

ISN: 13206

PD-AAL-417

9320968/49

AGENCY FOR INTERNATIONAL DEVELOPMENT
PROJECT AUTHORIZATION AND REQUEST
FOR ALLOTMENT OF FUNDS PART I

1 TRANSACTION CODE

A ADD
 C CHANGE
 D DELETE

PAF

2 DOCUMENT CODE
5

3. COUNTRY/ENTITY

Interregional

4 DOCUMENT REVISION NUMBER

5 PROJECT NUMBER (7 digits)

932-0968

6. BUREAU/OFFICE

A SYMBOL B CODE
PHA 05

7. PROJECT TITLE (Maximum 40 characters)

Program in Voluntary Sterilization

8. PROJECT APPROVAL DECISION

ACTION TAKEN

A APPROVED
 D DISAPPROVED
 DE DEAUTHORIZED

9. EST. PERIOD OF IMPLEMENTATION

YRS 7 8 QTRS 4

10 APPROVED BUDGET AID APPROPRIATED FUNDS (\$000)

A. APPROPRIATION	B PRIMARY PURPOSE CODE	PRIMARY TECH. CODE		E 1ST FY 78		H. 2ND FY 79		K 3RD FY 80	
		C GRANT	D LOAN	F GRANT	G LOAN	I GRANT	J LOAN	L GRANT	M LOAN
(1) PH	440	440		6,000		7,550		10,070	
(2)									
(3)									
(4)									
TOTALS				6,000		7,550		10,070	

A. APPROPRIATION	N. 4TH FY		O. 5TH FY		LIFE OF PROJECT		11 PROJECT FUNDING AUTHORIZED	
	O. GRANT	P LOAN	R. GRANT	S. LOAN	T GRANT	U. LOAN	ENTER APPROPRIATE CODE(S) 1 - LIFE OF PROJECT 2 - INCREMENTAL, LIFE OF PROJECT	A GRANT B LOAN
(1) PH					35,096			2
(2)								
(3)								
(4)								
TOTALS					35,096			C PROJECT FUNDING AUTHORIZED THRU FY <input type="checkbox"/> 8 <input type="checkbox"/> 0

12. INITIAL PROJECT FUNDING ALLOTMENT REQUESTED (\$000)

A APPROPRIATION	B. ALLOTMENT REQUEST NO 1	
	C GRANT	D LOAN
(1) PH	6,000	
(2)		
(3)		
(4)		
TOTALS		6,000

13 FUNDS RESERVED FOR ALLOTMENT

TYPED NAME (Char, SER/FM/FSD)

SIGNATURE

DATE

14. SOURCE/ORIGIN OF GOODS AND SERVICES

000 941 LOCAL OTHER

15. FOR AMENDMENTS, NATURE OF CHANGE PROPOSED

Note: This project also authorizes the negotiation in FY 1977 of a three-year grant agreement with the Association for Voluntary Sterilization, Inc. Incremental funding for this grant, however, will begin in FY 1978.

FOR PPC/PIAS USE ONLY	16. AUTHORIZING OFFICE SYMBOL	17. ACTION DATE	18. ACTION REFERENCE (Optional)	ACTION REFERENCE DATE
		MM DD YY		MM DD YY

In September 1978, IPAVS developed a third three-year management plan for the years 1978-1980. In this latest plan the 7 objectives of IPAVS are described and under each objective the various activities necessary to achieve these objectives are listed. To facilitate use of this plan, IPAVS now has an in-house computer. This system stores, feeds-back and analyzes the increasing amount of data needed for successful subgrant management. This is an important service because of the increasing size, complexity and numbers of subgrants being awarded. Over the past three years IPAVS has doubled its middle-level staff to handle this increased activity.

I accept your suggestion that the next formal IPAVS evaluation be advanced from February 1980 to September of 1979. This earlier timetable will insure that the IPAVS evaluation is completed and circulated prior to awarding planned 1980 funds. Any recommended changes in IPAVS funding or in IPAVS programs can thus be incorporated within a grant amendment, if necessary.

Between May 30, 1972 and December 31, 1978, IPAVS has received and efficiently managed a total of \$25,400,000 in AID funds. (under Grant 3611 (\$7,950,000) and Grant 1128 (\$17,450,000)). During this time all audits have been completely satisfactory and no expenditures have ever been successfully questioned or disallowed.

Because of its record of performance, its competent staff, its detailed plans for management and its two very positive evaluations, I, as Project Monitor, feel secure in awarding these planned 1979 funds to IPAVS at this time.

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PROJECT AUTHORIZATION AND REQUEST FOR ALLOTMENT OF FUNDS

PART II

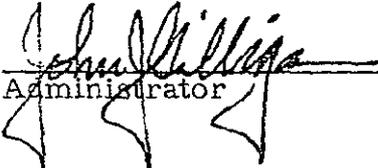
Name of Country/Entity: Interregional

Name of Project: International Project of the Association
for Voluntary Sterilization

Number of Project: 932-0968

Pursuant to Part I, Chapter 1, Section 104 of the Foreign Assistance Act of 1961, as amended, I hereby authorize a total level of A. I. D. -appropriated funding planned for this interregional project of not to exceed twenty-three million six hundred twenty thousand United States Dollars (\$23,620,000) of which the entire amount will be grant funded during FY 1978 through 1980 in accordance with the attached PP.

I also authorize the local procurement of commodities by subgrantees of the grantee under this project in an amount not to exceed a total cost of \$15,000 per subgrantee per annum without regard to limitations, rules and procedures applicable to commodity transactions financed by A. I. D. This authority will be on the same terms and conditions as currently apply to the \$5,000 local purchase authority contained in paragraph 4Eli(2), A. I. D. Handbook 13, and shall be limited to 20 subgrantees during the first year of the grant, 30 during the second year, and 40 during the third year.



Administrator

8-25-77

Date

INTERNATIONAL PROJECT
OF THE
ASSOCIATION FOR VOLUNTARY STERILIZATION, INC.

REVISED MANAGEMENT PLAN
FY SEPTEMBER 1 - AUGUST 31, 1978-1981

Submitted:

August, 1978

(M. E. Schima, R.N., Ed.D., M.P.H.)

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INTERNATIONAL PROJECT
OF THE
ASSOCIATION FOR VOLUNTARY STERILIZATION, INC.

