.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI staff have reviewed the Carraguard Study CRFs and requested data files from the Population Council.

Plans for January 2008 – June 2008

- An analysis plan will be drafted.
- Preliminary analysis will be conducted.

Funding Source(s):

USAID - US Agency for
International
Development/USAID: Core;
USAID - US Agency for
International
Development/USAID:
Microbicides

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| Total Approved Budget:112138 | \$ | 0 |
| 132129 | \$ | 166,405 |
| | \$ | 166,405 |

LONG-ACTING & PERMANENT METHODS

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| <p>I. To promote feasible, evidence-based models for revitalizing under-used LAPMs and/or introducing new LAPMs.</p> | <ul style="list-style-type: none"> A. At least two replicable approaches to improve provider performance or increase demand for LAPMs identified and evaluated. B. At least three programmatic approaches to improve access to or assure supply of LAPMs identified and evaluated. C. Evidence-based LAPM programming approaches institutionalized and implemented by at least three service-delivery organizations and at least four countries through information dissemination, technical assistance, and collaboration with partners. |
| <p>II. To develop a safe, effective, and acceptable method of non-surgical female sterilization ready for introduction into FP programs within ten years.</p> | <ul style="list-style-type: none"> • An FDA-regulated Phase II clinical trial of a nonsurgical female sterilization method will be underway and negotiations with a private sector licensee will be initiated. |
| <p>III. To increase male acceptance, support for, and uptake of LAPMs (including vasectomy).</p> | <ul style="list-style-type: none"> A. Evidence provided from two or more demonstration projects (in partnership with service delivery organizations) on effective approaches to increasing male involvement in FP and uptake of vasectomy. B. At least one spermicidal agent that could prove effective in hastening azoospermia after vasectomy evaluated. C. The effectiveness of more easily reversible methods of vasectomy, such as the Shepherd IVD (intra-vas device), and their impact on method uptake evaluated. <i>(NB: As of 2005-06 USAID considers this to be a lower priority outcome.)</i> |
| <p>IV. To substantially expand IUD use by decreasing medical and other access barriers, as well as increasing demand and contraceptive choice. <i>(USAID noted this goal could be combined with Goal I above.)</i></p> | <ul style="list-style-type: none"> A. New IUDs and IUS evaluated for effectiveness, uptake, continuation rates, and side effects, with emphasis on special populations such as nulliparous women, and introduced in at least three countries. <i>(NB: USAID considers this to be a low priority outcome due to poor feasibility.)</i> |

FHI/NC subprojects fully or partially funded by USAID's CRTU Agreement:

- Worldwide: USAID Financial Support of Female Nonsurgical Sterilization Development (FCO 2271/112107)
- Worldwide: Maximizing Access and Quality (MAQ) IUD Subcommittee, and FHI's IUD Checklist Production and Dissemination (FCO 113112)
- India: IUD Revitalization (FCO 113136)
- Kenya: IUD Revitalization - Transition Phase and M & E (FCO 113111)
- Kenya: Improved Counseling on Implants to Reduce Unintended Pregnancy (FCO 112129/112140)
- Worldwide: Assessing Implant Provision in Various Service Delivery Settings (FCO 112124)
- Worldwide: Collaborative Research on Implants (FCO 112125/112135)

India: Vasectomy Acceptability among Clients and Providers in Uttar Pradesh (FCO 116100/116111)
India: RCT of Three Vasectomy Techniques (FCO 112128)
Malawi: Using Male Educators to Increase Family Planning Use among Young Married Couples in Malawi (FCO 116108/116109)
Uganda: Repositioning Family Planning: Revitalizing LAPMs (FCO 113110)
Worldwide: Global Advocacy & Stakeholder Engagement for LAPMs (FCO 113109)

Worldwide: USAID Financial Support of Female Nonsurgical Sterilization Development (FCO 2271/112107)

Objective(s): To support the development of a method of non-surgical female sterilization.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Updates for this FCO were summarized in EIS reports for FCO 1656, 1658, 1339, 1340 and 1390. In summary, the work is steadily progressing.

Plans for January 2008 – June 2008

- The plans for this FCO will be summarized in EIS reports for FCO 1656, 1658, 1339, 1340 and 1390.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: 2271 | \$ 156,619 |
| 112107 | \$ 351,445 |
| | \$ 508,064 |

Worldwide: Maximizing Access and Quality (MAQ) IUD Subcommittee, and FHI's IUD Checklist Production and Dissemination (FCO 113112)

Objective(s): 1) To support FHI's participation in a key global technical leadership group that promotes knowledge-sharing and use of best practices related to the IUD; 2) to increase accessibility of key IUD-related resources, including job aids, assessment tools, scientific articles, and advocacy materials for field-based partners; and 3) to increase dissemination and uptake of evidence-based reproductive health practices related to IUD provision (e.g., use of FHI's IUD checklist or other job aids).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI disseminated a total of 950 IUD checklists in response to requests from India, Bolivia, and the U.S.
- In July 2007, FHI reprinted 5,000 copies of the Kenya adapted IUD checklist.
- As of December 2007, the development of the Training and Reference Guide for a Screening Checklist to Initiate the Copper IUD was completed and is awaiting production and dissemination in early 2008.
- Evaluation of dissemination/utilization of the checklist in the Dominican Republic and Uganda was completed in August 2007.

Plans for January 2008 – June 2008

- The Training and Reference Guide for a Screening Checklist to Initiate the Copper IUD will be printed and disseminated, and French and Spanish translations will be completed.
- A training on FHI's checklists will be conducted in Mali during a Child Survival and Technical Support Plus Project (CSTS+) workshop (under FCO 113138).

- The MAQ IUD Subcommittee will convene another meeting in January 2008 to discuss progress on promotion of the IUD Toolkit, possible content revisions, and share project information between partners on IUD activities. FHI is responsible for logistics and the agenda.
- Violet Bukusi will present on the Kenya IUD/LAPM assessment at the MAQ IUD meeting (with FCO 113111).

Findings and Outcomes:

- Although the IUD Toolkit (www.iudtoolkit.org) went “live” in April 2006, it was officially launched on October 27, 2006. There were over 4000 visits to the site in November, which represents an increase of 58% from October. By April 2007, the toolkit was receiving over 10,000 visitors a month.
- Between 1/1/07 and 4/30/07, the IUD Toolkit website received over 33,000 visitors; 36% were international. The top 10 countries visiting the website are: United States, Uruguay, Canada, Mexico, France, Spain, Western Europe, the United Kingdom, Australia, and the Netherlands.
- Almost 75,000 files have been downloaded from the site. The top five most downloaded files are: JHPIEGO’s IUD Guidelines for Family Planning Service Programs: A Problem Solving Reference Manual; CCP’s A Field Guide to Designing a Health Communication Strategy; JHPIEGO’s IUD Guidelines for Family Planning Service Programs: Course Notebook for Trainers; WHO’s Medical Eligibility Criteria for Contraceptive Use (Spanish); and Kenya Family Planning Guidelines for Service Providers.
- The IUD checklist was spontaneously translated and produced by JSI for use in Romania, by IntraHealth in Senegal, and by JPHIEGO for their global IUD training manual.
- In November 2007, IntraHealth adapted the IUD checklist to facilitate its introduction in Senegal under the USAID-funded bilateral: the Maternal, Neonatal, and Child Health project.
- In December 2007, Pathfinder International adapted the IUD screening checklist into their IUD training manual. One thousand copies of the manual will be printed and disseminated worldwide.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 282,515 |

India: IUD Revitalization in India (FCO 113136)

Objective(s): 1) To identify and prioritize local research and program needs; 2) to develop and implement country workplans that address those needs; 3) to foster collaborative partnerships with local groups; and 4) to utilize existing knowledge at the country level and hire and support country staff to facilitate the aforementioned activities.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Dr. Gupta received orientation to FHI and the CRTU during a visit to FHI/NC (July 2007).
- A joint review paper titled “IUD Repositioning in the Family Planning Program” was prepared with Population Council (September 2007), and was disseminated during the IUD Symposium. The Symposium to Develop a Comprehensive Strategy for IUD Repositioning was held in Lucknow, UP (October 3-5, 2007). The planning committee included representatives from the Ministry of Health and Family Welfare, the Government of UP, Constella Futures, Population Council, ICMR, SIFPSA, and FHI.
- FHI organized meetings of the planning committee, collated technical details and compiled background materials, and organized the logistics of the meeting. Dr. Gupta presented an Overview of the IUD in India – “How can we change history?” and an FHI consultant, Dr. Bhiwandiwala, presented “Initiatives for Repositioning the IUD: Global Experiences.”

- Materials were disseminated during the symposium, including nine journal articles on the IUD and STIs, PID, fertility, and other service delivery issues, IUDs : A resurging Method (Global Health Technical Brief), the FHI IUD Checklist, and the MAQ IUD Toolkit CD ROM.
- A report of the IUD Symposium was drafted and an IUD Working Group was formed to develop a strategy to revitalize IUDs in UP. Members include the Ministry of Health and Family Welfare, Government of UP, ICMR, SIFPSA, Constella Futures, Population Council, ITAP, JHU-CCP, PSP-One, SIHFW, FOGSI, UNFPA, and FHI. FHI will facilitate meetings.
- FHI received field support funds from the USAID Mission in support of this subproject for the LOSP amount of \$200,000 (FCO TBD).
- The Mission has identified four FY08 targets it wishes FHI to meet under this CRTU effort: a research study on the role of the private sector in IUD provision in UP, a desk review of agencies working in RH in India, and the development of a national and a UP IUD strategy.

Plans for January 2008 – June 2008

- The report of the IUD Symposium will be disseminated to participants/other stakeholders (January 2008).
- FHI will facilitate meetings of the IUD Working Group as needed.
- A strategy will be developed by the IUD Working Group on revitalization of IUDs in UP. This strategy will guide FHI's (and other partners') activities for 2008 and 2009. Anticipated FHI activities in 2008 include:
 - Organizing a one day CTU/orientation meeting on TCU 380A for providers, in collaboration with professional organizations like The Federation of Obstetrics and Gynecology Societies of India (FOGSI), Indian Medical Association (IMA) and King George Medical College Lucknow.
 - Training of private sector providers on quality IUD counseling, IUD insertion and removal techniques, and addressing barriers and myths will take place.
 - FHI will also initiate protocol development for a private sector study.
 - FHI will potentially conduct an advocacy workshop in Jharkand and Uttaranchal to promote FP in the context of Healthy Timing and Spacing of Pregnancy, as part of the effort to promote IUDs as a spacing method. This is to be further discussed with the USAID Mission first.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

Total Approved Budget: \$ 450,000

Kenya: Kenya IUD Revitalization - Transition Phase and M & E (FCO 113111)

Objective(s): 1) To develop and implement FHI's exit strategy from the Kenya IUD Revitalization Initiative (ongoing); 2) to provide technical assistance to the Kenya MoH and other partners during the leadership transition; 3) to provide focused advocacy and outreach at the national level to program managers and professional associations to disseminate the new Kenya FP Guidelines and FHI's IUD Provider Checklist; and 4) to inform the design of future IUD and LAPM revitalization efforts by comparing and contrasting the various interventions that have recently taken place in Kenya.

NOTE: The fourth objective has been broadened to include a comparative assessment of all IUD reintroduction activities in Kenya.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Data from the comparative assessment was analyzed and a draft report developed October 2007.
- A stakeholders meeting was held by the MOH, organized by FHI in collaboration with EngenderHealth and Marie Stopes/Kenya on November 14, 2007. The LAPM comparative assessments, as well as programmatic lessons learned, were discussed. There were 56 participants with Ministry of Health representation from all 8 provinces and representation from the collaborating agencies, RH co-ordinators from APHIA II, donors, and institutions of higher education. One outcome was the request to develop an LAPM Strategy; FHI has taken on this responsibility.
- FHI developed a scope of work and identified a consultant who will draft an LAPM strategy for the MOH. As such, the FCO has been extended until the end of March 2008.

Plans for January 2008 – June 2008

- The comparative assessment report will be finalized by February 2008.
- A draft strategy will be presented to a small MOH-led working group for comments (January 2008) and be finalized by February 2008.
- A two-page brief of the comparative assessment will be developed and disseminated through FHI's Information Programs/Research to Practice activities.
- A presentation on the comparative assessment will be made at a regional conference (potentially the 2nd East African Community International Health and Scientific Conference, in Arusha, Tanzania, March 2008).

Findings and Outcomes:

- Kenya's new APHIA II bilateral projects (several awarded, one in each of five provinces) will be integrating IUD revitalization efforts into their workplans, under MoH leadership and with technical assistance from EngenderHealth. This is tangible evidence that FHI's IUD revitalization effort, initiated in 2001, has become mainstreamed in Kenya's family planning and reproductive health programs.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 300,548 |

Kenya: Improved Counseling on Implants to Reduce Unintended Pregnancy (FCO 112129/112140)

Objective(s): 1) To measure the percent distribution of the contraceptive method chosen by the participants (implants, DMPA, and oral contraceptives); 2) to compare the percentage of women in each group who get pregnant over the 18 month period: implant group versus the DMPA/oral contraceptive group; 3) to measure the continuation rates of the different contraceptives methods; and 4) to assess the acceptability of implants through in-depth interviews.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- USAID gave final ATI approval in September 2007.
- FHI staff made a site visit to Kenya to select the site and draft the protocol.
- The protocol was submitted and approved by FHI's PHSC on November 9, 2007.
- The protocol was submitted to the Kenya IRB for review on December 11, 2007.

Plans for January 2008 – June 2008

- A subagreement with University of Nairobi Institute of Tropical and Infectious Diseases (UNITID) will be executed.
- Protocol amendments will be filed/approved.
- Data collection forms will be finalized, translated and printed
- Recruitment will begin.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | 112129 | \$ 285,996 |
| | 112140 | 75,000 |
| | | \$ 360,996 |

Worldwide: Assessing Implant Provision in Various Service Delivery Settings (FCO 112124)

Objective(s): To explore the role three sectors (private for profit, private not for profit and public sector) are currently playing in implant provision as we start to prepare for the introduction of lower cost implants should they become available. The information from this subproject will assess whether the private sector can provide implants with sufficient quality and in a sustainable manner. Specifically, we hope to determine at what unit cost is sustainable private sector provision of implants feasible.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The first participant was enrolled in October 2007.
- Data collection was completed in December 2007.

Plans for January 2008 – June 2008

- Data entry will be completed in February 2008.
- Data analysis is anticipated to begin in February 2008.
- A study dissemination meeting will be held in coordination with Sino-implant (II) registration, currently anticipated for April 2008.
- A manuscript will be submitted for publication in June 2008.

Findings and Outcomes:

- The mail/telephone interview had a response rate of 58% with a majority of recently trained private sector providers (79%) saying they currently provide implants. These facilities charge US\$2.80—28.00 per insertion with about a quarter (27%) charging US\$7 and 15% charging US\$14.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | | \$ 384,592 |

Worldwide: Collaborative Research on Implants (FCO 112125/112135)

Objective(s): 1) To provide financial support for a WHO clinical trial to allow continued follow-up of Implanon users through five years; 2) to provide partial support for data management; and 3) to monitor some or all of the clinical trial sites.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- GCP training of the study staff in the Dominican Republic was held in October 2007.
- An Investigators' Meeting was held in Argentina in November 2007.
- An updated Study Manual was finalized in November 2007.
- GCP training of the study staff in Thailand was held in December 2007.
- By December 2007, all seven sites were visited in a second wave of monitoring visits.

Plans for January 2008 – June 2008

- A third wave of monitoring visits will be completed by June 30, 2008.

Funding Source(s):

USAID - US Agency for
International
Development/USAID:
Core

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| Total Approved Budget:112135 | \$ | 166,279 |
| 112125 | \$ | 224,819 |
| | \$ | <u>391,098</u> |

India: Vasectomy Acceptability among Clients and Providers in Uttar Pradesh (FCO 116100/116111)

Objective(s): To establish evidence-based guidelines for improving vasectomy uptake in Uttar Pradesh and other states of India, as well as other countries within the region. This subproject will expand upon previous vasectomy research work done in other regions, and ultimately improve understanding of the barriers to vasectomy uptake.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Data collection was ongoing.
- Due to low numbers of NSV clients in the two study districts, EH explored other possible districts for data collection.
- Alleman drafted a data analysis plan in November 2007.
- In November 2007, a study monitoring visit was conducted on site by site PI and FHI/India staff Nisha Gupta.
- In December 2007, FHI/NC, FHI/India and EH began to plan for a research dissemination workshop scheduled for June 2008 and possible future acceptability research.

Plans for January 2008 – June 2008

- Alleman will conduct a study monitoring visit and meetings with study stakeholders in March 2008.
- Alleman will conduct training in data analysis with the study field team in March 2008.
- EH and FHI will prepare a draft study report in June 2008.
- A data utilization workshop is planned for June 2008 in India.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | 116100 \$ 222,710 |
| | 116111 \$ 103,106 |
| | \$ 325,816 |

India: RCT of Three Vasectomy Techniques (FCO 112128)

Objective(s): To compare the effectiveness of three vas occlusion techniques, all using the no-scalpel vasectomy approach for isolation of the vas.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- IRB approvals were obtained in October 2007 at two of the five Indian sites: Maulana Azad Medical College (Prof. Kaza); and St. Stephen's Hospital (Dr. Grover).
- FHI staff visited ICMR in November and December 2007 and revised the data management plan in consultation with ICMR staff.
- Prof. Kaza completed the video sessions to document the surgical techniques to be used.
- A timeline was agreed upon for a study initiation meeting in March 2008.

Plans for January 2008 – June 2008

- Obtain formal review and approval of the DM plan.
- Obtain IRB approvals at the three remaining sites.
- Hire key study staff at ICMR and at the five study sites.
- Arrange with PATH for some video-editing to be done in Delhi, before the video is sent to PATH/Seattle.
- The FHI study coordinator will travel to Delhi in February 2008 to help prepare for the study initiation meeting.
- A pre-study meeting of the Data Safety and Monitoring Committee will take place.
- A study initiation meeting will take place in March 2008.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 161,342 |

Malawi: Using Male Educators to Increase Family Planning Use among Young Married Couples (FCO 116108/116109)

Objective(s): To test the effectiveness of an intervention that involves utilizing “male motivators” to increase contraceptive uptake among 400 young married couples.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Field staff recruited male educators as well as eligible couples for the intervention.
- Field staff pre-tested and revised the survey.
- The baseline survey was completed.

Plans for January 2008 – June 2008

- Field staff will enter data from baseline survey and send them to FHI.
- FHI staff will clean the data set.
- FHI staff will run preliminary descriptive statistics on baseline survey data.
- Field staff will complete training for the male educators.
- Male educators will conduct visits 1 & 2 of the intervention.
- An experience sharing workshop for male educators will be held by field staff in Malawi.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget:116108 | \$ | 158,496 |
| 116109 | | 70,751 |
| | \$ | 229,247 |

Uganda: Repositioning Family Planning: Revitalizing LAPMs (FCO 113110)

Objective(s): 1) To provide technical assistance and support to the Uganda MoH in order to mobilize in-country stakeholders to undertake a revitalization of long-acting and permanent methods, particularly the IUD; and 2) to provide technical assistance to the MoH and in-country partners (e.g., ACQUIRE/EngenderHealth) in implementing evidence-based LAPM activities, and adapting and implementing lessons learned from the Kenya IUD Rehabilitation Initiative 2002-2005.

Note: Two additional objectives added in 2007-2008 are: (1) to conduct three additional CMEs at the district level; and (2) to provide technical assistance to EngenderHealth/ACQUIRE on assessing the costs of LAPM revitalization activities.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In August 2007, FHI completed an "Evaluation of Uganda Continuing Medical Education (CME) workshops. Final report" (M2007-42). As a result of this evaluation, the MOH has requested FHI conduct three additional CMEs in 2008.
- FHI developed and delivered to EngenderHealth a brief report on preliminary cost estimates of scaling up LAPMs in the districts of Mayuge and Hoima.
- Work continued with EngenderHealth staff on obtaining additional data for unit cost analyses.
- Additional funds, and the extension of the subproject were requested in order to complete additional costing TA and conduct three additional CMEs.

Plans for January 2008 – June 2008

- The evaluation of the CME will be disseminated locally.
- Dr. Blaakman will finalize the costing analysis for EngenderHealth will be finalized.
- A short brief will be developed summarizing the costing analysis, in collaboration with EngenderHealth.
- Pending additional funding, planning for three additional CMEs will be conducted.

Findings and Outcomes:

- As the project comes to end, the quarterly family planning working group meetings have served as a forum to bring together key stakeholders in reproductive health and discuss ways through which to synergize efforts aimed at revitalizing family planning. This forum has been institutionalized within the FP/RH community, and will continue beyond this subproject.
- Findings of the CME evaluation include: participants found them extremely useful and reported they influenced their work; the CMEs seemed to be instrumental in influencing community representatives' attitudes about FP; it may be useful to separate clinical and non-clinical audiences to tailor key messages appropriately; not enough job aids/tools were available for all participants; future M&E efforts should consider testing knowledge of providers to see if they are retaining the information learned in the workshop. As a result, the Ministry of Health requested FHI conduct three additional CMEs in 2007-2008.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 239,351 |

Worldwide: Global Advocacy & Stakeholder Engagement for LAPMs (FCO 113109)

Objective(s): 1) To broaden advocacy messages beyond IUDs, and to ensure that "Repositioning Family Planning" efforts include a revitalization of LAPMs based on evidence and best programming practices; and 2) to engage in-country stakeholders on revitalization of LAPMs and support champions for south-to-south learning of best practices on LAPM revitalization efforts.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In August 2007, FHI reviewed and provided input to the technical update brief: Linking CBFP with Long Acting Methods managed by CSTS+ and is widely circulated to the USAID/Flex Fund partners and CAs working on community-based family planning.
- In October 2007, the LAPM Advocacy Package was completed and dissemination began, with 20 copies disseminated at the LAPM Revitalization meeting in Kenya (Nov 2007), and a request of 100 copies by Marie Stopes International. Also in October, the Global Health Technical Brief on Implants was completed and posted on the MAQ website: www.MAQweb.org/techbriefs/.
- In October 2007, FHI, MSH and EngenderHealth agreed on the objectives of the upcoming GEN forum on LAPMs scheduled for April 2008.
- In November 2007, the report of the Vasectomy experts' consultation was finalized and circulated to meeting participants.

Plans for January 2008 – June 2008

- The global launch of the LAPM Advocacy Package is scheduled for January 2008.
- The LAPM Advocacy Materials will be translated into French.
- Country Level advocacy efforts will be initiated in spring 2008.

- The week long GEN forum on LAPMs is scheduled during April 21 and 25, 2008.
- An Implant Screening Checklist, Counseling Cue Card and accompanying Training Guide will be developed and disseminated.

Findings and Outcomes:

- The vasectomy experts' consultation meeting held in November 2006 identified several priorities and recommendations for investments in vasectomy programs, advocacy, and research, some of which include the following:
- Efforts should focus on settings in which vasectomy services are already available and where vasectomy revitalization efforts are most likely to succeed ("low-hanging fruit").
- Prevalence should not be the only indicator of success in a vasectomy program. Programs should measure incidence, by provider as well as by population, to give a better indication of vasectomy's contribution to family planning.
- Further research is needed to address questions on: 1) the cost of vasectomy programs and how to provide cost-effective services; 2) the effectiveness and feasibility of vasectomy techniques (e.g. Why aren't providers using better techniques? What kind of training is required to ensure adoption, mastery, and sustained use of new techniques?); 3) how to create and sustain demand and acceptability of vasectomy (for example, what is the relationship between awareness of vasectomy in a population and prevalence?); and 4) how to create demand for vasectomy and build support for vasectomy programs.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 240,438 |

MICROBICIDES

| GOALS | OUTCOMES |
|--|--|
| <p>I. To develop, evaluate and seek approval for microbicides with and without contraceptive effects</p> | <ul style="list-style-type: none"> A. Five pivotal trials of topical microbicides completed. Results will be submitted to the FDA, other regulatory bodies, and other interested parties as appropriate. B. Through Phase I trials in collaboration with CONRAD, the initial safety of three new microbicide candidates determined. Results will be submitted to the FDA, other regulatory bodies, and other interested parties as appropriate. C. Five new sites for pivotal microbicide trials established, qualified, and functioning, with appropriate stakeholder involvement. D. Two new approaches for evaluating the safety or effectiveness of topical microbicides developed and validated. Results will be shared with other research organizations, funding agencies, and other interested parties. E. A new multistage, interdisciplinary paradigm based on lessons learned from Phase I, II and III microbicide trials developed. Results will be shared with other research organizations, funding agencies, and other interested parties. F. Two new delivery systems/methods of administration for topical microbicides evaluated. Results will be submitted to the FDA, other regulatory bodies, and other interested parties as appropriate. G. One pivotal trial comparing oral versus topical microbicides implemented. Results will be submitted to the FDA, other regulatory bodies, and other interested parties as appropriate. H. Social and behavioral components and/or ancillary studies within microbicide clinical trials conducted to provide information on: sexual relationships and practices, the social and cultural context for microbicides, potential for covert use, and community support and policies. I. Innovative strategies to increase retention and reduce product interruptions in trials developed and tested. |
| <p>II. To inform microbicide introduction by research and information dissemination to stakeholders</p> <p><i>(NB: This goal and its outcomes are lower priority until such time that a microbicide is approved.)</i></p> | <ul style="list-style-type: none"> A. Acceptability of at least three different formulations or microbicide delivery systems assessed in at least three regions. B. In collaboration with various stakeholders (potential users, providers, women's groups, ministries of health, and service delivery programs), a plan to determine appropriate population and service delivery targets for the introduction of the first available microbicides developed. C. Acceptability and feasibility of integrating microbicides into STI and VCT clinics and other services used by individuals at high risk for HIV acquisition evaluated. D. Messages and materials for microbicides in various service delivery settings developed and evaluated. E. The impact of microbicide introduction and use |

| GOALS | OUTCOMES |
|--|---|
| | (contraceptive and non-contraceptive) on family planning use and pregnancy evaluated. F. Clients' willingness to pay for microbicides assessed. G. At least one pre-introductory study of effectiveness, extended safety and acceptability conducted while product regulatory approval is pending. Results will support local approvals and help further guide product introduction once approval is obtained. H. Programmatic and biomedical lessons learned from research synthesized, and results of these evaluations disseminated via professional literature, outreach, technical assistance, client materials, or other means to service delivery partners, normative bodies, USAID, clients, and others for incorporation into practice and procurement decisions. |
| III. To introduce microbicides and enhance current consistent use of microbicides by populations with greatest need | A. Uptake (actual use) and impact of microbicide use among the first target population assessed <i>as products become available</i> . B. Product quality assurance methodologies for testing and analyzing candidate microbicides adopted and further refined, if necessary, promoting independent quality assurance of microbicides. |

FHI/NC subprojects fully or partially funded by USAID's CTR and CRTU Agreement:

- Worldwide: Expert Meeting on Microbicide Adherence and Its Measurement (FCO 136110)
- USA: MRI Studies of New Microbicide Formulations (FCO 132112)
- USA: CONRAD: Phase I Safety Study of Q-2 Vaginal Gel (FCO 132148)
- Worldwide: UC-781 PK Study with CONRAD (FCO 132147)
- USA: Male Tolerance Study of UC-781 Gel (FCO 132111)
- South Africa: CAPRISA Microbicide Case-Control Study (FCO 136104/136107)
- Nigeria: Savvy Phase III RCT, Nigeria (FCO 2277/132104/132126/132127/132128/132139)
- Ghana: Savvy® Phase III RCT, Ghana (FCO 2278/132105/132121/132140/132141/132144)
- Africa Regional: Truvada Phase III Clinical Trial (FCO 132146/136108/136109)
- South Africa: RCT of Tenofovir Gel (FCO 132108/132119/132120)
- Africa Regional: Truvada Phase III Clinical Trial (FCO 12302/12322/12341/132146)
- Worldwide: Truvada Study: Site Preparedness (FCO 12331/12332/12333/12334/12335/12336/136105/136106/136108/136111/136112)
- Africa Regional: Truvada Study: Social, Behavioral & Community Activities (FCO 136109)

Nigeria: Randomized Controlled Trial of Cellulose Sulfate (CS) Gel and HIV in Nigeria (FCO 2266/132100/132122/132123/132124/132125/132143)

USA: New Delivery Device for Vaginal Microbicides (FCO 1844/2290/132103)

South Africa: Safety and Feasibility of the Diaphragm Used with ACIDFORM (FCO 2276/112103)

India: Sustained Acceptability of Vaginal Microbicides: Male and Female Perspectives (FCO 9386/136100/136102)

USA: Safety of Citric Acid (FCO 2295/132110)

USA: Assessment of Soluble and Cellular Markers of Inflammation after Vaginal Product Use (FCO 132109)

Worldwide: Independent Monitoring of CONRAD Collaborative Studies (FCO 2285/132101)

Worldwide: Site Identification, Assessment & Development (FCO 1041/132113/132118/132145/136114/136116)

Worldwide: Use of DHS Data for Site ID Recruitment (FCO 136103)

Worldwide: Assuring Stakeholder Involvement at New Microbicide Research Site (FCO 136115)

Worldwide: Tool for Local Lexicon to Explain Difficult Informed Consent Terms (FCO 136101)

Africa Regional: Evaluating Informed Consent Comprehension (FCO 136113)

USA: Statistical Support - Microbicides (FCO 139101)

Worldwide: Good Microbicide Communication Practice (FCO 133101)

Africa Regional: Improving Measurement of Pregnancy Intentions (FCO 134000)

Worldwide: Expert Meeting on Microbicide Adherence and Its Measurement (FCO 136110)

Objective(s): 1) To apply a "Mixture Models for Estimating Developmental Trajectories" approach to a subset of Savvy Ghana adherence data and document procedures and outcomes; 2) if the approach provides insight, to share procedures with other trial implementing agencies and request they prepare similar analyses; 3) to work with Alliance to finalize the agenda and list of agencies/individuals to attend the meeting; 4) to assist in meeting implementation; and 5) to write a "white paper" on meeting proceedings.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Approval to Implement the subproject was obtained in September 2007.
- Between September and December 2007, Dr. Tolley worked with Ms. Tsui and Dr. Weaver to analyze Savvy, CONRAD CS and Pune acceptability datasets to present at the meeting.
- The Meeting on Adherence and Its Measurement was held from December 18-19, 2007 in Washington, D.C. It was attended by approximately 70 individuals. Over two days and six substantive sessions, presentations examined the following: 1) Patterns of Adherence; 2) Validating Self-Reported Measures of Adherence; 3) Approaches to Gaining Adherence in Microbicide Trials; 4) Technologies and Approaches on the Horizon; 5) External Views and Approaches from HIV Prevention & Treatment Programs; and 6) Perspectives from Biostatisticians and the FDA.

Plans for January 2008 – June 2008

- A final report will be drafted by the AMD and reviewed and finalized with FHI input.
- Dr. Tolley will provide an overview and report on findings and next steps at the Microbicides 2008 Conference in February 2008.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 613,000

USA: MRI Studies of New Microbicide Formulations (FCO 132112)

Objective(s): To provide data management and analysis support to a CONRAD-led study designed to examine the spreading characteristics of new microbicide formulations.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- No activities occurred under this FCO during the July - December 2007 time period.

Plans for January 2008 – June 2008

- The FHI team will work with CONRAD as the study design is further developed and will provide review of the protocol to be written by CONRAD.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 126,00

USA: Phase I Safety Study of Q-2 Vaginal Gel with CONRAD (FCO 132148)

Objective(s): To provide data management and analysis support to a CONRAD-led study designed to assess and compare the effect of 14 days of twice-daily vaginal applications of Q-2 (3.5ml) or the HEC-based “universal placebo” (3.5 ml) on symptoms and signs of irritation of the external genitalia, vagina, and cervix.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- No activities occurred under this FCO during the July-December 2007 time period.

Plans for January 2008 – June 2008

- The FHI team will work with CONRAD as the study design is further developed and will provide review of the protocol to be written by CONRAD.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 176,680

USA: UC-781 PK Study with CONRAD (FCO 132147)

Objective(s): To provide statistical analysis and data management support for a CONRAD study designed to assess the local absorption and concentration of UC-781 in the female genital tract after a single dose and after 14 days of once or twice-daily dosing.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- No activities occurred under this FCO during the July-December 2007 time period.

Plans for January 2008 – June 2008

- The FHI team will work with CONRAD as the study design is further developed and will provide review of the protocol to be written by CONRAD.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 291,000

USA: Male Tolerance Study of UC-781 Gel (FCO 132111)

Objective(s): To provide biostatistical and data management support to a CONRAD-led Phase I male tolerance study of UC-781 gel versus a universal placebo gel.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The CRFs were finalized, approved, and printed in July 2007.
- During the June 2007 site initiation visit conducted by the CONRAD monitor, questions arose that necessitated further discussion with the FDA. It was determined another protocol amendment was needed and amendment #2, v3.0, was approved in September 2007.
- The Data Management Plan was finalized in October 2007.
- Enrollment began in October 2007.
- Analysis programming was set up in November 2007.
- The analysis plan and table shells were sent for CONRAD review in December 2007.
- The data management system was set-up and ready to receive data in December 2007.

Plans for January 2008 – June 2008

- The CRFs were finalized, approved, and printed in July 2007.
- During the June 2007 site initiation visit conducted by the CONRAD monitor, questions arose that necessitated further discussion with the FDA. It was determined another protocol amendment was needed and amendment #2, v3.0, was approved in September 2007.
- The Data Management Plan was finalized in October 2007.
- Enrollment began in October 2007.
- Analysis programming was set up in November 2007.
- The analysis plan and table shells were sent for CONRAD review in December 2007.
- The data management system was set-up and ready to receive data in December 2007.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 132,000

Africa Regional: Improving Measurement of Pregnancy Intentions (FCO 134000)

Objective(s): To develop a new measurement of pregnancy intentions that can be used by upcoming microbicide trials to screen out women likely to become pregnant during the course of the trial.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In October, the concept paper was finalized and the FCO was opened. The data collection forms that are being used in the Truvada trial were also finalized.

Plans for January 2008 – June 2008

- A literature review and the formative data from the Truvada trial will be analyzed to develop content domains and items that influence pregnancy intentions.
- The study protocol will be written and study sites will be identified.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 300,000

South Africa: CAPRISA Microbicide Case-Control Study (FCO 136104/136107)

Objective(s): To: (1) statistically model the relative risk of HIV infection for women in the experimental arm of the CAPRISA 004 tenofovir gel trial compared to those in the placebo arm, controlling for behavioral variability in gel use patterns; and (2) qualitatively evaluate patterns of gel use behavior among participants, and the extent to which those patterns vary by infection status and study arm.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- As of November 2007, ethics approvals for the study protocol were received.
- Key members of the CAPRISA research team were identified including a principal investigator, study coordinator, research assistant, and interviewers. One additional interviewer still needs to be identified for the Vulindlela site.
- The CAPRISA research team was trained in study procedures including research ethics in November 2007.
- Modifications to the consent forms and data collection instruments were made based on feedback during the CAPRISA training and modified materials submitted to the FHI and CAPRISA ethics committees in December 2007.
- A study procedures manual was outlined and initial sections drafted.
- Development of the quantitative data management system was begun.

Plans for January 2008 – June 2008

- Final approvals for protocol modifications will be received from the ethics committees in January 2008.
- The study procedures manual will be completed by February 2008.
- The quantitative data management system will be finalized, tested and implemented by March 2008.
- Pilot and formative research will be completed by March 2008.
- Participant recruitment will begin by March 2008.
- Study monitoring visits will be made in the first and second quarters of 2008.
- A data analysis plan will drafted by June 2008.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: 136104 \$ 327,000
136107 0

**Nigeria: Savvy Phase III RCT, Nigeria (FCO
2277/132104/132126/132127/132128/132139)**

Objective(s): To assess the effectiveness of Savvy vaginal gel in preventing HIV among Nigerian women at high risk.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The study team completed the final draft of the final report in August 2007. The report was submitted to CONRAD along with all corresponding appendices.
- All remaining study logs and tools that FHI requested from the study sites were shipped and received at FHI for filing.
- The study team submitted a manuscript to Public Library of Science One online journal reporting on the main SAVVY study results in December 2007.

Plans for January 2008 – June 2008

- Discussions are underway regarding possible secondary analysis of SAVVY data for additional paper writing topics.
- All remaining logs and tools shipped by study sites to FHI will be labeled and filed in central files.

Findings and Outcomes:

- The Data Monitoring Committee reviewed the interim data and the feasibility analysis, and found that the trial would be unlikely to provide evidence for the effectiveness of SAVVY gel. The DMC recommended termination of the study, and FHI concurred, ending the study in December 2006. While the outcome was disappointing, it was prudent for ethical, scientific and financial reasons.

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|-------------------------------|--------|--|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget: | 2277 | \$ 7,063,771 |
| had said Core | 132104 | \$ 0 |
| had said Core | 132126 | \$ 0 |
| had said Core | 132127 | \$ 0 |
| had said Microbicides | 132128 | \$ 0 |
| had said Core | 132139 | \$ 0 |

Note: Total LOSP for Savvy Nigeria & Ghana is \$5,558,000

**Ghana: Savvy® Phase III RCT, Ghana (FCO
2278/132105/132121/132140/132141/132144)**

Objective(s): To assess the effectiveness of Savvy vaginal gel in preventing HIV among Ghanaian women at high risk.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The manuscript, "Savvy (C31G) Gel for Prevention of HIV infection in Women: Phase III, Double-blind Randomized Placebo-controlled Trial in Ghana" was published in PLOS One on December 19, 2007.

Plans for January 2008 – June 2008

- Additional exploratory analyses will be done.

Findings and Outcomes:

- Although we could not assess the effectiveness of Savvy in this study, no safety concerns emerged from this study.
- Complex design and operational issues (such as lower than expected HIV incidence rates, high pregnancy rates, and low product adherence) have emerged from the Savvy trials that exceed the traditional clinical trial challenges of recruiting participants and maintaining protocol adherence. They also are relevant for other HIV prevention technologies.
- The following publication was supported under this subproject: Skoler S, Peterson L, Cates W. Our current microbicide trials: lessons learned and to be learned. Microbicide Q 2006 Jan-Mar; 4 (1): 1-6. (FHI Pub 2006-27).

| | | |
|-------------------------------|---------------|--|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core; USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget: | 2278 | \$ 6,767,839 |
| had said Core | 132105 | \$ 0 |
| had said Core | 132121 | \$ 0 |
| had said Core | 132140 | \$ 0 |
| had said Core | 132141 | \$ 0 |
| had said Core | 132144 | \$ 0 |

Note: Total LOSP for Savvy Nigeria & Ghana is \$5,558,000

South Africa: RCT of Tenofovir Gel in South Africa (FCO 132108/132119/132120)

Objective(s): To assess the safety and effectiveness of candidate vaginal microbicide 1% tenofovir gel, relative to a placebo gel in preventing sexually transmitted HIV infection. The primary outcome is seroconversion. Secondary objectives include: incidence rate of deep epithelial disruption, assessing the impact of either product on viral load for women who become infected during the trial, assessing tenofovir resistance among HIV seroconverters, and ascertaining the impact, if any, of tenofovir gel on pregnancy rates and outcomes.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The semi-annual progress report was submitted to the local IRB in July 2007.
- The first periodic monitoring visit occurred in July 2007.
- Annual PHSC approval was granted in August 2007.

- In September 2007, an additional site visit was conducted and the first audit visit by RAQA took place.
- PHSC approved revised Informed Consent forms & other enrollment educational materials in September 2007.
- The Columbia subcontract was executed and an annual progress report was submitted to the MCC in October 2007.
- The second periodic monitoring visit was conducted in October-November 2007.
- An additional recruitment team at CAPRISA was implemented to increase study enrollment in November 2007.
- The eThekweni site director and the Adherence Support Program manager from CAPRISA visited FHI in December 2007.

Plans for January 2008 – June 2008

- Quarterly monitoring visits will continue.
- The local IRB annual renewal will occur in January 2008.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget:132108 | \$ | 2,225,445 |
| | 132120 | \$ 632,195 |
| | 132119 | \$ 9,912,901 |
| | | <hr/> |
| | | \$ 12,770,541 |

Africa Regional: Truvada Phase III Clinical Trial (FCO 12302/12322/12341/132146)

Objective(s): 1) To determine the effectiveness and safety of daily Truvada™ compared with placebo for HIV prevention among HIV-uninfected women who are at high risk of becoming infected with HIV through vaginal intercourse, and 2) To assess the risk of hepatitis flares in HBV-infected participants taking Truvada compared with placebo.

The secondary objectives include: 1) To compare viral load, viral set point, CD4+ T cell counts, and frequency of FTC and tenofovir phenotypic and genotypic drug resistance among participants who seroconvert while receiving Truvada versus placebo; 2) To determine, in a subset of participants, the effects of co-administration of Truvada and DMPA (depot medroxyprogesterone acetate) on bone mineral density over time and compared to the effects with placebo and DMPA; 3) To assess adherence to once-daily pill taking, and the effect of adherence on efficacy of Truvada; 4) To describe the effect of potential pre-exposure prophylaxis on disinhibition of condom use and risky sexual behaviors; 5) Among participants who seroconvert, and a sample of participants who do not seroconvert, to describe sexual behaviors of participants and characteristics of sex partners around the time of estimated HIV infection and changes in sexual behavior after diagnosis; and 6) To evaluate the effects of administration of Truvada versus placebo during early pregnancy on pregnancy outcome.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A grant proposal for additional study funds was submitted to Bill & Melinda Gates Foundation in July 2007.
- In August 2007, Lut Van Damme joined FHI as the Principal Investigator of the Truvada study.

- The study's first annual Investigators' Meeting took place on October 24-26, 2007 in Nairobi, Kenya.
- The study Monitoring Plan, Data Management Plan, Study Manual and Case Report Forms (CRFs) were drafted.
- In December, the protocol was sent for review to the IDMC members, Protocol Advisory Committee, USAID, Gates and FHI formal reviewers.