MANAGEMENT PLAN
FISCAL YEAR 1978-79 TO FISCAL YEAR 1980-81
REVISION

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INTRODUCTION TO 1978-1981 MANAGEMENT PLAN

THE 1975-1978 MANAGEMENT PLAN ENCOMPASSED A PERIOD OF GREAT EXPANSION FOR IPAVS. IN JANUARY 1975, IPAVS HAD 41 ACTIVE SUB-GRANTS; BY 1978 THE NUMBER HAD INCREASED TO 94 CURRENTLY ACTIVE SUB-GRANTS. THE NUMBER OF PROFESSIONAL STAFF ROSE FROM 10 TO 28, INCLUDING THE CREATION OF A MIDDLE-MANAGEMENT LEVEL OF COORDINATORS. THE NEW MANAGEMENT PLAN FOR 1978-1981 WILL REFLECT IPAVS' GROWTH IN SIZE AND THE BROADENED RESPONSIBILITY AND PERSPECTIVE CONCOMITANT WITH SUCH GROWTH. THE AGENCY-WIDE OBJECTIVES HAVE INCREASED IN NUMBER, INCLUDING AN EXPRESS STATEMENT OF IPAVS' PREVIOUSLY TACIT BUT ALWAYS PRESENT COMMITMENT TO INTEGRATING VOLUNTARY STERILIZATION INTO THE TOTAL HEALTH CARE SYSTEM.

TECHNICALLY THE 1978-1981 MANAGEMENT PLAN IS VERY SIMILAR TO THE 1975-1978 MANAGEMENT PLAN. UNDER EACH SPECIFIC AGENCY-WIDE OBJECTIVE IS A LIST OF ACTIVITIES NECESSARY FOR COMPLETION OF THAT OBJECTIVE. THERE HAVE BEEN CHANGES IN WORDING, ADDITION OF NEW OBJECTIVES AND ACTIVITIES, AND AN EMPHASIS ON LOGICAL ORGANIZATION.

IT SHOULD BE NOTED THAT WHILE ACTIVITIES ARE ORGANIZED BY THEIR FUNCTIONAL AREA, ALL ARE INTER-RELATED IN THE ACHIEVEMENT OF AGENCY OBJECTIVES. THEREFORE, IT WAS AT TIMES SOMEWHAT ARBITRARY TO DESIGNATE AN ACTIVITY AS BELONGING UNDER ONE SPECIFIC OBJECTIVE, AND IN SOME CASES OVERLAP OF ACTIVITIES FROM ONE OBJECTIVE TO ANOTHER CLEARLY EXISTS.

AS WITH THE PREVIOUS PLAN, EACH ACTIVITY IS DESIGNATED AS EITHER A PLANNING, IMPLEMENTING, OR EVALUATING ACTIVITY. THUS THE MANAGEMENT PLAN WILL CONTINUE TO SERVE AS A TOOL FOR MEASURING IPAVS' PROGRESS BY COMPARING ACCOMPLISHMENTS WITH PROJECTED ACTIVITIES AND THEIR RESPECTIVE TIME FRAMES. USE OF THE PLAN WILL CHART OUR SUCCESSES AND THOSE OF OUR SUB-GRANTEES. FINALLY, IT WILL GIVE OUTSIDE EVALUATORS A HANDLE FOR ASSESSING OUR PROGRESS AND EFFECTIVENESS.

THE DEGREE TO WHICH THIS MOST RECENT MANAGEMENT PLAN CAN BE CARRIED OUT CONTINUES TO DEPEND ON THE SUPPORT OF THE INTERNATIONAL PROJECT'S FUNDERS, AVS AND AID, AS WELL AS THE COOPERATION OF THE INTERNATIONAL, MEDICAL, FAMILY PLANNING, AND HEALTH COMMUNITIES.

PURPOSE OF IPA VS MANAGEMENT PLAN

IPA VS regards the Management Plan as our opportunity of presenting a comprehensive guide to our projected goals and a detailed plan of action necessary for their accomplishment. The basic function of this document as a guide to organizational growth, development and as a monitoring tool has not changed since IPA VS' inception. In particular, our Management Plan serves:

- As a functional guide by which all activities are specifically identified and their accomplishment planned according to a clearly designated time frame;
- As a tool by which all IPA VS' offices may objectively assess their achievements;
- As an opportunity to involve total staff in the planning process;
- As a basis for modification or expansion of organizational activities;
- To provide the basis for external evaluation;
- To provide a departure point from which to plan new activities, changed emphases and broadened scope;
- As a foundation for projecting budget, staff, facilities and other organizational requirements.

IPA VS Management reiterates our commitment to using the Management Plan as an integral part of organizational planning. The scope of our activities has been comprehensively set forth and the time sequence for achievement has been stated. We proceed from here and look forward to 1981, expecting the status of voluntary sterilization to be still more firmly established as a method of improving family welfare.

IPAVS GOAL

The goal of IPAVS is to establish voluntary sterilization as an integral component of family planning programs throughout the world by focusing the attention of the international health community on voluntary sterilization as an effective method of fertility limitation.

IPAVS OBJECTIVES: SEPTEMBER, 1978 - AUGUST, 1981

- I. Assist LDC's in designing, developing, and implementing voluntary sterilization service programs within total health care programs.
- II. Promote the development of Information and Education programs as part of voluntary sterilization services and assist appropriate organizations to incorporate a selection of voluntary sterilization materials in their libraries.
- III. Stimulate and support the development of indigenous leadership organizations such as the National Associations for Voluntary Sterilization.
- IV. Stimulate and support the development of the World Federation of Associations for Voluntary Sterilization.
- V. Support, organize and conduct international, regional and country conferences relating to voluntary sterilization.
- VI. Assist in developing training programs for all levels of health team members including physicians, nurses, midwives, social workers, equipment technicians and managers, as well as others involved in voluntary sterilization programs.
- VII. Continue to incorporate comprehensive management systems to ensure IPAVS' responsive, flexible, and dynamic support of the worldwide voluntary sterilization movement.

MANAGEMENT RESPONSIBILITIES TO ACHIEVE OBJECTIVES

IPAVS Management is committed to achieving the objectives and completing the activities set forth in the 1978-1981 Management Plan. In order for this document to be a meaningful planning tool, all activities have been comprehensively reviewed and designated according to their stage of managerial development.

Three stages of activity development have been assigned, viz., planning, implementing and evaluating. These stages form the natural life cycle of an activity - through development of abstract concept into a planned activity, implementing, and finally evaluating the course of action. The planning category refers to those activities which are involved with determining the projects which should be implemented, and then, formulating the appropriate strategies. Implementing activities are those which deal with putting plans into action. Evaluation activities are those which enable the assessment of project accomplishment, provide methods of improving programs in the future, and lead to future planning strategies.

A. Program Planning - (P)

Activities are categorized as planning if they are concerned with:

1. Identifying goals and objectives;
2. Defining data necessary to make decisions;
3. Collecting and analyzing these required data;
4. Outlining the choices available to implement the project;
5. Developing the organizational structure necessary to implement the various courses of action with consideration given to staffing, legal and financial constraints; and
6. Selecting the course of action.