Plans for January 2008 – June 2008

- Subagreements will be finalized with the study sites.
- The study protocol will be finalized in January 2008.
- The study protocol and informed consent forms will be submitted to FHI's Protection of Human Subjects Committee (PHSC) for review and approval at its February 2008 meeting.
- Local IRB and regulatory approval will be sought on a country-by-country basis.
- The study Monitoring Plan, Data Management Plan, Study Manual and Case Report Forms (CRFs) will be finalized.
- The study team will submit the IND package to the FDA in March 2008.
- The first IDMC meeting will be held prior to study initiation.
- The study drug and clinical supplies will be shipped to the sites in April 2008.
- Site staff training and site initiation visits are anticipated to begin in April 2008.
- The first participant screening will occur in May 2008.
- Monitoring visits will begin at each site two months after the first participant is enrolled.

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| Funding Source(s): | Gates Foundation, Bill and Melinda/Foundation; USAID - US Agency for International Development/USAID: Microbicides; Gates Foundation, Bill and Melinda/Private; Gates Foundation, Bill and Melinda/PEPFAR |
| Total Approved Budget: 12302 | \$ 2,473,894 |
| 132146 | \$ 0 |
| 12322 | \$ 0 |
| 12341 | \$ 0 |
| | Note: Total LOSP for CRTU FCOs is \$36,562,615 |

South Africa: Truvada Study: Site Preparedness (FCO 12331/12332/12333/12334/12335/12336/136105/136106/136108/136111/136112)

Objective(s): 1) To identify and map areas and establishments within the study catchment area where people meet sex partners. 2) To identify and map community-based and other support organizations who are interested in the welfare of women at higher risk of HIV exposure and in the implementation of the future pre-exposure prophylaxis clinical trial. 3) To foster partnerships with civil society/community stakeholders and to maintain community involvement throughout all phases of the clinical trial process, from design of study procedures through

dissemination of results. 4) To improve understanding of and trust in clinical trial research among community-level stakeholders. 5) To gather data to inform:

- a) Strategies for recruiting women at higher risk of HIV exposure into a pre-exposure prophylaxis clinical trial.
- b) Strategies to ensure high product use, such as:
 - Retention strategies.
 - Strategies for contraception provision and to encourage consistent use of contraception.
 - Strategies to enhance product acceptability and adherence.
- c) Counseling messages on risk reduction.
- d) The explanation of the pre-exposure prophylaxis clinical trial in the informed consent documents.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In October 2007 FHI learned that funding from the Bill & Melinda Gates Foundation had been secured and would be used for all subsequent SBC site subagreements (two sites in South Africa and one in Tanzania).
- Minor amendments were submitted to the FHI IRB and approved including changes in project leadership for the clinical team at FHI and the sites, site initiation documents, and increasing the sample size for community mapping activities.
- In December 2007, FHI determined that Zimbabwe will no longer be a study site due to a variety of challenges stemming from the political and economic situation in the country.
- Activities related to preparing for the SBC preparedness phase were halted.
- One monitoring trip was made to the Kenyan sites in October 2007.
- The two sites in Kenya completed the site preparedness activities in February 2008.
- Due to civil unrest after the Kenyan presidential elections, the Kibera site was closed at the end of February; it will not continue to the clinical trial.
- The Bondo site has been regularly monitored and is expected to continue to the clinical trial.
- The subagreement for the Bondo site has been extended through April 2008 in order to bridge the time between phases.
- The data from the site is currently being analyzed.
- The two Malawi sites received training in October 2007 and have been involved in data collection.
- The two South African sites received preparedness phase training in February 2008.
- The study has been named FEM-PrEP. The FEM-PrEP clinical trial protocol was developed, with SBC on-going activities, and submitted to the FHI IRB and received approval in February 2008 with modifications needed.
- The protocol for an intervention strategy is under development by Natasha Mack.

Plans for January 2008 – June 2008

- The intervention strategy protocol, a component of the SBC on-going phase, will be completed.
- In April 2008, the Tanzania site will be trained to conduct the site preparedness activities.
- The sites in Malawi and South Africa will continue working on preparedness activities and the Malawi sites are expected to complete data collection April 15, 2007.
- The Kenya and Malawi sites' subagreements will be amended to provide bridging funds to the start of the clinical trial expected in the summer of 2008.
- The data analysis for Kenya and Malawi will be completed and reported to the clinical team for incorporation into training materials as needed.
- Once the clinical trial activities begin for each site, reporting for those continuing activities will transition to the SBC on-going phase.

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| Funding Source(s): | Gates Foundation, Bill and Melinda/Foundation; Gates Foundation, Bill and Melinda/Private; USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget: 136105 | 0 |
| 136106 | 0 |
| 136108 \$ | 0 |
| 136112 | 0 |
| 136111 | 169,704 |
| 12331 \$ | 2,284,248 |
| 12332 | 225,247 |
| 12333 | 140,690 |
| 12334 | 127,148 |
| 12335 \$ | 0 |
| 12336 | 179,231 |
| | <hr/> |
| \$ | 3,126,268 |
| Note: total LOSP for CRTU FCOs is \$36,562,613 | |

Africa Regional: Truvada Study: Social, Behavioral & Community Activities (FCO 136109)

Objective(s): Three distinct areas are included in the socio-behavioral and community (SBC) on-going activities of the FEM-PrEP clinical trial. They are:

- 1) SBC research integration and monitoring of the behavioral-related components of the clinical trial to inform recruitment, retention, adherence, informed consent process, contraceptive counseling, and HIV/STI risk reduction counseling.
- 2) A community engagement program to coordinate ongoing partnering, education, and outreach efforts with community and civil society stakeholders.
- 3) A separate qualitative protocol on intervention planning to inform site-specific intervention design plans for using PrEP if found to be safe and effective.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Budgets for subagreements with the sites began to be negotiated.

Plans for January 2008 – June 2008

- Core clinical trial training, incorporating SBC on-going training, is expected to begin in the summer of 2008 at the Kenya and Malawi sites.
- Subagreements will be in place approximately 3 months prior to training.
- A new site will be identified to replace the Kibera, Kenya site (discontinued in February 2008) due to the post-election civil unrest.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides
Total Approved Budget: **Note:** Total LOSP for CRTU
FCOs is \$36,562,613

**Nigeria: Randomized Controlled Trial of Cellulose Sulfate (CS) Gel and HIV in Nigeria
(FCO 2266/132100/132122/132123/132124/132125/132143)**

Objective(s): 1) To determine the effectiveness of CS gel in preventing male-to-female vaginal transmission of HIV infection among women at high risk; and 2) to determine the effectiveness of CS gel in preventing male-to-female transmission of gonorrhea and chlamydia infection among women at high risk.

NOTE: A second objective was added in 2003 in order to more accurately reflect the protocol objectives.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- HIV results were presented at the International AIDS Society (IAS) conference in July 2007 in Sydney, Australia.
- Four abstracts were submitted in September 2007 to the Microbicides 2008 (M2008) conference. The decision is pending.
- A statistical report was completed in October 2007.
- The main manuscript and final report to the FDA have been in progress.
- We concluded all 5 subagreements for cost and reimbursement purposes.
- Both PIs, Drs Obunge and Ogunsola, visited FHI in August 2007 and worked with BASS on a publication regarding recruitment strategies in the CS trial in Nigeria. Dr Ogunsola made a presentation on the recruitment strategies that were implemented in Lagos and Port Harcourt during the trial in order to increase HIV incidence. Dr Obunge presented "Other than Scientific Successes" in which he described how the implementation of the CS Phase III trial in Nigeria helped to develop both personal and professional skills of the staff as well as the existing regulatory and ethical systems. These presentations were used as abstracts submitted to M2008 (see "Findings and Outcomes" below).

Plans for January 2008 – June 2008

- Three members of the CS FHI team and six members of the CS Nigeria teams will attend the M2008 conference in New Delhi.
- A pregnancy outcome dataset will be frozen and analyzed.
- A final report will be submitted in February 2008.
- The main manuscript will be submitted in January/February 2008.
- Several additional manuscripts are in development and may be submitted for publication in the next six months.
- A 15% variance letter will be submitted to the USAID to cover any costs through the end of the project associated with additional data analyses and paper writing.

Findings and Outcomes:

- FHI pioneered a new microbicide research methodology with this study. Based on an on-going monitoring and analysis of STI/HIV prevalence and incidence rates, FHI researchers

developed a technique for continually modifying recruitment strategies in order to target populations at greatest risk of HIV infection. While this methodology proved useful, it was nonetheless insufficient to overcome the overall low HIV incidence in the Lagos study population within the limited period of time.

- The study was prematurely stopped on January 31, 2007 due to the unexpected negative effect on HIV acquisition observed in an interim analysis of data from a parallel trial of CS conducted by CONRAD. There was no apparent increased risk of HIV in the CS groups in the FHI study at the interim analysis but the DMC recommended to stop the trial due to safety concerns raised in the CONRAD trial.
- HIV results were presented at the IAS 2007 conference in Sydney, Australia (abstract A-042-0137-05491). The rates of infection were similar between the CS and placebo groups and our main conclusion was that we did not observe an effect of CS gel on the risk of vaginal HIV transmission.
- The secondary outcome of the study was to evaluate the effectiveness of the CS gel in prevention of vaginal transmission of gonorrhea and Chlamydia. The following abstract was submitted to the M2008 conference in New Delhi: Halpern V, et al. Effectiveness of Cellulose Sulfate Gel for Prevention of Gonorrhea and Chlamydia Infection: Results of the Phase III Trial in Nigeria. Microbicides 2008, New Delhi, India 2008; Abstract BP2-105.
- Despite the scientific failure, the implementation of the CS study had a long term positive impact on the community in Nigeria: McNeil L, et al. Microbicide Research in Nigeria - Other Than Scientific Successes. Microbicides 2008, New Delhi, India 2008; Abstract D020-513.
- Abstracts also submitted to the M2008 conference: Halpern V, et al. Monthly OMT Testing for Identification of HIV Infection. Microbicides 2008, New Delhi, India 2008; Abstract B025-106. Halpern V, et al. Performance of the OraQuick Rapid HIV Antibody Test in High Risk Women in Nigeria. Abstract BP3-107.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget: | 2266 | \$ 4,452,495 |
| | 132100 | \$ 0 |
| | 132143 | \$ 0 |
| | 132122 | \$ 0 |
| | 132123 | \$ 0 |
| | 132124 | \$ 0 |
| | 132125 | \$ 0 |
| | | Note: Total LOSP for CRTU FCOs is \$10,678,495 |

USA: New Delivery Device for Vaginal Microbicides (FCO 1844/2290/132103)

Objective(s): 1) To develop hand-made prototypes of a new vaginal delivery device for microbicides or other vaginal preparations; 2) to assess acceptability of the device via focus group discussions or in-depth interviews; and 3) to assess acceptability through vaginal insertion and removal of the device saturated with a marketed vaginal lubricant.

Note: we have added a third objective as the research has progressed, partially supported by funding from the International Partnership for Microbicides (IPM).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A 12-month report was prepared for IPM in July 2007.

- Toxicity and other safety tests were begun on 2nd generation material and the DVD2 device in July 2007. Testing was completed and results received in October 2007.
- Research was begun in August 2007 on the selection of an active agent to incorporate in the DVD2 for a future safety study.
- A protocol was written for the conduct of an acceptability study of the DVD2 device in South Africa. The protocol and related study instruments were approved by the PHSC in November 2007.
- Funding from NineSigma and Gillings has been sought to conduct additional research on materials of construction and for the development of a protocol to evaluate the safety of the DVD2 with an active agent.
- The project team continued to meet twice monthly to plan and discuss project issues.

Plans for January 2008 – June 2008

- The DVD2 acceptability protocol will be submitted to the South African IRB in January 2008.
- If accepted by the organizers, a poster will be presented at the Microbicides Conference to be held in New Delhi in February 2008.
- Study materials and prototypes should be readied and shipped to the site in February 2008.
- The acceptability study should be initiated in March 2008.
- If Gillings or other funding is obtained, we will begin drafting a protocol to evaluate the safety of the DVD2 device.
- We will continue to meet regularly and to seek additional funding to support needed research into materials selection, active agent selection and human testing throughout the reporting time frame.

Findings and Outcomes:

- A unique non-woven vaginal drug delivery prototype was developed. It is believed that the device will deliver microbicides more efficiently than currently available methods. The device uses inexpensive materials and if mass produced, the estimated cost would be about \$0.05 per unit (excluding drug).
- Results of the focus groups support continued research effort and the prototype was modified to reflect new insights.
- An international patent application was submitted, including a male version of the device.

Funding Source(s):

International Partnership
for Microbicides
(IPM)/Private; USAID - US
Agency for International
Development/USAID:
Microbicides

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|-------------------------------|---------------|----|---------|
| Total Approved Budget: | 2290 | \$ | 220,917 |
| | 132103 | \$ | 25,000 |
| | 1844 | \$ | 200,000 |
| | | \$ | 445,917 |

South Africa: Safety and Feasibility of the Diaphragm Used with ACIDFORM (FCO 2276/112103)

Objective(s): To provide statistical, data management, and clinical monitoring support for a CONRAD study. The study's objectives are: 1) to assess the effect of a diaphragm used with ACIDFORM (vs. one used with KY Jelly) on symptoms and signs of irritation of the external genitalia, vagina, and cervix; 2) to evaluate the willingness of women to use the diaphragm with a

gel prior to each vaginal sexual act for a period of 6 months; and 3) to compare the differences in vaginal health following 6 months use of a diaphragm with ACIDFORM vs. one used with KY Jelly.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI provided review of the draft final report prepared by CONRAD.
- The subproject ended and the FCO was closed as of December 31, 2007.

Findings and Outcomes:

- Findings, as noted in the final clinical report, concluded that although no primary safety comparisons achieved statistical significance, there was a trend towards more events in the ACIDFORM group than in the KY Jelly group.
- A positive finding of this study is that women were willing and able to use a diaphragm with a gel over a relatively long period of time. Adding a microbicide gel, when one becomes available, to a mechanical barrier could prove to be an important method of preventing both pregnancy and HIV/STI transmission.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core | |
| Total Approved Budget: 2276 | \$ | 329,186 |
| 112103 | \$ | 180,534 |
| | \$ | 509,720 |

India: Sustained Acceptability of Vaginal Microbicides: Male and Female Perspectives (FCO 9386/136100/136102)

Objective(s): 1) To identify and describe factors that enable individuals and couples to use microbicides consistently and long-term; and 2) to account for the effects of clinical trial and acceptability research participation on microbicide use including: motivations for joining the trial; the importance of counseling and support provided by clinical trial staff in maintaining product use; and the importance of interactions with acceptability research staff in maintaining product use.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Dr. Tolley and Ms. Tsui traveled to Pune in July 2007 to review data management systems and provide technical support to the local acceptability staff in qualitative data analysis and paper-writing. During the visit, the team finalized an in-depth interview guide for clinical trial providers and trained on its use.
- The provider interview guide and consent form were submitted and approved by FHI's PHSC in August 2007 as amendment version 3.0.
- Dr. Rewa Kohli visited FHI in October 2007 to work with Dr. Tolley and Ms. Tsui on data analysis and report-writing. Two abstracts were developed and submitted to the Microbicides 2008 conference.
- Continuing review of the study was submitted and approved by FHI's PHSC in November 2007.
- In December 2008, Dr. Tolley presented some mixed model analyses of condom and gel adherence at a Meeting on Adherence and Its Measurement, sponsored by the Alliance for Microbicide Development and FHI, held in Washington, D.C.
- Both the quantitative and qualitative follow-up interviews with women and their male partners were completed in December 2007.

Plans for January 2008 – June 2008

- Provider interviews will be completed by the end of January 2008.
- Dr. Tolley will visit NARI in February 2008 to assist in developing data dissemination plans and a plan for study closure.
- Dr. Tolley will present adherence-related analyses at the Microbicides 2008 Conference in February 2008.
- Dr. Tolley and Dr. Kohli will conduct meetings in Pune, India to disseminate findings from the study by the end of June 2008. They will also prepare and submit papers to several peer-reviewed journals.

Findings and Outcomes:

- The qualitative phase of this study found that women will not likely consider microbicide use unless they perceive themselves to be at risk of HIV. HIV risk was most commonly associated with a partner's infidelity, easily detected according to both men and women by a lack of marital harmony. Despite this logical pathway, high-risk women in this study denied perceiving HIV risk until confronted with specific evidence in the form of a husband's positive HIV test or diagnosis of a sexually transmitted disease.
- Overall, women's perceptions of control and sexual power appeared to influence attitudes towards consistency of microbicide use. The identification of HIV risk perception, couple harmony and sexual power constructs as potential determinants of microbicide use was further confirmed by findings from the scale survey.
- Factor analysis of the draft scale items produced five scales, four of which exhibited adequate to high levels of reliability. These included scales measuring couple harmony, Perception of Partner Infidelity, AIDS Fatalism, Pervasiveness of HIV Risk, and Protection Efficacy.
- Findings were published in the July/August 2006 edition of "Culture, Health & Sexuality in an article entitled "Examining the context of microbicide acceptability among married women and men in India." (FHI Pub 2006-51)
- Preliminary findings related to the study's methodology for examining microbicide acceptability and sustained use were presented at the Microbicide Trial Networks annual meeting in Washington, D.C. in March 2007. Several study features were emphasized, including: a mix of qualitative and quantitative data collection methods; a non-clinical trial cohort; male partners; and measurement of potential psychosocial predictors (couple harmony, sexual power, HIV risk perception and protection efficacy.)
- Further analyses were presented at a Meeting on Adherence and Its Measurement, held in Washington, D.C. from December 18-19, 2007. These preliminary analyses suggested significant differences between the clinical trial and non-clinical trial cohorts in condom acceptability and use at baseline.

Funding Source(s):

| | | USAID - US Agency for International Development/USAID: Microbicides |
|-------------------------------|---------------|--|
| Total Approved Budget: | 9386 | \$ 822,278 |
| | 136100 | \$ 613,000 |
| | 136102 | \$ 0 |
| | | <hr/> |
| | | \$ 1,435,278 |

USA: Safety of Citric Acid (FCO 2295/132110)

Objective(s): To provide statistical and data management support for a CONRAD study to determine the safety of citric acid as an agent in preventing STD and HIV infection.

NOTE: While originally the title and objectives of this subproject referred to safety and acceptability, the design of the study was narrowed to focus on the safety of lime juice as a vaginal product.

Activities, Accomplishments, and Problems—July 2007 - December 2007

There was no activity on this subproject during this period. The FCO was closed as of January 31, 2008.

Findings and Outcomes:

- In preliminary results shared via an abstract at Microbicides 2006, genital irritation was observed. Discontinuations for product-related reasons, symptoms/signs of urogenital irritation including colposcopic findings, and changes in microflora and vaginal pH were presented at the Microbicides meeting. The higher concentrations of lime juice were associated with adverse safety events.

Funding Source(s): USAID - US Agency for International Development/USAID: Core; USAID - US Agency for International Development/USAID: Microbicides

| | | | |
|-------------------------------|---------------|----|---------|
| Total Approved Budget: | 2295 | \$ | 162,695 |
| | 132110 | \$ | 35,396 |
| | | \$ | 198,091 |

USA: Assessment of Soluble and Cellular Markers of Inflammation after Vaginal Product Use (FCO 132109)

Objective(s): To provide data management and analysis support to a CONRAD-led study designed to assess proinflammatory cytokines and related factors in female participants who use a vaginal product (cellulose sulfate, HEC-based "universal" placebo or 4% nonoxynol-9).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The protocol was amended and approved as v4.0 in October 2007.
- The Data Management Plan was finalized in November 2007.
- Screening began in November 2007.

Plans for January 2008 – June 2008

- Error Specs will be finalized upon review/comments from CONRAD.
- The analysis plan and table shells will be drafted.
- Data system set-up will be completed and ready to receive data in January 2008.
- Data entry and querying will begin.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 217,647

Worldwide: Independent Monitoring of CONRAD Collaborative Studies (FCO 2285/132101)

Objective(s): To provide clinical monitoring services to CONRAD specifically for those studies funded by USAID.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- There was no monitoring activity under this subproject during the July-December 2007 time period.

Plans for January 2008 – June 2008

- Sites will be monitored according to study needs as determined by CONRAD and the availability of FHI staff.

Findings and Outcomes:

- As part of the ongoing FHI-CONRAD collaboration, FHI completed clinical monitoring services as agreed to by FHI and CONRAD.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: 2285 \$ 164,234
132101 Annually Approved

Worldwide: Site Identification, Assessment & Development (FCO 1041/132113/132118/132145/132152/136114/136116)

Objective(s): To identify, prepare, and establish five new sites for future Phase I to Phase III microbicide studies with appropriate stakeholder involvement. Secondary outcome: To develop and fully implement a new multistage, interdisciplinary paradigm based on lessons learned from Phase I, II and III microbicide trials.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Renovation of clinical facilities and community preparedness activities began at Truvada sites in Kenya and Tanzania in Aug. and Sept. 2007.
- Assessment visits were made to Zambia and South Africa/Rustenburg in Sept. and Nov. 2007.

- Follow-up trips were made to Mozambique, South Africa/Bloemfontein and Lesotho in Nov. 2007.
- A development/implementation plan was drafted for South Africa/Bloemfontein.
- Work continued on the Laboratory Assessment and Quality Assurance Training modules.
- In Sept. 2007, training was held for 45 staff (monitors and other research staff) in assessment of laboratory technologies and capabilities that support HIV prevention research and international guidelines.
- Protocol development commenced for a study in two sites in Tanzania to determine the size of cohorts of higher-risk women that could be formed for prevention research.
- A Formative and Pilot Study protocol was developed and approved by ethical committees to examine recruitment questions for an incidence study and a sexual network study planned in Ho Chi Minh City, Vietnam. The Pilot study to determine the feasibility of the larger Vietnam studies commenced in Nov. 2007.
- Planning for a qualitative study of concurrent partnerships in Lesotho began, with co-funding from UNAIDS.
- Discussions continued with FHI and the U.S. CDC to collaborate on a standard protocol to help validate cross-sectional tests that can estimate HIV incidence.
- Under FCO 132118, Global Research Services spent several months compiling a list of international investigators that may be interested in collaborating with FHI on future clinical research studies. Through FHI connections and internet research we compiled contact information for 600+ investigators. These investigators have been contacted in order to obtain information for populating the database.
- Departmental presentations on the Site Information Database were given to solicit participation in the hands-on database trainings.

Plans for January 2008 – June 2008

- The Pilot Study for the Vietnam incidence and network studies will be completed in early 2008.
- Renovations for research facilities in Vietnam, Mozambique and South Africa should begin during the reporting period.
- Travel to Mozambique, Tanzania, Vietnam and South Africa is planned.
- Approvals will be sought for implementation plans in South Africa (DOH) and Mozambique (MOH), followed by Subagreements for establishing the research units and Subcontracts for renovation costs.
- The qualitative study of concurrent partnerships in Lesotho will be finalized, submitted for ethical and scientific review, and should commence during the reporting period.
- The protocol to enumerate women at higher risk of HIV in two cities in Tanzania should commence during the reporting period.
- FHI staff will use the Site Information Database both to search for new sites and to compile information collected from ongoing research studies and assessment activities.
- The second phase of the Site Information Database will consist of revisions to Phase I along with site assessment database expansion activities. These activities will likely be in the form of supplemental GIS software to enhance the presentation capabilities of the system.
- Presentations/Trainings will continue for the departments in order to familiarize staff with the functions of the new Site Information Database (SID).
- In-house trainings are planned for FHI staff on Clinical Research Methods and Qualitative Research Methods.

Findings and Outcomes:

- As of June 2007, approximately 320 Investigator profiles and approximately 210 site-specific profiles have been entered into the Site Information Database.

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|------------------------------------|----|--|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core; USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget: 1041 | \$ | 128,038 |
| 132113 | \$ | 13,679,000 |
| 132118 | \$ | 0 |
| 132145 | \$ | 0 |
| 136114 | \$ | 0 |
| 136116 | \$ | 0 |
| 132152 | \$ | 0 |
| | \$ | <u>13,807,038</u> |

Worldwide: Use of DHS Data for Site ID Recruitment (FCO 136103)

Objective(s): 1) To identify and characterize subsets of women at a country, region or sub-regional level country who are at high risk of HIV, based on their responses to demographic and psychosocial questions currently collected by DHS; and 2) to develop a rapid and inexpensive tool for identifying population segments in specified countries at high risk of HIV. Findings from this subproject aims to inform Microbicide Strategy and Site Identification Efforts.

Plans for January 2008 – June 2008

- Identify one or several country datasets as test cases, based on availability of demographic, psychosocial and biomarker data;
- Examine country-level biomarker data to determine distribution of HIV prevalence by region and sub-region;
- Restrict further analyses to high HIV-prevalence areas (to be determined in consultation with CRD/BIOS advisers)
- Using cluster analytic methods, identify population segments based on data related to core DHS, domestic violence and women's status questionnaires;
- Evaluate bivariate relationships between HIV prevalence and geographic sampling clusters, socio-demographic data (age, marital status, education, etc.), and psychometric clusters.
- Develop models predictive of HIV sero-status.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget: | \$ | 50,000 |

Worldwide: Assuring Stakeholder Involvement at New Microbicide Research Site (FCO 136115)

Objective(s): To support microbicide site development efforts with a systematic approach to ensure stakeholder involvement throughout preparation and conduct of HIV prevention trials.

Plans for January 2008 – June 2008

- Materials for inclusion in the toolkit will be identified and compiled in a user-friendly format.
- Stakeholders will be identified to participate in the initial piloting of the toolkit.
- Collaborators for implementation and evaluation of the toolkit in an appropriate research setting will be identified.
- A protocol for evaluating implementation will be developed and any necessary approvals obtained.
- Implementation of the toolkit at one or more sites will be initiated.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 353,636

Worldwide: Tool for Local Lexicon to Explain Difficult Informed Consent Terms (FCO 136101)

Objective(s): To develop a pilot tool for eliciting local terminology and explanations for sexual behavior, sexual and affective relationships, reproductive health terms, and concepts relevant to participation in clinical trials.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Mack met with Kate MacQueen to discuss how to coordinate this subproject with MacQueen's complimentary project on non-verbal cues for informed consent comprehension. It was decided that one joint coordinator would provide most effective management and implementation of the projects.
- Development of methods for the elicitation tool was initiated.
- Potential international collaborators were identified in Ghana and Burkina Faso.
- The possibility of piloting the eventual tool as part of sociobehavioral capacity-building in the SIDI project was discussed and viewed favorably.

Plans for January 2008 – June 2008

- The literature review will be completed.
- Development of methods for the elicitation tool will continue.
- Creation of a draft version of the tool will be initiated.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides
Total Approved Budget: \$ 44,997

Africa Regional: Evaluating Informed Consent Comprehension (FCO 136113)

Objective(s): To use behavior-coding to investigate the effectiveness of two different comprehension instruments.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In September 2007 an initial planning meeting was held with an outside expert in behavioral coding (Dr. Norman Markel, professor emeritus in psycholinguistics from UF-Gainesville) to outline potential approaches to the research design.
- Practical constraints on the research design were identified and video tools evaluated.

Plans for January 2008 – June 2008

- Collaborators at two culturally distinct research settings will be identified.
- A protocol will be developed and necessary ethics approvals obtained.
- Data collection will be initiated.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides
Total Approved Budget: \$ 330,178

USA: Statistical Support - Microbicides (FCO 139101)

Objective(s): 1) To review statistical methods needed to answer questions concerning the effectiveness of microbicides in preventing HIV/STI transmission; 2) to conduct research on such methods; and 3) to develop recommendations for study design and analysis.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Doug Taylor presented a talk on Microbicide Effectiveness Trials (Current Status and Future Directions) at the WHO-sponsored Regional Workshop on Regulatory Issues for Microbicides in Asia (October 2007; staff time only).
- Doug Taylor and Mark Weaver explored alternative survival analysis methods for microbicide trials based on staggered entry of participants.
- Mark Weaver assisted BSS researchers in developing statistical tools for describing adherence data in microbicide trials. Both also presented methods and results at the QWG-sponsored adherence meeting in Washington, DC (December 2007).

Plans for January 2008 – June 2008

- Statistical methods, consult, and secondary analysis work will be completed as needed.

Findings and Outcomes:

- Highlights of the statistical presentations include:
- High pregnancy rates (requiring product withdrawal), low HIV incidence, participant retention, and product adherence remain serious challenges to finding an effective microbicide. Alternative trials designs (e.g. using flexible recruitment strategies, more efficient fertility analyses, and other data-driven trial decisions) need to be considered as the field moves forward. Likewise, site identification processes need to be expanded and improved to find appropriate study populations with high retention and adherence rates.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: Annually Approved

USA: Biomarkers of Semen Exposure Study with CONRAD (FCO 132149)

Objective(s): To provide data management and analysis support to a CONRAD-led study designed to determine the time of decay of two new sperm-specific biomarkers (protamine-2 [mRNA] and SRY) compared with Yc DNA, PSA, and semenogelin as measured by Rapid Stain assay in women exposed to semen via either inoculation or unprotected intercourse.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In December 2007, a draft study design was received from CONRAD.

Plans for January 2008 – June 2008

- FHI will work with CONRAD to review and finalize the protocol.
- FHI will work with CONRAD to review, finalize, and print the case report forms.
- FHI will create an analysis plan, write a data management plan, and will program data cleaning specs into ClinTrial.
- CONRAD will initiate the study at the one US site.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Microbicides

Total Approved Budget: \$ 159,294

Worldwide: Good Microbicide Communication Practice (FCO 133101)

Objective(s): 1) To integrate communications planning and ongoing assistance into microbicide research in order to both avert and manage potentially controversial issues related to microbicides research; and 2) to enhance the community engagement, policy, and advocacy aspects of microbicides research by strengthening key relationships and information-sharing between researchers and microbicide advocates at the international and country levels, complementing but not duplicating efforts led by the Global Campaign for Microbicides.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Approval to implement this subproject was obtained from USAID in October 2007.
- Staff:
- Participated in the Microbicides Media Communication Initiative group, organized by the Global Campaign for Microbicides, and planned responses to various media issues.
- Served as co-facilitator of the media training planning group for the Microbicides 2008 conference.
- Outlined components of the communication toolkit for microbicide and HIV prevention researchers.
- Monitored and analyzed international news coverage of microbicides and related HIV prevention research.
- Shared resources with other research organizations concerned about issues management related to microbicide studies.
- Created a Powerpoint presentation on issues management related to the cellulose sulfate study closures.
- Provided technical assistance to researchers and communications staff at various agencies on issues management for microbicide and HIV prevention trials.

Plans for January 2008 – June 2008

Staff will:

- Support the participation of two FHI communications staff to the Microbicides 2008 meeting in India; lead communication training activity with advocates and communications specialists, and co-present a media training session with key microbicide advocates.
- Conduct a one-day training in communication planning for microbicide researchers at M2008 in India.
- Work on further developing a microbicide research communication toolkit with advocates in the US and Africa.
- Continue to monitor and analyze news media coverage of microbicides and related HIV prevention research; share analyses with key stakeholders.
- Respond quickly to any misinformation or negative publicity about microbicide trials that FHI is involved in; support other research organizations as needed.
- Provide technical assistance in strategic communication to investigators within FHI and at collaborating sites in the field to make their research more successful, and to anticipate and avoid controversy.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget: | \$ 336,000 |

Africa Regional: Improving Measurement of Pregnancy Intentions (FCO 134000)

Objective(s): To develop a new measurement of pregnancy intentions that can be used by upcoming microbicide trials to screen out women likely to become pregnant during the course of the trial.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In October, the concept paper was finalized and the FCO was opened. The data collection forms that are being used in the Truvada trial were also finalized.

Plans for January 2008 – June 2008

- A literature review and the formative data from the Truvada trial will be analyzed to develop content domains and items that influence pregnancy intentions.
- The study protocol will be written and study sites will be identified.

| | |
|-------------------------------|--|
| Funding Source(s): | USAID - US Agency for International Development/USAID: Microbicides |
| Total Approved Budget: | \$ 299,860 |

YOUTH

| GOALS | OUTCOMES |
|---|--|
| I. To expand the evidence base of youth RH/HIV prevention programs. | <ul style="list-style-type: none"> A. Up to two youth RH and HIV prevention tools evaluated, such as the CFLE/MFLE manuals or a peer education tool. B. Up to two integrated services models for youth evaluated, including one using the YouthNet counseling/testing manual. |
| II. To increase the use of evidence-based knowledge, practices, and tools for youth RH/HIV prevention. | <ul style="list-style-type: none"> A. At least two knowledge management tools implemented globally. B. At least three papers on youth RH health and HIV prevention research submitted for publication to peer-reviewed journals. C. A synthesis of existing evidence and intervention models completed and disseminated. D. Utilization of at least two youth tools developed by FHI or its partners increased. E. Interagency Youth Working Group established and developed. |
| III. To meet country level needs for improving youth RH through the scale up of innovative programs. | <ul style="list-style-type: none"> A. A. Up to two youth tools utilized in a scaled up country program. |

FHI/NC subprojects fully or partially funded by USAID's CRTU Agreement:

- Worldwide: Knowledge Management: Youth Synthesis Report (FCO 125002/125003)
- Worldwide: Global Knowledge Management: Youth RH/HIV Prevention (FCO 125001/125005)
- Kenya: Evaluation of "What's New & Cool for Youth" Booklet (FCO 143101)
- Worldwide: Youth Strategy Group (FCO 115100)

Worldwide: Knowledge Management: Youth Report (FCO 125002/125003)

Objective(s): To expand the worldwide knowledge base on youth RH/HIV prevention through: a) a synthesis report on youth intervention projects; and b) further publication of research results from the YouthNet project.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In a meeting in early July, the decision was made not to proceed with a synthesis report.
- A report on the YouthNet research on post-abortion care (PAC) was completed and printed. It will be disseminated in January to major global researchers and organizations active in the PAC consortium.
- Joy Baumgartner presented on the YouthNet sexual violence/early sexual debut study at the IYWG partners meeting on July 24 in Washington, with USAID staff attending.
- A commitment was made to WHO to collaborate with them on a study/book-length report on preventing maternal mortality among youth, with FHI focusing on a chapter/review on unintended pregnancy. The details of the project will be developed in 2008. It will follow in general the approach of the WHO project by reviewing the evidence on preventing HIV/AIDS in young people.
- Initial conversations were held with a number of organizations about possible collaborations on key youth papers to fill gaps in knowledge.

Plans for January 2008 – June 2008

- Reports on YouthNet research will be completed, printed and disseminated, covering the PAC study (disseminated), peer education, and sexual violence/early sexual debut.
- The study on unintended pregnancy among youth as a contributor to maternal mortality among youth will begin, as part of a collaboration with WHO. It will follow in general the approach of the WHO project on reviewing the evidence on preventing HIV/AIDS in young people.
- Other papers will be explored with various organizations, to work in a collaborative fashion to fill information gaps on youth.

Findings and Outcomes:

- Findings from an assessment study indicated that wide consensus that a new overall synthesis report for the field is not currently needed, given other reports recently produced. With USAID, we decided not to pursue the synthesis report.
- Funds were reprogrammed to complete YouthNet research reports and publish them in the FHI Youth Research Report series.

| | | |
|-------------------------------------|----|---|
| Funding Source(s): | | USAID - US Agency for International Development/USAID: GLP |
| Total Approved Budget:125002 | \$ | 600,000 |
| 125003 | \$ | 600,000 |
| | \$ | 1,200,000 |

Worldwide: Global Knowledge Management: Youth RH/HIV Prevention (FCO 125001/125005)

Objective(s): 1) To expand the worldwide knowledge base on youth RH/HIV prevention through synthesis, production, and dissemination of the latest information, new evidence, and best practices; and 2) to increase utilization of key program resources through UN, CA, Ministry, and other systems, focusing on major program resources completed in the last 18 months of YouthNet, so that the USAID investment in these resources is fully realized.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A total of 10,684 publications were disseminated from July to Dec. 2007.
- An IYWG Partners meeting was held in July; Joy Baumgartner presented on the YouthNet sexual coercion study.
- About 125 people attended the IYWG held Dec. 6 in Washington, which focused on parents and integrated services for youth. Presenters came from WHO, CDC, PAHO, Population Council, Pathfinder, and FHI; it included discussion and a small group exercise. Evaluation results were very positive.
- On Dec. 7, the IYWG sponsored a half-day workshop on M&E regarding community involvement; about 50 attended. Experts from CARE, MEASURE Evaluation, and Advocates for Youth led the workshop on behalf of an interagency group.
- In Sept. YouthLens Nos. 22-24 on scaling up programs, the new IYWG Web site (and DHS and policy sites), and peer education toolkits were sent to 5,600 people (mostly international), with electronic notice through InfoNet and listservs.
- In Dec., YouthLens No. 25 on parents/youth was distributed at the IYWG meeting (wider dissemination in 2008).
- Five new Youth InfoNet issues (Nos. 36-40) were disseminated electronically July through Nov, covering 50 program resources and 64 research articles.
- The new IYWG Web site was heavily promoted with postcards disseminated in September and staff promoting cards at an Asian regional meeting in India and other meetings.
- The HIV Counseling and Testing Manual was reprinted with small revisions.
- The training guide for the HIV CT Manual was field tested in St. Lucia in July. A second field test is scheduled in Kenya in February 2008; the APHIA II project in Kenya will support those trained to train providers in Coast and Rift Valley.
- A questionnaire was completed by five organizations assessing their use of the Family Life Education (FLE) materials that helped inform plans to expand use of these materials.

Plans for January 2008 – June 2008

- An IYWG Partners meeting will be held in Feb 2008 to review IYWG activities; Holly Burke is scheduled to present on the YouthNet peer ed study.
- A third large IYWG meeting or workshop will be planned and held in DC and/or Nigeria. If in Nigeria, the meeting will be linked to the conference "Investing in Young People's Health and Development: Research That Improves Policies and Programs" hosted by The Bill and Melinda Gates Institute for Population and Reproductive Health; presentations from FHI will be branded as IYWG events and coordinated with other IYWG partners.
- Three or four more Youth Lens publications will be published and disseminated. Topics may include younger youth, technology, injecting drug users, and measurement/research issues for youth.
- Youth InfoNet will continue to be produced and disseminated monthly. The December issues will be presented in January, summarizing the youth presentations at the Asia/Pacific meeting attended by FHI in October 2007.
- The new IYWG Web site will be enhanced and promoted through select activities, including conferences and announcements.

- After further field testing in Kenya, the HIV Counseling and Testing Training Guide will be published and disseminated to key stakeholders.
- Utilization plans for the faith-based family life education curricula and the HIV Counseling and Testing Guide/Manual are being explored, with possible TOTs or other scaling up activities possible in Kenya, Nigeria, Tanzania, and Zambia. Publications and technical assistance will be provided to these organizations if needed. Utilization of these materials will be carefully documented with the aim of improving future utilization efforts of IYWG publications.
- An evaluation of several IYWG activities, most likely Youth InfoNet and YouthLens, will be initiated in order to determine outcomes from these activities.

Findings and Outcomes:

As of December 2007:

- Thirteen new Youth InfoNet publications had been distributed electronically, sharing 165 program resources and 183 research summaries to 7,000 people directly, plus listservs reaching up to 100,000.
- Seven new Youth Lens publications have been developed.
- The new IYWG Web site was launched.
- Two large, public IYWG meetings had been organized and implemented with strong attendance at each (about 125, and 94 people, respectively).
- Three meetings of the IYWG partners have been conducted.
- Utilization of tools had been enabled through multiple contacts, initiating the use of tools and responding to requests.
- A total of 18,177 publications were distributed based on requests, plus mailings of YouthLens, the YouthNet End of Program Report, and other documents.

Funding Source(s):

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|-------------------------------|---------------|--|
| | | USAID - US Agency for International Development/USAID: GLP |
| Total Approved Budget: | 125001 | \$ 1,000,000 |
| | 125005 | \$ 600,000 |
| | | <hr/> \$ 1,600,000 |

Jamaica: Capacity Building for Youth RH/HIV and Parenting Curriculum Development (FCO 145001)

Objective(s): To build the capacity of Jamaican youth-oriented NGOs and government agencies and assist in the development of a parenting curriculum.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The layout was completed, with approval by the collaborating organizations, URC and JA-Style.
- A printer was selected and the files were delivered to the Jamaica printer via URC's Kingston office.

Plans for January 2008 – June 2008

- A launch of the parenting curriculum will be made in early January, with dissemination scheduled for all of Jamaica.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Field Support
Total Approved Budget: \$ 150,000

Kenya: Evaluation of "What's New & Cool for Youth" Booklet (FCO 143101)

Objective(s): To inform the National Coordinating Agency for Population Development (NCAPD) on how to maximize exposure to the "What's New and Cool for Youth" booklet among Kenyan youth, thereby equipping them with knowledge, skills and attitudes to make informed decisions about their reproductive health needs and rights. More specifically, this proposed subproject aims to:

- 1) create consensus among key stakeholders (including NCAPD and the Kenya Institute of Education) on the best strategy to reach in- and out-of-school youth with the booklet;
- 2) pilot-test the distribution and utilization of the booklet and related orientation tools;
- 3) assess whether the booklet can help improve awareness of RH issues among youth; and
- 4) identify lessons learned that may inform NCAPD's efforts to scale-up the booklet distribution to other districts in Kenya.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Endline data collection took place in July 2007.
- Preliminary analysis of the evaluation data was performed and a draft report prepared.
- A complete page layout for the Kiswahili booklet was done and internal feedback from both NCAPD and FHI obtained. Illustrations for the booklet were also incorporated.

Plans for January 2008 – June 2008

Staff will:

- Obtain external review of the Kiswahili booklet.
- Field test the Kiswahili booklet in selected sites.
- Convene two data interpretation workshops targeting teachers and principals from the 80 study schools, MOE officials from Siaya and Rachuonyo districts as well as those from Nyanza province.
- Convene a national dissemination workshop to share evaluation results.
- Explore opportunities within APHIA II to reach out-of-school youth with the booklet.
- In collaboration with NCAPD, continue policy dialogue with the Ministry of Education and Kenya Institute of Education regarding the importance of reproductive health information and education among secondary schools in Kenya.

Findings and Outcomes:

- With support from UNFPA, NCAPD has printed 3500 additional copies of the "What's New and Cool for Youth" Booklet.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Field Support
Total Approved Budget: \$ 390,000

CROSS-CUTTING ACTIVITIES

As a cross-cutting activity, these subprojects facilitate the translation of research results into practice by working across strategic areas of work.