B. Program Implementation - (I)

Activities are categorized as implementing if they are concerned with:

1. Applying the organizational strategy developed during the planning stage ;
2. Adhering to budgetary, legal and staffing restrictions, and
3. Delivering the program components.

C. Program Evaluation - (E)

Activities are categorized as evaluating if they are concerned with:

1. Designing and developing an evaluation strategy;
2. Designing and developing data gathering and analysis tools;
3. Collecting the required data;
4. Analyzing the data;
5. Preparing reports;
6. Using reports to measure effectiveness of programs and/or adherence of programs to plans; and
7. Basing management decisions for future planning and implementation on the results of the evaluation.

ORGANIZATION OF THE 1978-1981 MANAGEMENT PLAN

The organization of the 1978-1981 Management Plan closely follows that of its two predecessors. Included are the following components:

1. Statement of purpose of the Management Plan;
2. Overall project goals and objectives;
3. Identification of management responsibilities required to achieve goals and objectives;
4. The specific activities required to achieve the objectives;
5. Gantt Charts which show the timetable necessary for performing all activities.

The 1978-1981 Management Plan sets forth two new objectives which reflect IPAVS' increasing concern with integrating voluntary sterilization into total health care services and with ensuring responsive management practices as our organization continues its rapid expansion of responsibilities.

A comprehensive set of activities is set forth under each objective. Similar to the previous Management Plans, many activities relate to the growth and development of our organization and to the implementation of program activities. However, as many of our programs have been in operation for an increasing number of years, this Management Plan emphasizes the necessity to evaluate our accomplishments. In this regard, specific evaluation activities are to be found throughout the Plan and under every objective.

In the following section each major objective is stated, followed by the actions necessary to accomplish the objective. Each action is designated as either Planning, Implementing or Evaluating. This has been indicated in parenthesis by abbreviation (i.e., P, I, E).

Each objective is accompanied by a Gantt Chart which outlines the timetable associated with the activities. The chart will further show whether activities occur at discreet intervals, on an ongoing basis, or are performed as requested. Activities are specified in the chart by the same number with which they are listed in the text.

OBJECTIVE I:

Assist LDC's in designing, developing, and implementing voluntary sterilization service programs within total health care programs.

ACTIVITIES:

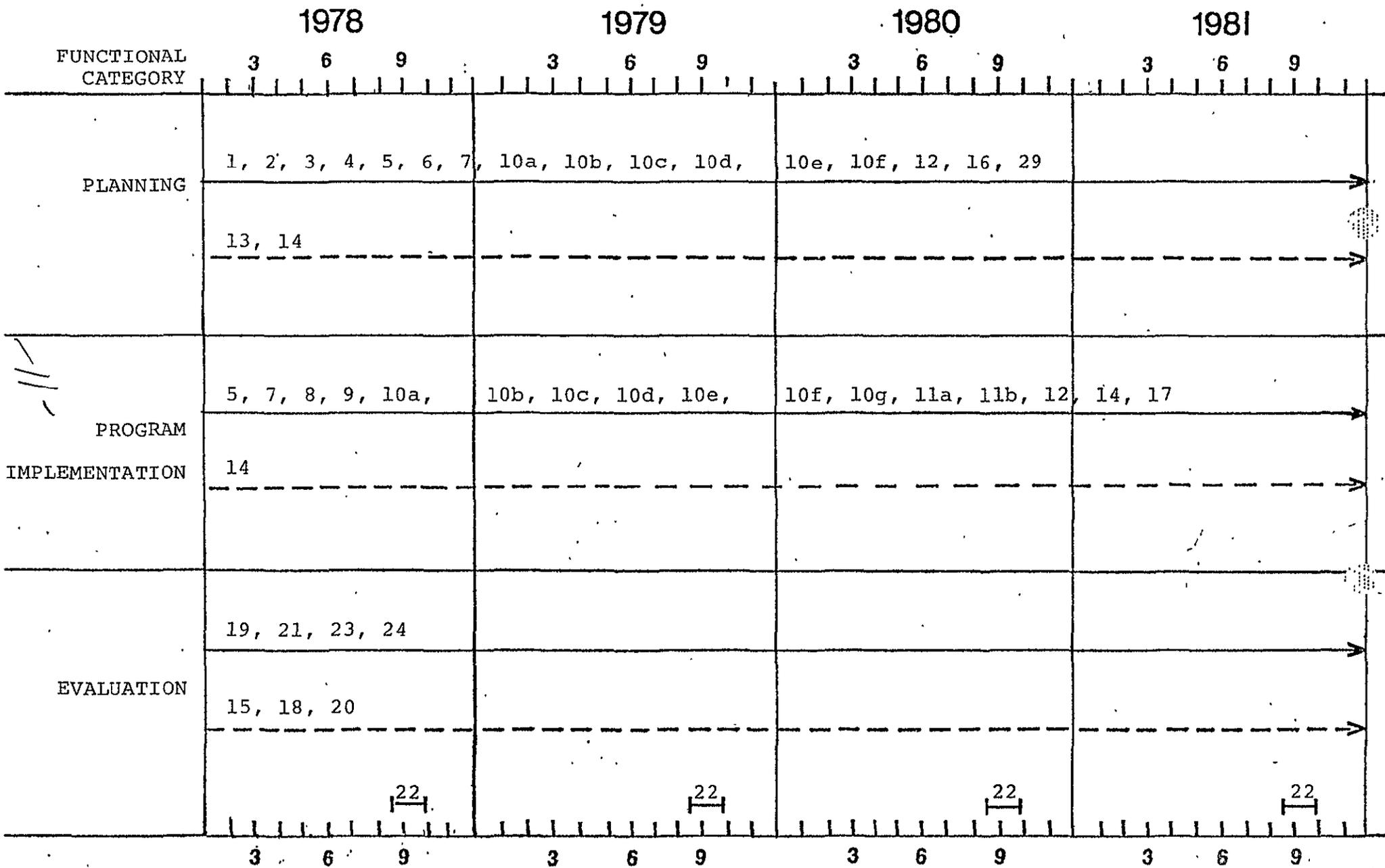
1. Initiate contact with potential sub-grantees by identifying key leaders in the family planning and health fields in developing countries. (P)
2. Communicate with potential sub-grantees to develop proposals for the provision of the full range of voluntary sterilization support categories. (P)
3. Develop procedures and criteria for maintaining the communication network established between IPAVS and leadership in developing countries. (P)
4. Maintain efficient and responsive mechanisms with AID/ Washington for the award of all categories of grants. (P)
5. Work with sub-grantees to develop proposals for programs to implement the full range of voluntary sterilization services. (P, I)
6. Investigate and document compliance of sub-grant applicants regarding the use of IPAVS' informed consent procedures and guidelines. (P)
7. Follow in-house procedures, revised as necessary, and established AID mechanisms for approval of the full range of voluntary sterilization grant categories. (P, I)
8. Maintain sub-grant review and other committees' procedures and processes. (I)
9. Continuously aid in developing and implementing service programs through site visits and/or the provision of technical consultants. (I)
10. Award and monitor sub-grants that will provide resources in the following areas to organizations, individuals, or government programs interested or engaging in the provision of voluntary sterilization services:
 - a. Reimbursement of incremental hospital clinical