FHI/NC subprojects fully or partially funded by USAID's CRTU Agreement:

| | |
|------------------|--|
| Worldwide: | BBR Technical Leadership (FCO 116103) |
| Worldwide: | BIOS Technical Leadership (FCO 119100) |
| Worldwide: | CRD Technical Leadership (FCO 112120) |
| Worldwide: | HSR Technical Leadership (FCO 114106) |
| Worldwide: | Technical Assistance to Develop a Standardized Family Planning Curriculum (FCO 113128) |
| Africa Regional: | Technical Assistance to Improve Family Planning Uptake (FCO 113133) |
| Tanzania: | Advancing the Application of FP/RH Evidence-based Practices in WHO SPP Countries. (FCO 113134/113140) |
| Worldwide: | Technical Leadership: Collaboration with Multi/Bi-Lateral Procurement Agencies (FCO 118101) |
| Worldwide: | Technical Assistance to Field Programs (FCO 118102) |
| Worldwide: | Technical Oversight Committee (FCO 118103) |
| Worldwide: | Inter-Laboratory Trials (FCO 118104) |
| Worldwide: | Production Surveillance, Domestic and Off-Shore, for Hormonal and Long-acting and Permanent Methods (FCO 148101) |
| Worldwide: | Enhanced Country Program Implementation (FCO 113117) |
| Kenya: | Enhanced Country Program Implementation (FCO 113122) |
| South Africa: | Enhanced Country Program Implementation (FCO 113123/133100) |
| Uganda: | Enhanced Country Program (FCO 113125) |
| Madagascar: | Enhanced Country Program (FCO 113129) |
| India: | Enhanced Country Program (FCO 113132) |
| USA: | Development of Guidelines for Contraceptive Users (FCO 2706/112110/172003) |
| Worldwide: | Cochrane Fertility Regulation Review Group, 2005-2010 (FCO 112112/172002) |
| Africa Regional: | CRTU Network of Champions (FCO 113113) |
| Worldwide: | Research to Practice Leadership (FCO 113114) |
| Worldwide: | USAID Best Practices Package: Development and M & E (FCO 113115/123101) |
| Worldwide: | USAID Best Practices - MAQ Funds (FCO 123103) |
| Worldwide: | Implementing Best Practices Consortium (FCO 113116) |

Worldwide: Promoting Adoption of FP/RH Best Practices in Child Survival (FCO 113138)

Worldwide: CRTU Knowledge Management (FCO 113118)

Kenya: Scaling-Up: Building Capacity in the Field (FCO 113130)

Worldwide: CRTU Monitoring and Evaluation (FCO 119501)

Kenya: Division of Reproductive Health Capacity Development: Follow-on Activity (FCO 143103)

Worldwide: Research Capacity Assessment (FCO 113137/993501)

Uganda: Needs Assessment for Male Circumcision (FCO 156101/156102)

Kenya: Building Strategic Information Capacity within NASCOP (FCO 153102)

Worldwide: Research Ethics Training Curriculum for Community Representatives (RETC-CR) (FCO 1398/1600/1601/2710/172000)

Worldwide: BBR Technical Leadership (FCO 116103)

Objective(s): To provide staff time for completing papers begun under the CTR Program, developing concept proposals for workplans, working on research synthesis, and external consultations.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- While this FCO/subproject was originally set up specifically for BASS, with the merger of Clinical Research and BASS, it became the FCO for the new BBR Department in July 2007.

Plans for January 2008 – June 2008

- Research concepts will be developed throughout the year, as appropriate.
- Papers will be written on RH related topics.
- Tolley will continue her co-chair activities for the Microbicide 2008 meeting.

Funding Source(s): USAID - US Agency for
International
Development/USAID: Core

Total Approved Budget: Annually Approved

Worldwide: BIOS Technical Leadership (FCO 119100)

Objective(s): 1) To develop biostatistical research subprojects to be funded under the CRTU; and 2) to prepare papers that report on findings of BIOS research funded under the CRTU.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Marlina Nasution audited a class at UNC-Chapel Hill on the analysis of pharmacokinetic data (August-December 2007) in order to better support USAID-supported pharmacokinetic studies conducted by FHI and CONRAD.
- Mario Chen attended a three day class on Latent Variable Analysis Using M-plus at Johns Hopkins University in August 2007.
- Debra Weiner attended an RTP-CDISC meeting on analysis data set standards for FDA in November 2007.
- Debra Weiner and Kathy Mincey investigated the availability of data from FHI and CONRAD pregnancy studies for secondary analyses pertaining to WHO guidelines on the pregnancy checklist.
- Pai-Lien Chen and Mark Weaver wrote a letter to the editor (accepted in JIDS) discussing the relationship between HIV disease progression and pregnancy
- Cynthia Kwok attended the SAS Users Group Meeting in Orlando, FL, November 2007.

Plans for January 2008 – June 2008

- Statistical methods, consult, secondary analysis, paper writing, and training work will be completed as needed.

Funding Source(s): USAID - US Agency for
International
Development/USAID: Core

Total Approved Budget: Annually Approved

Worldwide: CRD Technical Leadership (FCO 112120)

Objective(s): 1) To develop clinical research subprojects to be funded under the CRTU; 2) to support time of key staff to provide technical leadership to partners and organizations, including participation in relevant meetings; and 3) to prepare papers that report on additional findings of clinical research activities funded under the CTR.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI staff advanced the following papers:
- Hoke TH, Feldblum PJ, Van Damme K et al. Temporal trends in STI prevalence and condom use corresponding to the addition of the female condom to male condom distribution targeting Madagascar sex workers. *Int J STD AIDS* (in press).
- Feldblum PJ, Hoke TH, Nasution MD et al. Pregnancy among sex workers participating in a condom intervention trial highlights the need for dual protection. *Contraception* 2007 Aug 76 (2): 105-10. (FHI Pub 2007-56).
- Hoke TH et al. Randomized controlled trial of alternative male and female condom promotion strategies targeting sex workers in Madagascar (in preparation).
- Staff also:
- Attended the ACOG Gyn Practice Bulletins Committee meeting in April 2007. FHI staff, Kavita Nanda received an outstanding service award as an ACOG committee member.
- Reviewed manuscripts for various journals.
- Submitted the manuscript summarizing the results of the final report produced for USAID "Identifying Appropriate Candidates for IUD Insertion in Moderate to High STI Settings: The IUD Algorithm Project (March 2003). The manuscript was published in *Contraception* in March 2007.
- Continued to work on two vasectomy articles.
- Developed and refined proposals for CRTU funding.
- Attended the ALIRH meeting in Argentina and gave a presentation on IUDs on April 25-27, 2007.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

Total Approved Budget: \$ 250,000

Worldwide: HSR Technical Leadership (FCO 114106)

Objective(s): To develop health services research subprojects to be funded under the CRTU.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Papers that were published, accepted for publication or in press are listed in Findings and Outcomes.
- HSR staff developed 7 concept proposals for new CRTU projects.
- McCarraher D "Contraceptive needs and pregnancy desires among home-based care clients and caregivers in Kenya" submitted for review to *AIDS Care Jour*.
- Reynolds H "Risk for unintended pregnancy and HIV among youth seeking voluntary counseling and testing (VCT) services in Haiti and Tanzania" rejected by *AIDS Ed and Prev* and resubmitted to *East Africa Med Jour*.

- Chin-Quee completed a draft of "Provision of one vs. four cycles of pills when starting oral contraception: A cluster randomized controlled trial".
- Reynolds H "Cluster randomized trial of the uptake of a take-home infant dose of nevirapine--Kenya" was rejected by AIDS and resubmitted to JAIDS.
- Adamchak reviewed an article on Determinants of timing of life course events of adolescents for Studies in Family Planning.
- Hatzell-Hoke prepared a concept paper for a study examining the process, cost, and outcomes of taking community-based distribution of DMPA to scale.
- Hatzell-Hoke and Stanback served as co-authors on Provision of Injectable Contraceptives through Community-Based Distribution: An Implementation Handbook.

Plans for January 2008 – June 2008

- Adamchak will draft a paper on determinants of pregnancy intentions among HIV+ women in Ghana.
- Chin-Quee will obtain co-author reviews and edits of a draft of "Provision of one vs. four cycles of pills when starting oral contraception: A cluster randomized trial".
- Reynolds H "Integrating family planning services into voluntary counseling and testing for HIV in Kenya: results of operations research:" will be submitted to a journal.
- Reynolds H "Effectiveness of Training Supervisors in Kenya to Improve Reproductive Health Quality of Care" will be published electronically in Health Pol and Plan and will be in print in March 2008.
- Stanback "Injectable contraception: what should the grace period be for re-injections?" will be submitted to Contraception.
- Stanback "Menstruation requirements and the effectiveness of a job aid to rule out pregnancy in Egypt" will be submitted to a Journal.
- Stanback "Excluding Pregnancy Prior to Contraceptive Initiation: Time to Lower Our Standards" will be written.

Findings and Outcomes:

- Hatzell-Hoke T. "Randomised controlled trial of alternative male and female condom promotion strategies targeting sex workers in Madagascar" *Sex Transm Infect* 2007 Oct. 83 (6). [Pub#2007-91]
- Stanback J "Contraceptive Injections by Community Health Workers in Uganda: A Non-Randomized Trial," *Bulletin of the World Health Organization*, October 2007; 85. Pub#2007-93]
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Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: Annually Approved

Worldwide: Technical Assistance to Develop a Standardized Family Planning Curriculum (FCO 113128)

Objective(s): To provide technical assistance to Capacity Project to conceptualize and initiate the development of the Standardized Family Planning Resource Package.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A meeting was held on November 16th, 2007 between USAID, Capacity Project and FHI to outline the broad content and structure of the Resource Package. Initial consensus was achieved around the purpose, intended users, content, components, and design of the package.
- A follow-up meeting was held in January 2008 with the Capacity project to discuss the process, timeline, roles and responsibilities, and next steps. As a result of these two meetings, FHI's role was extended from providing technical assistance to the Capacity project to taking bigger role in developing key technical components of the package, such as training materials for contraceptive methods, starting with non-clinic based contraceptives.
- A meeting was held with Sarah Johnson to discuss the WHO contribution to the development process.

Plans for January 2008 – June 2008

- FHI staff will identify some of the collateral materials that could be used in the FP Resource Package to compliment the FP training curriculum.
- FHI staff will draft the curriculum section on COCs and circulate it among partners to get a consensus on format, design and level of details.
- Capacity Project staff will draft a piece related to policies and systems, which should be in place in order to support implementation of the FP Resource Package.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: \$ 100,154

Africa Regional: Technical Assistance to Improve Family Planning Uptake (FCO 113133)

Objective(s): To provide technical assistance to: 1) the Ministries of Health in Kenya, Uganda, and Madagascar to reduce medical barriers to OC provision; 2) the Ministries of Health in Kenya and Uganda to develop and implement CBD of DMPA programs; and 3) the Ministry of Health and other APHIA II partners in Kenya to introduce the Standard Days Method using CycleBeads.

Activities, Accomplishments, and Problems—July 2007 - December 2007

To reduce barriers to Oral Contraceptives:

- In Kenya: 1) the DRH approved a proposal to integrate evidence-based strategies into national FP guidelines in July '07; 2) in Sept., a rapid assessment of the guidelines was completed; 3) in Oct., the concept was presented to Kenya's National FP Working Group (NFPWG) and agreement obtained for the strategies in an addendum; and 4) in Nov., Dr. Kigen was appointed to the project as the DRH point person.
- In Uganda: 1) the concept was approved by MOH in Aug.; 2) FHI met with MoH leaders and received support for all strategies in a revised training curriculum; and 3) in Nov., FHI worked with the committee to develop the text for the curriculum.
- In Madagascar: 1) efforts are ongoing within the ECP to support providers with new practices from the revised National RH Norms (FCO 113129). As part of these efforts, the OC strategies will be recommended as a supplement.

To develop and expand CBD of DMPA:

- In Kenya: 1) An Advisory Committee (AC) was formed to guide activities; 2) an assessment of potential sites in Siaya, Butere, Mumias, Meru Central Districts was conducted in Sept. '07 and outcomes were presented; 3) ongoing discussions were held with JHPIEGO to discuss a collaboration; 4) the AC recommended Tharaka as a potential site and recommended a visit in '08.
- In Uganda: 1) Busia was assessed for scale up readiness (Aug.); 2) MOUs were signed by FHI, Bugiri and Busia; 3) a stakeholders' meeting was held in Bugiri, to plan for scale up (Nov.); and 4) in Bugiri 28 CBDs were trained to provide DMPA (Dec.).
- Standard Days Method in Kenya: 1) In Sept. '07 IRH presented a brownbag on the SDM and Kenya's DRH approved the proposal for SDM introduction 2) in Oct., a MoU between the CRTU and IRH was signed; 3) Kenya assigned a MOH point person for SDM activities; 4) in Nov., FHI estimated demand in Kenya to be 80,000 cycle beads over 5 years; and 5) in Dec., an assessment began to evaluate the policy environment and training needs.

Plans for January 2008 – June 2008

Oral Contraception

- In Kenya a stakeholder's meeting will be convened in Feb. '08 to garner additional support and solicit feedback regarding the OC strategies (QuickStart, advance provision, provision of multiple packs, and missed pill instructions). Also a consultant will be hired in March '08 to draft the addendum to the national guidelines.
- In Uganda FHI/Uganda will continue to provide input for the editing and production of the updated national guidelines in 2008 and will begin planning for the roll out of the new guidelines. Upon completion of updated guidelines/addendums in both Kenya and Uganda, technical support will be provided for training strategies and/or possible job aids necessary to train service providers in the new strategies.
- In Madagascar assistance will be provided for a stakeholder's meeting and training strategy or possible job aids to assist with implementation of the updated guidelines at the service delivery level.

CBD of DMPA

- In Kenya a meeting will be held with Tharaka District Health Management Team to determine their interest/support for the pilot project (Jan.). Partners for the pilot project will be named and an implementation work plan developed (Feb. to March).
- Staff will continue discussions in collaboration with JHPIEGO and the Kenya implementation will be started.
- In Uganda a stakeholders' meeting with district health officers will be held and then training of Busia district agents will be initiated.
- TA will continue to be provided to strengthen service statistics information and meetings with partners/districts interested in scale up within Uganda will continue to occur.
- Standard Days Method in Kenya:

- The in-country assessment will be completed in Jan/Feb and results will be presented at a stakeholder's meeting in March. Following the stakeholder's meeting, FHI/IRH will identify promising sites for implementation, develop an M&E plan, identify needed materials or training tools, and outline plans for demand generation.

Findings and Outcomes:

- The Kenya CBD DMPA site assessment of Siaya, Butere, Mumias, and Meru districts revealed that all but one district medical health team expressed their interest and willingness to support implementation of a pilot project (Mumias was close to an urban center and had few CBDs). In spite of some concerns about commodities supply, Butere district was the most well-suited given the sizeable cadre of CBD agents and superior commitment to the project. The interest in collaborating with JHPIEGO, however, which was ongoing but picked up momentum after the site assessment has led to a change in site identification. It is likely that the pilot will be conducted in Eastern province, Tharaka district, (where JHPIEGO is lead on APHIA II) CBD agents are already well incorporated into MOH system and are recognized by health agents. A site assessment was also conducted in Tharaka.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

Total Approved Budget: \$ 230,000

Tanzania: Advancing the Application of FP/RH Evidence-based Practices in WHO SPP Countries (FCO 113134/113140)

Objective(s): To promote introduction and application of WHO-endorsed FP/RH practical, evidence-based practices, approaches and tools aimed at improving access to and quality of family planning and reproductive health services in WHO/Strategic Partnership Programme participating countries.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- USAID provided approval to implement this subproject in July 2007.
- Nigeria: In August 2007, staff traveled to Nigeria to consult the Federal Ministry of Health and partners on the select list of evidence-based practices and tools that could be introduced in Nigeria. The recommendations were based on a desk review and analysis of gaps and opportunities within the current FP service protocols, standards of practice, and training manuals. In October 2007, a country workplan was developed and approved by FMOH for implementation. An interagency JobAid/IEC task force was formed in December 2007 to update the national standardized package of job aids and IEC materials.
- Tanzania: In November 2007, FHI participated in a stakeholder meeting to adapt the WHO Decision Making Tool for Tanzania. In December 2007, staff consulted with the Ministry of Health and Social Welfare to orient on the list of evidence-based practices and tools that could be introduced in Tanzania, as well as discussed how FHI could contribute to the country's SPP workplan. A workplan has been developed and implementation is scheduled to start in early 2008.

Plans for January 2008 – June 2008

- In January, this FCO will be split into two to reflect the specific country efforts.
- Nigeria - staff will:

- Finalize and plan for printing/dissemination of the MOH-endorsed standard job aid & IEC materials package.
- Orient trainees during three planned FMOH SPP zonal trainings.
- Coordinate and support a south-to-south study tour of Nigerian FMOH staff to Uganda on community-based distribution of DMPA. This effort has the potential to inform future introductory efforts of CBD of DMPA.
- Tanzania - staff will:
 - Agree on the work plan in January 2008, in conjunction with MOHSW staff.
 - Provide technical review of family planning guidelines and protocols.
 - Launch and disseminate new guidelines to zonal and district officials, as well as development partners.
 - Assist MoHSW in orienting the guidelines and tools to master and district trainers.
 - Provide support to simplify and incorporate a checklist into the Decision making tool (DMT).
 - Provide technical assistance to the MoHSW to pre-test the DMT.
- Explore opportunities for a south-to-south collaboration between Tanzania and Uganda on CBD of DMPA.

Funding Source(s):

USAID - US Agency for
International
Development/USAID:
Core

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|-------------------------------------|----|----------------|
| Total Approved Budget:113134 | \$ | 99,668 |
| 113140 | \$ | 143,332 |
| | \$ | <u>243,000</u> |

Worldwide: Technical Leadership: Collaboration with Multi/Bi-Lateral Procurement Agencies (FCO 118101)

Objective(s): To improve donor procurement practices and develop appropriate product specifications for field programs.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Carter assisted in the drafting of the final revisions of WHO Supplier Pre-Qualification Schemes for condoms and IUDs, and the IUD Specification and Procurement Guidelines for the Copper T-380A.

Plans for January 2008 – June 2008

- Carter will participate in the preparation and facilitation of the WHO Mfr's Pre-Qualification Workshops to be held in Beijing, China; Bangkok, Thailand; and New Delhi, India (January 21 - February 22 2008).
- In collaboration with WHO, Carter will complete the technical assessment of the Female Health Company, FC2 production facility in Kuala Lumpur, Malaysia.
- Carter, along with a team of technical experts will begin revision of WHO Male Latex Condom Specification and Procurement Guidelines.
- Carter will attend the next meeting of the Reproduction Health Coalition meeting in Brussels, Belgium.
- Staff will attend inter-agency meetings and provide technical assistance as needed or as requested by USAID/CSL.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
CSL-Core
Total Approved Budget: Annually Approved

Worldwide: Technical Assistance to Field Programs (FCO 118102)

Objective(s): To provide technical assistance to USAID field-funded programs and support field services initiatives through training and mentorship.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Laboratory assessments were performed at the Ghana Food and Drug Board and the Ethiopian Drug Administration and Control Authority. Recommendations for improvement and capability enhancement were provided.

Plans for January 2008 – June 2008

- Follow up technical assessments will be planned for contraceptive testing programs in Uganda, Tanzania, Ghana, and Ethiopia. On site training and educational materials will be provided as needed.
- Staff will respond to field complaints and provide technical assistance as needed or as requested by USAID/CSL.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
CSL-Core
Total Approved Budget: Annually Approved

Worldwide: Technical Oversight Committee (FCO 118103)

Objective(s): To facilitate annual Technical Oversight Committee meetings to review PQC's program activities and strategies for the CRTU.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The Technical Oversight Committee met November 27, 2007 at the FHI Headquarters in RTP. Discussions included updates on the performance of USAID suppliers, strategies for 2008/9 procurements, and offshore supplier management.

Plans for January 2008 – June 2008

- The TOC will meet May 29, 2008 at the FHI/Arlington Office.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: Annually Approved

Worldwide: Inter-Laboratory Trials (FCO 118104)

Objective(s): To conduct annual proficiency trials among accredited independent laboratories and condom manufacturers. This exercise helps ensure PQC's testing competence, and compliance with international laboratory performance standards.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The 2007 inter-laboratory study was initiated in November with 35 laboratories participating.

Plans for January 2008 – June 2008

- The results of the 2007 inter-laboratory study will be disseminated to USAID and all participants.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
CSL-Core
Total Approved Budget: Annually Approved

Worldwide: Production Surveillance, Domestic and Off-Shore, for Hormonal and Long-acting and Permanent Methods (FCO 148101)

Objective(s): To ensure pre-distribution quality of hormonal methods and long-acting and permanent methods, procured domestically or offshore, for developing country programs.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Hamel assisted in the preparation of RFQs for orals and IUDS, and participated in the evaluation of submitted proposals.

Plans for January 2008 – June 2008

- Post-award technical assessments will be conducted for each new supplier to insure compliance with GMP and contract requirements. Production surveillance protocols and activities will be revised or adapted (as needed) to achieve program objectives.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Field Support
Total Approved Budget: Annually Approved

Worldwide: Enhanced Country Program Implementation (FCO 113117)

Objective(s): 1) To identify and prioritize local reproductive health research and program needs in up to five enhanced countries; and 2) to facilitate efficient, effective implementation and utilization of reproductive health research and programs in the enhanced countries.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A M&E system was implemented in the 4 tier one enhanced countries to regularly capture information on the RU indicators.
- Two existing FHI/Tz staff have dedicated 50% of their time to assist with implementing CRTU activities and promoting evidence based practices to partners. In July, NC staff traveled to Tz to provide staff with an orientation to the CRTU and to draft a Tanzania specific Results and Logic Matrix.
- The Madagascar and India Project Director's visited NC in July to receive orientation to FHI and the CRTU and to meet with technical staff to work on new project ideas. NC staff also assisted them to refine the CRTU Results and Logic Matrix and Ensuring Utilization Work Plan.
- NC staff traveled to Kenya in October 2007 to implement a rapid assessment with local partners. The assessment looked at the facilitating factors and barriers to research utilization (RU).
- NC Senior Management traveled to Uganda in October to work with the Project Director on ways to expand the CRTU portfolio and to enhance technical and management links with the Africa Regional office.
- NC and Nairobi staff traveled to SA in December to discuss management of the ECP and update the CRTU Results and Logic Matrix and the Ensuring Research Utilization Work Plan.
- Concept papers were generated in collaboration with enhanced country staff and stakeholders for consideration for core funding in the year 4 work plan. In Uganda six were developed and submitted, in Madagascar two were developed and submitted, in Kenya five were proposed and two were developed and submitted, in India three were developed and submitted and in Nigeria one was developed and submitted.
- NC staff continued to provide TA to staff in enhanced countries in implementing their RU work plans.
- Country office systems for supporting the CRTU were reviewed and improved. Specifically, a plan for improving NC and Nairobi collaborative management to implement CRTU activities was drafted.

Plans for January 2008 – June 2008

- NC staff will work with country staff to draft country RU summaries, update the CRTU Results and Logic Matrices and prepare other documentation in preparation for the mid-term assessment.
- NC staff will facilitate visits by the assessment team.
- The Africa Regional Office Director of Research and his Deputy Director will visit NC to refine CRTU management systems.
- NC staff will visit India, Madagascar, Uganda, South Africa, Kenya, Tanzania and Nigeria to work with the Project Directors and stakeholders to refine plans for RU activities around existing subprojects, and to improve CRTU management systems.
- The Project Directors from Madagascar and Uganda will cost share a trip to NC. They will take this opportunity to work on CRTU portfolios and to develop new research ideas with technical staff in NC.

- NC staff will continue to provide TA to staff in enhanced countries in implementing their RU work plans, promoting evidence based practices, seeking research topics that respond to local needs and in managing their activity portfolios.
- NC staff will continue to ensure that research results and best practices generated in other countries are shared with enhanced countries and integrated into their work plans when appropriate.

Findings and Outcomes:

- Stakeholders identified RH priorities through stakeholder meetings/assessments in Kenya, Uganda and SA during Nov 2005, Dec 2005 and March 2006, respectively. Also, the Best Practices Assessment team met with several key stakeholders to identify RH priorities in Madagascar during the March-April 2005 assessment visit. Full reports of meeting proceedings and findings are available for each country: (Uganda M2005-85)
- Common themes and RH needs/challenges identified across countries include:
- HIV & Contraception: to generate information to refine models of integration and evaluate impact of innovative integration models; and to improve dissemination of evidence and knowledge on FP and HIV integration to inform policymakers and program managers.
- LAPMs: to increase demand by addressing misinformation and improving attitudes of both clients and providers; to strengthen providers' skills and confidence; and to identify, investigate and support efforts to improve access by expanding the types of providers (i.e. nurses, clinical officers) delivering LAPM services.
- Hormonal Methods: to expand access by increasing service delivery points (i.e. pharmacies, CBD of DMPA); and improve providers' attitudes, skills and confidence to provide hormonal methods.
- All Methods/Cross-Cutting: to update, harmonize and improve dissemination of RH policies and guidelines; to increase providers' efficiency and improve counseling skills on sexuality and the full range of contraceptive methods; to expand male and youth involvement in RH and strengthen RH services for these populations; to support advocacy efforts to reach opinion leaders and policymakers with FP/RH information to mobilize resources for FP programs and contraceptive commodities; and to enhance information, education and communication (IEC) to increase demand for and to augment the capacity of providers to offer quality FP/RH services.
- For the year 3 work plan, 27 concept proposals were developed in collaboration with local partners in Kenya, Uganda and Madagascar. Of those, 11 were selected for submission to USAID, representing a significant proportion of the total new subprojects submitted for USAID's consideration.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 10,406,331 |

Kenya: Enhanced Country Program Implementation (FCO 113122)

Objective(s): 1) To identify and prioritize local reproductive health research and program needs in Kenya; and 2) to facilitate efficient, effective implementation and utilization of reproductive health research and programs in Kenya.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- During the July-December 2007 period the following activities were carried out:
- Updated the CRTU matrix and ensuring utilization work plan for Kenya.
- Developed tools to capture distribution and utilization of evidence based practices and products.
- Planned with the Mission to hold a session with APHIA partners to disseminate research results, and evidence based practices and tools.
- In collaboration with Information Programs, produced and disseminated the 2nd and 3rd CRTU country newsletter “Family Health Research” on CBD of DMPA.
- Hosted two members of FHI’s Protection of Human Subjects Committee (PHSC) in September 2007.
- Facilitated a meeting for all ethical review committees in Kenya during the PHSC members' visit.
- Hosted a Nigeria delegation on an exchange visit on FP/HIV integration.
- Submitted ideas for PEPFAR COP08 and FY07 population field support funds.
- Continued to monitor and ensure CRTU program implementation in Kenya.
- Continued to generate and capitalize on opportunities to disseminate FHI’s menu of evidence based practices and support research utilization within the Kenya RH program.
- Continued contributing to development of new research ideas and identifying appropriate partners and sites in Kenya.
- Initiated implementation of the ensuring utilization work plan.
- Prepared a progress report on the CRTU Kenya matrix.
- Updated CRTU stakeholders on progress to date in addressing identified priorities.
- Disseminated CRTU research briefs to all APHIA technical teams.
- Prepared and conducted a stakeholder assessment to collect in-country utilization information.
- Prepared a report of the stakeholder utilization assessment.

Plans for January 2008 – June 2008

Staff will:

- Plan a stakeholder meeting during year 4 of the CRTU.
- Host the evaluation team in Kenya conducting the mid-term evaluation.
- Provide technical assistance to non-FHI APHIA II provinces to facilitate implementation of FP/VCT integration.
- Follow up with other USAID/USG-funded projects to facilitate implementation of FP/VCT integration.
- Facilitate the use of a module in training HBC community health workers and care givers.
- Further support dissemination of best practices on successful LAPM approaches that are identified through meta analysis (i.e., ACQUIRE model, Marie Stopes Model, CPD sessions).
- Conduct advocacy for use of research results.
- Document research utilization activities within all subprojects.

Findings and Outcomes:

- See prior reports for the RH priorities identified by stakeholders in Kenya.
- The Kenya ECP has generated concept papers every year for consideration during the CRTU Workplan process.
- The ECP contributed to the following research utilization successes:
 - A) Scaled-up use of the pregnancy, COC, DMPA and IUD checklists under the Kenya ECP (FCO 113122). As a result of FHI’s promotion of evidence-based approaches and technical assistance to the APHIA II project, 11 new facilities within the APHIA II Project in Coast and Rift Valley are now using FHI’s checklists as part of routine service delivery. Four partner organizations (EngenderHealth, JHPIEGO, PATH, and Pathfinder) are also using the

checklists within APHIA II programs in other provinces in Kenya. Moreover, the MOH had incorporated the checklists into in-service training and supervision.

B) Scaled-up FHI's IUD approach under the subproject FCO 113111. As a result of FHI's IUD advocacy and repositioning activities, 40 additional APHIA II facilities in Coast and Rift Valley provinces are providing IUDs in their programs. A total of \$30,000 was leveraged from APHIA II for training on IUD insertion and removal.

C) Due to FHI's efforts to share best practices and approaches with partners in Kenya, the What's New and Cool for Youth booklet is being used by the Centre for Studies in Adolescence to orient students in their programs to RH issues. Thirteen thousand dollars in GTZ funding was leveraged to disseminate information from the booklet to approximately 200,000 people via publication in The Standard newspaper. 1,000 booklets were reprinted and distributed by JHU/CCP through their youth program in two districts (143101).

D) Based on FHI's extensive consultations with key stakeholders, the evidence and global experiences with CBD of DMPA presented at a national workshop organized by FHI, and the experiences of MOH officials during a study trip to Uganda also organized by FHI, the Kenyan MOH agreed to pilot the safety, feasibility, and acceptability of CBD of DMPA (113108).

- To date, ECP has leveraged \$4,123,000 from PEPFAR, population field support, bilateral agreements, and other donors.

Funding Source(s): USAID - US Agency for
International
Development/USAID: Core
Total Approved Budget: \$ 10,406,331

South Africa: Enhanced Country Program Implementation (FCO 113123/133100)

Objective(s): 1) To identify and prioritize local reproductive health research and program needs in South Africa, as one of five countries under the CRTU; and 2) to facilitate efficient, effective implementation and utilization of reproductive health research and programs in South Africa.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI continued to implement newly funded subprojects promoting the integration of FP/HIV (FCOs 153105, 153104, 113127).
- The Integrated Community Palliative Care project is currently being implemented under the CRTU project (FCO 153122).
- In December 2007, FHI SA staff made a presentation giving an update on FP/HIV integration status in South Africa as well as challenges to the South Africa Midwives Conference attended by 2000 midwives.
- In collaboration with project partners, FHI staff prepared the annual PEPFAR report for USAID/South Africa in April 2007.
- FHI updated the South Africa Enhanced Country Program Matrix, and developed a life-of-subproject workplan to ensure application of research results.
- FHI/SA staff helped identify sites for new research, and provided communications and media support around FHI's ongoing microbicides activities as well as the closing of the Cellulose Sulfate trial.
- FHI/SA hired a Program Officer (PO) to assist in the implementation of CRTU-related activities. The PO who formerly worked under the PHP projects joined the CRTU team and also assists with implementation of the CRTU-related activities.

- An FP/HIV integration forum has been established within the CO. The role of this forum is to ensure that FP/HIV integration issues are addressed within all projects within the office as well as to ensure that new proposals address issues of FP/HIV integration.
- CRTU stakeholders are updated on FP/HIV integration issues through the FHI Family Forum Newsletter.

Findings and Outcomes:

- In December 2005, the USAID Mission agreed to the inclusion of South Africa as a CRTU enhanced country.
- Participants in the stakeholders' meeting in March 2006 identified priorities in the area of FP/HIV integration in South Africa. These were documented in the baseline assessment.
- FHI pursued the idea from the stakeholders' meeting to support "integration champions" in the NDOH and in South Africa's nine provinces to help establish evidence-based policies, training curricula, and programs related to FP/HIV integration. Core funding was secured and FHI hired an FP/HIV integration advisor to help establish a broader network of champions within South Africa.
- The Enhanced Country Program contributed to the following research utilization successes:
- A. PMTCT services enhanced to counsel for and refer/provide FP under the subproject Enhancing PMTCT Performance in South Africa (FCO 153104)
- FHI has been providing technical assistance to MOH PMTCT sites to integrate and strengthen family planning counseling and referral/provision. To date, FHI's technical assistance to our collaborating partners has resulted in the integration and/or strengthening of family planning counseling and/or referral in 122 PMTCT sites in Northern Cape Province and 13 sites in Limpopo Province.
- B. HIV/AIDS home-based care linked with FP and other services under the subproject Strengthening Linkages between FP, HBC and ARV Services (FCO 153105)
- Through technical support provided to Project Support Association of South Africa (PSA-SA), more than 700 referrals to FP, VCT, and ART services have been made by HBC volunteers. Moreover, approximately 150 FP and ART service providers have been trained in appropriate contraception for women and couples with HIV. Along with additional training of South Africa's Department of Health providers, this project has led to improvements in overall care services by PSA-SA, benefiting more than 10,000 HBC clients and their families.
- To date, The Enhanced Country Program has leveraged \$4,000,000 from PEPFAR.

Funding Source(s):

USAID - US Agency for
International
Development/USAID:
Core; USAID - US
Agency for International
Development/USAID:
Microbicides

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|-------------------------------|---------------|----|-------------------|
| Total Approved Budget: | 113123 | \$ | 187,402 |
| | 133100 | | Annually Approved |

Uganda: Enhanced Country Program (FCO 113125)

Objective(s): 1) To identify and prioritize local reproductive health research and program needs in Uganda; and 2) to facilitate efficient, effective implementation and utilization of reproductive health research and programs in Uganda.

Activities, Accomplishments, and Problems—July 2007 - December 2007

In January 2008:

1. Convened a meeting of the CRTU/Uganda MoU Partners to provide updates on FHI CRTU progress in Uganda; and solicit their input into the ECP.
2. Provided technical input into the Performance Monitoring Plan of the Health Communication Partnership (HCP).
3. Participated in the launch of RH Uganda, formerly FP Association of Uganda.
4. Initiated and held a meeting with the Quality Assurance Project to explore mutual collaboration for family planning programming.
5. Provided technical input to a UNFPA baseline assessment of quality of care for FP in 12 districts.
6. Held a meeting with Bugiri Local Government to review the implementation of CBD of DMPA, and provide technical assistance for improving their supervision and tracking systems.
7. Provided support to Bugiri and Busia districts to acquire FP counseling job aides (flip charts) and training materials for the CRHWs providing DMPA.
8. Promoted technical support to utilize FHI's HIV Counseling and Testing Manual for young people with 5 organizations (PIDC, Straight Talk Foundation, AIDS Information Center, Naguru Teenage Health and Information Center and Reproductive Health Uganda).
9. Participated in the quarterly Reproductive Health Commodity Security meeting convened by the MOH and the DELIVER project.
10. Disseminated Issue 1.3 of Family Health Research to in-country audiences.
11. Distributed 315 checklists (IUD, DMPA and COC) to Save the Children (US), Uganda Private Midwives Association (UPMA) and EngenderHealth. Save the Children (US) was also given 90 CBD DMPA advocacy kits.

In February 2008:

1. Held a CBD of DMPA Core Team Meeting with the MOH and relevant districts.

In March 2008:

1. Provided technical assistance to the MoH RH division to finalize update of FP basic skills and ToT curricula.
2. Provided assistance to the Paediatric Infectious Diseases Institute to undergo a ToT for FHI's new youth CT manual. One FHI staff also participated in this training.

Plans for January 2008 – June 2008

Staff will:

- Continue to disseminate FP provider checklists.
- Continue to promote Interagency Youth Working Group (IYWG) activities and products.
- Continue to advance USAID's FP / HIV integration best practices with ROADS and other partners and assist with the Uganda integration assessment dissemination.
- Continue to implement activities on the Ensuring Utilization workplan.
- Prepare for the CRTU evaluation in the 2nd quarter of 2008.
- Participate in the PEPFAR annual implementers' meeting in early June.
- Convene at least 2 CBD of DMPA core team meetings.
- Hold two community based family planning consortium meetings.
- Finalize the harmonization and updating of community based FP training curricula being used by different agencies.
- Provide support to the RtoP Champion.

Findings and Outcomes:

- In November 2005, the USAID Mission agreed to the inclusion of Uganda as a CRTU enhanced country.
- The M&E Unit developed the Uganda Baseline report (Feb-June).
- In May 2007, USAID-Uganda awarded FHI-Uganda field support and PEPFAR funds.

- In 2006, the Mission requested that FHI continue to support and facilitate the national Family Planning Working Group (FPWG).
- Nine concept proposals were submitted for Year 3 core funding and six for Year 4 core funding.
- Ongoing assistance was provided for all projects in Uganda.
- Staff developed and submitted updated results and application matrices to USAID on a regular basis.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

Total Approved Budget: \$ 10,406,331

Madagascar: Enhanced Country Program (FCO 113129)

Objective(s): 1) To identify and prioritize local reproductive health research and program needs in Madagascar; and 2) to facilitate efficient, effective implementation and utilization of reproductive health research and programs in Madagascar.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The Project Director traveled to NC to receive orientation to FHI and the CRTU and to meet with technical staff to work on new project ideas. The CRTU Results and Logic Matrix was also updated.
- A job description was drafted and posted for a Technical Advisor to assist with implementation of CRTU activities. Interviews were held and an offer made to the best candidate. The start date for this position is estimated to be January 2008. A second job description for an Associate Scientist was also developed and will be posted in January.
- New, larger office space was secured to allow room for an increased number of local staff.
- The Project Director negotiated the contribution of stakeholders to the development of two concept papers for submission for core funds in year 4. He also actively participated in negotiation partner involvement in and the development of 3 concept papers outlining our plans for FY07 field support funds. They include: taking CBD of DMPA to scale in Madagascar, Taking the Best Practices Package to scale in Madagascar, and operationalizing National RH Norms and Procedures at the health facility level in Madagascar.
- The PD represented FHI at numerous RH events in the country and promoted evidence based programming and FHI's best practices. Specific promotion activities focused on the following results: provider checklists for FP initiation, the CBD of DMPA, improving uptake of hormonal contraception, and integrating contraception and HIV services.

Plans for January 2008 – June 2008

Staff will:

- Continue to meet regularly with local stakeholders to finalize collaborative ideas.
- Collaborate closely with NC colleagues to ensure that CRTU strategy areas and the needs identified by local stakeholder meetings are being addressed.
- Work with NC staff to draft country research utilization summaries, update the CRTU Results and Logic Matrices and prepare other documentation in preparation for the mid-term assessment.
- Travel to NC to work with colleagues on research utilization planning and on improving office and management infrastructure.

- Work with key stakeholders to refine and implement core and field funded activities approved in the year 4 work plan. Continue to monitor and support all ongoing CRTU activities.
- Continue to promote evidence based programming with stakeholders and the implementation of research results as applicable and continue to represent FHI at relevant meetings.
- New country staff will be oriented to FHI and the CRTU.
- Facilitate visits by the assessment team.

Findings and Outcomes:

- The Enhanced Country Program contributed to the following research utilization successes:
- A. Secured MOH commitment and USAID financial support to scale-up CBD of DMPA and the use of the pregnancy checklist and systematic screening in MOH sites under the subproject USAID Best Practices Package: Development and M & E (FCOs 113115/123101)
- Based on initial, positive experiences with 1) CBD of DMPA, 2) the pregnancy, COC, and DMPA checklists, and 3) systematic screening, the MOH, USAID/Madagascar, and other local stakeholders committed to expanding and funding services to approximately eight new districts with new partners. Evaluation data are being used to guide scale-up decisions.
- B. National Norms and Standards for RH to be disseminated in 10 districts under the subproject Technical Assistance to Improve Family Planning Uptake (FCO 113133)
- FHI was entrusted with developing a training approach to update service providers on the recent changes to the national norms and standards for RH. FHI will also incorporate research results on hormonal methods into this activity to strengthen the updated national guidance.
- To date, the enhanced country program has leveraged \$1,250,000 from population field support, and bilateral agreements.

Funding Source(s): USAID - US Agency for International Development/USAID: CSL-Core
Total Approved Budget: Annually Approved

India: Enhanced Country Program (FCO 113132)

Objective(s): 1) To identify and prioritize local reproductive health research and program needs in India; and 2) to facilitate efficient, effective implementation and utilization of reproductive health research and best practices in India.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Gupta traveled to FHI/NC in July 2007 to receive orientation to FHI and the CRTU.
- Gupta oriented the FHI/India office, which has historically focused on HIV/ AIDS to the CRTU, evidence based programming and key research results and best practices in RH. Meetings were held to identify programs that could adopt some FHI research results around the integration of FP and HIV programs.
- Multiple meetings were held with various stakeholders, including the Government of UP and the Directorate of Family Welfare to introduce them to the CRTU, evidence-based programming and key research results and best practices in RH. Key stakeholders such as Population Council, SIFPSA, Futures and Central Government of India to orient them to the CRTU and planned evidence-based research activities.
- Regular meetings were held with EngenderHealth and ICMR, to ensure smooth implementation of the two NSV studies.

- Population Council set up a Gender Working Group (GWG) which has gender-based violence and male involvement in family planning as its core themes. FHI was represented at a meeting of this group in July 2007 and Dr. Nisha gave a brief overview of FHI's NSV acceptability study. The CRTU brief was distributed to about 25 people during this meeting.
- The Institute for Reproductive Health is carrying out a Standard Days Method Project in UP and Jharkand. FHI attended their May 2007 dissemination meeting.
- FHI's research briefs titled "Experienced researchers diverse settings" were distributed to around 50 partners at the USAID partners meeting held on Dec. 7, 2007.
- Three studies were discussed and drafted for submission to the Year 4 CRTU workplan.