- expenses for provision of voluntary sterilization services (P, I)
- b. Staffing, administration, and travel (P, I)
 - c. Training programs (P, I)
 - d. Information, education, and communication (P, I)
 - e. Capital equipment (P, I)
 - f. Materials and supplies (P, I)
 - g. Other categories of programs meeting criteria established by IPAVS in planning and developing its overall goal of promoting voluntary sterilization. (I)
11. Use IPAVS Regional Offices to stimulate, assist in developing, and monitor comprehensive voluntary sterilization service programs by:
- a. Communicating, interpreting, and clarifying IPAVS policies, procedures, and contractual requirements on-site to potential and existing sub-grantees; (I) and
 - b. Relaying problems, needs, plans, requests, progress, etc. of potential and existing sub-grantees, coordinating with the New York Office for speedy responses and action. (I)
12. Develop the mechanisms by which sub-grantees receive and maintain equipment by identifying common problems, reviewing and revising repair procedures, and continuing to train repair technicians in-country. (P, I)
13. Identify countries where Repair and Maintenance Centers are appropriate based on the number of laparoscopes and other endoscopic equipment and availability of qualified technicians. (P)
14. Locate institutions suitable for handling RAM Centers having established criteria for determining suitability. (P, I)
15. Evaluate the impact of IPAVS-funded RAM Centers by analyzing trends in equipment "longevity" and declines in equipment problem reports. (E)

16. Construct comprehensive country and regional profiles regarding the status of voluntary sterilization and factors affecting such status in every country and region where IPAVS funds, or could potentially fund programs. (P)
17. Implement country and regional action plans for advancing voluntary sterilization based on analysis of country profiles. (I)
18. Periodically review, assess, and revise country and regional profiles and action plans. (E)
19. Provide technical assistance to sub-grantees on general evaluation issues, including survey design, data processing, setting up evaluation systems, and assessing program impact. (P, E)
20. Analyze patient records from selected sub-grants for evaluating the geographic coverage of IPAVS programs and the socio-demographic characteristics of acceptors. (E)
21. Identify with the Regional Offices those sub-grantees who are most in need of evaluation assistance for their own operations research and program assessment. (E)
22. Perform cost/benefit analysis for selected projects so that we may isolate those program factors associated with a favorable cost/benefit ratio. (E)
23. Use the revised evaluation forms to provide feedback to sub-grantees on their progress toward meeting their sub-grant objectives. (E)
24. Study the various IPAVS data sources to gain insights into those variables associated with sub-grantee progress. (E)

|-----| COMPLETED ACTIVITY
 |-----| ONGOING ACTIVITY
 |-----| IMPLEMENTED AS REQUIRED

OBJECTIVE I



OBJECTIVE II:

Promote the development of Information and Education programs as part of voluntary sterilization services and assist appropriate organizations to incorporate a selection of voluntary sterilization material in their libraries.

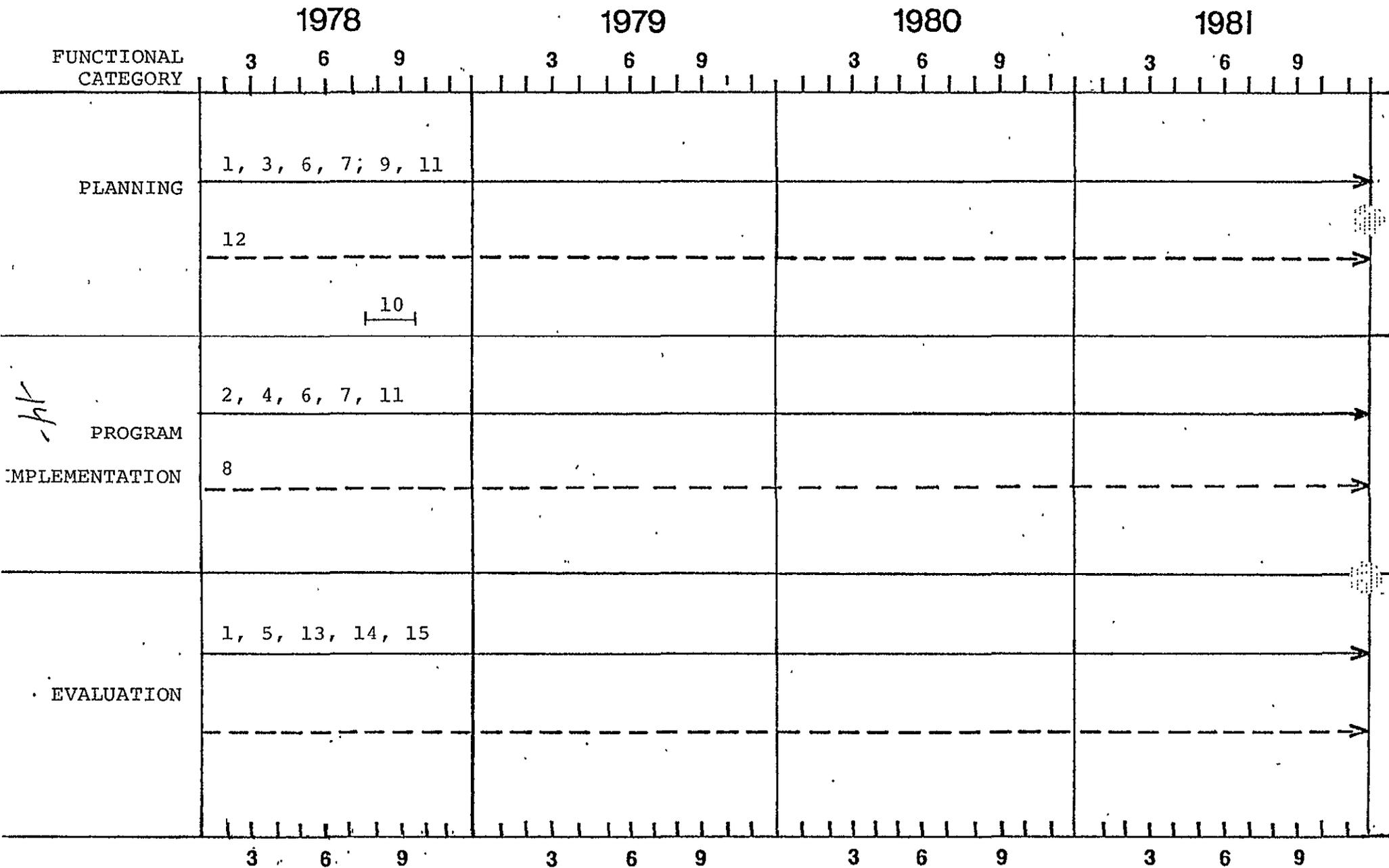
ACTIVITIES:

1. Review and assess the Information and Education strategies of sub-grantees and the National Associations for Voluntary Sterilization. (P, E)
2. Provide technical assistance to sub-grantees to cover the full range of voluntary sterilization information and education activities. (I)
3. Develop mechanisms to identify specific countries' needs in manpower development and training. (P)
4. Maintain and expand the operations and use of the IPAVS Resource Center by developing and distributing Information and Education materials; acquiring, classifying and cataloging all materials relevant to voluntary sterilization; compiling and updating specialized bibliographies; contributing to and using computerized and other data banks and information networks. (I)
5. Review films, slides, pamphlets, books, and other educational material: (E)
6. Propose recommendations and provide technical assistance to develop educational material and newsletters for sub-grantees, the National Associations for Voluntary Sterilization, and at IPAVS. (P, I)
7. Develop voluntary sterilization and informed consent counseling guidelines and recommendations for counselor training. (P, I)
8. Function as an Information and Education resource for sub-grantees, the National Associations for Voluntary Sterilization, and the staff of IPAVS. (I)
9. Develop and maintain an inventory of consultants who are recognized experts in such fields as planning programs in Information and Education, Family Planning, Health Education, Organizational Development, Counseling, Manpower Development, Management, and Social Work. (P)

10. Develop a position paper on world literacy and how it affects the work of IPAVS. (P)
11. Establish relationships with other international organizations concerned with voluntary sterilization, family planning and sex education. (P, I)
12. Develop the Information and Education and counseling components of regional, national and international conferences, including plenary sessions, workshop planning and implementation. (P)
13. Review and evaluate on an ongoing basis the role, needs and priorities of Information and Education in voluntary sterilization programs. (E)
14. Develop criteria and other review mechanisms to assess Information and Education programs. (E)
15. Design and update Information and Education evaluation procedures. (E)

COMPLETED ACTIVITY
 ONGOING ACTIVITY
 IMPLEMENTED AS REQUIRED

OBJECTIVE II



OBJECTIVE III:

Stimulate and support the development of indigenous leadership organizations, such as the National Associations for Voluntary Sterilization.

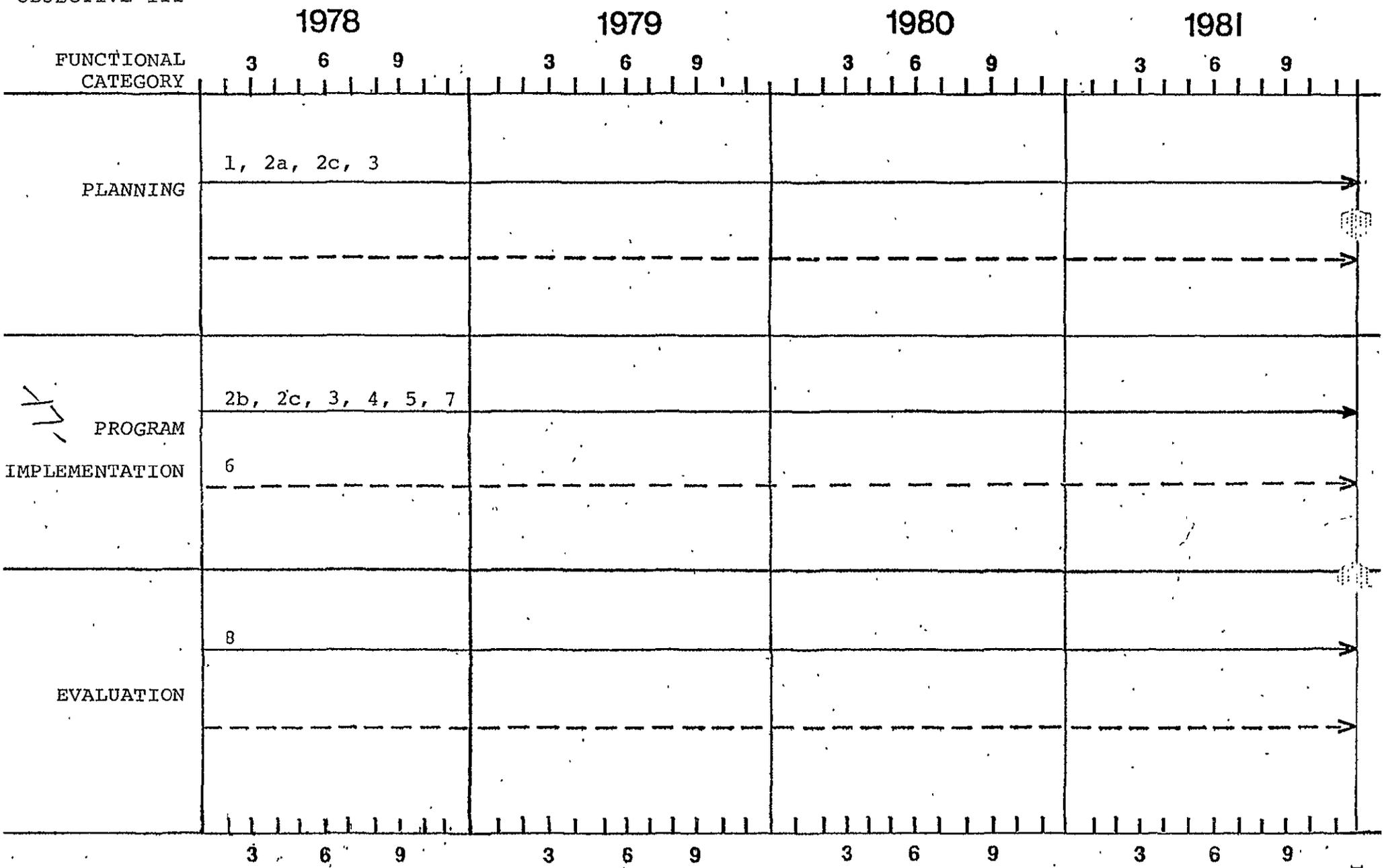
ACTIVITIES:

1. Establish criteria for surveying the readiness of various countries for supporting a leadership organization capable of working to promote voluntary sterilization, including consideration of legal, political, cultural and other factors. (P)
2. Develop strategies for establishing and supporting a network of such leadership organizations by:
 - a. establishing criteria for support; (P)
 - b. establishing and maintaining contact with leaders in the health, medical and other professions. (I)
 - c. identifying factors within each country which may not allow for the formation of a leadership base and determining needs to assist in overcoming these factors. (P, I)
3. Develop administrative, management and program planning procedures and manuals to assist national voluntary leadership groups to establish and implement their administrative office and program activities. (P, I)
4. Provide technical assistance such as training, conference support, I & E materials, travel grants and management guidelines. (I)
5. Support indigenous leadership participation in national, regional and international conferences. (I)
6. Organize workshops around common problems and issues of concern to the National Association for Voluntary Sterilization. (I)
7. Provide direct financial support to national associations or other national voluntary leadership organizations by funding and monitoring programmatic sub-grants consistent with IPAVS' policies governing the granting and monitoring of financial aid to national voluntary leadership organizations. (I)

8. Develop systems and criteria to evaluate the contribution of IPAVS to the world-wide voluntary sterilization movement by establishing objective criteria measuring changes in the level of development and scope of activities of the national voluntary leadership organizations over time. (E)

|-----| COMPLETED ACTIVITY
 |-----| ONGOING ACTIVITY
 |-----| IMPLEMENTED AS REQUIRED

OBJECTIVE III



OBJECTIVE IV:

Stimulate and support the development of the World Federation of Associations for Voluntary Sterilization.

ACTIVITIES:

1. Strengthen the administrative and organizational structure of the Federation by developing policies and procedures enabling the World Federation to carry out its mandate. (P, I)
2. Design and implement a system for facilitating communication between the office of the World Federation Executive Secretary, the President, the committee chairpersons and committee members. (P, I)
3. Plan and implement, in cooperation with World Federation officers and committees, the Annual General Assembly and committee meetings by preparing necessary documents, technical assistance and travel and logistical support. (P, I)
4. Continue to seek and/or maintain NGO status with appropriate UN agencies. (I)
5. Develop and implement a comprehensive strategy for funding the Federation's programs and activities by determining those activities needing financial support, locating donor agencies and submitting proposals to those agencies. (P, I)
6. Form cooperative working relationships with other organizations concerned with family planning and health by:
 - a. Identifying groups or individuals working in areas which are related to WFAVS; (P)
 - b. Contacting the groups or individuals identified to ascertain the possible ways that WFAVS can interact with them; (I)
 - c. Encouraging member associations to work with related organizations in their countries. (I)
7. Provide administrative and backup support to WFAVS officers by:
 - a. Helping to coordinate the activities of the officers; (I)

- b. Helping to fulfill the duties of their offices as specified in the bylaws and the various procedures manuals; (I)
 - c. Helping with materials or technical assistance as necessary. (I)
- 8. Provide administrative and backup support for WFAVS standing committees, regular committees, ad hoc committees, and study groups by:
 - a. Helping to coordinate the activities of the committees; (I)
 - b. Helping to fulfill the duties of the committees as specified in the bylaws and the various procedures manuals; (I)
 - c. Helping with materials or technical assistance as necessary. (I)
- 9. Regularly review and update WFAVS committee responsibilities as called for by the member organizations, developing new committees or disbanding existing ones as necessary. (P)
- 10. Implement programmatic and administrative activities, as designated by the General Assembly for the office of the Executive Secretary, by:
 - a. Developing appropriate procedures by which the office of the Executive Secretary can operate effectively and efficiently in carrying out the General Assembly mandate; (P)
 - b. Analyzing General Assembly minutes to determine appropriate program and administrative activities; (P)
 - c. Developing, implementing and evaluating the activities; (I)
 - d. Implementing the activities as specified in the plan; (I)
 - e. Evaluating the success of the activities. (E)
- 11. Develop the expertise necessary for World Federation members to assist in initiating national association programs. (I)
- 12. Conduct workshops and seminars focusing on common issues and concerns of constituent members of the WFAVS. (I)

13. Assess the progress of the World Federation in carrying out its program and meeting its objectives by designing and implementing evaluation strategies and basing decisions upon the results of such evaluations. (E)
14. Evaluate the contribution of IPAVS to the voluntary sterilization movements around the world by working with the World Federation to establish objective criteria measuring changes in the level of development and scope of the World Federation over time. (E)

|-----| COMPLETED ACTIVITY
 |-----| ONGOING ACTIVITY
 |-----| IMPLEMENTED AS REQUIRED

OBJECTIVE IV

FUNCTIONAL CATEGORY	1978			1979			1980			1981		
	3	6	9	3	6	9	3	6	9	3	6	9
PLANNING	1, 2, 3, 5, 6a, 9,			10a, 10b								
	----->											
PROGRAM IMPLEMENTATION	1, 2, 3, 4, 5, 6b, 6c, 7a, 7b, 7c, 8a, 8b,			10c, 10d, 11								
	8c, 12											
----->												
EVALUATION	10e, 13, 14											
	----->											

OBJECTIVE V:

Support, organize, and conduct conferences of international, regional, and national scope relating to voluntary sterilization.