Plans for January 2008 – June 2008

- Population Council will be organizing a conference in New Delhi on Feb 28-29th, 2008, where future research opportunities and possibilities in the area of reproductive health and family planning in India will be discussed. FHI has been invited to make a presentation at this meeting.
- A data utilization workshop will be held in May/June 2007 to discuss findings from the study on Vasectomy Acceptability Among Clients and Providers in Uttar Pradesh (FCO 116100). Recommendations for utilizing the research results will be discussed and prioritized.
- An NSV portfolio of programmatic recommendations will be created and submitted to the Government of India. The recommendations will utilize findings from the FHI clinical and behavioral studies (FCOs 116100 and 11212) and a recent UNFPA NSV study conducted in India.
- Efforts at integrating Family Planning into ongoing FHI India programs will be made. FHI India currently has programs with an HIV focus, which include the SAMARTH Project, Aastha, STI Capacity building grant, Balasahayoga, INP+. CRTU will attempt to integrate family planning into these programs by orienting them to the concepts of Sexual and reproductive health. A core team would be formed and an operational plan for wider orientation would be prepared.
- The feasibility of linking contraceptive and HIV services in targeted interventions with USAID partners (APAC and AVERT) will be explored.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 10,406,331 |

USA: Development of Guidelines for Contraceptive Users (FCO 2706/112110/172003)

Objective(s): To develop and implement a system to ensure that the "Medical Eligibility Criteria" and the "Selected Practice Recommendations" remain current and based on the best available science. The system provides for ongoing monitoring and critical appraisal of available evidence and assures that this information is available for updating guidance.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- WHO and CDC staff and FHI collaborators had several discussions regarding the planning of an Expert Working Group meeting to update MEC and SPR guidance in 2008.
- WHO and CDC staff updated several systematic reviews and conducted a new systematic review on lupus and hormonal contraceptives.
- FHI updated systematic reviews on antiretroviral and antibiotic drug interactions with hormonal contraceptive methods.

Plans for January 2008 – June 2008

FHI staff will:

- Attend a special consultation at WHO on hormonal contraceptives and the liver in January 2008.
- Update the drug interaction reviews after the liver meeting.
- Participate in the combined MEC/SPR meeting to be held in Geneva in April 2008.

Findings and Outcomes:

- Findings from several systematic reviews led to changes in eligibility criteria for several contraceptive methods. These changes were published in the second (2004) edition of the "Selected Practice Recommendations for Contraceptive Use" and the third (2004) edition of the "Medical Eligibility Criteria for Contraceptive Use". These guidelines are available on the WHO Website, www.who.int/reproductive-health/publications.
- The WHO special consultation on progestin-only contraception and bone, made the following recommendations:
 - There should be no restriction on the use of DMPA, including no restriction on duration of use, among women aged 18 to 45 who are otherwise eligible to use the method.
 - Among adolescents (menarche to <18) and women over 45, the advantages of using DMPA generally outweigh the theoretical safety concerns regarding fracture risk. Since data are insufficient to determine if this is the case with long-term use among these age groups, the overall risks and benefits for continuing use of the method should be reconsidered over time with the individual user.
- Recommendations regarding DMPA use also pertain to use of NET-EN:
- There should be no restriction on the use of other progestogen-only contraceptive methods among women who are otherwise eligible to use these methods, including no restrictions on duration of use.
- There should be no restriction on the use of combined hormonal contraceptive methods among women who are otherwise eligible to use these methods, including no restrictions on duration of use.
- JHPIEGO requested permission to reprint the FHI MEC chart in a French Multi-method Family Planning document for Madagascar that they are developing.

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| Funding Source(s): | | USAID - US Agency for International Development/USAID: Core; USAID - US Agency for International Development/USAID: IAA |
| Total Approved Budget: 2706 | \$ | 500,000 |
| 112110 | \$ | 213,047 |
| 172003 | \$ | 750,000 |
| | \$ | <u>1,463,047</u> |

Worldwide: Cochrane Fertility Regulation Review Group, 2005-2010 (FCO 112112/172002)

Objective(s): To perform systematic reviews and meta-analyses of randomized controlled trials on methods of family planning, with an early emphasis on IUDs and barrier methods.

Activities, Accomplishments, and Problems—July 2007 - December 2007

Reviews were finished and accepted:

- 1) Lopez LM, et al. Oral contraceptives containing drospirenone for premenstrual syndrome, 2007 Oct.
- 2) Lopez LM, et al. Skin patch and vaginal ring versus combined oral contraceptives for contraception, 2007 Oct.
- 3) Grimes DA, et al. Do clinical experts rely on the Cochrane Library? *Obstet & Gynecol*, 2007 Nov.
- Poster presented at Reproductive Health 2007: Vaginal ring versus combined oral contraceptives for contraception: a systematic review, 2007 Sep.
- Review was finished and re-submitted: Lopez LM, et al. Immediate start of hormonal contraceptives for contraception, 2007 Dec.
- Review was drafted and submitted: Lopez LM, et al. Strategies to communicate contraceptive effectiveness, 2007 Dec.
- New title was registered and review started: Lopez LM, et al. Theory-based interventions for contraception, 2007 Nov.
- Updated reviews were submitted:
 - 1) Grimes DA, et al. Fertility awareness-based methods for contraception, 2007 Oct.
 - 2) Grimes DA, et al. Immediate postpartum insertion of intrauterine devices, 2007 Nov.
 - Handsearch – Updated the search of the journal *Contraception* (Jan 2007 – Jun 2007) for trials to be included in the Cochrane Central Register of Controlled Trials, 2007 Dec.

Plans for January 2008 – June 2008

- Review will be drafted: Lopez LM, et al. Theory-based interventions for contraception.
- Review will be revised for publication: Lopez LM, et al. Strategies to communicate contraceptive effectiveness.
- Review will be scheduled for publication: Lopez LM, et al. Immediate start of hormonal contraceptives for contraception.
- New review topic will be registered: Allen et al. Drugs for pain with intrauterine device insertion.
- Cochrane reviews will be updated according to Cochrane policy:
 - 1) Grimes DA, et al. Immediate postabortal insertion of intrauterine devices.
 - 2) Gallo M, et al. 20 mcg versus >20 mcg estrogen combined oral contraceptives for contraception.
 - 3) Gallo M, et al. Combination injectable contraceptives for contraception.
- Handsearch – Search the journal *Contraception* (Jun 2007 – Dec 2007) for trials to be included in the Cochrane Central Register of Controlled Trials.

Findings and Outcomes:

- Systematic review examined RCTs comparing COCs containing drospirenone versus a placebo or another COC for effect on premenstrual symptoms. Drospirenone plus EE 20 mg may help treat premenstrual symptoms in women with PMDD. The placebo also had a large effect. We do not know whether the COC works after three cycles, for women with less severe symptoms, or better than other COCs. Larger and longer trials of higher quality are needed to address these issues.
- Systematic review studied RCTs of immediate-start hormonal contraception for differences in effectiveness, continuation, and acceptability. We found limited evidence that immediate start affects pregnancies or continuation. Pregnancy rate was lower with immediate start of DMPA. Some differences were associated with contraceptive type rather than initiation method. More studies are needed of start methods with the same contraceptive.
- Systematic review examined citation of Cochrane reviews in the Clinical Expert Series of Obstetrics and Gynecology. No temporal trends were evident. Although half of clinical expert articles cited relevant Cochrane reviews, only 21% of the eligible reviews were referenced. Wider use of Cochrane reviews could strengthen the scientific basis of this popular series.

- Systematic review studied the contraceptive skin patch or vaginal ring versus a combination oral contraceptive. Efficacy rates were similar. Patch users had more side effects than COC users. Ring users generally had fewer side effects but had more vaginal irritation and discharge. The patch could lead to more discontinuation.
- Systematic review examined RCTs comparing strategies for communicating contraceptive effectiveness. One trial showed that categories were better than numbers. In another trial, audiovisual aids worked better than the usual oral presentation. Strategies should be examined in clinical settings and assessed for effect on contraceptive choice and retention of knowledge.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core; USAID - US
Agency for International
Development/USAID: IAA

Total Approved Budget: 112112 \$ Annually Approved
172002 Annually Approved

Africa Regional: CRTU Network of Champions (FCO 113113)

Objective(s): 1) To implement and evaluate a network approach to enhance RtoP. 2) To support “change agents” efforts to introduce or facilitate evidence-based change at the programmatic or policy level in-country. 3) To increase partnerships in the field, primarily through memorandums of understanding (MOU) with the champions’ home agencies. 4) To improve local input into FHI’s research agenda, strengthening the important link between practice and research.

Note: Objectives were updated in July 2006 in an effort to make them more specific to the proposed activities and projected outcomes of the subproject.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The remaining installments of activity funds were disbursed between June and December 2007.
- A total of 5 Project Quarterly Reports were submitted by Champions between June and December 2007.
- A needs assessment for integrated FP and HIV services was conducted in 20 PRINMAT sites in Tanzania. A working group was formed by the Champion, comprised of government health officials, service providers, PRINMAT staff, and media, to develop key integration advocacy messages for 4 key categories of stakeholders. The needs assessment results and the key advocacy messages were disseminated at a stakeholders meeting with 45 participants in October 2007.
- In Zambia, a 3-day training workshop for 19 service providers was conducted in October 2007. The providers were from 7 facilities in the Zambia Prevention Care and Treatment Partnership (ZPCT). The training focused on integrating FP into PMTCT services, and used facilitators from the Kabwe District Health Office and the ZPCT Kabwe Office.
- In Uganda, work continued on developing key integration issues to address during ongoing advocacy meetings, community sensitization, and training of health workers. Planning was initiated for dissemination of the Gombe Hospital assessment and for reviews of existing IEC materials and job aids on FP and its use among PHAs.

- In Nigeria, between September and November 2007, the Champion conducted an FP/HIV integration advocacy meeting for 17 participants, a 4-day service provider training for 15 participants, and held a dissemination meeting for results of the advocacy and training workshops.
- A concept proposal was submitted to extend the project into YR 4 of the CRTU, to support the 4 current national Champions for an additional year.

Plans for January 2008 – June 2008

- Individual champion project activities will tentatively end in December 2007. Champions will submit their Final Project Reports in January 2008.
- An evaluative report will be developed from an analysis of the Final Project Reports in January 2008.
- A meeting will be held in February or March 2008 in Tanzania for FHI staff and 4 Champions to share challenges, lessons learned, and to determine next steps.
- If approved for extension, strategy plans for YR 4 will be developed with each Champion in the first quarter of 2008.

Findings and Outcomes:

- Some key recommendations from the evaluation of the 2004-2005 Network of Champions subproject under the CTR were considered in the planning and development of the 2006-2007 Champions subproject under the CRTU:
- A unifying theme of FP and HIV was chosen, to encourage sharing of experiences and approaches between the champions.
- Similar to the first Network of Champions, it has been difficult to cultivate a “network” between individuals. Communication via e-mail has been limited.
- In Uganda, an assessment of the status of FP and HIV/AIDS services in Gombe Hospital, provided information on key areas to address through advocacy meetings, community sensitization, and training of health workers. These findings will also serve as a basis for developing key messages for the IEC materials and job aides for health workers.
- In Tanzania, the needs assessment for the integration of FP and HIV services found that current challenges for access to HIV testing include stigma, limited or no access to VCT services, gender issues, and missed opportunities for referrals.
- In Tanzania, lessons learned from project activities in 2007 include:
- TA and cooperation from the FHI/Tanzania office and the District Ministry of Health, and enthusiastic participation by service providers and community members has resulted in substantial stakeholder support of Champion activities.
- Operating within the organization’s (PRINMAT) existing structure facilitated smooth project planning and implementation, while limited PRINMAT staff time was a challenge.
- Collaboration with media advanced the advocacy efforts of the project.
- For integration of services to occur in PRINMAT clinics, VCT training is required for PRINMAT service providers.
- A false expectation from community members for integrated services to be initiated was created after the needs assessment was conducted.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 304,780 |

Worldwide: Research to Practice Leadership (FCO 113114)

Objective(s): 1) To provide internal technical assistance and strengthen capacity building for research utilization (RU); 2) to identify RtoP priority topics and strategies; and 3) to develop, maintain and implement memorandums of understanding (MoU) with key partners.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The RU and RtoP pages of SharePoint were updated.
- A new RU Planning Tool form was finalized and rolled out within ARD.
- The Underused Research Findings were updated to include four new sections on Male Circumcision, Youth, Contraceptive Continuation, and Implants.
- McGinn presented at the Women Deliver conference on “What ever happened to contraceptive choice.”
- I Jacobson and J Smith attended the ANE BP meeting (9/07) and Jacobsen co-presented with J Shelton (USAID) on “Tools and Tips to Overcome Medical Barriers and Improve Best Clinical Practices in Family Planning.”
- I Jacobson presented on the challenges of translating research into practice at a launch of the Global Handbook at JHU CCP (9/07); experts from 30 organizations were present.
- The MOU Collaborations Poster was updated (9/07).
- An MOU Relationship Managers meeting was held (8/07); a new MOU was signed with ESD (9/07); and an MOU was signed with the Institute for Reproductive Health/Georgetown to work on adding SDM to the method mix in Kenya. Those activities will be under FCO 113133.
- K Tumlinson and J Smith met with PATH president Chris Elias to discuss current PATH/FHI collaboration (8/07).
- Translations of the Pregnancy and COC checklist into Kiswahili were completed and sent for printing in Kenya.
- A dissemination plan for the contraceptive effectiveness chart was finalized in collaboration with INFO, and implementation was initiated.
- 13 project ideas were submitted for CRTU Year 4; and seven were approved for development into concept proposals, 4 were included in the workplan sent to USAID (12/07).
- RtoP and RU orientations and materials were provided to 8 staff from India, Kenya, Madagascar, Nigeria, and HQ, as well as representatives from the World Bank.
- L Wilson completed an internship collecting national FP/RH policies and outlining a possible journal article on policy barriers to FP/RH services.

Plans for January 2008 – June 2008

- A new MoU will be signed with ORC Macro’s Child Survival and Technical Support Plus Project (CSTS+).
- Another MOU Relationship Managers meeting will be held.
- Case Studies will be developed outlining the progress of MOU partnerships for the CRTU mid-term evaluation.
- Four Research Utilization Case Studies will be developed for the CRTU mid-term evaluation.
- Other RtoP preparations for the CRTU mid-term evaluation will be made as needed.
- The FHI “Menu of Practices” briefs will be finalized.
- The Nairobi office will hold an orientation for staff on the new RU Planning Tool form.
- McGinn, Wilson, Stanback, Yacobson, and Lasway will complete analysis and write a journal article on national policy guidelines for FP/RH.
- The COC and DMPA Checklists Training Guides will be printed in English and translated into French. Dissemination will be initiated.
- RtoP will support attendance and participation in the Global Health Conference.

Findings and Outcomes:

- Significant advances have been made in getting FHI checklists adopted, and implemented (FCO 113107). For example, checklists were endorsed and co-branded by the MOH in Uganda and Kenya; independently adapted and translated into Romanian by JSI (approximately 400 checklists disseminated during the “15 Years of FP in Romania” conference organized by JSI in Sept 2006); as a result of a CTU held in the DR, the coordinator for Medical Residents at a local University requested additional materials and stated the checklists would be used in the training of 32 Ob/Gyn residents; and in June 2007, IntraHealth requested to adapt the COC checklist to facilitate its introduction in Senegal, under the USAID-funded bilateral: the Maternal, Neonatal, and Child Health project.
- RtoP played a pivotal role in generating and coordinating new projects in Tanzania. As a result, Tanzania is now a “Tier 2” country under the CRTU.
- RU / RtoP / “Practice-to-Research-to-Practice” continuum has been further institutionalized at FHI; RtoP is specifically mentioned in the 2007 FHI Strategic Plan, and integration of RU indicators and a RtoP approach into FHI’s Public Health Programs are key activities/goals in the Research Operation Plan.
- FHI has demonstrated its leadership in RtoP to external audiences, as indicated by its inclusion in several conference agendas (e.g., East Africa Health Conference, Global Health Council).
- RU and RtoP concepts and language are increasingly in the lexicon of USAID and other CAs.
- Key CRTU topics supported by this and other FCOs have made significant inroads at the international level, notably CBD of DMPA, LAPMs, and FP/HIV. This FCO has supported presentations at nine conferences (five global, four regional) since its inception in 2005.
- MOUs have been operationalized with seven of the original eight CRTU MOU partners (the partnership with ADRA was dissolved in 2006 due to differing expectations), and two additional CRTU MOUs have been signed (Pathfinder’s ESD Project and ORC-MACRO’s CSTS+). We have renewed our MOU with IBP and developed a subproject-specific MOU with Georgetown. As of Dec 2007, we have 53 ongoing or completed collaboration activities.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 1,494,019 |

Worldwide: USAID Best Practices Package: Development and M & E (FCO 113115/123101)

Objective(s): 1) To develop strategies and tools to enhance timely and convenient delivery of contraceptive methods; 2) to change policies and guidelines to reflect new research findings; 3) to facilitate increased acceptance, support for, and uptake of contraceptive methods; 4) to facilitate USAID Health, Population and Nutrition (HPN) officers oversight of the design and evaluation of country-level family planning programs; 5) to identify and market in collaboration with USAID, an improved coordination among cooperating agencies (CAs) to promote a basic package of best practices for FP/RH programs; and 6) to facilitate increased funding for and implementation of RH best practices (BPP) at the country level.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- NC staff traveled to Madagascar in November to begin data collection and supervise the first two weeks of field worker interviews for the evaluation of the BPP.

- Approximately 21 personnel from the research contractor, Focus Development Association, were trained and questionnaires pre-tested. They include: 13 research assistants, 3 supervisors, and the director of Focus Development Association, as of December 2007.

Plans for January 2008 – June 2008

- Evaluation data will be analyzed and interpreted by key stakeholders. Recommendations for scale-up will be made.
- A final report will be written.
- The subproject will be closed.

Findings and Outcomes:

- While formal data analysis has yet to be completed, initial impressions were mixed:
- The systematic screening intervention seemed to be very well received. When asked, many providers said that their family planning, child immunization and prenatal care services program indicators had increased as a result of the systematic screening, although this is one of the questions that will be further examined using the regular monthly activity reports of service statistics.
- The reaction to the pregnancy checklist was more mixed, with some providers saying it facilitated their work and allowed them to provide FP to more clients and other providers saying it was a “waste of time”. This issue will be further analyzed in the quantitative and qualitative data being collected for the evaluation.

Funding Source(s):

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| | | USAID - US Agency for International Development/USAID: Core; USAID - US Agency for International Development/USAID: CSL-Core |
| Total Approved Budget: | 113115 | \$ 179,282 |
| | 123101 | \$ 135,600 |
| | | \$ <u>314,882</u> |

Worldwide: USAID Best Practices - MAQ Funds (FCO 123103)

Objective(s): To identify, develop and market a package of USAID’s select Reproductive Health Best Practices.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Key stakeholders met to discuss next steps for the Mini-University. The MOHFP decided that based on their very full schedule of activities planned for early 2008, they would like to postpone the meeting from May to June 2008.
- It was also decided to abandon the approach outlined in the original concept paper based on the input from stakeholders. Originally, the plan was to use the Mini-U as a forum for disseminating FHI best practices and research results down to regional and district level MOH staff and other key stakeholders. Because this is already being done through regional coordination meetings, it was suggested to focus on building a community of support among the key RH decision makers at the national level. It has also been proposed to expand the presentation of best practices beyond FHI and look at a broader set of RH best practices being implemented in Madagascar. The proposal includes grouping the presentations by policy principle, best practice, promising practice and innovation. A new concept paper will

be drafted based on this input and will be shared with key stakeholders from Madagascar and USAID/Washington in an effort to further refine the meeting approach.

- FHI research results that may be included in the meeting include: the CBD of DMPA, the Best Practices Project, Surveying the FP Needs of Postpartum Clients, and Formative Research on Improving Continuation of Injectables.

Plans for January 2008 – June 2008

- A revised concept paper will be drafted in January.
- NC and Madagascar staff will share the concept paper with relevant local and international stakeholders to further refine the meeting objectives, participants and topics to be presented.
- Negotiations will be undertaken to secure a venue, invite participants, and secure speakers.
- A case study/newsletter will be developed and disseminated that will report on key experiences and findings from the CBD of DMPA activities and Best Practices Project.
- The Mini University will be held in June 2008.
- A meeting report and next steps will be generated and shared with key stakeholders.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: |
| | GLP |
| Total Approved Budget: | \$ 75,000 |

Worldwide: Implementing Best Practices Consortium (FCO 113116)

Objective(s): 1) To identify how FHI's institutional goals can dovetail with those of the IBP; 2) to incorporate partnerships with the IBP into existing workplans and strategies; and 3) to increase utilization of the IBP's Electronic Communication System (ECS) among FHI staff and in-country partners.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI staff attended the IBP Consortium Meetings at AED in Washington, DC (June 2007) and at JHPIEGO's offices in Baltimore, MD (November 2007).
- FHI renewed its MoU with IBP with an indefinite commitment (August 2007).
- A description of FHI's work with IBP was included in FHI's July to September 2007 Contraceptive Technology Research Brief.
- FHI, as a member of the Knowledge Sharing Task Force, helped to plan for the KSTF meeting (October 2007).
- FHI/Kenya's Country Director presented a summary of the Kenya IBP team's work to consortium meeting participants (November 2007).
- A revised ATI letter, with an increased budget to continue FHI's involvement in the IBP consortium for the life of the CRTU project, was approved by USAID/W in December 2007.
- FHI/Kenya, in collaboration with the best practices task force, assisted the MOH/DRH in the development of a tool to be used to identify best practices in-country.

Plans for January 2008 – June 2008

- FHI will be co-sponsoring an electronic forum on the topic of contraceptive implants, with the support of other IBP partners, to be held in late January 2008 on the IBP Knowledge Gateway electronic platform.

- FHI has agreed to collaborate with INFO Project and other IBP partners to provide technical expertise to an e-forum on male and female sterilization, which will be held in March 2008 on the IBP Platform.
- FHI/Kenya will continue to support the work of the Kenya IBP task force by collaborating with a consultant tasked with using the newly developed best practices identification tool to create a summary document of in-country best practices.
- It is expected that the summary document of in-country best practices will be presented to Kenya stakeholders in March 2008.

Findings and Outcomes:

- Supported by this and other FCOs under the CTR and CRTU, Kenya's IBP effort was initiated in 2004.
- FHI's role in the Kenya IBP has included establishing the country team, developing the country action plan and working with subcommittees on implementation, supporting WHO's effort to document best practices, and through the Research to Practice initiative (RtoP), compiling and disseminating a list of evidence-based practices that can easily be adopted by implementing organizations.
- At the Kenya IBP meeting held October 2006, the Kenya MOH reported the following achievements of its IBP efforts:
 - 1) Advocacy: a) secured budget line item for Reproductive Health; and b) increased support for family planning at the national level.
 - 2) Demand creation: a) increased awareness of FP at the community level; b) created demand for FP services; and c) improved perception of FP in the communities.
 - 3) Training: a) enhanced FP and infection prevention (IP) knowledge and skills; and b) enhanced adherence to FP service provider standards and guidelines.
 - 4) Logistics management: a) All districts reported no stock outs in at least 3 modern FP methods at any given time; b) created awareness of the value of timely data for decision making; and c) the district reporting rate went up from 38% to 71% although facility reporting remained low; it moved from 16% to 20%.
- Perhaps most importantly, the IBP model has been taken up by the Kenya MOH/DRH as the way for increasing the uptake of family planning. The IBP model is being applied in the APHIA II projects, and at a CTU carried out May 2007 for service providers in Rift Valley, the IBP CTU manual was used. FHI/Kenya continues to work with WHO to support Kenya MOH/DRH in the development of a Best Practices document in Reproductive Health.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

Total Approved Budget: \$ 145,681

Worldwide: Global: Promoting Adoption of FP/RH Best Practices in Child Survival (FCO 113138)

Objective(s): To promote adoption and application of best practices and tools to improve the quality of family planning/reproductive health services in Child Survival Programs.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In August 2007, FHI reviewed and provided input to the CBFP technical update on Linking CBFP with Long Acting Methods.

- The subproject was approved at FHI and in early October an Approval to Implement letter was submitted to USAID.
- As part of an effort to strengthen PVOs/NGOs capacity to document promising/best practices, in October 2007, FHI initiated on-going technical assistance for scientific writing and data analysis to two flex fund partners: World Vision/India and ADRA/Nepal.
- In Nov. 2007, FHI developed a CBFP technical update on CBD of DMPA. Both updates are widely circulated to the USAID/Flex Fund partners and CAs working on community-based family planning.
- FHI participated in a Flex Fund partners' meeting on Dec. 11th in Washington, DC, attended by approximately 50 partners, and facilitated a lunchtime discussion to identify needs for new or revised FP/RH service delivery job aids for frontline service providers working to integrate FP into their existing health and development programs. Recommendations are currently in review for further follow-up.
- In Dec. 2007, a concept proposal was submitted in the CRTU YR 4 workplan to support an operations research study with the Christian Children's Fund in Zambia to assess factors contributing to successful FP integration into community-based programs.
- Ultimately USAID did not approve this subproject as an addition to the Year 3 Workplan. Limited activities will continue with funding under Research to Practice Leadership, FCO 113114.

Plans for January 2008 – June 2008

- An MoU between FHI/CRTU and CSTS+ is expected to be finalized by Jan. 2008.
- FHI will present on CBD of DMPA and checklists at a flex fund partners' meeting in Mali in Feb. 2008.
- As a result of on-going technical support by FHI writing and biostatistics staff, World Vision/India and ADRA/Nepal are expected to have articles or summary reports on recent community based projects completed by June 2008.
- As a follow on to the Dec. 11 partners' meeting, FHI will support ongoing discussion and will lead the development of a job aid designed to assist service providers with integration of FP into child development programs.

Findings and Outcomes:

- FHI did not participate in the joint submission of an abstract for a panel for the Annual GHC Conference in May 2008. It was decided that it was best that only PVOs submit. Hence, Save the Children represented the CBD of DMPA work.

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|-------------------------------|--|
| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 70,000 |

Worldwide: CRTU Knowledge Management (FCO 113118)

Objective(s): 1) To develop communications and dissemination strategies for all relevant research; 2) to implement CRTU research dissemination priorities; 3) to provide technical assistance in dissemination; and 4) to maintain core infrastructures to support CRTU dissemination and issues management.

Activities, Accomplishments, and Problems—July 2007 - December 2007

FHI Staff:

- Wrote 7 new research briefs and distributed 20 briefs globally.
- Distributed 16 tailored announcements on research reaching 71,263 recipients.
- Published 15,500 English and 7,500 French copies of Family Health Research, including issues on FP/HIV integration; improving access to FP; and tools for service delivery; 7,030 copies were distributed.
- Wrote 3 articles published in MERA and several op-ed pieces for Ugandan and South African daily papers.
- Added 653 and updated 2,203 mailing list records; updated records for South Africa, Uganda, Kenya, Senegal, Madagascar, Rwanda, USAID, NIH and all FHI country offices.
- Responded to 1,950 information requests and mailed 20,679 materials.
- Provided TA in communications to FHI/Africa offices and researchers.
- Edited "Contraception for Women and Couples with HIV" in French for posting on the Web and production as CD-ROM.
- Supported attendance at key conferences and visited India to work with local office on RU plans and materials.
- In collaboration with MSH's online Global Exchange Network (GEN), managed a virtual forum on CBD of injectables; also contributed to the IBP forums managed by INFO on fertility-awareness based methods (Oct 2007), and Strengthening Service Delivery and Counseling for Injectable Contraceptives (Nov 2007).
- Provided technical review of issues of Population Reports on Family planning choices for clients with HIV, and the related INFO Reports, "Women and HIV: Questions Answered"; also "Implants: The Next Generation" (Oct 2007).
- Authored a Global Health Technical Brief for INFO on weight gain and COCs, and a brief on the immediate postpartum insertion of IUDs (July 2007); wrote "Contraceptive Implants: Safe Effective, Long-acting, Reversible" (2007).
- FHI provided financial support to JHUCCP to purchase 2,000 copies of the Global Family Planning Handbook.

Plans for January 2008 – June 2008

FHI staff will:

- Track the progress of programs to identify newsworthy CRTU results or accomplishments, and summarize and distribute these, then translate relevant ones into French or Spanish.
- Repackage and disseminate 2-3 existing FHI evidence-based syntheses to reach colleagues in the developing world.
- Publish and distribute an implementation tool to facilitate provider use of CBD of DMPAs; and translate it into French.
- Document evidence of RU approaches and lessons learned.
- Produce 5-10 handouts on specific topics to support CRTU activities, collaborating with CRTU partners, wherever possible.
- Distribute mass and tailored e-mailings (approximately 25).
- Respond to about 2,000 information requests (emails, phone calls, faxes, and postal inquiries) and mail materials, as the freight budget permits.
- Coordinate with dissemination staff at CAs and CRTU partners; participate in USAID's HIPNET group for dissemination staff; operationalize dissemination plans with MoU partners; and participate in ad-hoc inter-agency meetings to promote dissemination of research findings.
- Continue work on communications strategies on key CRTU topics for issues management; and coordinate communications approaches among CAs related to issues requiring special media management.
- Publish one issue of Family Health Research and implement local follow-up activities designed to increase dialogue among partners and adoption of evidence-based practices.

- Continue to provide TA in communications to FHI/Africa offices for CRTU activities.
- Co-produce an electronic forum with INFO Project on implants and contribute to a half dozen others over the course of FY08.

Findings and Outcomes:

- The Global Campaign for Microbicides (GCM) and Microbicide Trials Network incorporated FHI's communications plan into materials used by PATH, DAIDS, MTN.
- FHI backgrounders/Q&As was the basis for fact sheets distributed by CONRAD and the GCM; re-distributed to other stakeholders (IPM, MDP, Population Council, MRC/SA, WHO, Alliance for Microbicides, NIH, HPTN, MTN) and donors (Gates Foundation, DFID, USAID). FHI daily media analyses were redistributed by MMCI to global stakeholders. These played an important role in managing media coverage of trial closures/promoting positive outcomes. The implementation of the communications plan for the Ghana Savvy study resulted in positive responses and avoided potential controversy.
- PAHO's 2005 Spanish translation of FHI's field guide on qualitative research made modern research methodologies available to SRH researchers in Latin America.
- From Jan 06–Jun 07, news coverage of FHI programs/research reached more than 192M people. From Jul-Dec 07; over 28M people. Jan 06-Dec 07 total: 220M.
- FHI's checklists were translated into Romanian by JSI for use throughout Romania, and also described in INFO's Global Health Technical Brief, "Five Simple Ways to Improve Oral Contraceptive Provision and Use," (Apr 06); FHI's pregnancy, COC, DMPA, and IUD checklists were the basis of an INFO Global Health Technical Brief, "Checklists Reduce Medical Barriers to Contraceptive Use" (Apr 06); the IUD checklist was printed in Population Reports, Vol. 33(2)/Feb 06 and the DMPA checklist in the issue on injectables (06).
- Teaching Aides at Low Cost (TALC)/UK reprinted FHI dozens of materials on CD-ROMs distributed to 10,000 health professionals.
- Qualitative Research Methods: A Data Collector's Field Guide were used in site initiation trainings by 120 individuals.
- Nurses and Midwives' associations in Uganda used the Family Health Research (FHR) newsletter in a May 07 training; the German development agency GTZ highlighted FHR in its electronic bulletin.
- The Health Communication Partnership reprinted FHI's Quick Reference Chart for the WHO Medical Criteria for Contraceptive Use in their Post-abortion Resource Package, and on their website.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 2,959,885 |

Kenya: Scaling-Up: Building Capacity in the Field (FCO 113130)

Objective(s): To build field staff and partners' capacity to plan for and manage the scaling-up process, and to develop a scaling-up strategy for at least one FHI project in Kenya currently in development or in progress.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- A summary report of the workshop was developed for internal use.
- Discussion on follow on activities was held among project team members. Feedback from staff indicates that the knowledge gained from the workshop was useful and staff will make an effort to incorporate issues of scale up during project development.

Plans for January 2008 – June 2008

Staff will:

- Hold discussions with the Division of Reproductive Health (DRH), Ministry of Health (Kenya) to explore the possibility of convening a follow-on scaling up workshop for DRH staff (DRH).
- Identify additional needs and resources for further capacity building on Scaling Up among FHI's Africa Region staff.

Findings and Outcomes:

- Thirteen FHI staff from the Africa region, including Kenya, Uganda and Madagascar, as well as seven staff from partner organizations, including ADRA, EngenderHealth, JHPIEGO, and the Ministry of Health, received training to build their capacity for planning and managing the scaling up process.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Core |
| Total Approved Budget: | \$ 85,306 |

Worldwide: CRTU Monitoring and Evaluation (FCO 119501)

Objective(s): 1) To monitor performance in CRTU-related subproject efforts; 2) to share results promptly to guide subsequent efforts and decision-making; 3) to assess progress toward the achievement of intermediate results; and 4) to evaluate the extent to which CRTU goals and objectives have been met and have had demonstrable impact.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Follow-up was done on a proposed scope of work for an external evaluation of research utilization, as agreed in April and July 2007 discussions with USAID.
- All required entries into the Microbicides database were completed in September 2007.
- In October, in conjunction with FCO 119502, the CRTU Key Results were submitted for both microbicides and population activities. Numeric indicators were submitted the same month.
- FHI submitted a written reply to seven CRTU management review questions on November 16, 2007. The M&E Unit (now renamed the Planning and Assessment Unit) coordinated and oversaw this deliverable.
- Monitoring and evaluation activities were presented and discussed during the December 6-7, 2007 Management Review. In addition, a listing of all CTR/CRTU final reports since September 2005 was provided, along with a compendium of abstracts from all publications supported by the CRTU.
- As of December 2007, HRIT entries were completed for all 2005-6 research activities under the CRTU. In addition over 400 entries left over from the CTR were updated and submitted for USAID's review and approval.
- The development of an internet database to gather and sort data on RU indicators continues.

Plans for January 2008 – June 2008

- In conjunction with CRTU management (see FCO 119502), this subproject will continue to provide USAID quality, on-time reporting of the CRTU Program. Progress towards meeting the desired outcomes of the CRTU will continue to be monitored.
- The new RU indicator database will be completed, tested and launched. It is anticipated that the database will be operational for beta testing in February.

- All preparations will be made for the external evaluation of research utilization activities under the CRTU.

Findings and Outcomes:

- Between July 2006- June 2007, M&E staff worked closely with strategy group leaders to prepare for reviews with the CRTU Leadership group that included consideration of an up-to-date Gap Analysis and discussion of whether we were on track to meet each strategy's desired outcomes or whether modification was necessary. As of June 2007, all strategy groups had met with the Leadership Group once since the development of the 2007-08 Workplan. In planning for the Year 4 Workplan, newly proposed concepts that addressed identified "gaps", were encouraged and given some priority.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core

Total Approved Budget: Annually Approved

Kenya: Kenya Division of Reproductive Health Capacity Development: Follow-on Activity (FCO 143103)

Objective(s): 1) To enhance Kenya's Division of Reproductive Health (DRH) staff capacity at all levels in research management and data utilization for decision-making skills to ensure research utilization and evidence-based programming; 2) to provide a clear system and set of guidelines for conducting RH research in Kenya; 3) to provide efficient communications between the DRH (all levels) and partners as facilitated by establishing a DRH Web site; and 4) to provide a platform for gathering strategic information and evaluating public health impact through the annotated bibliography on the Web site and the existing resource center.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- The librarian and M&E officer (both DRH staff), were sponsored to attend the African Health Information Librarian Association (AHILA) conference in December 2007.
- In September 2007, 30 service providers were trained on data for decision making in Rift Valley province.

Staff:

- Tracked Web site usage and received feedback for additional improvements.
- Finalized all Web site administration documentation.
- Updated and provided technical assistance to the DRH for maintaining the national depository (annotated bibliography) within the established Web site.
- Provided technical assistance to DRH Resource Center staff to ensure that new research is being captured and added to the RH database.
- Reviewed the Research Management training curriculum and circulated it to the MOH/DRH working group for final approval.

Plans for January 2008 – June 2008

Staff will:

- Finalize the Operations Research Training manual which will be used by the Ministry of Health when training their program staff in Research Management.
- Train 40 Provincial and District Health management teams and implementation staff on data for decision making in Coast Province.

- Train 40 Provincial and District Health management teams and implementation staff on data for decision making in Central Province and Eastern Province.
- Facilitate roll out training on D-4-D at the facility level in Central Province and Eastern Province.
- Facilitate a DRH RH research working group meeting on January 24, 2008.
- Update the research agenda which was last updated in 2003.

Findings and Outcomes:

- The DRH Resource center staff has been referring students from the Kenya Medical Training College and the University of Nairobi Medical School to the Website. Some in-country collaborating agencies such as the Africa Population Health and Research Center have derived information on CAs collaborating with the DRH in Kenya, from the Web site.
- The National Co-ordinating Agency for Population and Development has visited the DRH to seek technical advice on how to set up their own Web site. The NCAPD Website has since been established and was officially launched in early 2007. The DRH Website has a link to the NCAPD website.
- DRH has re-established a research working group to help them strengthen the management and utilization of RH data throughout the country. The working group, which is under the leadership of the DRH, is composed of 16 member organizations, including national and international organizations. The group met for the first time in February 2006 in Nairobi to outline its responsibilities. These responsibilities include: advising the MOH on the latest evidence that can improve RH services; facilitating partnerships and research utilization among local research agencies; and advocating adoption of research-based reproductive health policies, among others. Subsequent meetings have been held on a quarterly basis. Achievements from the Research technical working group include the following: 1) provided technical input to finalize the National RH Research Guidelines; 2) formulated the research guidelines dissemination strategy; 3) implemented the dissemination strategy; and 4) a DRH Program Manager participated at a Conference on “Linking Reproductive Health, Family Planning and HIV/AIDS in Africa” held in Addis Ababa, Ethiopia (October 9-10, 2006) and made a presentation titled, “Integrating reproductive health with HIV/AIDS services in Kenya: A Ministry of Health perspective”.

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| Funding Source(s): | USAID - US Agency for International Development/USAID: Field Support |
| Total Approved Budget: | \$ 362,500 |

Worldwide: Research Capacity Assessment (FCO 113137/993501)

Objective(s): 1) To assess FHI country office capacity to conduct research; 2) to assist the country office in establishing its research priorities and in developing a research agenda; 3) to determine whether existing datasets can address public health research needs; 4) to identify areas of need for research capacity building; and 5) to develop a plan to increase research capacity in these country offices.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- During this reporting period, there has been a great deal of progress with this initiative:
- A Steering Committee was formed to guide the overall process, and refinements in the proposed methodology were completed.

- Criteria were established and a list of high priority countries was selected for the planned assessments.
- In November 2007, a team of FHI staff traveled to Indonesia to conduct the first in a planned series of research capacity assessments within FHI's network of country offices. This assessment was largely paid for with non-USAID funds.
- Also, a team traveled to Rwanda to conduct the second assessment.
- A final report is now available for the Indonesian assessment, and the Rwanda report is being drafted and will be available in early January.

Plans for January 2008 – June 2008

Staff will:

- Lessons learned from the first 2 assessments, in Indonesia and Rwanda will be consolidated.
- The operational plan will be modified as needed.
- A Brown bag presentation, with video link to Arlington, will be held for FHI staff to review findings from Indonesia and Rwanda.
- The next set of assessments will be initiated in selected countries.
- Research and research capacity strengthening will be initiated as appropriate based on identified priorities.

Funding Source(s):

USAID - US Agency for
International
Development/USAID:
Core

| | | | |
|------------------------|--------|----|---------|
| Total Approved Budget: | 113137 | \$ | 60,715 |
| | 993501 | \$ | 231,758 |
| | | \$ | 292,473 |

Uganda: Needs Assessment for Male Circumcision (FCO 156101/156102)

Objective(s): To describe: 1) the degree of support for male circumcision amongst key political, ethnic, and religious leaders at national and local levels; 2) the acceptability of male circumcision among men and women including in their roles as parents; 3) the themes and issues that should be taken into account in developing messages that will be most appropriate and acceptable for promoting male circumcision as an HIV prevention strategy; 4) mechanisms for the integration of MC into other health programs; and 5) the availability of required human resources and infrastructure at hospitals and Health Center IVs for providing high quality male circumcision services.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In December 2007, the subproject was launched with a national stakeholder meeting held in Kampala with approximately 30 participants. Another meeting was planned but was cancelled due to the Ebola virus outbreak and ensuing cabinet meetings that some key participants were obliged to attend. The purpose of the meeting was to inform participants about the purpose of the study, to gather their input on the study, and to begin to gain buy-in for the study.

Plans for January 2008 – June 2008

- An abstract for the 2008 PEPFAR Implementers' meeting will be submitted in January 2008.
- Thomsen will travel to Kampala to help train approximately 12 research assistants in February 2008.

- Four district workshops with approximately 25 individuals each will be held in four districts of Uganda in February 2008.
- A survey will be conducted with 420 men and women in each of four districts of Uganda in March-April 2008.
- A survey will be conducted with all providers and chief administrators in the hospitals and health center IVs of 4 districts in Uganda in March-April, 2008.
- Approximately 12 focus groups will be conducted in each of 4 districts in Uganda in March-April, 2008.
- Data from all data collection activities will be entered and analyzed by the subgrantee in April-May, 2008.
- Data will be verified by FHI in May 2008.
- Preliminary data will be presented at a regional WHO meeting on situation analyses of Male Circumcision in May 2008.

Findings and Outcomes:

- Activities at the December 11, 2007 stakeholders meeting included an overview of male circumcision (MC) as an HIV preventive method; plans to roll out MC in Uganda; overview of the National Needs Assessment; and a SWOT (strengths, weaknesses, opportunities, threats) analysis. Participants were also involved in a planning session for the next steps for needs assessment, selection of districts for the needs assessment, selection of key informants and district stakeholders. An analysis of a short questionnaire completed by each participant at the end of the meeting indicated that participants gave the study a priority of 7.5 out of 10.

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| Funding Source(s): | | USAID - US Agency for International Development/PEPFAR |
| Total Approved Budget: | 156101 | \$ 200,353 |
| | 156102 | \$ 99,646 |
| | | \$ 300,000 |

Kenya: Building Strategic Information Capacity within NASCOP (FCO 153102)

Objective(s): To strengthen national systems for strategic information and operations research in order to improve reproductive health (including HIV/AIDS) programming, implementation, monitoring, and evaluation. FHI will work with Kenyatta University's School of Health Sciences and the National AIDS and STI Control Programme (NASCOP) to: 1) train four students (3 Master's and 1 PhD) in strategic information collation, analysis and interpretation; and 2) identify key RH/HIV program areas with gaps in strategic information and address these through the students' thesis reports.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In October 2007, a meeting was held with NASCOP to discuss future activities under this subproject.
- In December 2007, a meeting was held with Kenyatta University to discuss future activities under this subproject.
- By December 2007, three of the four students have had their theses approved by committee members and sent for external review.

Plans for January 2008 – June 2008

Staff will:

- Hold a joint planning meeting with NASCOP and KU to reach consensus on the way forward.
- Revise the data for decision making (D4D) training curricula to reflect NASCOP needs.
- Train faculty from KU in the delivery of D4D training to NASCOP employees.

Funding Source(s): USAID - US Agency for International Development/PEPFAR
Total Approved Budget: \$ 214,000

Worldwide: Research Ethics Training Curriculum for Community Representatives (RETC-CR) (FCO 1398/1600/1601/2710/172000)

Objective(s): To provide basic education to community representatives on the essential ethical questions that must be considered when research is being planned and conducted. The Research Ethics Training Curriculum for Community Representatives (RETC-CR) will empower community representatives to have meaningful participation in the research process. In Year 2 of the CRTU, this subproject was expanded to include production of the 2nd Edition of the Research Ethics Training Curriculum (RETC).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In December 2007, authors and external reviewers of the RETC 2nd Edition completed the review of the final draft of the curriculum.

Plans for January 2008 – June 2008

- The final draft of the RETC 2nd Edition will be sent to the editor for final review.
- FHI staff from the IT department will start working on the development of the CD-ROM and Web versions of the RETC 2nd Edition.

Findings and Outcomes:

- In March 2005, the RETC-CR received the 2004-2005 Distinguished Award of the Society for Technical Communication (STC), which is the highest award of this society. It also received the Merit Award at the STC International competition.
- In December 2005, the RETC-CR received the Best Practice Award for Excellence in Human Research Protection from the Health Improvement Institute. This annual award is given for demonstrated excellence in protecting and promoting the well-being of people who participate in research.

Funding Source(s): Mellon Foundation;
 USAID - US Agency for International Development/USAID: IAA

| | | | |
|-------------------------------|---------------|----|----------------|
| Total Approved Budget: | 1600 | | N/A |
| | 1398 | | N/A |
| | 1601 | \$ | 7,514 |
| | 2710 | \$ | 50,000 |
| | 172000 | \$ | 200,000 |
| | | \$ | <u>257,514</u> |

TECHNICAL SUPPORT

FHI/NC subprojects fully or partially funded by USAID's CRTU Agreement:

- USA: Coordination and Statistical Support of CONRAD Activities (FCO 112100)
- Switzerland: WHO Technical Assistance - Sarah Johnson (FCO 119505)
- USA: Cost-Effectiveness Analysis of Assisted Reproductive Technology (FCO 174001)
- USA: Regulatory Affairs and Quality Assurance for the CRTU (FCO 119200)

USA: Coordination and Statistical Support of CONRAD Activities (FCO 112100)

Objective(s): To provide general management and statistical support of CONRAD-sponsored activities that are supported by FHI staff.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- FHI and CONRAD held Quarterly Meetings on August 7, 2007, at FHI, and on December 13, 2007, at CONRAD to discuss the status of current collaborative activities and to plan for new ones.
- FHI staff provided assistance with the manuscript for the PATH WC study (study 9857/FCO 112102) as requested by CONRAD (any further manuscript support for this work will be provided under FCO 12078).
- FHI staff provided consultations, at CONRAD's request, for sample size calculations and statistical input regarding non-collaborative manuscript reviews.
- A summary of technical reports of the collaborative activities were prepared, as requested, for FHI senior management

Plans for January 2008 – June 2008

- FHI staff will provide general coordination and oversight for the approximately 20 subprojects that are conducted via the FHI-CONRAD collaboration.
- FHI and CONRAD will conduct Quarterly Meetings (two at each headquarters) to discuss the status of current collaborative activities and plan for new ones.
- The collaborative SharePoint site, accessed by both FHI and CONRAD, will be maintained.
- A summary of technical reports of the collaborative activities will be prepared and provided, as requested, by FHI senior management.
- Monthly summary financial reports of the FCOs under this collaboration will be produced and shared with CONRAD.
- FHI will respond to requests from CONRAD for statistical support of USAID-funded work that is not covered by established FCOs.
- FHI and CONRAD staff will consult on the development of their respective workplans to be submitted to USAID.

Funding Source(s): USAID - US Agency for
International
Development/USAID: Core
Total Approved Budget: \$ Annually Approved

Switzerland: WHO Technical Assistance - Sarah Johnson (FCO 119505)

Objective(s): To facilitate the development of evidence-based family planning guidance in the WHO Department of Reproductive Health and Research (RHR).

Activities, Accomplishments, and Problems—July 2007 - December 2007

- As of July 2007, Johnson had completed the following list of additional activities:

Global Handbook for Family Planning Providers:

- Johnson orchestrated organizational endorsements and obtained commitments to dissemination from TA and health professionals' organizations.
- With IBP members and other partner organizations, she organized development of supporting tools and complementary materials including a training package.

Integration tool(s) for family planning and HIV:

- Johnson organized and led WHO collaboration with partners on adaptation of the Decision-Making Tool for Family Planning Clients and Providers for high HIV prevalence areas.

Development of Guidelines:

- Johnson initiated, with partners, the development of the Managerial and Service Delivery Guidelines, as funding and staffing allow.
- She convened a meeting of the Guidelines Steering Group to review new evidence from the CIRE System.
- She participated in guiding the ongoing development of the CIRE system.

Findings and Outcomes:

- Sarah Johnson performed all job functions as outlined above. Final payment on the contract was issued at the end of July 2007. "Family Planning: A Global Handbook for Providers" was published in 2007 by WHO and Johns Hopkins Bloomberg School of Public Health, with acknowledgement to Sara Johnson for her primary role as one of the editors of this publication.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: \$ 171,212

USA: Cost-Effectiveness Analysis of Assisted Reproductive Technology (FCO 174001)

Objective(s): To model the costs and outcomes of assisted reproductive technologies as a function of the number of embryos transferred.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- In October 2007, data was received from the CDC. The data was processed and cleaned in December 2007.

Plans for January 2008 – June 2008

- Probability and cost data will be combined to assess the relative cost effectiveness of alternative strategies.
- Results of these analyses will be submitted to CDC for review and a report and manuscript will be finalized.

Funding Source(s): USAID - US Agency for
International
Development/USAID: IAA
Total Approved Budget: \$ 25,739

**USA: Regulatory Affairs and Quality Assurance for the CRTU
(FCO 119200)**

Objective(s): To provide Regulatory Affairs and Quality Assurance support to CRTU subprojects.

Activities, Accomplishments, and Problems—July 2007 - December 2007

- Routine regulatory and quality assurance support was provided to CRTU studies. Development of RAQA tools and tracking systems to increase efficiency across CRTU studies globally. A number of RAQA activities are funded and reported as part of the specific studies.

Plans for January 2008 – June 2008

- Technical assistance to the CRTU Programs, in particular advising on the regulatory and quality assurance strategy for new CRTU-funded subprojects, will continue.

Funding Source(s): USAID - US Agency for
International
Development/USAID:
Core
Total Approved Budget: \$ 100,000



FINANCIAL INFORMATION APPENDIX A

BUDGET & EXPENDITURE INFORMATION BY STRATEGY

July 2007 – December 2007

CRTU Year Three Workplan (July 2007-June 2008)
EXPENDITURES REPORT (July 2007- Dec. 2007)

| Group | FCO | Title | Fund Source | Original | LOSP | Actual | Remaining | (Loaded) | Projected | |
|---|--------|---|-------------|-----------------|------------|--------------|--------------|-----------------|------------|--|
| | | | | Yr. 3 Budget | Budget | Expenditures | Need | Revised | End Date | |
| | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | | |
| Barrier Methods | | | | | | | | | | |
| BBR | 116104 | Formative Research to Recruit for True Efficacy Trials | Core | 170,561 | 297,359 | 90,893 | 56,663 | 147,556 | Aug. 2008 | |
| | 116112 | Sub: SA: Formative Research to Recruit for True Efficacy Trials | | | | | | | | |
| BBR | 116107 | Sub: Developing Strategies to Recruit for True Efficacy Trials | Core | 84,161 | 94,260 | 25 | 63,120 | 63,145 | Aug. 2008 | |
| BBR | 112101 | Pivotal Effectiveness Study of PATH SILCS Diaphragm | Core | 473,241 | 1,313,190 | 89,467 | 170,490 | 259,957 | April 2010 | |
| BBR | 112117 | Structural Integrity of the FC2 Female Condom | Core | 35,795 | 43,864 | (210) | 33,655 | 33,445 | June 2008 | |
| BBR | 172004 | ACASI vs FTF - A Randomized Comparison using PSA | CDC/IAA | 108,330 | 10,903 | 101,618 | 75,744 | 177,362 | June 2008 | |
| | 172007 | | | | 88,097 | | | | | |
| BBR | 132117 | ACASI vs FTF - A Randomized Comparison using PSA | Microb. | 12,000 | 64,170 | 11,575 | 425 | 12,000 | Dec 2008 | |
| BBR | 172006 | Immunological Markers of Chlamydial Infection (IMCI) | CDC/IAA | 107,486 | 127,271 | 17,394 | 68,436 | 85,830 | June 2009 | |
| BBR | 172008 | Sub UNC: Rapid PSA Testing - Next Steps | CDC/IAA | 50,000 | 50,000 | 868 | 50,118 | 50,986 | June 2008 | |
| | 172009 | | | | | | | | | |
| HSR | 114100 | Evaluating the "Young Men as Equal Partners" Project | Core | - | 644,193 | (1,650) | - | (1,650) | Aug. 2008 | |
| | 114122 | | | | | | | | | |
| | 114123 | | | | | | | | | |
| HSR | 114120 | Improving DP Counseling for Youth: Formative Research | Core | 167,040 | 320,142 | 46,381 | 114,076 | 160,457 | Dec. 2008 | |
| BBR | 116113 | Evaluation of the SPW Model of Peer Education - Zambia | Core | 247,449 | 279,963 | 9,796 | 176,905 | 186,701 | Sept. 2008 | |
| BBR | 132114 | Next Steps for Clinical Research of New FCs | Microb. | 345,000 | 876,000 | 169,741 | 175,259 | 345,000 | Feb 2009 | |
| | 132142 | | | | | | | | | |
| BBR | 132115 | Female Condom Reuse: Assessing the Efficacy of Dish Detergent | Microb. | - | 241,000 | - | - | - | TBD | |
| HSR | 144102 | Improving FP Counseling of Clients | FS | 188,619 | 200,000 | 57,961 | 120,692 | 178,653 | June 2008 | |
| PQC | 118100 | International Standards Development (ISO, ASTM, ANSI, etc.) | CSL-Core | 77,464 | Annual | 40,104 | 37,360 | 77,464 | April 2010 | |
| PQC | 148100 | Production Surveillance of Condoms, Domestic and Off-shore | CSL-FS | 1,378,849 | Annual | 638,441 | 740,408 | 1,378,849 | April 2010 | |
| PQC | 148104 | Production Surveillance of Condoms - Bangkok | CSL-FS | 248,348 | Annual | 98,642 | 149,706 | 248,348 | April 2010 | |
| ARD | 153110 | ABC Approach in Institutes of Higher Learning - Kenya | PEPFAR | 113,304 | 640,000 | 57,160 | 56,144 | 113,304 | Sept. 2008 | |
| | 153111 | | | | | | | | | |
| Cross-cutting: Technical Leadership | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | | |
| BBR | 116103 | BBR Technical Leadership | Core | 555,421 | Annual | 158,986 | 229,751 | 388,737 | April 2010 | |
| BIOS | 119100 | BIOS Technical Leadership | Core | 231,229 | Annual | 63,107 | 168,122 | 231,229 | April 2010 | |
| CRD | 112120 | CRD Technical Leadership | Core | - | Closed | 79,752 | - | 79,752 | Dec 2008 | |
| HSR | 114106 | HSR Technical Leadership | Core | 529,953 | Annual | 157,939 | 335,516 | 493,455 | April 2010 | |
| Cross-cutting: Enhanced Country Programs | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | | |
| ARD | 113117 | Enhanced Country Program Implementation | Core | 594,381 | 10,406,331 | 241,158 | 303,223 | 544,381 | April 2010 | |
| ARD | 113122 | Kenya Enhanced Country Program Implementation | Core | 130,843 | | 52,185 | 121,315 | 173,500 | April 2010 | |
| ARD | 113125 | Uganda Enhanced Country Program Implementation | Core | 230,920 | | 39,071 | 150,232 | 189,303 | April 2010 | |
| ARD | 113129 | Madagascar Enhanced Country Program Implementation | Core | 168,885 | | 72,853 | 96,032 | 168,885 | April 2010 | |
| ARD | 113132 | India Enhanced Country Program Implementation | Core | 118,423 | | 20,709 | 77,714 | 98,423 | April 2010 | |
| ARD | 133100 | South Africa Enhanced Country Program Implementation | Microb. | 120,000 | Annual | 7,608 | 112,392 | 120,000 | April 2010 | |
| Cross-cutting: Research Utilization | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | | |
| BBR | 112110 | Development of Guidelines for Contraceptive Users | Core | 60,773 | 213,047 | 12,193 | 65,993 | 78,186 | Aug. 2008 | |
| BBR | 172003 | Development of Guidelines for Contraceptive Users | NIH | 221,580 | 750,000 | 221,973 | - | 221,973 | Aug. 2008 | |
| BBR | 112112 | Cochrane Fertility Review Group | Core | 166,065 | Annual | 15,920 | 150,145 | 166,065 | April 2010 | |
| BBR | 172002 | Cochrane Fertility Review Group | NIH | 166,021 | Annual | 15,054 | 150,967 | 166,021 | April 2010 | |
| ARD | 113113 | CRTU Network of Champions | Core | 173,622 | 304,780 | 28,417 | 110,205 | 138,622 | June 2009 | |
| ARD | 113114 | Research to Practice Leadership | Core | 500,000 | 1,494,019 | 316,667 | 283,333 | 600,000 | April 2010 | |
| ARD | 113115 | USAID Best Practices Package: Development and M&E | Core | 50,465 | 179,282 | 46,911 | 3,554 | 50,465 | June 2008 | |
| ARD | 123101 | USAID Best Practices Package: Development and M&E | VC | 77,717 | 135,600 | 14,367 | 63,350 | 77,717 | June 2008 | |

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| Group | FCO | Title | Fund Source | Original | | Actual Expenditures | Remaining Need | (Loaded) | |
|---|--------|--|-------------|-----------------|-------------|---------------------|----------------|-----------------|--------------------|
| | | | | Yr. 3 Budget | LOSP Budget | | | Yr. 3 Budget | Projected End Date |
| ARD | 123103 | USAID Best Practices: MAQ Funds | GLP | 48,521 | 75,000 | (14,808) | 63,329 | 48,521 | June 2008 |
| ARD | 113116 | IBP Consortium | Core | 35,989 | 145,681 | 12,467 | 26,795 | 39,262 | June 2009 |
| ARD | 113118 | CRTU Knowledge Management | Core | 690,831 | 2,959,885 | 314,647 | 351,184 | 665,831 | April 2010 |
| ARD | 113128 | Technical Assistance to Develop a Standardized FP Curriculum | Core | 100,154 | 100,154 | 7,785 | 92,369 | 100,154 | April 2010 |
| ARD | 113130 | Scaling Up - Building Field Capacity | Core | 43,300 | 85,306 | 7,161 | - | 7,161 | June 2008 |
| ARD | 113134 | Advancing the Application of FP/RH Best Practices in WHO SPP Countries | Core | 141,798 | 99668 | 62,204 | 79,595 | 141,799 | June 2009 |
| | 113140 | | | | 143332 | | | | |
| ARD | 113138 | Promoting Adoption of FP/RH Best Practices in Child Survival | Core | - | 70,000 | 7,465 | 7,465 | 14,930 | TBD |
| Cross-cutting: General | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | |
| ARD | 113133 | Technical Assistance to Improve FP Uptake | Core | 230,000 | 230,000 | 41,564 | 188,436 | 230,000 | June 2009 |
| ARD | 113137 | Research Capacity Assessments | Core | 60,715 | 60,715 | 473 | 60,242 | 60,715 | June 2008 |
| EXO | 119501 | CRTU Monitoring and Evaluation | Core | 312,401 | Annual | 102,201 | 234,525 | 336,726 | April 2010 |
| ARD | 143103 | Kenya DRHCD Follow-on | FS | 246,921 | 362,500 | 38,349 | 144,124 | 182,473 | Sept. 2008 |
| ARD | 153102 | Building Strategic Information Capacity within NASCOP in Kenya | PEPFAR | 376,229 | 437,000 | 1,926 | 293,371 | 295,297 | Sept. 2008 |
| BBR | 156101 | Needs Assessment for Male Circumcision | PEPFAR | 200,353 | 300,000 | 16,603 | 283,397 | 300,000 | Jun 2009 |
| | 156102 | | | | | | | | |
| OIRE | 172000 | Research Ethics Training Curriculum for Community Representatives | NIH | 49,795 | 200,000 | 8,068 | 41,985 | 50,053 | June 2008 |
| Cross-cutting: Commodities, Securities and Logistics | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | |
| PQC | 118101 | Technical Leadership: Collab. w/Multi/Bi-Lateral Procurement Agencies | CSL-Core | 84,060 | Annual | 62,259 | 21,801 | 84,060 | April 2010 |
| PQC | 118102 | Technical Assistance to Field Programs | CSL-Core | 182,186 | Annual | 59,726 | 122,460 | 182,186 | April 2010 |
| PQC | 118103 | Technical Oversight Committee | CSL-Core | 93,538 | Annual | 24,917 | 68,621 | 93,538 | April 2010 |
| PQC | 118104 | Inter-Laboratory Trials | CSL-Core | 39,399 | Annual | 31,123 | 8,276 | 39,399 | April 2010 |
| PQC | 148101 | Production Surveillance – Hormonals and LAPMs | CSL-FS | 176,368 | Annual | 30,809 | 145,559 | 176,368 | April 2010 |
| HIV and Contraceptive Services | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | |
| BBR | 112127 | Prospective Evaluation of Contraceptive Dynamics in Women | Core | 35,544 | 100,846 | 36,387 | 31,233 | 67,620 | Aug. 2008 |
| BBR | 112136 | Safety of Implant Use Among Women on ARVs | Core | 84,564 | 220,779 | 38,365 | 51,537 | 89,902 | Dec. 2009 |
| | 112141 | | | | | | | | |
| BBR | 112139 | Do ARVs Affect the Efficacy of COCs | Core | 60,000 | 476,807 | 1,863 | 40,082 | 41,945 | April 2010 |
| ARD | 113104 | Providing Global Leadership-FP-HIV Integration Efforts | Core | 159,127 | 360,721 | 55,085 | 148,673 | 203,758 | April 2010 |
| ARD | 123100 | Providing Global Leadership-FP-HIV Integration Efforts | GLP | 55,549 | 175,000 | 3,588 | 32,843 | 36,431 | June 2008 |
| ARD | 113106 | Tool Kit to Increase Access to Contraception | Core | 60,372 | 360,972 | 60,945 | 18,606 | 79,551 | June 2008 |
| ARD | 113126 | Scale-up & Global Dissem. of Kenya's FP/VCT Integration Package | Core | 95,646 | 146,001 | 26,102 | 43,798 | 69,900 | June 2008 |
| ARD | 123102 | Scale-up & Global Dissem. of Kenya's FP/VCT Integration Package | GLP | 73,274 | 88,628 | 4,120 | 69,454 | 73,574 | June 2008 |
| ARD | 113131 | FP in Context of HIV: Supporting Evidenced-based Practices | Core | 307,105 | 470,858 | 59,090 | 115,745 | 174,835 | Dec. 2009 |
| ARD | 113127 | FP & HIV Service Integration: SA Network of Champions | Core | 21,857 | 129,005 | 29,795 | 16,906 | 46,701 | June 2008 |
| ARD | 153130 | FP & HIV Service Integration: SA Network of Champions | PEPFAR | | 250,000 | | | | |
| HSR | 114104 | Improving Use of FP in VCT in Kenya | Core | 290,565 | 446,239 | 18,535 | 126,815 | 145,350 | April 2010 |
| HSR | 153103 | Improving Use of FP in VCT in Kenya | PEPFAR | | | | | | |
| ARD | 153104 | Enhancing PMTCT Performance Improvement in South Africa | PEPFAR | 306,442 | 425,000 | 50,885 | 127,560 | 178,445 | Sept. 2009 |
| ARD | 153105 | Strengthening Linkages between FP, HBC and ARV Services | PEPFAR | 283,325 | 1,034,791 | 204,425 | 78,900 | 283,325 | Sept. 2008 |
| | 153112 | SAG: PSA | | | | | | | |
| | 153113 | SAG: SACC | | | | | | | |
| ARD | 153114 | SAG: Integration FP/Comprehensive HIV Care & Prevention Program | PEPFAR | 659,534 | 340311 | 541,961 | 19,001 | 560,962 | Sept. 2008 |
| | 153115 | Palliative Care | | | 314608 | | | | |
| | 153116 | SAG: OVC Support for South/South East Dept | | | 100000 | | | | |
| | 153117 | SAG: NPKRK | | | 33841 | | | | |
| | 153118 | SAG: MHDR | | | 76241 | | | | |

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| Group | FCO | Title | Fund Source | Original | LOSP | Actual | Remaining | (Loaded) | Projected |
|------------------|--------|--|-------------|------------------------|---------------------|---------------------|------------------------|--------------|------------|
| | | | | Yr. 3 Budget | Budget | Expenditures | Need | Yr. 3 Budget | End Date |
| ARD | 153122 | SA: Integrated Community Palliative Care Project (ICPC) (Parent) | PEPFAR | 593,703 | 1,180,000 | 663,785 | 78,344 | 742,129 | Sept. 2008 |
| | 153123 | | | | | | | | |
| | 153124 | | | | | | | | |
| | 153125 | | | | | | | | |
| | 153126 | | | | | | | | |
| | 153127 | | | | | | | | |
| ARD | 153128 | Expansion of Strengthen Linkages Between HBC, FP, ARV | PEPFAR | 300,000 | 434,578 | - | 300,000 | 300,000 | Sept 2009 |
| | 153129 | | | | 765,426 | | | | |
| HSR | 114103 | Developing Interventions to Serve the FP Needs of PMTCT Clients-SA | Core | 223,066 | 254,357 | 26,524 | 134,329 | 160,853 | June 2009 |
| | 114127 | | | | | | | | |
| HSR | 114130 | Youth Integrated FP and HIV Service Delivery Models | Core | 80,000 | 264,101 | 6,592 | 30,342 | 36,934 | June 2009 |
| HSR | 114136 | Facilitated Referrals to Promote Contraceptive Access Among HIV+ Women | Core | - | 376,729 | - | 75,000 | 75,000 | April 2010 |
| HSR | 114114 | Integration of FP into Comprehensive Care Centers | Core | 202,371 | 234,490 | 26,713 | 53,341 | 80,054 | June 2009 |
| HSR | 124104 | Integration of FP into Comprehensive Care Centers | GLP | 76,004 | 134,000 | 14,870 | 67,482 | 82,352 | June 2009 |
| HSR | 124100 | Examining the FP Needs of Women Targeted for HIV Services | GLP | 185,463 | 269,302 | 90,850 | 93,563 | 184,413 | June 2008 |
| | 124105 | | | | | | | | |
| HSR | 124102 | Assessing Provision of FP and RH Services in Commercial Sector | GLP | 44,785 | 114,599 | (113) | 25,113 | 25,000 | June 2009 |
| | TBD | | (Core) | | | | | | |
| HSR | 154100 | Risk of HIV and Feasibility Research Among House Girls in Nairobi | PEPFAR | 236,127 | 482,000 | 94,341 | 105,659 | 200,000 | June 2009 |
| | 154102 | | | | | | | | |
| BBR | 172005 | Dissemination of HC-HIV Study results-Multiple Countries | NIH | 14,750 | 33,240 | 13,633 | 1,117 | 14,750 | Dec. 2007 |
| BBR | 156100 | Understanding Fertility Knowledge & Desire of Women on ART | PEPFAR | 200,002 | 200,000 | 58,884 | 100,476 | 159,360 | March 2009 |
| ARD | 153108 | SAG: CPDEP - Haiti | PEPFAR | 92,382 | 72,001 | 130,133 | 1,021 | 131,154 | Dec. 2007 |
| | 153109 | FP-VCT Extension Project in Haiti | | | 177,999 | | | | |
| | 153120 | Sub with DCCH | | | 56,846 | | | | |
| ARD | 143110 | Support to the MOH for Increased Access to FP in Uganda | FS | - | 200,000 | - | 100,000 | 100,000 | Dec. 2008 |
| ARD | 143105 | Increase FP Uptake in Designated Locations in Haiti | FS | 52,834 | 200,000 | (7,354) | 60,188 | 52,834 | Sept. 2007 |
| ARD | 143106 | Integration of FP Services into VCT Sites in the DRC | FS | 500,000 | 1,164,923 | 43,973 | 456,027 | 500,000 | Dec. 2009 |
| HSR | 144101 | FP/PMTCT Integration Assessment | FS | 53,979 | 49,958 | 3,622 | 42,847 | 46,469 | June 2008 |
| HSR | 154101 | FP/PMTCT Integration Assessment | PEPFAR | 197,695 | 199,436 | 28,532 | 149,472 | 178,004 | June 2008 |
| HSR | 114124 | Country Assessments: Documenting Promising FP/HIV Models | Core | 179,409 | 280,049 | 405,289 | - | 405,289 | June 2008 |
| | 114135 | | | | 69,951 | | | | |
| HSR | 124106 | Country Assessments: Documenting Promising FP/HIV Models | GLP | - | 300,000 | 3,271 | 441,804 | 445,075 | Dec. 2008 |
| | 124107 | Sub to: Progressus: Country Assessments: FP-HIV Integration Models | (Core) | | 603,73 | | | | |
| | 124108 | Sub to: MACRO: Country Assessments: FP-HIV Integration Models | | | 157,239 | | | | |
| HSR | 114116 | Increasing Access to Postpartum FP Services - Nigeria | Core | 152,451 | 190,104 | 72,936 | 75,098 | 148,034 | June 2008 |
| | 114132 | | | | | | | | |
| HSR | 114115 | FP-VCT Integration in Tanzania | Core | 183,627 | 329,716 | 37,908 | 106,264 | 144,172 | April 2010 |
| BBR | 112138 | HC and HIV Acquisition Analysis of the Carraguard Dataset | Core | 0 | 0 | 3,214 | - | 3,214 | |
| BBR | 132129 | HC and HIV Acquisition Analysis of the Carraguard Dataset | Microb. | 90,000 | 166,405 | 646 | 89,354 | 90,000 | Nov 2008 |
| Hormonals | | | | July 07-June 08 | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | | |
| BBR | 116105 | Development & Evaluation of Campaign to Increase Continuation | Core | 159,343 | 336,986 | 63,813 | 84,714 | 148,527 | April 2010 |
| | 116110 | | | | | | | | |
| BBR | 112118 | Continuous vs. Cyclic Use of COC Pills | Core | 110,000 | 576,692 | 84,051 | 95,919 | 179,970 | April 2010 |
| | 112130 | | | | | | | | |

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| Group | FCO | Title | Fund Source | Original Yr. 3 Budget | LOSP Budget | Actual Expenditures | Remaining Need | (Loaded) | Projected End Date |
|--|--------|---|-------------|-----------------------|-------------|---------------------|----------------|----------------------|--------------------|
| | | | | | | | | Revised Yr. 3 Budget | |
| BBR | 112119 | Feasibility of RCT to Evaluate the Effect of DMPA on STI Risk | Core | 38,347 | 188,784 | 22,148 | 21,883 | 44,031 | Feb. 2008 |
| | 112132 | | | | | | | | |
| | 112133 | | | | | | | | |
| | 112134 | | | | | | | | |
| ARD | 113107 | Pregnancy Provider Checklists and Reference Guide 2005 | Core | 25,547 | 150,680 | 14,378 | 35,577 | 49,955 | June 2008 |
| ARD | 113108 | Promoting DMPA Provision by Community Health Providers | Core | 30,204 | 301,361 | 62,938 | 223,776 | 286,714 | June 2009 |
| ARD | 113135 | Expanding Access to Hormonals via Drug Outlets in Tanzania | Core | 233,995 | 350,000 | 76,712 | 38,288 | 115,000 | June 2009 |
| HSR | 114102 | Improving Continuation Rates for Injectable Contraceptives | Core | 227,702 | 356,472 | 116,054 | 81,263 | 197,317 | June 2009 |
| | 114126 | | | | | | | | |
| HSR | 114111 | Improving Service Delivery of CBD of DMPA in Uganda | Core | 100,434 | 197,778 | 87,627 | 39,169 | 126,796 | June 2008 |
| | 114129 | | | | | | | | |
| HSR | 114113 | Assessment of Late DMPA Client Management | Core | 187,703 | 236,768 | 27,703 | 133,251 | 160,954 | Aug. 2008 |
| | 114137 | | | | | | | | |
| HSR | 114121 | Introductory Trial of CBD of DMPA in Rural Madagascar | Core | 75,596 | 133,827 | 1,690 | 64,664 | 66,354 | Sept. 2008 |
| HSR | 144100 | Introductory Trial of CBD of DMPA in Rural Madagascar | FS | 124,700 | 200,000 | 82,637 | 39,134 | 121,771 | June 2008 |
| | 144103 | | | | | | | | |
| ARD | 143104 | Evidence-based Child Intervention Development in Northern Nigeria | FS | 93,792 | 252,000 | 33,755 | 56,103 | 89,858 | Oct. 2008 |
| | 146001 | | | | | | | | |
| ARD | 143109 | Taking CBD of DMPA to scale in Madagascar | FS | 214,315 | 285,752 | - | 214,315 | 214,315 | Oct. 2008 |
| ARD | 143107 | Taking the Best Practices Package to scale in Madagascar | FS | 235,685 | 314,247 | - | 235,685 | 235,685 | Dec. 2008 |
| ARD | 143108 | Operationalizing National RH Norms & Procedures | FS | 150,000 | 200,000 | - | 150,000 | 150,000 | Oct. 2008 |
| BBR | 112123 | Analyzing Pregnancy Rates based on the Injection Interval of DMPA | Core | 36,029 | 61,098 | 13,599 | 25,110 | 38,709 | June 2008 |
| HSR | 114128 | Increasing FP Uptake Among PP Women-Testing Supply & Demand | Core | 96,822 | 375,000 | 52,538 | 95,628 | 148,166 | June 2009 |
| BBR | 112137 | Pregnancy Testing: Depo Now in Africa | Core | 60,204 | | 30,022 | 52,422 | 82,444 | June 2009 |
| HSR | 114131 | Drug Shops as Sales Outlets for Injectable Contraception | Core | 63,982 | 121,000 | 18,183 | 63,715 | 81,898 | June 2009 |
| HSR | 114133 | A DHS Analysis of Increased Injectable Use on Contracept. Use (On Hold) | Core | - | 110,000 | - | - | - | April 2010 |
| HSR | 114134 | Taking CBD of DMPA to Scale: Process, Cost and Outcome Evaluation | Core | - | 266,456 | 3,638 | 43,146 | 46,784 | March 2009 |
| Long-Acting and Permanent Methods | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | |
| BBR | 116100 | Vasectomy Accept. Among Clients/Providers in Uttar Pradesh | Core | 153,916 | 325,816 | 33,951 | 116,204 | 150,155 | Aug. 2008 |
| | 116111 | Sub: Vasectomy Accept. | | | | | | | |
| BBR | 116108 | Using Male Motivators to Increase FP Use - Malawi | Core | 236,694 | 229,247 | 32,619 | 142,488 | 175,107 | Aug. 2008 |
| | 116109 | Sub | | | | | | | |
| BBR | 112107 | USAID Fin. Support to Develop a Female NSS Method w/Erythromycin | Core | 58,416 | 351,445 | 25,170 | 33,246 | 58,416 | April 2010 |
| BBR | 112124 | Assessing Implant Provision in Various Service Delivery Settings | Core | 182,140 | 384,592 | 42,927 | 98,843 | 141,770 | TBD |
| BBR | 112125 | Collaborative Research on Implants | Core | 243,777 | 391,098 | 156,811 | 123,213 | 280,024 | April 2010 |
| | 112135 | | | | | | | | |
| BBR | 112129 | Improved Counseling on Implants to Reduce Unintended Pregnancy | Core | 100,000 | 285,996 | 37,929 | 108,243 | 146,172 | Dec. 2009 |
| | 112140 | | | 75,000 | | | | | |
| ARD | 113109 | Global Advocacy and Stakeholder Engagement for LAPMs | Core | 120,001 | 240,438 | 67,321 | 52,680 | 120,001 | Dec. 2008 |
| ARD | 113110 | Repositioning FP-Revitalizing LAPMs in Uganda | Core | 22,000 | 239,351 | 9,429 | 56,625 | 66,054 | June 2008 |
| ARD | 113111 | Kenya IUD Revitalization-Transition Phase and M&E | Core | 137,329 | 300,548 | 88,704 | 48,625 | 137,329 | March 2008 |
| ARD | 113112 | MAQ IUD Subcommittee & IUD Checklist Production & Dissemination | Core | 39,614 | 282,515 | 50,209 | 24,739 | 74,948 | June 2008 |
| ARD | 113136 | IUD Revitalization in India | Core | 180,000 | 450,000 | 62,283 | 107,717 | 170,000 | June 2009 |
| BBR | 112128 | RCT of Three Vasectomy Techniques | Core | 173,961 | 161,342 | 56,807 | 72,298 | 129,105 | April 2010 |
| Microbicides | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | |
| BBR | 112103 | Safety & Feasibility of the Diaphragm Used with Acidform | Core | 27,191 | 180,534 | 8,244 | - | 8,244 | June 2008 |

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| Group | FCO | Title | Fund Source | Original Yr. 3 Budget | LOSP Budget | Actual Expenditures | Remaining Need | (Loaded) | Projected End Date |
|-------|--------|--|-------------|-----------------------|-------------|---------------------|----------------|----------------------|--------------------|
| | | | | | | | | Revised Yr. 3 Budget | |
| BBR | 132100 | CS: Phase III HIV study, Nigeria, #2266 | Microb. | 789,000 | 6,226,000 | 477,036 | 311,964 | 789,000 | June 2009 |
| | 132122 | | | | | | | | |
| | 132123 | | | | | | | | |
| | 132124 | | | | | | | | |
| | 132125 | | | | | | | | |
| | 132143 | | | | | | | | |
| BBR | 132104 | SAVVY: Phase III HIV study, #2277-2278 | Microb. | 88,000 | 5,558,000 | 97,798 | (9,798) | 88,000 | June 2009 |
| | | 132105 Note: FCOs included in this group include 132121, 132126, 132127, 132128, et al. 132139, 132140, 132141, 132144 | | | | | | | |
| BBR | 132108 | CAPRISA Phase IIB Trial - TDF Gel | Microb. | 2,586,000 | 12,771,000 | 715,414 | 1,870,586 | 2,586,000 | April 2010 |
| | 132119 | | | | | | | | |
| | 132120 | | | | | | | | |
| BBR | 132101 | Independent monitoring, #2285 | Microb. | 25,000 | Annual | - | 25,000 | 25,000 | June 2009 |
| BIOS | 139101 | Statistical support-microbicides, BIOS, #9113 | Microb. | 76,000 | Annual | 21,464 | 54,536 | 76,000 | April 2010 |
| BBR | 136100 | Microbicides in India, acceptab, BASS (for HPTN), #9386 | Microb. | 235,000 | 613,000 | 104,155 | 130,845 | 235,000 | Dec 2009 |
| | 136102 | | | | | | | | |
| BBR | 132103 | New Delivery Device for Vaginal Microbicides | Microb. | 179,000 | 25,000 | 137,321 | 41,679 | 179,000 | June 2009 |
| BBR | 132113 | Site Identification, Assessment and Development | Microb. | 2,707,000 | 13,679,000 | 1,286,732 | 1,420,268 | 2,707,000 | April 2010 |
| | | 132118 Note: FCOs included in this group include 132145, 132152, 136114, 136116 | | | | | | | |
| BBR | 132109 | CONRAD - Assessment of Soluble and Cellular Markers of Inflammation after Vaginal Product Use | Microb. | 92,000 | 218,000 | 41,818 | 50,182 | 92,000 | June 2009 |
| BBR | 132111 | CONRAD UC-781 Male Tolerance | Microb. | 96,000 | 132,000 | 40,472 | 55,528 | 96,000 | Oct 2008 |
| BBR | 132149 | CONRAD Biomarkers of semen exposure | Microb. | 36,000 | 159,000 | 1,185 | 34,815 | 36,000 | March 2009 |
| BBR | 132112 | CONRAD MRI Microbicide Formulation | Microb. | 18,000 | 126,000 | 378 | 17,622 | 18,000 | Dec 2009 |
| BBR | 136101 | Elicitation Tool for Local Lexicon to Explain Difficult IC Terms and Concepts (in partnership with PC) | Microb. | 20,000 | 67,000 | 16 | 19,984 | 20,000 | Dec 2009 |
| BBR | 136104 | Case Control Analysis of M'cide use and HIV infection | Microb. | 117,000 | 529,272 | 67,326 | 49,674 | 117,000 | April 2010 |
| | 136107 | | | | | | | | |
| BBR | 132146 | Phase III Truvada Fem-PrEP Study | Microb. | 3,750,000 | 36,562,613 | 1,461,561 | 2,288,439 | 3,750,000 | Dec 2013 |
| | 136105 | | | | | | | | |
| | 136106 | | | | | | | | |
| | 136108 | | | | | | | | |
| | 136109 | | | | | | | | |
| | 136111 | | | | | | | | |
| | 136112 | | | | | | | | |
| BBR | 133101 | Good Communication Practices for M'cide Studies | Microb. | 112,000 | 336,000 | 8,776 | 103,224 | 112,000 | June 2009 |
| BBR | 132148 | CONRAD: Ph. I Study of Q-2 Vaginal Gel | Microb. | 22,000 | 176,680 | 957 | 21,043 | 22,000 | April 2010 |
| BBR | 132147 | CONRAD UC-781 PK Study | Microb. | 14,000 | 291,000 | 1,767 | 12,233 | 14,000 | Dec 2009 |
| BBR | 136103 | Use of DHS Data for Site ID Recruitment | Microb. | 50,000 | 50,000 | 837 | 49,163 | 50,000 | June 2009 |
| BBR | 136113 | Evaluating Informed Consent Comprehension | Microb. | 33,000 | 330,000 | 6,639 | 26,361 | 33,000 | Dec 2009 |
| ARD | 134000 | Develop Improved Measure of Pregnancy Intentions | Microb. | 150,000 | 300,000 | 1,309 | 148,691 | 150,000 | April 2009 |
| BBR | 136110 | Expert Meeting on Measurement Issues | Microb. | 55,000 | 50,000 | 36,249 | 18,751 | 55,000 | June 2008 |
| BBR | 136115 | Assuring Stakeholder Involvement in New M'cide Studies | Microb. | 25,000 | 354,000 | - | 25,000 | 25,000 | Dec 2009 |
| BBR | 136100 | Sustained Acceptability of Vaginal Microbicides: Male and Female Perspectives | Microb. | | 613,000 | | | | |
| BBR | 136102 | | Microb. | | | | | | |
| GRS | 132109 | Assessment of Soluble and Cellular Markers of Inflammation after Vaginal Product Use | | | 218,000 | | | | |
| GRS | 132101 | Independent Monitoring of CONRAD Collaboration | | | Annual | | | | |

CRTU Year Three Workplan (July 2007-June 2008)
EXPENDITURES REPORT (July 2007- Dec. 2007)

| Group | FCO | Title | Fund Source | Original Yr. 3 Budget | LOSP Budget | Actual Expenditures | Remaining Need | (Loaded) | Projected End Date |
|--|--------|---|-------------|-----------------------|-------------|---------------------|-------------------|----------------------|--------------------|
| | | | | | | | | Revised Yr. 3 Budget | |
| Microbicide Activities with CDC | | | | | | | | | |
| BBR | TBD | Diaphragm+microbicide: Expansion of ongoing clinical study to prevent STD | Microb. | 179,000 | 15,116,000 | - | 179,000 | 179,000 | June 2009 |
| BBR | TBD | Diaphragm plus microbicide: Staff support | Microb. | 163,000 | 544,000 | - | 163,000 | 163,000 | Ongoing |
| BBR | 132110 | Completion of Analysis of Data from the Citric Acid Study | Microb. | - | 35,396 | 6,663 | - | 6,663 | Jan. 2008 |
| Technical Support | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | |
| BBR | 112100 | Coordination of CONRAD Activities | Core | 220,639 | Annual | 107,287 | 120,288 | 227,575 | April 2010 |
| EXO | 119505 | WHO Technical Assistance - Sarah Johnson | Core | 22,767 | 171,212 | 28,610 | - | 28,610 | June 2007 |
| HSR | 174001 | Cost-Effectiveness Analysis of Assisted Reproductive Technology | CDC | 15,607 | 25,739 | (110) | 18,360 | 18,250 | Jan. 2007 |
| RAQA | 119200 | Regulatory Affairs and Quality Assurance | Core | 200,010 | 100,000 | 75,769 | 124,241 | 200,010 | April 2010 |
| Youth | | | | July 07-June 08 | | July-Dec. 07 | Jan.-June 08 | July 07-June 08 | |
| ARD | 143101 | Evaluation of What's New and Cool for Youth Booklet | FS | 242,374 | 390,000 | 37,945 | 122,344 | 160,289 | April 2010 |
| ARD | 125005 | Global Knowledge Management: Youth RH/HIV Prevention | GLP-HIV | 205,119 | 600,000 | 85,382 | 119,737 | 205,119 | April 2010 |
| | TBD | | (Core) | | | | | | |
| ARD | 125003 | Global Knowledge Management: Youth Synthesis Report | GLP-HIV | 281,289 | 600,000 | 16,478 | 264,811 | 281,289 | June 2007 |
| | TBD | | (Core) | | | | | | |
| ARD | 125001 | Global Knowledge Management: Youth RH/HIV Prevention | GLP-Youth | 346,405 | 1,000,000 | 134,825 | 211,580 | 346,405 | April 2010 |
| | TBD | | (Core) | | | | | | |
| ARD | 125002 | Global Knowledge Management: Youth Synthesis Report | GLP-Youth | 194,483 | 600,000 | 38,640 | 155,843 | 194,483 | June 2007 |
| | TBD | | (Core) | | | | | | |
| ARD | 145001 | Capacity Building for Youth RH/HIV & Parenting Curr. Dev. | FS | 64,804 | 150,000 | 33,262 | 31,542 | 64,804 | June 2008 |
| TOTAL (Core Funds) | | | | 12,004,482 | NA | 4,561,044 | 7,146,398 | 11,707,442 | |
| TOTAL (GLP Funds) | | | | 1,510,892 | NA | 377,103 | 1,545,559 | 1,922,662 | |
| TOTAL (Venture Capital Funds) | | | | 77,717 | NA | 14,367 | 63,350 | 77,717 | |
| TOTAL (WHO Support Funds) | | | | - | NA | - | - | - | |
| TOTAL (FS Funds) | | | | 2,168,023 | NA | 324,151 | 1,673,000 | 1,997,151 | |
| TOTAL (PEPFAR Funds) | | | | 3,877,235 | NA | 1,948,426 | 1,705,183 | 3,653,609 | |
| TOTAL (Microbicide Funds) | | | | 12,184,000 | NA | 4,705,443 | 7,485,219 | 12,190,663 | |
| TOTAL (NIH-IAA Funds) | | | | 502,146 | NA | 259,596 | 244,187 | 503,783 | |
| TOTAL (CSL-Core Funds) | | | | 476,647 | NA | 218,129 | 258,518 | 476,647 | |
| TOTAL (CSL-FS Funds) | | | | 1,803,565 | NA | 767,891 | 1,035,674 | 1,803,565 | |
| TOTAL (CDC Funds) | | | | 231,423 | NA | 118,902 | 162,540 | 281,442 | |
| TOTAL | | | | 34,836,130 | NA | 13,295,052 | 21,319,628 | 34,614,680 | |