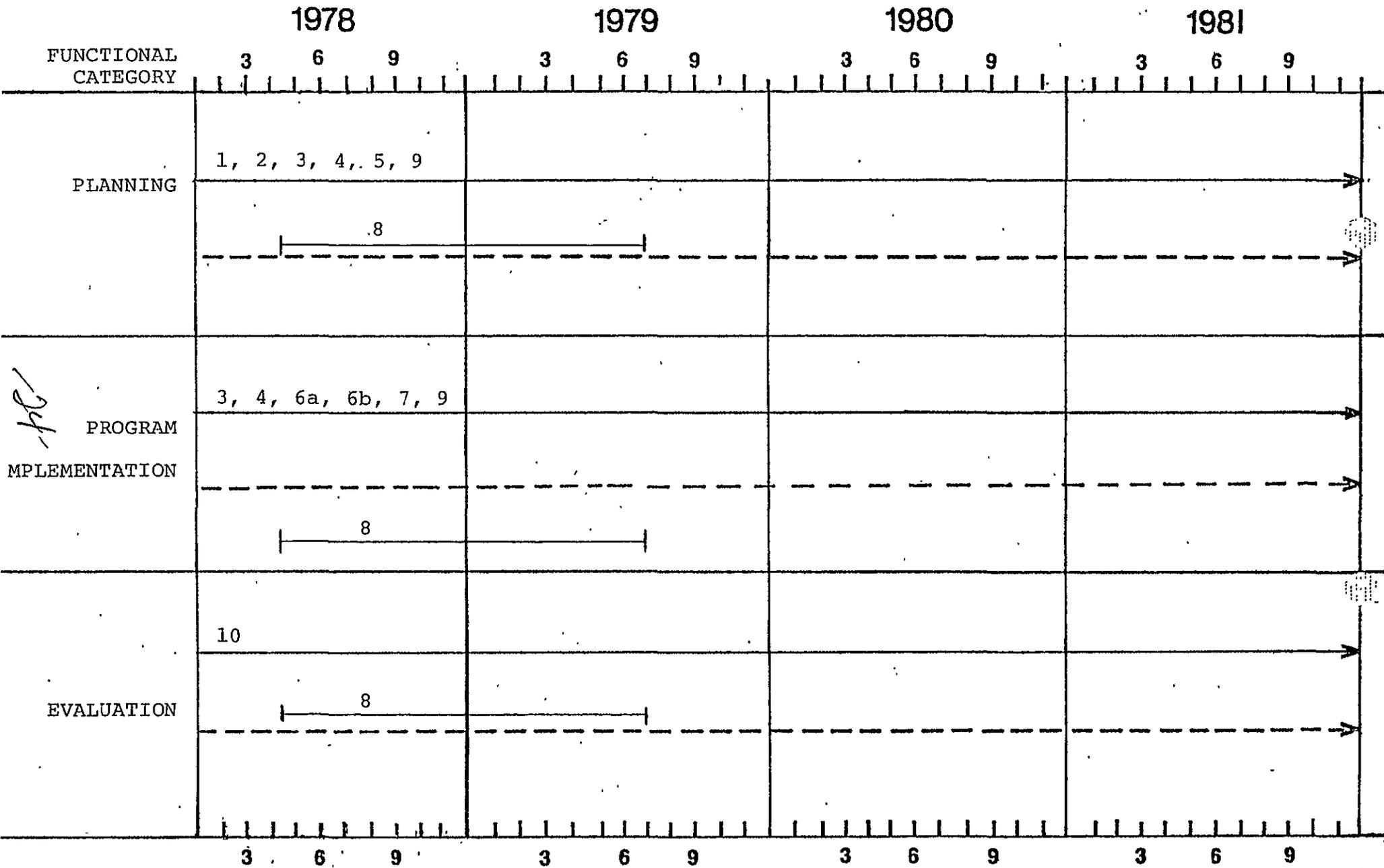
ACTIVITIES:

1. Identify the need for conferences, using IPAVS organizational goals and activities as criteria for identifying such need. (P)
2. Establish criteria for choosing conference topics, sites, participants, and co-sponsors and for determining the levels of funding for individual conferences. (P).
3. Develop and use a mechanism for approving conference funding. (P, I)
4. Identify and encourage the support of recognized experts and leaders in the field for organizing and implementing conferences on their own and/or in cooperation with IPAVS. (P, I)
5. Develop procedures for supporting conferences, including financial, travel, publishing, graphic, audio-visual, and other matters. (P)
6. Support the requisite national, regional, and international conferences on voluntary sterilization by:
 - a. cooperating with other organizations in co-sponsoring conferences; (I) and
 - b. funding sub-grantees so they may conduct their own conferences. (I)
7. Publicize and disseminate conference findings, recommendations, and related matters. (I)
8. Plan, organize, and implement the Fourth International Conference on Voluntary Sterilization. (P, I, E)
9. Continue to participate in and support national, regional, and international professional conferences representing various disciplines in order to promote the integration of voluntary sterilization into comprehensive national family planning programs. (P, I)

10. Evaluate the degree to which each conference achieves its goals, using techniques designed specifically for individual conferences. (E)

COMPLETED ACTIVITY
 ONGOING ACTIVITY
 IMPLEMENTED AS REQUIRED

OBJECTIVE V



OBJECTIVE VI:

Assist in developing training programs for all levels of the health team, including physicians, nurses, midwives, social workers, equipment technicians and managers, as well as others involved in voluntary sterilization programs.

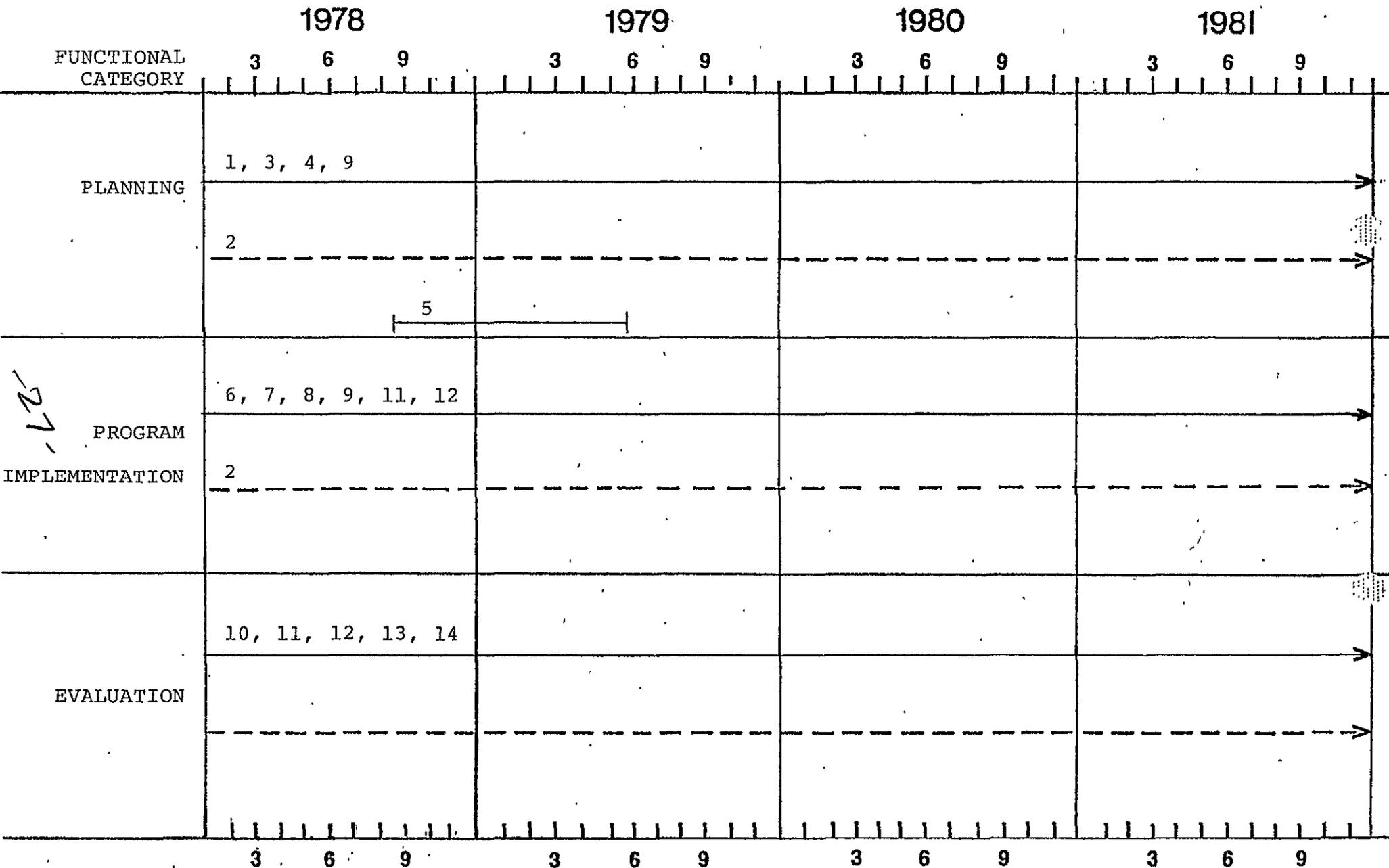
ACTIVITIES:

1. Identify various training needs for all levels of personnel involved in voluntary sterilization programs. (P)
2. Assist when requested in the design of comprehensive voluntary sterilization training programs for all members of the health team. (P, I)
3. Coordinate IPAVS training objectives and activities with other funding agencies engaged in similar activities. (P)
4. Develop criteria for the selection of all categories of IPAVS trainees. (P)
5. Develop the guidelines necessary for the certification of the surgical expertise of IPAVS medical trainees. (P)
6. Provide technical assistance for starting national regional training centers. (I)
7. Award and monitor sub-grants which provide for comprehensive training of all members of the health team. (I)
8. Provide technical training for RAM Centers while coordinating with appropriate equipment centers. (I)
9. Encourage the incorporation of training issues in conferences and workshops. (P, I)
10. Identify those areas where trainee follow-up is appropriate. (E)
11. Implement procedures to ensure appropriate routine follow-up of trainees. (I, E)
12. Collect, analyze and evaluate program statistics relating to numbers and types of personnel trained under IPAVS support. (I, E)

13. Evaluate the training centers and the trainers in the various facilities for instructing physicians in surgical techniques. (E)
14. Evaluate methods and curricula used in all IPAVS training programs. (E)

COMPLETED ACTIVITY
 ONGOING ACTIVITY
 IMPLEMENTED AS REQUIRED

OBJECTIVE VI



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OBJECTIVE VII:

Continue to incorporate comprehensive management systems to ensure IPAVS' responsive, flexible and dynamic support of the worldwide voluntary sterilization movement.

ACTIVITIES:

1. Provide overall leadership and management expertise to meet the growth and advances in the field of voluntary sterilization. (P)
2. Identify the overall goals and objectives of the agency and review and update these periodically. (P)
3. Provide the framework necessary to assess the progress of this agency in meeting the total organizational objectives. (P)
4. Develop IPAVS office policies and procedures manuals to insure adherence to efficient management practices. (I, E)
5. Maintain adaptable policies to ensure flexibility in meeting the requirements of our funders and responsiveness to new needs in the field. (P)
6. Coordinate activities with governments, other international agencies and health leaders. (P)
7. Utilize IPAVS Regional Offices to supplement responsive management support of sub-grants. (P, I)
8. Continuously develop the skills of IPAVS staff to ensure responsiveness to changing program needs. (P)
9. Cooperate with independent evaluators in their assessment of IPAVS (per AID contract). (E)
10. Review and redefine the broad eligibility criteria for potential sub-grantees through identification of IPAVS and AID policies and funding priorities. (P, E)
11. Establish guidelines for monitoring abortion-related activities of sub-grantees per guidelines received from AID/W. (I)

12. Establish and implement a computerized system for routine collection and analysis of agency-wide data for program management by:
 - a. Determining the management information needs of IPAVS and identifying the areas of computer application for all offices; (P)
 - b. Revising sub-grant data collection instruments so that they are compatible with the computer and elicit meaningful responses from sub-grantees; (P)
 - c. Coordinating the data collection from IPAVS offices through the design of a system which ensures prompt input of data into the computer; (P)
 - d. Organizing the computerized program data for the offices so that project monitoring functions can be made more efficient; (P)
 - e. Monitoring the collection and analysis of specific critical information relating to the life cycle of grants. (P)
13. Utilize the IPAVS Management Information System to identify the factors affecting the progress of sub-grantees towards achieving their program goals, including such topics as the relationship between site visits, logistical problems, technical assistance needs and goal achievement. (E)
14. Assist sub-grantees in the management of IPAVS funds by ensuring the hiring of personnel skilled in administrative and financial management. (P)
15. Develop a financial management manual for sub-grantees which will identify and resolve common financial problems. (P)
16. Maintain active communication links to alleviate and prevent financial and administrative problems. (P)
17. Develop policies and guidelines concerning equipment type, quality and vending procedures for IPAVS sub-grants. (P)
18. Establish criteria by which to evaluate the impact of RAM Centers in alleviating equipment problems. (E)

19. Provide assistance to sub-grantees so that Information and Education materials developed can be used to provide an independent source of income for the program. (P, I)
20. Initiate and develop a plan for consultant support based upon identified specific needs. (P, I)
21. Evaluate the contribution of outside consultants to the achievement of sub-grant objectives. (E)
22. Assess the impact of our voluntary sterilization programs - both from the viewpoint of a specific developing country and also from a global perspective. (E)
23. Write periodic reports covering the demographic, health and medical contributions of IPAVS sub-grants. (E)
24. Perform cost/benefit analyses for selected projects so that we may isolate those program factors associated with a favorable cost/benefit ratio. (E)
25. Design criteria for evaluating the institutionalization of terminated or selected ongoing sub-grants. (E)
26. Establish a system for collecting on a routine basis, baseline data about the status of voluntary sterilization services around the world, to cover the location of service sites, number of procedures performed and personnel trained at these service sites. (E)
27. Assess the feasibility of expanding IPAVS involvement in new geographic areas based upon information obtained from the collection of baseline voluntary sterilization data. (P)
28. Develop on a systematic basis reports to funding agencies and other appropriate bodies concerning overall project accomplishments and progress. (P, I)
29. Promulgate the advances in and contributions of voluntary sterilization to the professional community. (I)
30. Routinely review the management plan, procedures manuals; and staffing pattern in light of projected IPAVS needs and priorities in order to evaluate the status of IPAVS' progress toward promoting voluntary sterilization as an integral part of total health care services worldwide. (E)