APPENDIX B

Subprojects by Region/Country and Current FCO(s)

AFRICA

Africa Regional

| | |
|--|--|
| Improving Measurement of Pregnancy Intentions | 134000 |
| Assessing Provision of Family Planning and Reproductive Health Services in Commercial Sector HIV/AIDS Programs | 124102 |
| CRTU Network of Champions | 113113 |
| Do Pregnancy Tests Increase FP Uptake? | 112137/114128 |
| Evaluating Informed Consent Comprehension | 136113 |
| FP in Context of HIV: Supporting Evidence-Based and Promising Practices in Africa | 113131 |
| Formative Research to Determine the Feasibility of Recruitment for "True Efficacy" Trials | 116104/116107/116112 |
| Promoting DMPA Provision by Community Health Providers | 113108 |
| Technical Assistance to Improve Family Planning Uptake | 113133 |
| Truvada Phase III Clinical Trial | 12302/12322/12341/132146 |
| Truvada Study: Site Preparedness | 12331/12332/12333/12334/ 12335/12336/136105/136106/ 136108/136111/136112 |
| Truvada Study: Social, Behavioral & Community Activities | 136109 |

Dem Rep of Congo

| | |
|---|--------|
| Democratic Republic Congo: Integration of FP Services into Counseling and Testing Sites | 143106 |
|---|--------|

Ethiopia

| | |
|---|--|
| Country Assessments: Documenting Promising Family Planning-HIV Integration Models | 114124/114135/124106/124107/ 124108 |
|---|--|

Ghana

| | |
|----------------------|---|
| Savvy® Phase III RCT | 2278/132105/ 132121/132140/132141/132144 |
|----------------------|---|

Kenya

| | |
|--|----------------------|
| Building Strategic Information Capacity within NASCOP | 153102 |
| Development and Evaluation of a Campaign to Increase Continuation of Hormonal Methods | 116105/116110 |
| Evaluating the Young Men as Equal Partners Project | 114100/114122/114123 |
| Examining the Family Planning Needs of Women Traditionally Targeted for HIV/STI Services | 124100/124105 |
| Improved Counseling on Implants to Reduce Unintended Pregnancy | 112129 |
| Improving FP Counseling of Clients | 144102 |
| Improving Use of Family Planning in VCT | 114104/153103 |
| Integration of Family Planning into Comprehensive Care Centers | 114114/124104 |
| Kenya Division of Reproductive Health Capacity Development: Follow-on Activity | 143103 |
| Kenya FP/PMTCT Integration Assessment | 144101/154101 |
| Kenya IUD Revitalization - Transition Phase and M & E | 113111 |

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Kenya (Continued)

| | |
|--|--|
| Kenya: CRTU Management | 113139 |
| Kenya: Enhanced Country Program Implementation | 113122 |
| Kenya: Evaluation of What's New & Cool for Youth" Booklet | 143101 |
| Kenya: Scaling-Up: Building Capacity in the Field | 113130 |
| Risk of HIV and Feasibility Research Among House Girls in Nairobi | 154100/154102 |
| Safety of Implant Use among Women on ARVs | 112136 |
| Scale-up and Global Dissemination of Kenya's FP/VCT Integration Package | 113126/123102 |
| Site Identification, Assessment & Development | 1041/132113/132118/132145/ 132152/136114/136116 |
| Truvada Study: Site Preparedness | 12331/12332/12333/12334/12335/ 12336/136105/136106/136108/ 136111/136112 |
| Understanding Fertility Desires and Demand for Contraceptive Use of Women on Antiretroviral Therapy in Comprehensive Care Centers | 156100 |
| Youth Integrated FP and HIV Service Delivery Models | 114130 |

Madagascar

| | |
|--|-----------------------------|
| Assessment of Late DMPA Client Management | 114113 |
| Diaphragm Plus Microbicide Expansion Study of STDs | 132150/132151 |
| Increasing Access to Postpartum Family Planning Services | 114116/114132 |
| Introductory Trial of Community-based Distribution of DMPA in Rural Madagascar | 114121/124103/144100/144103 |
| Enhanced Country Program | 113129 |
| Scale Up Norms and Procedures | 143108 |
| Taking Best Practices Package to Scale Madagascar | 143107 |
| Taking CBD of DMPA to Scale | 143109 |
| Taking Community-based Distribution of DMPA to Scale: Process, Cost, and Outcome Evaluation | 114134 |

Malawi

| | |
|---|--|
| Truvada Study: Site Preparedness | 12331/12332/12333/12334/12335/ 12336/136105/136106/136108/ 136111/136112 |
| Using Male Educators to increase Family Planning use among young married couples in Malawi | 116108/116109 |

Mozambique

| | |
|---|--|
| Site Identification, Assessment & Development | 1041/132113/132118/132145/ 132152/136114/136116 |
|---|--|

Nigeria

| | |
|--|---------------|
| Advancing the Application of FP/RH Evidence-based Practices in WHO SPP Countries. | 113134/113140 |
| Evidence-based Child Spacing Intervention Development for Northern Nigeria | 143104/146001 |

Nigeria (Continued)

| | |
|---|--|
| Randomized Controlled Trial of Cellulose Sulfate (CS) Gel and HIV | 2266/132100/132122/132123/ 132124/132125/132143 |
| Savvy Phase III RCT | 2277/132104/132126/132127/132128/ 132139 |

South Africa

| | |
|--|---|
| CAPRISA Microbicide Case-Control Study | 136104/136107 |
| Country Assessments: Documenting Promising Family Planning-HIV Integration Models | 114124/114135/124106/ 124107/124108 |
| Developing and Testing Interventions to Serve the Family Planning Needs of PMTCT Clients in South Africa | 114103/114127 |
| Enhancing PMTCT Performance | 153104 |
| Family Planning & HIV Service Integration: South Africa Network of Champions | 113127 |
| Feasibility of Randomized Trial to Evaluate the Effect of DMPA on STI | 112119/112132/ 112133/112134 |
| Formative Research to Determine the Feasibility of Recruitment for " True Efficacy" Trials | 116104/116107/116112 |
| Hormonal Contraception and HIV Acquisition Analysis of the Carraguard Dataset | 112138/132129 |
| Improving Continuation Rates for Injectable Contraceptives | 114102/114126 |
| Next Steps for Clinical Research of New Female Condoms | 112111/132114/132142 |
| RCT of Tenofovir Gel | 132108/132119/132120 |
| Expansion of Strengthen Linkages Between HBC, FP, ARV | 153128/153129 |
| Safety and Feasibility of the Diaphragm Used with ACIDFORM | 2276/112103 |
| Enhanced Country Program Implementation | 113123/133100 |
| Integrated Community Palliative Care Project (ICPC) | 153122/153123/153124/ 153125/153126/153127 |
| Strengthening Linkages between FP, HBC and ARV Services | 153105/153112/153113 |

Tanzania

| | |
|---|---------------|
| Advancing the Application of FP/RH Evidence-based Practices in WHO SPP Countries. | 113134/113140 |
| Expanding Access to Hormonal Contraceptives through Drug Shops | 113135 |
| Facilitated Referrals to Promote FP Access Among HIV-Positive Women at HIV Care and Treatment Centers | 114136 |
| Implementing and Evaluating FP and VCT Services Integration | 114115 |
| Improving Dual Protection Counseling for Youth | 114120 |

Uganda

| | |
|--|---------------|
| Drug Shops and Private Clinics as Sales Outlets for Injectable Contraception | 114131 |
| Hormonal Contraception and HIV Research: Dissemination through Africa Regional and In-Country Meetings | 3703/172005 |
| Improving Service Delivery of CBD of DMPA in Uganda | 114111/114129 |
| Needs Assessment for Male Circumcision | 156101/156102 |
| Repositioning Family Planning: Revitalizing LAPMs | 113110 |
| Enhanced Country Program | 113125 |
| Support to MoH to Increase Access to FP | 143110 |

Zambia

| | |
|---|--------|
| Evaluation of the Students Partnership Worldwide (SPW) Model of Peer Education. | 116113 |
|---|--------|

Appendix B – Subprojects by Region/Country and Current FCO(s)

Zimbabwe

Audio Computer-assisted Self-interviewing (ACASI) vs.
Face-to-face (FTF)

132117/172004/172007

ASIA/NEAR EAST

India

| | |
|---|---------------------|
| DMPA Acceptance Uttar Pradesh | 12067/114119/114125 |
| IUD Revitalization in India | 113136 |
| India: Enhanced Country Program | 113132 |
| RCT of Three Vasectomy Techniques | 112128 |
| Sustained Acceptability of Vaginal Microbicides: Male and Female Perspectives | 9386/136100/136102 |
| Vasectomy Acceptability among Clients and Providers in Uttar Pradesh | 116100/116111 |

Thailand

| | |
|---|--------|
| Production Surveillance: Domestic and Off-shore Condoms (Bangkok) | 148104 |
|---|--------|

Vietnam

| | |
|---|--|
| Site Identification, Assessment & Development | 1041/132113/132118/ 132145/132152/136114/136116 |
|---|--|

EUROPE

Switzerland

| | |
|--|--------|
| WHO Technical Assistance - Sarah Johnson | 119505 |
|--|--------|

LATIN AMERICA

Guatemala

| | |
|--|---------------|
| Continuous vs. Cyclic Use of COC Pills | 112118/112130 |
|--|---------------|

Latin America (Continued)

Haiti

| | |
|---|----------------------|
| FP/VCT Extension Project in Haiti | 153108/153109/153120 |
| FP/VCT Integration in the South Department | 153114 |
| Increase Family Planning Uptake in Designated Locations | 143105 |
| Institutional Strengthening and Capacity Development of Nou Pa Ka Ret Konsa | 153117 |
| Integrating FP into an HIV Care & Prevention Program—Technical Assistance | 153115 |
| OVC Support for South and South East Departments | 153116 |
| Operations Support and Capacity Building for the Community Transit House Jacmel | 153118 |

Jamaica

| | |
|--|---------------------------------|
| A Randomized Trial Using Prostate-Specific Antigen (PSA) Among STI -Infected Patients | 172008/172009 |
| Feasibility of Randomized Trial to Evaluate the Effect of DMPA on STI | 112119/112132/ 112133/112134 |
| Capacity Building for Youth RH/HIV and Parenting Curriculum Development | 145001 |

NORTH AMERICA

USA

| | |
|---|---------------------------|
| Assessment of Soluble and Cellular Markers of Inflammation after Vaginal Product Use | 132109 |
| Audio Computer-assisted Self-interviewing (ACASI) vs. Face-to-face (FTF) | 132117/172004/172007 |
| CRTU: Hormonals Strategy Group | 112121 |
| Cochrane Fertility Regulation Review Group, 2005-2010 | 112112/172002 |
| Coordination and Statistical Support of CONRAD Activities | 112100 |
| Cost-Effectiveness Analysis of Assisted Reproductive Technology | 174001 |
| Female Condom Reuse: Assessing the Efficacy of Dish Detergent in Removing HIV and Chlamydia from the Surfaces of Inoculated FC2 Female Condoms | 132115 |
| Formative Research to Determine the Feasibility of Recruitment for True Efficacy Trials | 116104/116107/116112 |
| MRI Studies of New Microbicide Formulations | 132112 |
| Male Tolerance Study of UC-781 Gel | 132111 |
| New Delivery Device for Vaginal Microbicides | 1844/2290/132103 |
| Phase I Study of the BufferGel Duet's Functional Performance, Safety and Acceptability | 2292/132102 |
| Pivotal Effectiveness Study of the PATH SILCS Diaphragm | 2299/112101 |
| Regulatory Affairs and Quality Assurance for the CRTU | 119200 |
| Safety of Citric Acid | 2295/132110 |
| Site Identification, Assessment & Development | 1041/132113/132118/132145 |
| Statistical Support - Microbicides | 139101 |
| Structural Integrity of the FC2 Female Condom | 112117 |
| USAID Financial Support of Female Nonsurgical Sterilization Development | 2271/112107 |

WORLD

Worldwide

| | |
|--|----------------------------|
| Analyzing Pregnancy Rates Based on the Injection Interval of DMPA | 112123 |
| Enhanced Country Program Implementation | 113117 |
| Prospective Evaluation of Contraceptive Dynamics in Women | 112127 |
| Assessing Implant Provision in Various Service Delivery Settings | 112124 |
| Assuring Stakeholder Involvement at New Microbicide Research Site | 136115 |
| BASS Technical Leadership | 116103 |
| BIOS Management | 119101 |
| BIOS Technical Leadership | 119100 |
| CRD Management | 112000 |
| CRD Technical Leadership | 112120 |
| CRTU Knowledge Management | 113118 |
| CRTU Monitoring and Evaluation | 119501 |
| Cochrane Fertility Regulation Review Group, 2005-2010 | 112112/172002 |
| Collaborative Research on Implants | 112125/112135 |
| Country Assessments: Documenting Promising Family Planning-HIV Integration Models | 114124 |
| Data Management Division Management | 119400 |
| Development of Guidelines for Contraceptive Users | 2706/112110/172003 |
| Expert Meeting on Microbicide Adherence and Its Measurement | 136110 |
| FHI Publications Revenue | 113271 |
| Global Advocacy & Stakeholder Engagement for LAPMs | 113109 |
| Global Knowledge Management: Youth RH/HIV Prevention | 125001/125005 |
| Global: Good Microbicide Communication Practice | 133101 |
| Global: Promoting Adoption of FP/RH Best Practices in Child Survival | 113138 |
| HSR Technical Leadership | 114106 |
| Immunological Markers of Chlamydial Infection (IMCI) | 172006 |
| Implementing Best Practices Consortium | 113116 |
| Independent Monitoring of CONRAD Collaborative Studies | 2285/132101 |
| Inter-Laboratory Trials | 118104 |
| Interactions between Hormonal Contraceptives and Antiretroviral Therapies | 112139 |
| International Standards Development | 118100 |
| Knowledge Management: Youth Synthesis Report | 125002/125003 |
| LAPM Strategy Group | 113121 |
| Maximizing Access and Quality (MAQ) IUD Subcommittee, and FHI's IUD Checklist Production and Dissemination | 113112 |
| Pregnancy Provider Checklist & Reference Guide 2005 Update & Implementation | 113107 |
| Production Surveillance of Condoms- Domestic and Off-Shore | 148100 |
| Production Surveillance, Domestic and Off-Shore, for Hormonal and Long-acting and Permanent Methods | 148101 |
| Providing Global Leadership to Family Planning and HIV Integration Efforts | 113104/123100 |
| Research Ethics Training Curriculum for Community Representatives (RETC-CR) | 1398/1600/1601/2710/172000 |
| Research to Practice Leadership | 113114 |
| Site Identification, Assessment & Development | 1041/132113/132118/132145 |
| Technical Assistance to Develop a Standardized Family Planning Curriculum | 113128 |

Worldwide (Continued)

| | |
|--|--|
| Technical Assistance to Field Programs | 118102 |
| Technical Leadership: Collaboration with Multi/Bi-Lateral Procurement Agencies | 118101 |
| Technical Oversight Committee | 118103 |
| Tool Kit to Increase Access to Appropriate and Effective Contraception for Clients with HIV | 113106 |
| Tool for Local Lexicon to Explain Difficult Informed Consent Terms | 136101 |
| Truvada Study: Site Preparedness | 12331/12332/12333/12334/ 12335/12336/136105/136106/ 136108/136111/136112 |
| UC-781 PK Study with CONRAD | 132147 |
| USAID Best Practices - MAQ Funds | 123103 |
| USAID Best Practices Package: Development and M & E | 113115/123101 |
| Use of DHS Data for Site ID Recruitment | 136103 |
| A DHS Analysis of the Effects of Increased Injectable Use on Contraceptive Behavior | 114133 |
| Youth Strategy Group | 115100 |



APPENDIX C

Family Health International List of CTR/CRTU – Supported Publications July 1, 2007 – December 31, 2007

Appendix C

CTR/CRTU Related Published Papers Reported to the Library from July 1, 2007 – December 31, 2007

Since July 2007, FHI's Library has documented the publication of 31 new articles or other writings authored or coauthored by FHI staff and/or investigators, and supported—in whole or in part—by either the CTR or the CRTU. These publications serve to disseminate research results, synthesize what is known, and respond to current concerns regarding family planning and reproductive health. Final cost objective (FCO) numbers are provided following the citation to show first what funding supported time spent in writing the publication and secondly, if applicable, what funding supported the original research addressed by the article. The articles are grouped first by whether they were supported primarily by the CTR or the CRTU program and then by the order in which they were reported to the Library.

CTR-Funded

- 2007-44 Cook LA, van Vliet H, Lopez LM, Pun A, Gallo MF. Vasectomy occlusion techniques for male sterilization. *Cochrane Database Syst Rev* 2007; (2): CD003991, 31 p. (FCO-5206) (FCO-N/A)
- 2007-55F Guest G, Namey E, MacQueen KM. Chapter 9, A framework for monitoring sociobehavioral research. In: Guest G; MacQueen KM, editors. *Handbook for team-based qualitative research*. Lanham, MD: AltaMira Press; 2008; p. 189-204. (FCO-9391)
- 2007-55G Guest G, MacQueen KM. Chapter 10, Reevaluating guidelines in qualitative research. In: Guest G; MacQueen KM, editors. *Handbook for team-based qualitative research*. Lanham, MD: AltaMira Press; 2008; p 205-226. (FCO-9391)
- 2007-58 Guest G, Johnson L, Burke H, Rain-Taljaard R, Severy L, von Mollendorf C, Van Damme L. Changes in sexual behavior during a safety and feasibility trial of a microbicide/diaphragm combination: an integrated qualitative and quantitative analysis. *AIDS Educ Prev* 2007 Aug; 19 (4): 310-20. (FCO-2276) (FCO-2276)
- 2007-93 Stanback J, Mbonye AK, Bekiita M. Contraceptive injections by community health workers in Uganda: a nonrandomized community trial. *Bull World Health Organ* 2007 Oct; 85 (10): 768-73. (FCO-9327) (FCO-9327)
- 2007-99 Muller KE, Edwards LJ, Simpson SL, Taylor DJ. Statistical tests with accurate size and power for balanced linear mixed models. *Stat Med* 2007 Aug 30; 26 (19): 3639-60. (FCO-9102) (FCO-9102)

CRTU-Funded

- 2007-45 Cook LA, Pun A, van Vliet H, Gallo MF, Lopez LM. Scalpel versus no-scalpel incision for vasectomy. *Cochrane Database Syst Rev* 2007; (2): CD004112, 20 p. (FCO-5206 / 172002 / 112112) (FCO-N/A)
- 2007-46 Hoke TH, Feldblum PJ, Van Damme K, Nasution MD, Grey TW, Wong EL, Ralimamnjy L, Raharimalala L, Rasamindrakotroka A. Temporal trends in sexually transmitted infection prevalence and condom use following introduction of the female condom to Madagascar sex workers. *Int J STD AIDS* 2007 Jul; 18 (7): 461-6. (FCO-114106 / 119100 / 112120) (FCO-9368)
- 2007-48 Aradhya KW. Providing intrauterine devices to women at risk of sexually transmitted infections. *Mera* 2007 May; (29): iii-iv. (FCO-113118)
- 2007-50 Grimes DA. Discovering the need for randomized controlled trials in obstetrics: a personal odyssey. *James Lind Library* 2007; 7 p. Online. Available:www.jameslindlibrary.org. (FCO-172002) (FCO-N/A)

- 2007-51 Pettifor AE, Turner AN, Van Damme K, Hatzell-Hoke T, Rasamindrakotroka A, Nasution MD, Behets F. Increased risk of chlamydial and gonococcal infection in adolescent sex workers in Madagascar. *Sex Transm Dis* 2007 Jul; 34 (7): 475-8. (FCO-114106 / 119100) (FCO-9368)
- 2007-56 Feldblum PJ, Nasution MD, Hoke TH, Van Damme K, Turner AN, Gmach R, Wong EL, Behets F. Pregnancy among sex workers participating in a condom intervention trial highlights the need for dual protection. *Contraception* 2007 Aug; 76 (2): 105-10. (FCO-112000 / 114106) (FCO-9368)
- 2007-57 Guest G, Severy L, von Mollendorf C, Van Damme L. Overcoming recruitment challenges: lessons learned from a safety and feasibility study of a diaphragm/microbicide combination in South Africa (letter) *J Acquir Immune Defic Syndr* 2007 Aug 1; 45 (4): 481-2. (FCO-116101) (FCO-9785)
- 2007-65 Grimes DA, Lopez LM, Gallo MF, Halpern V, Nanda K, Schulz KF. Steroid hormones for contraception in men. *Cochrane Database Syst Rev* 2007; (2): CD004316, 59 p. (FCO-172002 / 112112) (FCO-N/A)
- 2007-66 Aradhya KW, Finger W, Scholl E. Contraceptive options for youth. *Mera* 2007 Sep; (31): iii-v. (FCO-113118) (FCO-N/A)
- 2007-67 Doh AS, Ngoh N, Roddy R, Lai JJ, Linton K, Mauck C. Safety and acceptability of 6% cellulose sulfate vaginal gel applied four times per day for 14 days. *Contraception* 2007 Sep; 76 (3): 245-9. (FCO-112100) (FCO-2272)
- 2007-68 Shears KH. Making family planning services more 'youth friendly' *Mera* 2007 Sep; (31): v-vi. (FCO-113118) (FCO-N/A)
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APPENDIX D

CRTU-FUNDED

FHI STAFF AND CONSULTANT

TRAVEL UNDERTAKEN

**July 1, 2007
through
December 31, 2007**



Domestic

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| <u>TA NUMBER</u> | <u>COUNTRY</u> | <u>STATE</u> | <u>START DATE</u> | <u>END DATE</u> | <u>TRAVELER</u> |
|------------------|----------------|--------------|-------------------|-----------------|--|
| 35221-50 | USA | AL | 18/DEC/2007 | 18/DEC/2007 | ELI CARTER TO MEET WITH ALATECH TO DISCUSS PRODUCTION AND DELIVERY PLANS FOR THE 2008 CONTRACT. FCO 148100. |
| 34892-50 | USA | CA | 23/OCT/2007 | 25/OCT/2007 | BELINDA IRSULA TO ATTEND A SITE INITIATION MEETING AND VISIT ALL THE CLINICS IN THE AREA. FCO 112101. |
| 34227-50 | USA | DC | 9/JUL/2007 | 10/JUL/2007 | WILLIAM FINGER TO FACILITATE A MEETING WITH USAID TO DECIDE WHETHER TO PROCEED WITH DEVELOPING A NEW YOUTH SYNTHESIS REPORT AND TO MEET WITH FHI/DC STAFF ON VARIOUS YOUTH ACTIVITIES. FCO 125003. |
| 34224-50 | USA | DC | 9/JUL/2007 | 11/JUL/2007 | SUSAN ADAMCHAK TO PARTICIPATE IN MEETINGS WITH FHI STAFF TO PRESENT THE FINDINGS OF A NEEDS ASSESSMENT FOR FHI'S YOUTH GLP WORK TO USAID. FCO 125003. |
| 34172-50 | USA | DC | 16/JUL/2007 | 17/JUL/2007 | TARA NUTLEY TO ATTEND A USAID BROWN BAG PRESENTATION AND PRESENT LESSONS LEARNED FROM THE BEST PRACTICES PROJECT. TO MEET WITH COLLEAGUES IN THE FHI ARLINGTON OFFICE TO DISCUSS OFFICE REGISTRATION AND RESOURCE DEVELOPMENT OPPORTUNITIES IN MADAGASCAR. FCO 113117. |
| 34170-50 | USA | DC | 16/JUL/2007 | 18/JUL/2007 | SERGE RAHARISON TO MEET WITH USAID STAFF TO DISCUSS THE STATUS OF THE BEST PRACTICES PROJECT IN MADAGASCAR. TO DISCUSS THE CHAMPION KOMMUNE EVALUATION PLAN AND THE MINI UNIVERSITY DISSEMINATION EVENT IN MADAGASCAR. TO MEET WITH PHP STAFF TO DISCUSS PLANS FOR THE TASC 3 UPCOMING REBID OF SANTENET IN MADAGASCAR. FCO 113129. |
| 34186-50 | USA | DC | 17/JUL/2007 | 17/JUL/2007 | MICHAEL WELSH TO PARTICIPATE IN THE QUARTERLY MEETING OF THE CAS WORKING WITH THE SERVICE DELIVERY IMPROVEMENT DIVISION. FCO 113108. |
| 34176-50 | USA | DC | 17/JUL/2007 | 17/JUL/2007 | KIRSTEN KRUEGER TO PARTICIPATE IN THE QUARTERLY MEETING OF THE CAS WORKING WITH THE SERVICE DELIVERY IMPROVEMENT DIVISION. FCO 113108. |
| 34292-50 | USA | DC | 23/JUL/2007 | 24/JUL/2007 | WILLIAM FINGER TO COORDINATE A MEETING OF THE USAID YOUTH GLOBAL LEADERSHIP PRIORITY (GLP) PARTNERS AND MEET WITH USAID AND WITH FHI STAFF ON VARIOUS YOUTH PROJECTS. FCO 125001. |

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|------------------|----------------|--------------|-------------------|-----------------|---|
| 34222-50 | USA | DC | 24/JUL/2007 | 24/JUL/2007 | JOY BAUMGARTNER TO ATTEND THE YOUTH GLOBAL LEADERSHIP PRIORITIES (GLP) PARTNERS MEETING TO GIVE A PRESENTATION ON THE STUDY "EARLY SEXUAL DEBUT, SEXUAL VIOLENCE, SEXUAL RISK-TAKING BEHAVIOR AND UNINTENDED PREGNANCY AMONG ADOLESCENTS IN UGANDA AND JAMAICA". FCO 125002. |
| 34257-50 | USA | DC | 31/JUL/2007 | 3/AUG/2007 | JOHN BRATT TO DISCUSS OPPORTUNITIES FOR COLLABORATION WITH THE EXTENDING SERVICE DELIVERY (ESD) PROJECT AND POPULATION SERVICES INTERNATIONAL (PSI). FCO 114106. |
| 34258-50 | USA | DC | 2/AUG/2007 | 3/AUG/2007 | BARBARA JANOWITZ TO DISCUSS OPPORTUNITIES FOR COLLABORATION WITH THE EXTENDING SERVICE DELIVERY (ESD) PROJECT AND POPULATION SERVICES INTERNATIONAL (PSI). FCO 114106. |
| 34288-50 | USA | DC | 2/AUG/2007 | 2/AUG/2007 | AMANDA ABBOTT TO MEET WITH EXTENDING SERVICE DELIVERY STAFF. FCO 113114. |
| 34289-50 | USA | DC | 2/AUG/2007 | 2/AUG/2007 | CHRISTINE LASWAY TO MEET WITH STAFF OF THE EXTENDING SERVICE DELIVERY PROJECT. FCO 113114. |
| 34457-50 | USA | DC | 22/AUG/2007 | 22/AUG/2007 | ELIZABETH ROBINSON TO ATTEND THE HIPNET QUARTERLY MEETING, TO MEET WITH REPRESENTATIVES FROM OTHER COLLABORATING AGENCIES AND TO COORDINATE RELEVANT ACTIVITIES WITH COLLEAGUES AT THE INFO PROJECT. FCO 113118. |
| 34468-50 | USA | DC | 23/AUG/2007 | 23/AUG/2007 | SUSAN MCINTYRE TO ORIENT PHP AND GO STAFF TO THE CRTU AND DISCUSS GO DESK OFFICER'S ROLE IN SUPPORTING CRTU ACTIVITIES. FCO 119501 AND 119502. |
| 34618-50 | USA | DC | 5/SEP/2007 | 6/SEP/2007 | STEVE HAMEL TO PARTICIPATE IN THE RFP PANEL REVIEW FOR IUDS AND ORAL CONTRACEPTIVES. FCO 148101. |
| 34634-50 | USA | DC | 9/SEP/2007 | 10/SEP/2007 | ELIZABETH ROBINSON TO ATTEND THE NIH CONFERENCE ON "BUILDING THE SCIENCE OF DISSEMINATION AND IMPLEMENTATION IN THE SERVICE OF PUBLIC HEALTH". FCO 113118. |

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|------------------|----------------|--------------|-------------------|-----------------|--|
| 34805-50 | USA | DC | 17/SEP/2007 | 18/SEP/2007 | GARY WEST TO ATTEND A MEETING OF THE CRTU EXECUTIVE MANAGEMENT TEAM. FCO 119502. |
| 34714-50 | USA | DC | 24/SEP/2007 | 25/SEP/2007 | WILLIAM FINGER TO COORDINATE A PLANNING MEETING FOR THE DECEMBER IYWG MEETING, TO MEET WITH USAID ON FHI'S YOUTH GLP WORK PLAN, AND TO HOLD INFORMAL MEETINGS ON YOUTH ACTIVITIES WITH FHI/DC STAFF. FCO 125001. |
| 34732-50 | USA | DC | 24/SEP/2007 | 25/SEP/2007 | KARAH FAZEKAS TO COORDINATE A PLANNING MEETING FOR THE DECEMBER IYWG MEETING, TO MEET WITH USAID ON FHI'S YOUTH GLP WORK PLAN, AND TO HOLD INFORMAL MEETINGS ON YOUTH ACTIVITIES WITH FHI/DC STAFF. FCO 125001. |
| 34835-50 | USA | DC | 27/SEP/2007 | 27/SEP/2007 | IRENE YACOBSON TO PARTICIPATE IN THE PANEL DISCUSSION FOR THE LAUNCH OF THE FAMILY PLANNING HANDBOOK FOR PROVIDERS. FCO 113114. |
| 34603-50 | USA | DC | 4/OCT/2007 | 5/OCT/2007 | JOHN STANBACK TO PRESENT ON FAMILY PLANNING OUTREACH AT THE ANNUAL USAID GLOBAL HEALTH MINI-UNIVERSITY. FCO 114111. |
| 34798-50 | USA | DC | 5/OCT/2007 | 5/OCT/2007 | CHRISTINE LASWAY TO ATTEND THE ANNUAL MAQ GLOBAL HEALTH MINI-UNIVERSITY. FCO 113114. |
| 34831-50 | USA | DC | 5/OCT/2007 | 7/OCT/2007 | KATHERINE TUMLINSON TO ATTEND THE ANNUAL MAQ GLOBAL HEALTH MINI-UNIVERSITY. FCO 113114. |
| 34866-50 | USA | DC | 12/OCT/2007 | 13/OCT/2007 | ELIZABETH TOLLEY TO MEET WITH DR. SASTRY AND DISCUSS REVISIONS AND RESUBMISSION OF OUR COLLABORATIVE PROPOSAL TO NIH. TO MEET WITH THE ALLIANCE FOR MICROBICIDE DEVELOPMENT TO PLAN THE ADHERENCE MEETING. FCO 116103, 136110 AND 993032. |
| 34907-50 | USA | DC | 18/OCT/2007 | 18/OCT/2007 | EVANTHIA CANOUTAS TO MEET WITH KIMBERLY ROSS TO HAND OVER THE SOUTH AFRICA PROGRAM SUPPORT RESPONSIBILITIES. TO MEET WITH GLOBAL OPERATIONS TEAM AS PART OF AN ONGOING ORIENTATION FOR A NEW SPO POSITION. FCO 153122, 619000 AND 990100. |

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|------------------|----------------|--------------|-------------------|-----------------|--|
| 34906-50 | USA | DC | 30/OCT/2007 | 30/OCT/2007 | ROSE MONAHAN TO PARTICIPATE IN A CONFERENCE HOSTED BY THE CSIS TASK FORCE ON HIV/AIDS ENTITLED "INTEGRATING REPRODUCTIVE HEALTH AND HIV/AIDS SERVICES: LESSONS FROM THE FIELD FOR PEPFAR REAUTHORIZATION". FCO 113104. |
| 34484-50 | USA | DC | 5/NOV/2007 | 7/NOV/2007 | BARBARA JANOWITZ TO ATTEND SESSIONS ON FP AND RH AT THE APHA CONFERENCE. FCO 114106. |
| 34485-50 | USA | DC | 6/NOV/2007 | 7/NOV/2007 | DAWN CHIN QUEE TO PRESENT RESULTS FROM THE JAMAICA STUDY ON BRIDGING EMERGENCY CONTRACEPTIVE PILL USERS TO ONGOING CONTRACEPTION AT THE 135TH ANNUAL MEETING OF THE AMERICAN PUBLIC HEALTH ASSOCIATION. FCO 114106. |
| 34797-50 | USA | DC | 7/NOV/2007 | 9/NOV/2007 | AMANDA ABBOTT TO ATTEND THE IMPLEMENTING BEST PRACTICES CONSORTIUM MEETING AT JHPIEGO. FCO 113116. |
| 34673-50 | USA | DC | 8/NOV/2007 | 9/NOV/2007 | JASON SMITH TO ATTEND THE IMPLEMENTING BEST PRACTICES (IBP) STEERING COMMITTEE MEETING AND THE IBP CONSORTIUM MEETING AT JHPIEGO. FCO 113116. |
| 35092-50 | USA | DC | 8/NOV/2007 | 9/NOV/2007 | STELLA KIRKENDALE TO ATTEND THE NEXT GENERATION HIV PREVENTION TRIALS WORKING GROUP MEETING. FCO 136108. |
| 34991-50 | USA | DC | 13/NOV/2007 | 13/NOV/2007 | SUSAN MCINTYRE TO ATTEND THE BI-ANNUAL MEETING OF THE USAID/GH/POPULATION AND REPRODUCTIVE HEALTH MONITORING AND EVALUATION WORKING GROUP. FCO 119501. |
| 34891-50 | USA | DC | 14/NOV/2007 | 16/NOV/2007 | KATHERINE TUMLINSON TO GAIN KNOWLEDGE OF BEST PRACTICES FOR SCALING UP NATURAL FAMILY PLANNING PROJECTS IN AFRICA AND MEET WITH STAFF FROM MACRO INTERNATIONAL. TO MEET WITH STAFF FROM POPULATION COUNCIL REGARDING CURRENT AND FUTURE COLLABORATION. FCO 113114 AND 113133. |

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|------------------|----------------|--------------|-------------------|-----------------|---|
| 35104-50 | USA | DC | 16/NOV/2007 | 16/NOV/2007 | ELIZABETH ROBINSON TO ATTEND THE HIPNET QUARTERLY MEETING, MEET WITH REPRESENTATIVES FROM OTHER COLLABORATING AGENCIES, AND MAKE A PRESENTATION ON OPTIONS FOR PROMOTING USE AMONG USAID COLLABORATING AGENCIES OF THE HIPNET M&E GUIDE FOR INFORMATION DISSEMINATION. FCO 113118. |
| 35034-50 | USA | DC | 16/NOV/2007 | 16/NOV/2007 | THERESA HOKE TO PARTICIPATE IN A WORKSHOP ORGANIZED BY GEORGETOWN INSTITUTE FOR REPRODUCTIVE HEALTH ON RESEARCH METHODS INCLUDED IN THE EXPANDNET/WHO APPROACH TO SCALING UP HEALTH INTERVENTIONS. FCO 114134. |
| 35038-50 | USA | DC | 16/NOV/2007 | 16/NOV/2007 | MICHAEL STALKER TO PARTICIPATE IN THE MEETING BETWEEN USAID, FHI AND THE CAPACITY PROJECT TO DISCUSS THE STANDARDIZED FAMILY PLANNING RESOURCE PACKAGE PRIOR TO IMPLEMENTATION. FCO 113128. |
| 35039-50 | USA | DC | 16/NOV/2007 | 16/NOV/2007 | IRENE YACOBSON TO PARTICIPATE IN THE MEETING BETWEEN USAID, FHI AND THE CAPACITY PROJECT TO DISCUSS THE STANDARDIZED FAMILY PLANNING RESOURCE PACKAGE PRIOR TO IMPLEMENTATION. FCO 113128. |
| 35037-50 | USA | DC | 16/NOV/2007 | 16/NOV/2007 | LUCY HARBER TO PARTICIPATE IN THE MEETING BETWEEN USAID, FHI AND THE CAPACITY PROJECT TO DISCUSS THE STANDARDIZED FAMILY PLANNING RESOURCE PACKAGE PRIOR TO IMPLEMENTATION. FCO 113128. |
| 35189-50 | USA | DC | 2/DEC/2007 | 4/DEC/2007 | STEVE HAMEL TO PARTICIPATE IN THE USAID DELIVER TEAM PRESENTATION ABOUT PROCUREMENTS FOR THE THREE TASK ORDERS. TO PRESENT INFORMATION ON QUALITY ASSURANCE. FCO 148100. |
| 34976-50 | USA | DC | 3/DEC/2007 | 8/DEC/2007 | MERYWEN WIGLEY TO ATTEND A WORKSHOP ON "DESIGNING LEARNING" AND MEET WITH COLLEAGUES AT THE FHI/ARLINGTON OFFICE TO DISCUSS THE SIDI PROJECT. FCO 132113. |

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|------------------|----------------|--------------|-------------------|-----------------|---|
| 34967-50 | USA | DC | 4/DEC/2007 | 7/DEC/2007 | WILLIAM FINGER TO COORDINATE THE INTERAGENCY YOUTH WORKING GROUP MEETING AND THE FOLLOW-ON WORKSHOP. TO MEET WITH USAID STAFF TO PLAN WORK ACTIVITIES UNDER THE GLP. TO ATTEND THE AIDSMARK END OF PROJECT MEETING. FCO 125001. |
| 34966-50 | USA | DC | 4/DEC/2007 | 7/DEC/2007 | KARAH FAZEKAS TO PREPARE FOR AND COORDINATE THE IYWG MEETING. FCO 125001. |
| 35192-50 | USA | DC | 4/DEC/2007 | 7/DEC/2007 | SUZANNE FISCHER TO ATTEND THE MEETING OF THE INTERAGENCY YOUTH WORKING GROUP. FCO 125001. |
| 35108-50 | USA | DC | 5/DEC/2007 | 6/DEC/2007 | KIM MILLER TO PRESENT AND PARTICIPATE AT THE IYWG MEETING. FCO 125001. |
| 35135-50 | USA | DC | 6/DEC/2007 | 7/DEC/2007 | DONNA MCCARRAHER TO PARTICIPATE IN THE INTERAGENCY YOUTH WORKING GROUP SEMIANNUAL MEETING. FCO 125001. |
| 35165-50 | USA | DC | 6/DEC/2007 | 7/DEC/2007 | KELLY L'ENGLE TO ATTEND THE MEETING OF THE INTERAGENCY YOUTH WORKING GROUP. FCO 116103. |
| 35097-50 | USA | DC | 11/DEC/2007 | 11/DEC/2007 | KATHERINE TUMLINSON TO INITIATE DIALOGUE AND SOLICIT STAKEHOLDER FEEDBACK REGARDING USEFUL JOB AIDS AND TOOLS FOR SERVICE PROVIDERS WHO ARE TASKED WITH INTEGRATING FP INTO OTHER TYPES OF DEVELOPMENT PROGRAMS. FCO 113138. |
| 35224-50 | USA | DC | 13/DEC/2007 | 13/DEC/2007 | LINDA MCNEIL TO DISCUSS CURRENT AND UPCOMING COLLABORATIVE PROJECTS WITH CONRAD. FCO 112100. |
| 35226-50 | USA | DC | 13/DEC/2007 | 13/DEC/2007 | DEBRA WEINER TO DISCUSS ON-GOING AND UPCOMING FHI/CONRAD COLLABORATIVE PROJECTS. FCO 112100. |
| 35225-50 | USA | DC | 13/DEC/2007 | 13/DEC/2007 | GINGER PITTMAN TO DISCUSS CURRENT AND UPCOMING COLLABORATIVE PROJECTS WITH CONRAD. FCO 112100. |

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| 35273-50 | USA | DC | 14/DEC/2007 | 19/DEC/2007 | LANETA DORFLINGER TO ATTEND AND PARTICIPATE IN THE 7TH QUICK WORKING GROUP MEETING AND THE ADHERENCE MEETING. SALARY ONLY. FCO 132113. |
| 34960-50 | USA | DC | 16/DEC/2007 | 19/DEC/2007 | PAUL FELDBLUM TO ATTEND THE QUICK WORKING GROUP MEETING AND THE MEETING ON ADHERENCE IN MICROBICIDE TRIALS HOSTED BY THE ALLIANCE FOR MICROBICIDE DEVELOPMENT. SALARY ONLY. FCO 132104. |
| 35190-50 | USA | DC | 16/DEC/2007 | 19/DEC/2007 | ELIZABETH TOLLEY TO ATTEND THE QUICK WORKING GROUP QUARTERLY MEETING AND THE FOLLOWING ADHERENCE MEETING. FCO 136100 AND 136110. |
| 35172-50 | USA | DC | 16/DEC/2007 | 19/DEC/2007 | DOUGLAS TAYLOR TO ATTEND AND PARTICIPATE IN THE 7TH QUICK WORKING GROUP MEETING AND THE ADHERENCE MEETING. SALARY ONLY. FCO 132113. |
| 35218-50 | USA | DC | 17/DEC/2007 | 19/DEC/2007 | WILLARD CATES TO ATTEND AND PARTICIPATE IN THE MICROBICIDE QUICK WORKING GROUP AND THE WORKING MEETING ON "ADHERENCE AND ITS MEASUREMENT IN MICROBICIDE CLINICAL TRIALS". FCO 262 AND 800. |
| 35465-50 | USA | DC | 17/DEC/2007 | 19/DEC/2007 | VERA HALPERN TO ATTEND THE 7TH QUICK WORK GROUP MEETING. SALARY ONLY. FCO 132100. |
| 34940-50 | USA | DC | 17/DEC/2007 | 19/DEC/2007 | MARK WEAVER TO ATTEND THE ADHERENCE MEETING SPONSORED BY THE ALLIANCE FOR MICROBICIDE DEVELOPMENT. FCO 139101. |
| 34708-50 | USA | FL | 2/DEC/2007 | 4/DEC/2007 | ELI CARTER TO ATTEND THE SEMI-ANNUAL ASTM COMMITTEE MEETING AND PARTICIPATE IN VARIOUS TASK GROUP MEETINGS AND CHAIR THE U.S. TECHNICAL ADVISORY GROUP FOR ISO TC 157. FCO 118100. |
| 34795-50 | USA | GA | 8/OCT/2007 | 10/OCT/2007 | STEPHANIE COMBES TO VISIT CDC TO DISCUSS INCIDENCE LABORATORY METHODOLOGIES AND ALSO EXPLORE THE POSSIBILITY OF COLLABORATING WITH THE CDC TEAM ON A VALIDATION PROTOCOL DEVELOPED BY CDC. FCO 132113. |
| 34794-50 | USA | GA | 8/OCT/2007 | 10/OCT/2007 | BOB HARVEY TO VISIT CDC TO DISCUSS INCIDENCE LABORATORY METHODOLOGIES AND ALSO EXPLORE THE POSSIBILITY OF COLLABORATING WITH THE CDC TEAM ON A VALIDATION PROTOCOL DEVELOPED BY CDC. FCO 132113. |

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| 34672-50 | USA | GA | 8/OCT/2007 | 10/OCT/2007 | SHELLY FISCHER TO VISIT CDC TO DISCUSS INCIDENCE LABORATORY METHODOLOGIES AND ALSO EXPLORE THE POSSIBILITY OF COLLABORATING WITH THE CDC TEAM ON A VALIDATION PROTOCOL DEVELOPED BY CDC. FCO 132113. |
| 34671-50 | USA | GA | 8/OCT/2007 | 10/OCT/2007 | PADMAJA PATNAIK TO VISIT CDC TO DISCUSS INCIDENCE LABORATORY METHODOLOGIES AND ALSO EXPLORE THE POSSIBILITY OF COLLABORATING WITH THE CDC TEAM ON A VALIDATION PROTOCOL DEVELOPED BY CDC. FCO 132113. |
| 34691-50 | USA | GA | 8/OCT/2007 | 10/OCT/2007 | CONNIE SEXTON TO VISIT CDC TO DISCUSS INCIDENCE LABORATORY METHODOLOGIES AND ALSO EXPLORE THE POSSIBILITY OF COLLABORATING WITH THE CDC TEAM ON A VALIDATION PROTOCOL DEVELOPED BY CDC. FCO 132113. |
| 34939-50 | USA | GA | 28/OCT/2007 | 30/OCT/2007 | ELAN REUBEN TO CONDUCT THE FIRST INTERIM MONITORING VISIT FOR THE HC-101, "PHASE I STUDY OF THE SAFETY AND ACCEPTABILITY OF UC-781 TOPICAL VAGINAL MICROBICIDE IN HETEROSEXUAL WOMEN AND THEIR MALE PARTNERS". FCO 132146. |
| 34793-50 | USA | GA | 1/NOV/2007 | 4/NOV/2007 | WILLARD CATES TO ATTEND AND PARTICIPATE IN THE CONTRACEPTIVE TECHNOLOGY CONFERENCE. FCO 119502. |
| 34824-50 | USA | GA | 1/NOV/2007 | 3/NOV/2007 | LUCY WILSON TO ATTEND THE "CONTRACEPTIVE TECHNOLOGY: QUEST FOR EXCELLENCE" CONFERENCE. FCO 119501. |
| 34998-50 | USA | GA | 1/NOV/2007 | 3/NOV/2007 | KATE HILGENBERG TO ATTEND THE "CONTRACEPTIVE TECHNOLOGY: QUEST FOR EXCELLENCE" CONFERENCE. FCO 113118. |
| 34728-50 | USA | GA | 1/NOV/2007 | 3/NOV/2007 | TRICIA PETRUNEY TO ATTEND THE "CONTRACEPTIVE TECHNOLOGY QUEST FOR EXCELLENCE" CONFERENCE. FCO 113114. |
| 34722-50 | USA | GA | 1/NOV/2007 | 3/NOV/2007 | AMANDA ABBOTT TO ATTEND THE "CONTRACEPTIVE TECHNOLOGY: QUEST FOR EXCELLENCE" CONFERENCE. FCO 113114. |

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|------------------|----------------|--------------|-------------------|-----------------|--|
| 34910-50 | USA | GA | 12/NOV/2007 | 13/NOV/2007 | DOUGLAS TAYLOR TO ATTEND THE CDC MADAGASCAR DIAPHRAGM MEETING. SALARY ONLY. FCO 139101. |
| 34452-50 | USA | MD | 19/AUG/2007 | 22/AUG/2007 | MARIO CHEN TO ATTEND A WORKSHOP ON LATENT VARIABLE ANALYSIS USING MPLUS. FCO 119100. |
| 34731-50 | USA | MD | 19/SEP/2007 | 19/SEP/2007 | BELINDA IRSULA TO PERFORM A SITE INITIATION FOR THE CONRAD STUDY "CONTRACEPTIVE EFFECTIVENESS AND SAFETY STUDY OF THE SILCS DIAPHRAGM: THE PIVOTAL STUDY". FCO 112101. |
| 34589-50 | USA | MD | 19/SEP/2007 | 19/SEP/2007 | IRENE YACOBSON TO PARTICIPATE IN THE PANEL DISCUSSION FOR THE LAUNCH OF THE FAMILY PLANNING HANDBOOK FOR PROVIDERS. FCO 113114. |
| 34669-50 | USA | MN | 26/SEP/2007 | 27/SEP/2007 | DAVID HUBACHER TO ATTEND THE ANNUAL MEETING OF THE ASSOCIATION OF REPRODUCTIVE HEALTH PROFESSIONALS INCLUDING THE PRE-CONFERENCE SESSION ON INTRAUTERINE CONTRACEPTION. FCO 112120. |
| 34132-50 | USA | MN | 26/SEP/2007 | 30/SEP/2007 | LAUREEN LOPEZ TO ATTEND AND PRESENT AT THE ASSOCIATION OF REPRODUCTIVE HEALTH PROFESSIONALS ANNUAL MEETING. FCO 112112 AND 172002. |
| 34561-50 | USA | MN | 26/SEP/2007 | 29/SEP/2007 | WILLARD CATES TO ATTEND AND PARTICIPATE IN THE REPRODUCTIVE HEALTH 2007 ANNUAL MEETING. FCO 119502 AND 112120. |
| 34171-50 | USA | NC | 6/JUL/2007 | 15/JUL/2007 | NISHA GUPTA TRAVELED FROM INDIA TO RECEIVE ORIENTATION ON CRTU AND FHI RESEARCH OPERATIONS. FCO 113112. |
| 34660-50 | USA | NC | 7/JUL/2007 | 14/JUL/2007 | KATHLEEN KAY TRAVELED FROM INDIA TO HOLD MEETINGS WITH SENIOR MANAGEMENT STAFF FROM RESEARCH, GLOBAL OPERATIONS AND SHARED SERVICES AND BRIEF ON THE CRTU. FCO 119502. |
| 34170-50 | USA | NC | 8/JUL/2007 | 16/JUL/2007 | SERGE RAHARISON TO RECEIVE ORIENTATION AND WORK WITH STAFF FROM FHI/NC ON IMPLEMENTING THE CRTU ACTIVITIES IN MADAGASCAR. FCO 113129. |

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|------------------|----------------|--------------|-------------------|-----------------|--|
| 34225-50 | USA | NC | 17/JUL/2007 | 20/JUL/2007 | SUSAN ADAMCHAK TO WORK WITH FHI STAFF ON FINALIZATION OF DATA COLLECTION INSTRUMENTS, TO PLAN THE PRE-TEST AND TO BECOME FAMILIAR WITH REQUIREMENTS OF REMOTE DATA ENTRY. FCO 114124. |
| 34305-50 | USA | NC | 23/JUL/2007 | 25/JUL/2007 | ANJA LENDVAY TO HOLD MEETINGS WITH THE SITE ID, CS, SAVVY, AND COCS STUDY TEAMS. FCO 132113. |
| 34407-50 | USA | NC | 21/AUG/2007 | 24/AUG/2007 | SUSAN ADAMCHAK TO WORK ON REVISING THE DATA COLLECTION INSTRUMENTS AND ON PLANNING ANALYSIS FOR THE FP-HIV INTEGRATION ASSESSMENT. FCO 114124. |
| 34416-50 | USA | NC | 21/AUG/2007 | 22/AUG/2007 | ANJA LENDVAY TO HOLD MONITORING AND ALL-TEAM PLANNING MEETINGS WITH STUDY TEAMS. FCO 1321100. |
| 34644-50 | USA | NC | 16/SEP/2007 | 18/SEP/2007 | NORMAN MARKEL TO PROVIDE CONSULTATION ON BEHAVIORAL CODING AND STUDY DESIGN OPTIONS. FCO 136113. |
| 34787-50 | USA | NC | 1/OCT/2007 | 5/OCT/2007 | WAYNE WIEBEL TO MEET THE SIDI VIETNAM TEAM, MAKE PLANS FOR THE UPCOMING TRIP TO VIETNAM AND COMPLETE NECESSARY ARRANGEMENTS. FCO 132113. |
| 34804-50 | USA | NC | 2/OCT/2007 | 14/OCT/2007 | CONSTANCE AMBASA TO WORK WITH NC COLLEAGUES ON THE HORMONAL CONTINUATION PROJECT. FCO 116105. |
| 34832-50 | USA | NC | 9/OCT/2007 | 10/OCT/2007 | JULIE DENISON TO MEET WITH MEMBERS OF THE BEHAVIORAL AND SOCIAL SCIENCES GROUP, MEMBERS OF FHI'S RESEARCH TEAM AND TO ATTEND THE BI-MONTHLY TRUVADA ADHERENCE WORKING GROUP MEETING. FCO 116103 AND 116113. |
| 34905-50 | USA | NC | 19/OCT/2007 | 19/OCT/2007 | YA DIUL MUKADI TO DISCUSS THE STAKEHOLDER MAPPING PROJECT. TO MEET ABOUT THE FP/HIV INTEGRATION WORKING GROUP. FCO 113131. |

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| 34867-50 | USA | NC | 22/OCT/2007 | 25/OCT/2007 | STEPHEN MUTH TO MEET AND DISCUSS RESEARCH DESIGNS FOR DATA COLLECTION FOR THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE. FCO 113132. |
| 34941-50 | USA | NC | 31/OCT/2007 | 9/NOV/2007 | MARSDEN SOLOMON TO WORK WITH COLLEAGUES TO ADVANCE ONGOING FP/HIV INITIATIVES AND CRTU SUBPROJECTS. FCO 113114,113116,113117.153106,123102. |
| 35007-50 | USA | NC | 6/NOV/2007 | 7/NOV/2007 | ANJA LENDVAY TO HOLD MEETINGS WITH ERY AND COCS STUDY TEAMS AT THE FHI/NC OFFICE. FCO 112118 AND 112139. |
| 34937-50 | USA | NC | 26/NOV/2007 | 27/NOV/2007 | DONALD MARLOWE TO ATTEND THE TECHNICAL OVERSIGHT COMMITTEE MEETING. FCO 118103. |
| 34846-50 | USA | NC | 6/DEC/2007 | 8/DEC/2007 | DAO GIANG TO WORK WITH STAFF IN THE FHI NORTH CAROLINA OFFICE. FCO 172000. |
| 35130-50 | USA | NC | 10/DEC/2007 | 11/DEC/2007 | JULIE DENISON TO WORK WITH COLLEAGUES ON THE SPW EVALUATION RESEARCH STUDY. FCO 116113. |
| 35131-50 | USA | NC | 11/DEC/2007 | 12/DEC/2007 | ANJA LENDVAY TO ATTEND THE BBR ALL STAFF MEETING AND HOLD STUDY TEAM MEETINGS. FCO 116102. |
| 35222-50 | USA | NC | 13/DEC/2007 | 14/DEC/2007 | KATHLEEN SHEARS TO MEET WITH VISITING CAPRISA STAFF ABOUT COMMUNICATIONS SUPPORT FOR THE CAPRISA 004 STUDY AND TO MEET WITH APPLIED RESEARCH STAFF ABOUT ONGOING KNOWLEDGE MANAGEMENT PRODUCTS. FCO 113118. |
| 35133-50 | USA | NC | 13/DEC/2007 | 14/DEC/2007 | LEILA MANSOOR TO MEET WITH THE CAPRISA TEAM. FCO 132108. |
| 35134-50 | USA | NC | 13/DEC/2007 | 14/DEC/2007 | AYESHA KHARSANY TO MEET WITH THE CAPRISA TEAM. FCO 132108. |
| 33722-50 | USA | NV | 21/JUL/2007 | 3/AUG/2007 | PAI LIEN CHEN TO ATTEND THE ANNUAL PROFESSIONAL MEETING OF THE AMERICAN STATICAL ASSOCIATION (ASA) AND TO PRESENT A PAPER ON STATISTICAL METHODS FOR BARRIER CONTRACEPTIVE TRIALS. FCO 119100. |

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|------------------|----------------|--------------|-------------------|-----------------|--|
| 34284-50 | USA | NY | 22/JUL/2007 | 23/JUL/2007 | ERIN MCGINN TO MEET WITH ENGENDERHEALTH/ACQUIRE STAFF TO DISCUSS ONGOING COLLABORATIONS, PARTICULARLY THE LAPM ADVOCACY EFFORTS. FCO 113109 AND 113114. |
| 34283-50 | USA | NY | 22/JUL/2007 | 23/JUL/2007 | CHRISTINE LASWAY TO MEET WITH ENGENDERHEALTH /ACQUIRE STAFF TO DISCUSS ONGOING COLLABORATIONS, PARTICULARLY LAPM ADVOCACY EFFORTS. FCO 113109. |
| 34353-50 | USA | NY | 27/JUL/2007 | 28/JUL/2007 | MICHAEL WELSH TO MEET WITH SELECTED STAFF OF ENGENDERHEALTH TO REVIEW ONGOING OR PLANNED COLLABORATIONS. FCO 113103. |
| 34287-50 | USA | NY | 6/AUG/2007 | 12/AUG/2007 | JENNIFER WESSON TO DISCUSS THE KENYA LAPM ASSESSMENT AND INITIATE PRELIMINARY DATA ANALYSIS AND REPORT WRITING WITH ENGENDERHEALTH. FCO 113111. |
| 34454-50 | USA | NY | 11/SEP/2007 | 13/SEP/2007 | ROSE MONAHAN TO PARTICIPATE IN A TECHNICAL MEETING SPONSORED BY UNFPA ON STRENGTHENING PRIMARY PREVENTION OF HIV AND PREVENTION OF UNINTENDED PREGNANCIES IN WOMEN LIVING WITH HIV. FCO 113104. |
| 34552-50 | USA | NY | 2/OCT/2007 | 5/OCT/2007 | ELIZABETH RAYMOND TO ATTEND THREE MEETINGS ON EMERGENCY CONTRACEPTION. FCO 112120. |
| 34692-50 | USA | NY | 2/OCT/2007 | 4/OCT/2007 | THERESA HOKE TO PARTICIPATE IN A UNFPA SPONSORED INTERAGENCY CORE GROUP MEETING ON COMPREHENSIVE CONDOM PROGRAMMING. FCO 119503. |
| 34836-50 | USA | PA | 12/NOV/2007 | 15/NOV/2007 | ELAN REUBEN TO ATTEND THE "MONITORING CLINICAL DRUG STUDIES-BEGINNER" COURSE OFFERED BY BARNETT EDUCATIONAL SERVICES. FCO 132146. |
| 35370-50 | USA | PA | 27/NOV/2007 | 29/NOV/2007 | BELINDA IRSULA TO CONDUCT A SITE INITIATION VISIT FOR THE STUDY ENTITLED "CONTRACEPTIVE EFFECTIVENESS AND SAFETY STUDY OF THE SILCS DIAPHRAGM: THE PIVOTAL STUDY". FCO 112101. |
| 35107-50 | USA | PA | 4/DEC/2007 | 5/DEC/2007 | BELINDA IRSULA TO CONDUCT A SITE INITIATION VISIT FOR THE STUDY ENTITLED "CONTRACEPTIVE EFFECTIVENESS AND SAFETY STUDY OF THE SILCS DIAPHRAGM: THE PIVOTAL STUDY". FCO 112101. |

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| 34595-50 | USA | SC | 3/NOV/2007 | 7/NOV/2007 | CYNTHIA KWOK TO ATTEND THE 15TH SOUTHEAST SAS USER GROUP ANNUAL CONFERENCE. FCO 119100. |
| 34782-50 | USA | TX | 26/SEP/2007 | 27/SEP/2007 | BELINDA IRSULA TO PERFORM A SITE INITIATION FOR THE CONRAD STUDY "CONTRACEPTIVE EFFECTIVENESS AND SAFETY STUDY OF THE SILCS DIAPHRAGM: THE PIVOTAL STUDY." FCO 112101. |
| 34668-50 | USA | WA | 25/SEP/2007 | 30/SEP/2007 | DAVID SOKAL TO ATTEND THE MEETING "FUTURE OF MALE CONTRACEPTION" SPONSORED BY NICHD AND NIH. FCO 112120. |



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|------------------|---------------|----------------|-------------------|-----------------|---|
| 34926-50 | AFRICA | DR CONGO | 1/DEC/2007 | 15/DEC/2007 | IRENE YACOBSON TO CLARIFY THE GOALS AND OBJECTIVES OF THE FIRST YEAR OF FAMILY PLANNING/VCT INTEGRATION PILOT PROJECT AND TO BEGIN DEVELOPMENT OF A BASELINE ASSESSMENT THAT WILL SERVE BOTH TO INFORM THE PILOT INTERVENTION AND TO COLLECT BASELINE DATA FOR MONITORING AND EVALUATION PURPOSES. FCO 143106. |
| 35046-50 | AFRICA | DR CONGO | 2/DEC/2007 | 7/DEC/2007 | LISA DULLI TO CLARIFY THE GOALS AND OBJECTIVES OF THE PILOT INTEGRATION PROJECT. TO WORK ON THE DEVELOPMENT OF THE BASELINE ASSESSMENT TO BE CONDUCTED AT THE BEGINNING OF THE PROJECT. FCO 143106. |
| 34638-50 | AFRICA | ETHIOPIA | 10/NOV/2007 | 18/NOV/2007 | ELI CARTER TO EVALUATE THE ETHIOPIAN DRUG ADMINISTRATION AND CONTROL AUTHORITY CONDOM TESTING FACILITY AND TO SHARE USAID/FHI EXPERIENCES IN CONTRACEPTIVE QUALITY MANAGEMENT. TO EVALUATE LOCAL WAREHOUSING AND PRODUCT DISTRIBUTION SYSTEMS. FCO 118102. |
| 33738-50 | AFRICA | GHANA | 13/AUG/2007 | 18/AUG/2007 | ELI CARTER TO PROVIDE TECHNICAL ASSISTANCE IN ENHANCING THE TESTING CAPABILITIES OF THE GHANAIAAN FOOD AND DRUG BOARD LABORATORY. TO ASSESS CURRENT OPERATION AND PROVIDE RECOMMENDATIONS FOR IMPROVEMENT. FCO 118102. |
| 34889-50 | AFRICA | GHANA | 10/NOV/2007 | 15/NOV/2007 | JOHN STANBACK TO DEVELOP A NEW STUDY TO ESTIMATE THE IMPACT OF FREELY AVAILABLE PREGNANCY TESTS ON FAMILY PLANNING SERVICE DELIVERY. FCO 114128. |
| 34890-50 | AFRICA | GHANA | 10/NOV/2007 | 15/NOV/2007 | GWYNETH VANCE TO DEVELOP A NEW STUDY TO ESTIMATE THE IMPACT OF FREELY AVAILABLE PREGNANCY TESTS ON FAMILY PLANNING SERVICE DELIVERY. FCO 114128. |
| 34078-50 | AFRICA | KENYA | 6/JUL/2007 | 22/JUL/2007 | ELIZABETH RAYMOND TO PLAN A NEW DEPO STUDY. FCO 112137. |
| 34079-50 | AFRICA | KENYA | 6/JUL/2007 | 22/JUL/2007 | HEATHER VAHDAT TO PLAN A NEW DEPO STUDY. FCO 112137. |
| 34229-50 | AFRICA | KENYA | 30/JUL/2007 | 5/AUG/2007 | SUSAN ADAMCHAK TO WORK WITH FHI STAFF ON PROJECT PLANNING, IDENTIFICATION OF KEY INFORMANTS AND VERIFICATION OF PHASE I DATA. FCO 114124. |

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|------------------|---------------|----------------|-------------------|-----------------|--|
| 34168-50 | AFRICA | KENYA | 13/AUG/2007 | 1/SEP/2007 | CHRISTINA WONG TO CONDUCT THE SITE INITIATION TRAINING FOR THE TRUVADA SBC PROTOCOL. TO SUPERVISE SET-UP AFTER THE SITE INITIATION TRAINING AND VISIT RECRUITMENT SITES TO PLAN RECRUITMENT STRATEGIES. FCO 136108. |
| 34251-50 | AFRICA | KENYA | 15/AUG/2007 | 1/SEP/2007 | ELIZABETH SUTHERLAND TO FACILITATE THE IMPLEMENTATION OF THE FP-FSW RESEARCH STUDY. TO BECOME FAMILIAR WITH THE FHI/KENYA OFFICE AND TOUCH BASE WITH THE FP/HIV INTEGRATION TEAM ABOUT THE STATUS OF ONGOING RESEARCH IN THIS AREA. FCO 124100 AND 154101. |
| 34250-50 | AFRICA | KENYA | 20/AUG/2007 | 29/AUG/2007 | CLAIRE JAGEMANN TO PROVIDE TECHNICAL ASSISTANCE ON THE HOUSE GIRL PROJECT. FCO 153111 AND 154100. |
| 34364-50 | AFRICA | KENYA | 27/AUG/2007 | 7/SEP/2007 | DAVID HUBACHER TO VISIT THE PROPOSED STUDY SITES, MEET THE PROPOSED INVESTIGATOR AND UPDATE THE DRAFT PROTOCOLS AND DATA COLLECTION INSTRUMENTS FOR THE STUDIES ENTITLED "IMPROVED COUNSELING ON CONTRACEPTIVE IMPLANTS TO PREVENT UNINTENDED PREGNANCIES" AND "SAFETY OF IMPLANT USE AMONG WOMEN ON ANTIRETROVIRAL THERAPY". FCO 112129 AND 112136. |
| 34757-50 | AFRICA | KENYA | 6/OCT/2007 | 13/OCT/2007 | TARA NUTLEY TO CONDUCT AN ASSESSMENT OF RESEARCH UTILIZATION PROGRESS WITHIN THE CRTU. TO UPDATE THE KENYA CRTU LOGIC AND RESULTS MATRIX. TO MONITOR THE RESEARCH UTILIZATION DATA COLLECTION PROCESS. TO FINALIZE PLANS FOR THE UPCOMING MID-TERM EVALUATION. TO WORK WITH THE REGIONAL RESEARCH DIRECTOR TO OUTLINE THE SCOPE OF WORK FOR THE CRTU MANAGER POSITION RECENTLY CREATED IN THE AFRO ORGANIZATIONAL STRUCTURE AND DISCUSS HOW NUTLEY WILL FILL THIS POSITION FROM NORTH CAROLINA. FCO 113117. |
| 34684-50 | AFRICA | KENYA | 12/OCT/2007 | 27/OCT/2007 | MICHAEL WELSH TO CHECK-IN ON FCP ACTIVITIES, REVIEW MANAGEMENT ISSUES WITH THE TEAM, ASSESS MCC PROGRESS AND REVIEW OTHER ISSUES. FCO 119502. |
| 34587-50 | AFRICA | KENYA | 21/OCT/2007 | 27/OCT/2007 | LANETA DORFLINGER TO CONDUCT AND ATTEND THE 1ST INVESTIGATORS' MEETING FOR THE FHI STUDY 10015 AND VISIT THE STUDY SITE IN KISUMU/BONDO AND KIBERA/NAIROBI. FCO 132146. |

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| 34785-50 | AFRICA | KENYA | 21/OCT/2007 | 29/OCT/2007 | TANIA CRUCITTI TRAVELED FROM BELGIUM TO ATTEND THE TRUVADA INVESTIGATORS' MEETING AND A SITE VISIT. FCO 132146. |
| 34545-50 | AFRICA | KENYA | 21/OCT/2007 | 27/OCT/2007 | AMY CORNELI TO CONDUCT AND ATTEND THE 1ST INVESTIGATORS' MEETING FOR THE FHI STUDY 10015. FCO 132146. |
| 34520-50 | AFRICA | KENYA | 21/OCT/2007 | 3/NOV/2007 | SUSAN ADAMCHAK TO CONDUCT KEY INFORMANT INTERVIEWS FOR THE FOUR-COUNTRY FP-HIV PROGRAM ASSESSMENT AND TO PARTICIPATE IN TRAINING OF THE DATA COLLECTION TEAM. FCO 114124. |
| 34614-50 | AFRICA | KENYA | 21/OCT/2007 | 30/OCT/2007 | JENNIFER DEESE TO CONDUCT AND ATTEND THE 1ST INVESTIGATORS' MEETING FOR THE FHI STUDY 10015 AND VISIT THE STUDY SITE IN KISUMU/BONDO AND KIBERA/NAIROBI. FCO 132146. |
| 34371-50 | AFRICA | KENYA | 22/OCT/2007 | 30/OCT/2007 | AMANDA TROXLER TO CONDUCT AND ATTEND THE 1ST INVESTIGATORS' MEETING FOR THE FHI STUDY 10015 AND VISIT THE STUDY SITE IN KISUMU/BONDO AND KIBERA/NAIROBI. FCO 132146. |
| 34588-50 | AFRICA | KENYA | 22/OCT/2007 | 27/OCT/2007 | DOUGLAS TAYLOR TO CONDUCT AND ATTEND THE 1ST INVESTIGATORS' MEETING FOR FHI STUDY 10015. FCO 132146. |
| 34615-50 | AFRICA | KENYA | 22/OCT/2007 | 27/OCT/2007 | KAVITA NANDA TO CONDUCT AND ATTEND THE 1ST INVESTIGATORS' MEETING FOR THE FHI STUDY 10015 AND VISIT THE STUDY SITE IN KISUMU/BONDO AND KIBERA/NAIROBI. FCO 132146. |
| 34543-50 | AFRICA | KENYA | 25/OCT/2007 | 7/NOV/2007 | CHRISTINA WONG TO CONDUCT MONITORING VISITS FOR THE TRUVADA SOCIO-BEHAVIORAL AND COMMUNITY PREPAREDNESS RESEARCH. FCO 136108. |
| 34519-50 | AFRICA | KENYA | 27/OCT/2007 | 10/NOV/2007 | THOMAS GREY TO IMPLEMENT THE RESEARCH ASSISTANT TRAINING, TO CONDUCT INTERVIEWS WITH KEY INFORMANTS AND TO INITIATE AND OBSERVE THE PROVIDER/CLIENT SURVEY DATA COLLECTION FOR THE STUDY ENTITLED "COUNTRY ASSESSMENTS: DOCUMENTING FAMILY PLANNING-HIV INTEGRATION MODELS IN FIVE COUNTRIES IN AFRICA". FCO 114124. |

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| 34496-50 | AFRICA | LESOTHO | 14/NOV/2007 | 20/NOV/2007 | KATHLEEN MACQUEEN TO PROVIDE TRAINING AND SUPPORT FOR COLLABORATIVE FORMATIVE RESEARCH ON CONCURRENT PARTNERSHIPS. FCO 132113. |
| 34413-50 | AFRICA | MADAGASCAR | 31/AUG/2007 | 10/SEP/2007 | LISA DULLI TO CONDUCT TRAINING FOR THE STUDY TEAM, INCLUDING THE RESEARCH SUPERVISORS AND DATA COLLECTORS, AND TO FIELD TEST THE DATA COLLECTION INSTRUMENTS. FCO 114116. |
| 35342-50 | AFRICA | MADAGASCAR | 3/NOV/2007 | 23/NOV/2007 | JENNIFER WESSON TO PRESENT PRELIMINARY RESULTS OF THE EVALUATION OF THE INTRODUCTION OF THE BEST PRACTICES PACKAGE TO THE MOH AND FAMILY PLANNING AND BEGIN THE DISSEMINATION PROCESS. FCO 113115. |
| 34871-50 | AFRICA | MADAGASCAR | 18/NOV/2007 | 8/DEC/2007 | KELSEY LYND TO PREPARE FOR A DISSEMINATION MEETING ON THE CBD OF DEPO-PROVERA STUDY AND PARTICIPATE IN THE MEETING. TO ASSIST WITH PREPARATIONS FOR SCALE-UP OF CBD OF DEPO-PROVERA. FCO 143109 AND 114121. |
| 34927-50 | AFRICA | MADAGASCAR | 26/NOV/2007 | 6/DEC/2007 | PAUL BLUMENTHAL TO PREPARE FOR A DISSEMINATION MEETING ON THE CBD OF DEPO-PROVERA STUDY. TO PARTICIPATE IN THE MEETING AND RELATED ADVOCACY WITH KEY STAKEHOLDERS. FCO 114121. |
| 34872-50 | AFRICA | MADAGASCAR | 28/NOV/2007 | 6/DEC/2007 | TARA NUTLEY TO PARTICIPATE IN A MEETING TO DISSEMINATE RESULTS OF THE CRTU STUDY EXAMINING CBD OF DMPA IN MADAGASCAR AND TO PLAN SCALE-UP OF THIS BEST PRACTICE. TO WORK WITH THE PROJECT DIRECTOR TO FURTHER DEVELOP IMPLEMENTATION PLANS FOR FIELD SUPPORT AND CORE FUNDED ACTIVITIES. FCO 113117, 113115, 123101 AND 123103. |
| 34873-50 | AFRICA | MADAGASCAR | 28/NOV/2007 | 6/DEC/2007 | THERESA HOKE TO PARTICIPATE IN A MEETING TO DISSEMINATE RESULTS OF THE CRTU STUDY EXAMINING CBD OF DMPA IN MADAGASCAR AND TO PLAN SCALE-UP OF THIS BEST PRACTICE. FCO 114103. |
| 33589-50 | AFRICA | MALAWI | 8/JUL/2007 | 19/JUL/2007 | DOMINICK SHATTUCK TO TRAIN THE RESEARCH STAFF ABOUT THE FHI PROCEDURES RELATED TO DATA COLLECTION AND DATA MANAGEMENT AND OVERSEE THE PRESENT STATE OF THE PROJECT. FCO 116108. |

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| 34541-50 | AFRICA | MALAWI | 27/SEP/2007 | 14/OCT/2007 | AMY CORNELI TO CONDUCT THE SITE INITIATION TRAINING FOR THE TRUVADA SOCIO-BAHAVIORAL AND COMMUNITY PREPAREDNESS RESEARCH FOR THE TWO MALAWI SITES. FCO 136108. |
| 34542-50 | AFRICA | MALAWI | 27/SEP/2007 | 17/OCT/2007 | MONIQUE MUELLER TO CONDUCT SITE INITIATION TRAINING FOR THE TWO TRUVADA SOCIO-BAHAVIORAL AND COMMUNITY PREPAREDNESS RESEARCH SITES. FCO 136108. |
| 34506-50 | AFRICA | MALAWI | 16/OCT/2007 | 29/OCT/2007 | STELLA KIRKENDALE TO MEET WITH THE SITE COMMUNITY ADVISORY BOARD TO OBTAIN INITIAL INPUT ON THE PLANNED TRUVADA CLINICAL TRIAL. FCO 136108. |
| 34554-50 | AFRICA | MALAWI | 16/OCT/2007 | 29/OCT/2007 | MICHAEL SZPIR TO MEET WITH THE SITE COMMUNITY ADVISORY BOARD TO OBTAIN INITIAL INPUT ON THE PLANNED TRUVADA CLINICAL TRIAL. FCO 132146. |
| 35127-50 | AFRICA | MALAWI | 5/DEC/2007 | 9/DEC/2007 | AMY CORNELI TO CONDUCT SITE MONITORING VISIT FOR THE SBC TRUVADA SITE. FCO 136108. |
| 34455-50 | AFRICA | MALI | 16/SEP/2007 | 18/SEP/2007 | AARON BEASTON-BLAAK TO WORK WITH SAVE THE CHILDREN ON COST-EFFECTIVENESS ANALYSES OF CBD INTERVENTION. FCO 113114. |
| 34649-50 | AFRICA | MOZAMBIQUE | 5/NOV/2007 | 11/NOV/2007 | PAUL FELDBLUM TO HOLD DISCUSSIONS WITH PROSPECTIVE PARTNERS IN THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE (SIDI). FCO 132113. |
| 34694-50 | AFRICA | MOZAMBIQUE | 5/NOV/2007 | 11/NOV/2007 | CONNIE SEXTON TO HOLD DISCUSSIONS WITH PROSPECTIVE PARTNERS IN THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE (SIDI). FCO 132113. |
| 34680-50 | AFRICA | MOZAMBIQUE | 5/NOV/2007 | 11/NOV/2007 | NATASHA MACK TO HOLD DISCUSSIONS WITH PROSPECTIVE PARTNERS IN THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE (SIDI). FCO 132113. |
| 34339-50 | AFRICA | NIGERIA | 10/AUG/2007 | 26/AUG/2007 | CHRISTINE LASWAY TO INITIATE EFFORTS UNDER THE WHO STRATEGIC PARTNERSHIP PROGRAM SPP TO FACILITATE INTRODUCTION AND UTILIZATION OF EVIDENCE-BASED PRACTICES, APPROACHES AND TOOLS IN NIGERIA. FCO 113134. |

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|------------------|---------------|----------------|-------------------|-----------------|--|
| 34338-50 | AFRICA | NIGERIA | 10/AUG/2007 | 26/AUG/2007 | AMANDA ABBOTT TO INITIATE EFFORTS UNDER THE WHO STRATEGIC PARTNERSHIP PROGRAM SPP TO FACILITATE INTRODUCTION AND UTILIZATION OF EVIDENCE-BASED PRACTICES, APPROACHES AND TOOLS IN NIGERIA. FCO 113134. |
| 35024-50 | AFRICA | RWANDA | 30/NOV/2007 | 9/DEC/2007 | SUSAN ADAMCHAK TO PLAN FIELDWORK AND CONDUCT KEY INFORMANT INTERVIEWS FOR THE COUNTRY ASSESSMENTS: FP/HIV INTEGRATION PROJECT. FCO 114124. |
| 35026-50 | AFRICA | RWANDA | 30/NOV/2007 | 12/DEC/2007 | AARON BEASTON-BLAAK TO PREPARE FOR THE FP/HIV INTEGRATION STUDY AND MEET WITH STAKEHOLDERS FOR DATA COLLECTION. FCO 114124. |
| 34115-50 | AFRICA | SOUTH AFRICA | 6/JUL/2007 | 18/JUL/2007 | CAROL JOANIS TO MONITOR THE RESEARCH STUDY ENTITLED "ASSESSING PREFERENCE FOR 3 FEMALE CONDOMS: A COMPARATIVE EVALUATION OF THE PATH WOMEN'S CONDOM, FC2 AND REDDY 6". FCO 132114. |
| 34114-50 | AFRICA | SOUTH AFRICA | 6/JUL/2007 | 18/JUL/2007 | CATHERINE HART TO MONITOR THE RESEARCH STUDY ENTITLED "ASSESSING PREFERENCE FOR 3 FEMALE CONDOMS: A COMPARATIVE EVALUATION OF THE PATH WOMEN'S CONDOM, FC2 AND REDDY 6". FCO 132114. |
| 33896-50 | AFRICA | SOUTH AFRICA | 11/JUL/2007 | 20/JUL/2007 | STEPHANIE COMBES TO CONDUCT THE FIRST PERIODIC MONITORING VISIT FOR THE STUDY ENTITLED "PHASE IIB TRIAL TO ASSESS THE SAFETY AND EFFECTIVENESS OF THE VAGINAL MICROBICIDE 1% TENOFOVIR GEL FOR THE PREVENTION OF HIV INFECTION IN WOMEN IN SOUTH AFRICA". FCO 132108. |
| 33897-50 | AFRICA | SOUTH AFRICA | 13/JUL/2007 | 20/JUL/2007 | AMANDA TROXLER TO CONDUCT THE FIRST PERIODIC MONITORING VISIT FOR THE STUDY ENTITLED "PHASE IIB TRIAL TO ASSESS THE SAFETY AND EFFECTIVENESS OF THE VAGINAL MICROBICIDE 1% TENOFOVIR GEL FOR THE PREVENTION OF HIV INFECTION IN WOMEN IN SOUTH AFRICA". FCO 132108. |
| 34313-50 | AFRICA | SOUTH AFRICA | 9/AUG/2007 | 24/AUG/2007 | MICHAEL STALKER TO PROVIDE TECHNICAL ASSISTANCE TO INSTITUTIONS OF HIGHER EDUCATION PARTNERS AND THE LOCAL IMPLEMENTATION AGENCIES FOR THE PEPFAR-SUPPORTED ABC PROJECT ON UNIVERSITY CAMPUSES. TO DEVELOP DRAFT SUBAGREEMENTS. FCO 153107. |

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|------------------|---------------|----------------|-------------------|-----------------|---|
| 34392-50 | AFRICA | SOUTH AFRICA | 1/SEP/2007 | 9/SEP/2007 | LINDA MCNEIL TO FOLLOW-UP ON THE JULY 2007 MONITORING TRIP, REVIEW PROGRESS AND EVALUATE SYSTEMS IN PREPARATION FOR THE UPCOMING AUDIT OF THE CAPRISA 004 SITES. FCO 132108. |
| 34456-50 | AFRICA | SOUTH AFRICA | 5/SEP/2007 | 16/SEP/2007 | STELLA KIRKENDALE TO CONDUCT AN INITIAL COMMUNITY ASSESSMENT VISIT FOR THE PLANNED USAID/GATES FUNDED PH III TRUVADA PRE-EXPOSURE PROPHYLAXIS TRIAL. FCO 136108. |
| 34432-50 | AFRICA | SOUTH AFRICA | 14/SEP/2007 | 28/SEP/2007 | SANDRA CAMERON TO CONDUCT A SITE AUDIT OF THE PROTOCOL ENTITLED "CAPRISA 004-PHASE IIB TRIAL TO ASSESS THE SAFETY AND EFFECTIVENESS OF THE VAGINAL MICROBICIDE 1% TENOFOVIR GEL FOR THE PREVENTION OF HIV INFECTION IN WOMEN IN SOUTH AFRICA" AT TWO RESEARCH SITES. FCO 132108. |
| 34676-50 | AFRICA | SOUTH AFRICA | 7/OCT/2007 | 13/OCT/2007 | CRAIG HENDRIX TO VISIT CAPRISA AND JOIN THE CO-PRINCIPAL INVESTIGATORS IN DISCUSSIONS ON HOW TO MAXIMIZE THE OPPORTUNITIES TO STUDY TENOFOVIR LEVELS IN THE CAPRISA 004 TENOFOVIR GEL TRIAL. FCO 132108. |
| 34678-50 | AFRICA | SOUTH AFRICA | 11/OCT/2007 | 28/OCT/2007 | CAROL JOANIS TO MONITOR THE RESEARCH STUDY ENTITLED "ASSESSING PREFERENCE FOR 3 FEMALE CONDOMS: A COMPARATIVE EVALUATION OF THE PATH WOMAN'S CONDOM, FC2 AND REDDY 6". FCO 132114. |
| 34682-50 | AFRICA | SOUTH AFRICA | 11/OCT/2007 | 28/OCT/2007 | CATHERINE HART TO MONITOR THE RESEARCH STUDY ENTITLED "ASSESSING PREFERENCE FOR 3 FEMALE CONDOMS: A COMPARATIVE EVALUATION OF THE PATH WOMAN'S CONDOM, FC2 AND REDDY 6". FCO 132114. |
| 34759-50 | AFRICA | SOUTH AFRICA | 19/OCT/2007 | 28/OCT/2007 | KATHRYN TWEEDY TO MONITOR THE RESEARCH STUDY ENTITLED "ASSESSING PREFERENCE FOR 3 FEMALE CONDOMS: A COMPARATIVE EVALUATION OF THE PATH WOMAN'S CONDOM, FC2 AND REDDY 6". FCO 132114. |
| 34647-50 | AFRICA | SOUTH AFRICA | 27/OCT/2007 | 10/NOV/2007 | CRYSTAL DREISBACH TO CONDUCT A PERIODIC MONITORING VISIT FOR CAPRISA 004. FCO 132108. |

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|------------------|---------------|----------------|-------------------|-----------------|--|
| 34648-50 | AFRICA | SOUTH AFRICA | 27/OCT/2007 | 17/NOV/2007 | STEPHANIE COMBES TO CONDUCT THE SECOND PERIODIC MONITORING VISIT FOR THE STUDY "PHASE IIB TRIAL TO ASSESS THE SAFETY AND EFFECTIVENESS OF THE VAGINAL MICROBICIDE 1% TENOFOVIR GEL FOR THE PREVENTION OF HIV INFECTION IN WOMEN IN SOUTH AFRICA". TO HOLD DISCUSSIONS WITH PROSPECTIVE PARTNERS IN THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE. FCO 132108 AND 132113. |
| 34371-50 | AFRICA | SOUTH AFRICA | 31/OCT/2007 | 10/NOV/2007 | AMANDA TROXLER TO CONDUCT A PERIODIC MONITORING VISIT FOR CAPRISA 004. FCO 132108. |
| 34496-50 | AFRICA | SOUTH AFRICA | 31/OCT/2007 | 14/NOV/2007 | KATHLEEN MACQUEEN TO PROVIDE TRAINING FOR IMPLEMENTATION OF CAPRISA 104 CASE CONTROL STUDY. TO MEET WITH POTENTIAL COLLABORATORS TO DISCUSS POTENTIAL SITE DEVELOPMENT ACTIVITIES. FCO 132113 AND 136104. |
| 34497-50 | AFRICA | SOUTH AFRICA | 4/NOV/2007 | 17/NOV/2007 | PATTY ALLEMAN TO CONDUCT STUDY INITIATION TRAINING FOR THE CAPRISA CASE CONTROL STUDY. FCO 132113 AND 136104. |
| 34630-50 | AFRICA | SOUTH AFRICA | 10/NOV/2007 | 17/NOV/2007 | ROBIN BRIGGS TO HOLD DISCUSSIONS WITH PROSPECTIVE PARTNERS IN THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE (SIDI). FCO 132113. |
| 34649-50 | AFRICA | SOUTH AFRICA | 11/NOV/2007 | 17/NOV/2007 | PAUL FELDBLUM TO HOLD DISCUSSIONS WITH PROSPECTIVE PARTNERS IN THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE (SIDI). FCO 132113. |
| 34694-50 | AFRICA | SOUTH AFRICA | 11/NOV/2007 | 17/NOV/2007 | CONNIE SEXTON TO HOLD DISCUSSIONS WITH PROSPECTIVE PARTNERS IN THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE (SIDI). FCO 132113. |
| 34496-50 | AFRICA | SOUTH AFRICA | 20/NOV/2007 | 25/NOV/2007 | KATHLEEN MACQUEEN TO MONITOR RESEARCH INITIATION OF CAPRISA 104 CASE CONTROL STUDY. FCO 136104. |
| 34872-50 | AFRICA | SOUTH AFRICA | 24/NOV/2007 | 28/NOV/2007 | TARA NUTLEY TO MEET WITH CRTU STAFF TO PREPARE FOR THE MID-TERM EVALUATION. FCO 113117. |
| 35024-50 | AFRICA | SOUTH AFRICA | 24/NOV/2007 | 30/NOV/2007 | SUSAN ADAMCHAK TO PLAN FIELDWORK AND CONDUCT KEY INFORMANT INTERVIEWS FOR THE COUNTRY ASSESSMENTS: FP/HIV INTEGRATION PROJECT. FCO 114124. |

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|------------------|---------------|----------------|-------------------|-----------------|---|
| 34873-50 | AFRICA | SOUTH AFRICA | 24/NOV/2007 | 28/NOV/2007 | THERESA HOKE TO COLLABORATE WITH FHI/SOUTH AFRICA AND THE WOMEN'S HEALTH RESEARCH UNIT IN PLANNING PHASE II OF THE CRTU STUDY ON SERVING POST-PARTUM CONTRACEPTION NEEDS OF PMTCT CLIENTS. FCO 114100 AND 114134. |
| 35109-50 | AFRICA | SOUTH AFRICA | 25/NOV/2007 | 30/NOV/2007 | STELLA KIRKENDALE TO ATTEND A PLANNING MEETING ON COMMUNITY AND CIVIL SOCIETY ENGAGEMENT WITH TRIALS IN JOHANNESBURG. SALARY ONLY. FCO 136108. |
| 34413-50 | AFRICA | TANZANIA | 10/SEP/2007 | 15/SEP/2007 | LISA DULLI TO DISCUSS AND REFINE IDEAS FOR RESEARCH SURROUNDING INCREASED ACCESS TO HORMONAL CONTRACEPTIVES THROUGH DRUG SHOP DISTRIBUTION. FCO 113135. |
| 34555-50 | AFRICA | TANZANIA | 29/SEP/2007 | 3/OCT/2007 | ROSE MONAHAN TO ORIENT LOCAL STAFF TO THE CRTU FOCUS COUNTRY PROGRAM AND DEVELOP PLANS FOR A COUNTRY-LEVEL SOTA MEETING ON CONTRACEPTION AND HIV. FCO 113117 AND 113131. |
| 34297-50 | AFRICA | TANZANIA | 6/OCT/2007 | 12/OCT/2007 | THERESA HOKE TO MEET WITH PARTNERS AND GATHER INFORMATION TO SUPPORT PROTOCOL DEVELOPMENT FOR THE CRTU STUDY EXAMINING DUAL PROTECTION COUNSELING FOR YOUTH. FCO 114120. |
| 34785-50 | AFRICA | TANZANIA | 29/OCT/2007 | 2/NOV/2007 | TANIA CRUCITTI TRAVELED FROM BELGIUM TO VISIT A TRUVADA SITE. FCO 132146. |
| 34371-50 | AFRICA | TANZANIA | 30/OCT/2007 | 31/OCT/2007 | AMANDA TROXLER TO VISIT THE TRUVADA STUDY SITE. FCO 132146. |
| 34614-50 | AFRICA | TANZANIA | 30/OCT/2007 | 1/NOV/2007 | JENNIFER DEESE TO VISIT THE TRUVADA STUDY SITE. FCO 132146. |
| 34639-50 | AFRICA | TANZANIA | 6/NOV/2007 | 17/NOV/2007 | JOY BAUMGARTNER TO INITIATE THE STUDY "IMPLEMENTING AND EVALUATING INTEGRATED FAMILY PLANNING AND VCT SERVICES". TO FOLLOW-UP ON THE PROPOSED FP AND VTC INTEGRATION PROJECT WITH FHI/TANZANIA AND ENGENDERHEALTH. FCO 114106 AND 114115. |
| 35091-50 | AFRICA | TANZANIA | 26/NOV/2007 | 10/DEC/2007 | CHRISTINE LASWAY TO INITIATE AND FOLLOW-UP ON PLANNED ACTIVITIES UNDER SEVERAL SUB-PROJECTS. FCO 113135 AND 113134. |

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|------------------|---------------|----------------|-------------------|-----------------|---|
| 35046-50 | AFRICA | TANZANIA | 26/NOV/2007 | 2/DEC/2007 | LISA DULLI TO BUILD ON PRIOR DISCUSSIONS WITH PARTNER ORGANIZATIONS AND IDENTIFY THE PROGRAMMATIC AND RESEARCH PRIORITIES OF THE GOVERNMENT OF TANZANIA WITH REGARDS TO EXPANDING ACCESS TO HORMONAL CONTRACEPTION. TO DISCUSS THE POSSIBILITIES OF EMPLOYING ACCREDITED DRUG DISPENSING OUTLETS IN ORDER TO FACILITATE THE PROCESS. FCO 113135. |
| 33905-50 | AFRICA | UGANDA | 6/JUL/2007 | 13/JUL/2007 | JOHN STANBACK TO TRAIN DATA COLLECTORS AND DATA ENTRY STAFF FOR THE STUDY "ASSESSING EXPANDED COMMUNITY-BASED DISTRIBUTION OF DMPA IN UGANDA". FCO 114111. |
| 34033-50 | AFRICA | UGANDA | 6/JUL/2007 | 21/JUL/2007 | CONRAD OTTERNESS TO TRAIN STAFF AT SAVE THE CHILDREN AND PERFORM DATA ENTRY AND DATA ANALYSIS. FCO 114111. |
| 34295-50 | AFRICA | UGANDA | 30/JUL/2007 | 11/AUG/2007 | THOMAS GREY TO PLAN FOR AND HELP IMPLEMENT THE TRAINING AND THE PRETEST OF THE DATA COLLECTION INSTRUMENTS FOR THE STUDY ENTITLED "COUNTRY ASSESSMENTS: DOCUMENTING FAMILY PLANNING-HIV INTEGRATION MODELS IN FIVE COUNTRIES IN AFRICA". FCO 114124. |
| 34229-50 | AFRICA | UGANDA | 5/AUG/2007 | 11/AUG/2007 | SUSAN ADAMCHAK TO WORK WITH A LOCAL DATA COLLECTION FIRM AND PARTICIPATE IN INSTRUMENT PRE-TEST. FCO 114124. |
| 34520-50 | AFRICA | UGANDA | 4/OCT/2007 | 21/OCT/2007 | SUSAN ADAMCHAK TO CONDUCT KEY INFORMANT INTERVIEWS FOR THE FOUR-COUNTRY FP-HIV PROGRAM ASSESSMENT AND TO PARTICIPATE IN TRAINING OF THE DATA COLLECTION TEAM. FCO 114124. |
| 34519-50 | AFRICA | UGANDA | 11/OCT/2007 | 27/OCT/2007 | THOMAS GREY TO IMPLEMENT THE RESEARCH ASSISTANT TRAINING, TO CONDUCT INTERVIEWS WITH KEY INFORMANTS AND TO INITIATE AND OBSERVE THE PROVIDER/CLIENT SURVEY DATA COLLECTION FOR THE STUDY ENTITLED "COUNTRY ASSESSMENTS: DOCUMENTING FAMILY PLANNING-HIV INTEGRATION MODELS IN FIVE COUNTRIES IN AFRICA". FCO 114124. |
| 34684-50 | AFRICA | UGANDA | 24/OCT/2007 | 25/OCT/2007 | MICHAEL WELSH TO CHECK-IN ON FCP ACTIVITIES, REVIEW MANAGEMENT ISSUES WITH THE TEAM, ASSESS MCC PROGRESS AND REVIEW OTHER ISSUES. FCO 119502. |

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| 34889-50 | AFRICA | UGANDA | 3/NOV/2007 | 10/NOV/2007 | JOHN STANBACK TO DEVELOP A NEW STUDY TO ESTIMATE THE IMPACT OF FREELY AVAILABLE PREGNANCY TESTS ON FAMILY PLANNING SERVICE DELIVERY. TO DEVELOP A NEW STUDY OF SAFE PROVISION OF INJECTABLE CONTRACEPTIVES IN DRUG SHOPS. TO MONITOR THE ONGOING STUDY OF SCALE-UP OF CBD IN DEPO IN TWO DISTRICTS. FCO 114111, 114128 AND 114131. |
| 34890-50 | AFRICA | UGANDA | 3/NOV/2007 | 10/NOV/2007 | GWYNETH VANCE TO DEVELOP A NEW STUDY TO ESTIMATE THE IMPACT OF FREELY AVAILABLE PREGNANCY TESTS ON FAMILY PLANNING SERVICE DELIVERY. TO DEVELOP A NEW STUDY OF SAFE PROVISION OF INJECTABLE CONTRACEPTIVES IN DRUG SHOPS. TO MONITOR ONGOING STUDY OF SCALE-UP OF CBD IN DEPO IN TWO DISTRICTS. FCO 114111, 114128 AND 114131. |
| 34975-50 | AFRICA | UGANDA | 5/DEC/2007 | 13/DEC/2007 | SARAH THOMSEN TRAVELED FROM SWEDEN TO PARTICIPATE IN A NATIONAL STAKEHOLDERS MEETING, FINALIZE THE STUDY PROTOCOL WITH COLLABORATORS AND DEVELOP A WORKPLAN FOR THE REST OF THE PROJECT PERIOD. FCO 156101. |
| 34250-50 | AFRICA | ZAMBIA | 12/AUG/2007 | 14/AUG/2007 | CLAIRE JAGEMANN TO PROVIDE TECHNICAL ASSISTANCE FOR THE FHI CHAMPION. FCO 113113. |
| 34518-50 | AFRICA | ZAMBIA | 13/SEP/2007 | 25/SEP/2007 | PADMAJA PATNAIK TO ASSESS THE ACCEPTABILITY AND FEASIBILITY OF DEVELOPING ONE OR MORE SITES TO CONDUCT MICROBICIDE AND OTHER HIV PREVENTIONS TRIALS IN ZAMBIA AS PART OF THE USAID FUNDED SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE. FCO 132113. |
| 34333-50 | AFRICA | ZAMBIA | 14/SEP/2007 | 25/SEP/2007 | PATTY ALLEMAN TO ASSESS THE ACCEPTABILITY AND FEASIBILITY OF DEVELOPING ONE OR MORE SITES TO CONDUCT MICROBICIDE AND OTHER HIV PREVENTIONS TRIALS IN ZAMBIA AS PART OF THE USAID FUNDED SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE. FCO 132113. |
| 34610-50 | AFRICA | ZAMBIA | 14/SEP/2007 | 23/SEP/2007 | CONNIE SEXTON TO ASSESS THE ACCEPTABILITY AND FEASIBILITY OF DEVELOPING ONE OR MORE SITES TO CONDUCT MICROBICIDE AND OTHER HIV PREVENTIONS TRIALS IN ZAMBIA AS PART OF THE USAID FUNDED SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE. FCO 132113. |

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| 34609-50 | AFRICA | ZAMBIA | 14/SEP/2007 | 23/SEP/2007 | SHELLY FISCHER TO ASSESS THE ACCEPTABILITY AND FEASIBILITY OF DEVELOPING ONE OR MORE SITES TO CONDUCT MICROBICIDE AND OTHER HIV PREVENTIONS TRIALS IN ZAMBIA AS PART OF THE USAID FUNDED SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE. FCO 132113. |
| 34446-50 | AFRICA | ZIMBABWE | 22/SEP/2007 | 28/SEP/2007 | NINCOSHKA ACEVEDO TRAVELED FROM ITALY TO CONDUCT A PERIODIC MONITORING VISIT FOR THE STUDY ENTITLED "A MULTICENTRE RANDOMIZED CLINICAL TRIAL OF TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN, JADELLE AND IMPLANON". FCO 112125. |
| 34506-50 | AFRICA | ZIMBABWE | 29/OCT/2007 | 3/NOV/2007 | STELLA KIRKENDALE TO MEET WITH THE SITE COMMUNITY ADVISORY BOARD TO OBTAIN INITIAL INPUT ON THE PLANNED TRUVADA CLINICAL TRIAL. FCO 136108. |
| 34554-50 | AFRICA | ZIMBABWE | 29/OCT/2007 | 3/NOV/2007 | MICHAEL SZPIR TO MEET WITH THE SITE COMMUNITY ADVISORY BOARD TO OBTAIN INITIAL INPUT ON THE PLANNED TRUVADA CLINICAL TRIAL. FCO 132146. |
| 34069-50 | ASIA/NEAR EAST | INDIA | 7/JUL/2007 | 14/JUL/2007 | ELIZABETH TOLLEY TO UPDATE THE FHI/INDIA OFFICE ABOUT THE "SUSTAINED ACCEPTABILITY OF VAGINAL MICROBICIDES" STUDY AND OTHER BBR-RELATED STUDIES AND MONITOR THE STUDY. TO PROVIDE ASSISTANCE TO THE ACCEPTABILITY RESEARCH TEAM ON ANALYSIS OF THE QUALITATIVE/QUANITATIVE DATA IN PREPARATION FOR THE 2008 MICROBICIDE CONFERENCE. FCO 136100. |
| 33987-50 | ASIA/NEAR EAST | INDIA | 7/JUL/2007 | 21/JUL/2007 | SHARON TSUI TO MEET REPRESENTATIVES OF USAID AND UPDATE THEM ON FHI'S MICROBICIDE RESEARCH IN INDIA. TO MONITOR PROGRESS OF THE SUSTAINED ACCEPTABILITY OF VAGINAL MICROBICIDES STUDY IN PUNE. TO PROVIDE SUPPORT TO ACCEPTABILITY TEAM ON QUALITATIVE DATA ANALYSIS. TO CONDUCT RESEARCH ETHICS TRAINING FOR NEW ACCEPTABILITY TEAM MEMBERS. FCO 136100. |
| 34376-50 | ASIA/NEAR EAST | INDIA | 14/SEP/2007 | 22/SEP/2007 | MICHAEL SZPIR TO DISCUSS THE RESEARCH UTILIZATION PORTFOLIO WITH COLLEAGUES IN THE FHI/APRO AND TO WRITE UP MATERIALS TO SUPPORT RESEARCH-RELATED COMMUNICATIONS, INCLUDING MATERIALS FOR FHI'S WEB SITE. FCO 113114. |

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| 34586-50 | ASIA/NEAR EAST | INDIA | 15/SEP/2007 | 22/SEP/2007 | LANETA DORFLINGER TO MEET WITH STAFF OF THE FHI/INDIA OFFICE. TO ATTEND AND PARTICIPATE IN THE 9TH JOINT WORKING GROUP MEETING ON CONTRACEPTIVE AND REPRODUCTIVE HEALTH RESEARCH. FCO 112120. |
| 34695-50 | ASIA/NEAR EAST | INDIA | 29/SEP/2007 | 7/OCT/2007 | POURU BHIWANDI TO PARTICIPATE IN THE "SYMPOSIUM TO DEVELOP A COMPREHENSIVE STRATEGY FOR IUD REPOSITIONING IN THE FAMILY PLANNING PROGRAM". FCO 113136. |
| 34563-50 | ASIA/NEAR EAST | INDIA | 1/OCT/2007 | 6/OCT/2007 | JENNIFER WESSON TO ATTEND THE REVITALIZAION STAKEHOLDERS MEETING IN UTTAR PRADESH TO ASSIST IN DEVELOPING RESEARCH CONCEPTS WHERE THE NEED FOR ADDITIONAL INFORMATION IS NEEDED. FCO 114106 AND 113136. |
| 34685-50 | ASIA/NEAR EAST | INDIA | 21/OCT/2007 | 3/NOV/2007 | WILLIAM FINGER TO PROMOTE IYWG MATERIALS, CONSULT WITH YOUTH EXPERTS, REVIEW POSSIBLE FHI AND OTHER GROUPS YOUTH PROJECTS FOR IYWG WRITE-UPS AND ATTEND THE 4TH INTERNATIONAL ASIA PACIFIC CONFERENCE ON REPRODUCTIVE AND SEXUAL HEALTH AND RIGHTS. FCO 125001, 125003 AND 125005. |
| 34588-50 | ASIA/NEAR EAST | INDIA | 27/OCT/2007 | 1/NOV/2007 | DOUGLAS TAYLOR TO ATTEND THE ICMR/CONRAD/IPM SPONSORED REGIONAL MEETING ON REGULATORY ISSUES FOR MICROBICIDES IN ASIA. TO GIVE A PRESENTATION ON STATISTICAL ISSUES RELATED TO EFFECTIVENESS TRIALS. SALARY ONLY. FCO 139101. |
| 35029-50 | ASIA/NEAR EAST | INDIA | 13/NOV/2007 | 23/NOV/2007 | DAVID SOKAL TO ATTEND A MEETING TO ASSIST IN THE DEVELOPMENT IN AN AVAHAN DATA ANALYSIS PLAN TO MAXIMIZE THE USE OF THE EXTENSIVE M&E DATA GATHERED IN CONJUNCTION WITH THE LARGE HIV/IBBA SURVEY RECENTLY COMPLETED. TO ASSIST IN PREPARATIONS FOR THE INDO-US CLINICAL TRIAL OF THREE VASECTOMY TECHNIQUES. FCO 112128 AND 116103. |
| 34646-50 | ASIA/NEAR EAST | INDONESIA | 2/NOV/2007 | 17/NOV/2007 | MICHAEL WELSH TO CONDUCT A RESEARCH CAPACITY ASSESSMENT TO IDENTIFY CAPABILITIES AND SKILLS IN FHI/INDONESIA AND OTHER LOCAL INSTITUTIONS, ESTABLISH RESEARCH PRIORITIES AND TO CONSIDER RESEARCH DEVELOPMENT NEEDS AND NEXT STEPS. FCO 993501. |
| 34677-50 | ASIA/NEAR EAST | INDONESIA | 3/NOV/2007 | 16/NOV/2007 | CYNTHIA GEARY TO CONDUCT A RESEARCH CAPACITY ASSESSMENT TO IDENTIFY CAPABILITIES AND SKILLS IN FHI/INDONESIA AND OTHER LOCAL INSTITUTIONS, ESTABLISH RESEARCH PRIORITIES AND TO CONSIDER RESEARCH DEVELOPMENT NEEDS AND NEXT STEPS. FCO 993501. |

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FAMILY HEALTH INTERNATIONAL
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(RTP)

| <u>TA NUMBER</u> | <u>REGION</u> | <u>COUNTRY</u> | <u>START DATE</u> | <u>END DATE</u> | <u>TRAVELER</u> |
|------------------|----------------|----------------|-------------------|-----------------|---|
| 34647-50 | ASIA/NEAR EAST | INDONESIA | 10/NOV/2007 | 17/NOV/2007 | CRYSTAL DREISBACH TO CONDUCT RESEARCH CAPACITY ASSESSMENT TO IDENTIFY CAPABILITIES AND SKILLS IN FHI/INDONESIA AND OTHER LOCAL INSTITUTIONS, ESTABLISH RESEARCH PRIORITIES AND TO CONSIDER RESEARCH DEVELOPMENT NEEDS AND NEXT STEPS. FCO 993501. |
| 34302-50 | ASIA/NEAR EAST | KOREA | 5/OCT/2007 | 13/OCT/2007 | ELI CARTER TO MEET WITH UNIDUS MANAGEMENT TO DISCUSS CONTRACT PERFORMANCE AND TESTING PROFICIENCY CONCERNS. TO PARTICIPATE IN THE 24TH MEETING OF ISO TECHNICAL COMMITTEE 157. FCO 148104 AND 118100. |
| 34302-50 | ASIA/NEAR EAST | MALAYSIA | 13/OCT/2007 | 17/OCT/2007 | ELI CARTER TO VISIT THE FEMALE HEALTH COMPANY TO PERFORM A TECHNICAL ASSESSMENT OF THE FC2 MANUFACTURING OPERATION. FCO 118101. |
| 34412-50 | ASIA/NEAR EAST | THAILAND | 2/SEP/2007 | 13/SEP/2007 | JASON SMITH TO ATTEND THE USAID-SPONSORED "SCALING-UP FP/MCH BEST PRACTICES IN ASIA AND THE NEAR EAST". TO MAKE A PRESENTATION ON THE NEW INTERAGENCY YOUTH WORKING GROUP WEBSITE. TO CO-FACILITATE AN IBP-SPONSORED SKILLS BUILDING WORKSHOP ON "FOSTERING CHANGE" AND DISTRIBUTE FHI MATERIALS SUPPORTING FAMILY PLANNING BEST PRACTICES AT THE CONFERENCE'S EXHIBIT SITE. TO VISIT WITH COLLEAGUES IN FHI'S APRO OFFICE AND MAHIDOL UNIVERSITY'S ASEAN INSTITUTE FOR HEALTH DEVELOPMENT. FCO 113114, 125001 AND 113118. |
| 34399-50 | ASIA/NEAR EAST | THAILAND | 2/SEP/2007 | 12/SEP/2007 | IRENE YACOBSON TO PARTICIPATE IN THE TECHNICAL MEETING ON SCALING-UP FP/MNCH BEST PRACTICES IN ASIA AND THE NEAR EAST AND FACILITATE A WORKSHOP ENTITLED "TOOLS AND TIPS TO OVERCOME MEDICAL BARRIERS AND IMPROVE BEST CLINICAL PRACTICES IN FAMILY PLANNING". FCO 113114. |
| 34302-50 | ASIA/NEAR EAST | THAILAND | 28/SEP/2007 | 5/OCT/2007 | ELI CARTER TO WORK WITH THE PQC/BANGKOK STAFF AND MEET WITH THE STAFF IN APRO. FCO 148100. |
| 34497-50 | ASIA/NEAR EAST | THAILAND | 23/NOV/2007 | 30/NOV/2007 | PATTY ALLEMAN TO DEBRIEF APRO OFFICE IN STUDY AND ASSIST WITH DATA ANALYSIS/DATA COLLECTION CAPACITY BUILDING. FCO 132113. |

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| <u>TA NUMBER</u> | <u>REGION</u> | <u>COUNTRY</u> | <u>START DATE</u> | <u>END DATE</u> | <u>TRAVELER</u> |
|------------------|-----------------|----------------|-------------------|-----------------|--|
| 34778-50 | ASIA/NEAR EAST | THAILAND | 23/NOV/2007 | 28/NOV/2007 | WAYNE WIEBEL TO DEBRIEF THE APRO OFFICE ON THE STUDY IN VIETNAM. FCO 132113. |
| 34778-50 | ASIA/NEAR EAST | VIETNAM | 12/OCT/2007 | 23/NOV/2007 | WAYNE WIEBEL TO ASSIST WITH SITE INITIATION, COMMUNITY AND DATA COLLECTION TRAININGS AND START DATA COLLECTION FOR THE PILOT STUDY OF THE SEXUAL NETWORK STUDY TO BE CONDUCTED UNDER THE SITE IDENTIFICATION AND DEVELOPMENT INITIATIVE. FCO 132113. |
| 34779-50 | ASIA/NEAR EAST | VIETNAM | 12/OCT/2007 | 3/NOV/2007 | NANCY DESOUSA TO CONDUCT STUDY INITIATION TRAINING FOR VIETNAM NETWORK FORMATIVE AND PILOT STUDY. FCO 132113. |
| 34497-50 | ASIA/NEAR EAST | VIETNAM | 13/OCT/2007 | 4/NOV/2007 | PATTY ALLEMAN TO CONDUCT STUDY INITIATION TRAINING FOR VIETNAM NETWORK FORMATIVE AND PILOT STUDY. FCO 132113. |
| 34497-50 | ASIA/NEAR EAST | VIETNAM | 17/NOV/2007 | 23/NOV/2007 | PATTY ALLEMAN TO MONITOR STUDY INITIATION AND TRAIN AS NEEDED. TO DEBRIEF IN-COUNTRY PARTNERS. FCO 132113. |
| 34124-50 | DEMOCRATIC REPU | ST. LUCIA | 7/JUL/2007 | 15/JUL/2007 | SUZANNE FISCHER TO PARTICIPATE IN A THREE-DAY TRAINING/FIELD TEST FOR A DRAFT TRAINING GUIDE FOR HIV COUNSELING AND TESTING FOR YOUTH: A MANUAL FOR PROVIDERS. FCO 125005. |
| 34679-50 | EUROPE | ENGLAND | 16/OCT/2007 | 21/OCT/2007 | ERIN MCGINN TO ATTEND AND PRESENT AT THE WOMEN DELIVER CONFERENCE. FCO 113114. |
| 34680-50 | EUROPE | PORTUGAL | 11/NOV/2007 | 11/DEC/2007 | NATASHA MACK TO COMPLETE A FOUR-WEEK INTENSIVE PORTUGUESE TRAINING COURSE IN ORDER TO FACILITATE COMMUNICATION ON BEHALF OF THE SIDI TEAM FOR PROJECT SITES IN MOZAMBIQUE. FCO 132113. |
| 33738-50 | EUROPE | SWITZERLAND | 30/JUL/2007 | 13/AUG/2007 | ELI CARTER TO PARTICIPATE IN WHO/UNFPA TECHNICAL EXPERTS MEETINGS. FCO 118101. |
| 34685-50 | EUROPE | SWITZERLAND | 3/NOV/2007 | 8/NOV/2007 | WILLIAM FINGER TO MEET WITH WHO STAFF REGARDING OVERLAPPING YOUTH PROJECTS, INCLUDING THE FALL IYWG MEETING, THE IYWG WEBSITE AND FUTURE ISSUES PAPERS. FCO 125001, 125003 AND 125005. |

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FAMILY HEALTH INTERNATIONAL
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(RTP)

| <u>TA NUMBER</u> | <u>REGION</u> | <u>COUNTRY</u> | <u>START DATE</u> | <u>END DATE</u> | <u>TRAVELER</u> |
|------------------|---------------|--------------------|-------------------|-----------------|--|
| 34464-50 | L. AMERICA | ARGENTINA | 27/OCT/2007 | 4/NOV/2007 | NINCOSHKA ACEVEDO TRAVELED FROM ITALY TO CONDUCT A PERIODIC MONITORING VISIT FOR THE PROJECT ENTITLED "A MULTICENTRE RANDOMIZED CLINICAL TRIAL FOR TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN, JADELLE AND IMPLANON". FCO 112125. |
| 34440-50 | L. AMERICA | ARGENTINA | 30/OCT/2007 | 4/NOV/2007 | MARKUS STEINER TO ATTEND THE WHO INVESTIGATORS MEETING OF THE PROJECT AI 5229 "MULTICENTRE RANDOMIZED CLINICAL TRIAL OF TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN: JADELLE AND IMPLANON". FCO 112125. |
| 35139-50 | L. AMERICA | BRAZIL | 15/DEC/2007 | 23/DEC/2007 | NINCOSHKA ACEVEDO TO CONDUCT A PERIODIC MONITORING VISIT FOR THE STUDY ENTITLED "A MULTICENTRE RANDOMIZED CLINICAL TRIAL OF TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN, JADELLE AND IMPLANON". FCO 112125. |
| 35156-50 | L. AMERICA | BRAZIL | 16/DEC/2007 | 23/DEC/2007 | JOY COKER TO CONDUCT A PERIODIC MONITORING VISIT FOR THE STUDY ENTITLED "A MULTICENTRE RANDOMIZED CLINICAL TRIAL OF TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN, JADELLE AND IMPLANON". FCO 112125. |
| 34464-50 | L. AMERICA | CHILE | 21/OCT/2007 | 27/NOV/2007 | NINCOSHKA ACEVEDO TRAVELED FROM ITALY TO CONDUCT A PERIODIC MONITORING VISIT FOR THE PROJECT ENTITLED "A MULTICENTRE RANDOMIZED CLINICAL TRIAL FOR TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN, JADELLE AND IMPLANON". FCO 112125. |
| 34464-50 | L. AMERICA | DOMINICAN REPUBLIC | 5/OCT/2007 | 14/OCT/2007 | NINCOSHKA ACEVEDO TRAVELED FROM ITALY TO CONDUCT A PERIODIC MONITORING VISIT FOR THE PROJECT ENTITLED "A MULTICENTRE RANDOMIZED CLINICAL TRIAL FOR TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN, JADELLE AND IMPLANON". FCO 112125. |
| 34699-50 | L. AMERICA | DOMINICAN REPUBLIC | 7/OCT/2007 | 14/OCT/2007 | JOY COKER TO CONDUCT A PERIODIC MONITORING VISIT FOR THE STUDY ENTITLED "A MULTICENTRE RANDOMIZED CLINICAL TRIAL OF TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN, JADELLE AND IMPLANON". FCO 112125. |
| 34758-50 | L. AMERICA | DOMINICAN REPUBLIC | 12/OCT/2007 | 14/OCT/2007 | BELINDA IRSULA TO CONDUCT AN ON-SITE GCP TRAINING FOR PROFAMILIA STAFF. FCO 112125. |
| 34640-50 | L. AMERICA | DOMINICAN REPUBLIC | 2/DEC/2007 | 8/DEC/2007 | ROBERTO RIVERA TO REPRESENT FHI IN THE ANNUAL MEETING OF THE REGIONAL ADVISORY PANEL OF THE AMERICAS OF WHO-RHR. FCO 112110. |

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(RTP)

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|------------------|---------------|----------------|-------------------|-----------------|--|
| 34988-50 | L. AMERICA | GUATEMALA | 3/DEC/2007 | 7/DEC/2007 | ANJA LENDVAY TO CONDUCT A MONITORING VISIT FOR THE STUDY ENTITLED "CONTINUOUS VERSUS CYCLIC USE OF COMBINED ORAL CONTRACEPTIVE PILLS". FCO 112118. |
| 35155-50 | L. AMERICA | GUATEMALA | 3/DEC/2007 | 7/DEC/2007 | LAURA JOHNSON TO CONDUCT A MONITORING VISIT FOR THE STUDY ENTITLED "CONTINUOUS VERSUS CYCLIC USE OF COMBINED ORAL CONTRACEPTIVE PILLS". FCO 112118. |
| 33317-50 | N.AMERICA | USA | 26/JUL/2007 | 2/AUG/2007 | WILLARD CATES TO ATTEND AND PARTICIPATE IN THE 17TH MEETING OF THE INTERNATIONAL SOCIETY FOR SEXUALLY TRANSMITTED DISEASES RESEARCH AND THE 10TH INTERNATIONAL UNION AGAINST SEXUALLY TRANSMITTED INFECTIONS. FCO 119502. |
| 34139-50 | N.AMERICA | USA | 18/AUG/2007 | 25/AUG/2007 | ORIKOMABA OBUNGE TRAVELED FROM NIGERIA TO MEET WITH CRD AND BASS STAFF IN REGARDS TO THE RCT OF CELLULOSE SULFATE AND HIV IN NIGERIA STUDY. FCO 132100. |
| 34140-50 | N.AMERICA | USA | 18/AUG/2007 | 25/AUG/2007 | FOLASADE OGUNSOLA TRAVELED FROM NIGERIA TO MEET WITH CRD AND BASS STAFF IN REGARDS TO THE RCT OF CELLULOSE SULFATE AND HIV IN NIGERIA STUDY. FCO 132100. |
| 34464-50 | N.AMERICA | USA | 14/OCT/2007 | 16/OCT/2007 | NINCOSHKA ACEVEDO TRAVELED FROM ITALY TO OBTAIN VISA FOR BRAZIL. FCO 112125. |
| 34464-50 | N.AMERICA | USA | 16/OCT/2007 | 21/OCT/2007 | NINCOSHKA ACEVEDO TRAVELED FROM ITALY TO WORK WITH FHI/NC TEAM ON THE STUDY ENTITLED "A MULTICENTRE RANDOMIZED CLINICAL TRIAL OF TWO IMPLANTABLE CONTRACEPTIVES FOR WOMEN, JADELLE AND IMPLANON" AND FINALIZE PRESENTATIONS FOR THE UPCOMING WHO INVESTIGATOR'S MEETING IN ARGENTINA. FCO 112125. |
| 34821-50 | N.AMERICA | USA | 20/OCT/2007 | 3/NOV/2007 | REWA KOHLI TRAVELED FROM INDIA TO WORK WITH FHI STAFF ON ANALYSIS OF DATA FROM THE COLLABORATIVE STUDY ENTITLED "SUSTAINED ACCEPTABILITY OF VAGINAL MICROBICIDES: MALE AND FEMALE PERSPECTIVES IN PUNE, INDIA". FCO 136100. |
| 34869-50 | N.AMERICA | USA | 11/NOV/2007 | 19/NOV/2007 | SARAH THOMSEN TRAVELED FROM SWEDEN TO WORK WITH COLLEAGUES ON 1) DEVELOPMENT OF SEXUALITY CURRICULUM FOR KENYAN SERVICE PROVIDERS, 2) DEVELOPMENT OF PROTOCOL AND INSTRUMENTS FOR NEEDS ASSESSMENT FOR MALE CIRCUMCISION IN UGANDA, 3) LEARNING NEW FORMS AND PROCESSES FOR PROJECT MANAGEMENT AND 4) DEVELOPMENT OF PROTOCOL FOR CORE-FUNDED DUAL PROTECTION STUDY IN TANZANIA. FCO 114120, 116103 AND 603300. |

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|------------------|---------------|----------------|-------------------|-----------------|---|
| 34938-50 | N.AMERICA | USA | 26/NOV/2007 | 28/NOV/2007 | WILLIAM POTTER TRAVELED FROM ENGLAND TO ATTEND THE TECHNICAL OVERSIGHT COMMITTEE MEETING. FCO 118103. |
| 35024-50 | N.AMERICA | USA | 9/DEC/2007 | 13/DEC/2007 | SUSAN ADAMCHAK TO UPDATE FHI/NC COLLEAGUES ON THE PROGRESS TO DATE ON FIELDWORK FOR THE STUDY "COUNTRY ASSESSMENTS: DOCUMENTING FAMILY PLANNING-HIV INTEGRATION MODELS IN FIVE COUNTRIES IN AFRICA". FCO 114124. |
| 35091-50 | N.AMERICA | USA | 10/DEC/2007 | 11/DEC/2007 | CHRISTINE LASWAY TO ATTEND THE FELXIBLE FUND PARTNERS MEETING ENTITLED "BACK TO THE BASICS: COMMUNITY-BASED FAMILY PLANNING MESSAGES". FCO 113135 AND 113134. |



APPENDIX E

FHI Board of Directors and ADVISORY COMMITTEE ROSTERS

**July 2007
through
December 31, 2007**

FAMILY HEALTH INTERNATIONAL

Board of Directors

- | | | | |
|------|---|------|---|
| 2009 | Torrey C. Brown, MD Chairman of the Board INTRALYTIX, Inc. The Warehouse at Camden Yards 323 West Camden Street, Suite 675 Baltimore, MD 21201 410/625-0300 (B) 410/215-3012 (Cell) 410/625-2244 (F) Torrey@intralytix.com | 2011 | Albert J. Siemens, PhD Chair/Chief Executive Officer Family Health International Post Office Box 13950 Research Triangle Park, NC 27709 919/544-7040; 405-1418 (B) 919/544-7533 (F) asiemens@fhi.org |
| 2010 | Susan G. Dull Commonwealth of Virginia Agency Head (retired) 304 St. David's Lane Richmond, VA 23221 804/358-5741 (R) 804/914-9791 (Cell) 804/358-9262 (F) sdull@comcast.net | 2010 | Edward W. Whitehorne, AM Partner, CI Partners, LLC 4216 Green Level Road West Apex, NC 27523-7501 919/368-8990 (Voice) 919/362-5991 (F) ed@cipartners.com |
| 2011 | Luella V. Klein, MD Vice President, Women's Health Issues The American College of Obstetricians & Gynecologists (ACOG) Charles Howard Candler Professor Department of Gynecology/Obstetrics Emory University School of Medicine Thomas K. Glenn Memorial Building 69 Jesse Hill, Jr. Drive, SE, Suite 412 Atlanta, GA 30303 404/616-8500/3540 (B) 404/616-5599 (F) lklein@gmh.edu | 2011 | R. Peyton Woodson, III, MBA Woodson Associates Post Office Box 12346 Raleigh, NC 27605 919/833-2882 (B) 919/833-4754 (F) rpwiii@nc.rr.com |
| 2009 | Martin Mittag-Lenkheym, LLD Vice President, Sales & Marketing John S. Herold, Inc. 14 Westport Avenue, Suite 2 Norwalk, CT 06851-3915 203/847-3344, Ext. 231 (B) 203/847-5566 (F) 203/834-9904 (R) 203/858-4449; 554-2728 (Cell) 203/834-1615 (F) mmittag@herold.com mmittag@msn.com | | |

*Note: The year indicates the fiscal year
each Director rotates off the Board*

Effective October 1, 2007

Officers – Family Health International

Dr. Albert J. Siemens, Chair/Chief Executive Officer
Mr. Edward W. Whitehorne, Vice Chair
Ms. Susan G. Dull, Secretary
Ms. Marie F. Porter, Assistant Secretary
Mr. Martin Mittag-Lenkheym, Treasurer
Dr. Willard Cates, Jr., President/Research
Dr. Peter R. Lamptey, President/Public Health Programs
Mr. C. Steven Smoot, Executive Vice President/Chief Financial Officer
Mr. Robert R. Price, Executive Vice President/General Counsel
Ms. Sheila W. Mitchell, Senior Vice President/Global Operations
Ms. Laura Kayser, Vice President/Global Operations
Mr. David G. Mein, Vice President/Finance & Administration
Ms. Manisha Bharti, Vice President/Planning, Development & Communication

Research

Dr. Willard Cates, Jr., President
Mr. Gary R. West, Senior Vice President/Research & Strategic Coordination
Dr. Laneta Dorflinger, Vice President/Clinical Research
Dr. David A. Grimes, Vice President/Biomedical Affairs
Dr. Kenneth F. Schulz, Vice President/Quantitative Sciences
Dr. Michael J. Welsh, Vice President/Applied Research

Public Health Programs

Dr. Peter R. Lamptey, President
Dr. Edward Dennison, Vice President

Global Operations

Ms. Sheila W. Mitchell, Senior Vice President
Ms. Laura Kayser, Vice President

Effective March 17, 2008

FAMILY HEALTH INTERNATIONAL

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- Note: The year indicates the fiscal year each
committee member rotates off*
- Effective October 1, 2007*

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Revised: January 22, 2008

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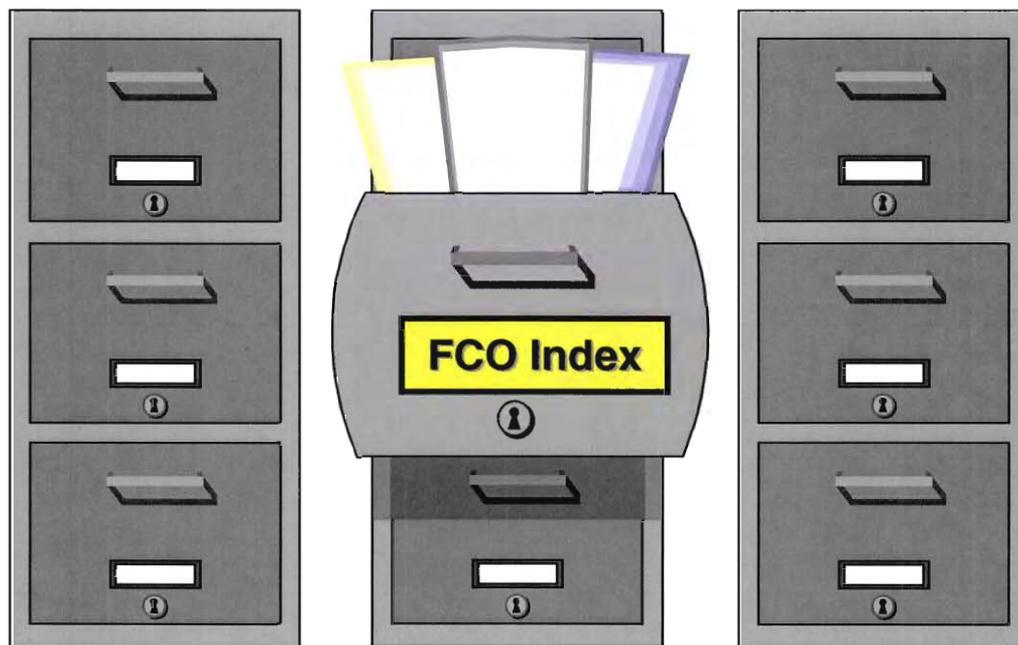
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