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PD-1 AN-287

ISN 49307

TRIP REPORT

FAMILY PLANNING MANAGEMENT TRAINING PROJECT

DEVELOPMENT PLAN FOR STUDY TOUR

BANGLADESH UPAZILA OFFICIALS TO BE TRAINED

BY BKKBN IN INDONESIA

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APR - 6 1987

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THE PURPOSE OF THE TRIP

The purpose of my trip to Bangladesh was to work with USAID/Dhaka and the GOB to design a study tour program for local level Bangladeshi officials.

The first week of my trip was spent meeting with appropriate representatives from USAID, GOB and NGOs, and in drafting the scope of work for the design team (Annex A). The second week was spent in Indonesia where the team benefited a great deal from the expertise of BKKBN and very useful help from USAID/Jakarta. The final few days were spent back in Dhaka when the attached study tour plan was drafted.

The attached plan provides full details including background, rationale, evaluation of the previous project, proposed content of the study tour program, calendar of activities, and an implementation plan.

USAID/Dhaka wishes to implement this program using an intermediary - probably via a "buy-in" to FPMT. This would necessitate FPMT opening small offices in both Dhaka and Jakarta. However, the GOB representative on the team, Mr. Azizul Karim, was strongly of the opinion that the GOB should contract directly with the GOI. At the time I left, the cogent arguments from both USAIDs (Dhaka and Jakarta) about the impracticality of this suggestion failed to persuade Mr. Karim. Therefore, FPMT would either be extensively involved in this program or hardly involved at all - depending on how this particular issue is resolved. USAID/Dhaka plans to hold a series of meetings with the GOB to try and resolve this issue.

**Design Plan for an Indonesian
Study Tour Program for Upazila Officials**

Design Team Members:

- 1) Azizul Karim, Deputy Chief,
Family Planning Wing, Ministry of
Health and Family Planning.
- 2) A. Sigrid Anderson, Population
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- 3) M. Alauddin, Country Representative,
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Acknowledgements

The team wishes to express our appreciation of the help and guidance which was enthusiastically extended to us during our visit to Indonesia. We were very graciously received by Dr. Haryono Suyono, Chairman of BKKBN and his senior staff. The Training Division of BKKBN was particularly helpful to us. We also greatly appreciated our warm reception at the Indonesian Family Planning Association - an organization which has long been interested in the population program in Bangladesh. Dr. Does Soemparno of Pathfinder provided valuable insights into the Indonesia program and gave us much useful advice. USAID/Jakarta very kindly helped arrange our schedule. We are particularly appreciative of the extended assistance and hospitality of Dr. Carol Carpenter-Yaman who did so much to make our visit as pleasant as possible. We were very fortunate indeed to make the acquaintance of His Excellency, Bangladesh's Ambassador to Indonesia, and Mr. M. Alam, the First Secretary. The vision and encouragement of these two gentlemen will be very valuable as the study tour program progresses.

Last, but by no means least, we wish to say a special thank you to our guide, shepherd and friend, Hari of BKKBN. We will all remember his patience, humour and kindness.

List of Acronyms

GOB	Government of Bangladesh
GOI	Government of Indonesia
BKKBN	Indonesian Family Planning Coordinating Board
UFPO	Upazila Family Planning Officer
UHFPO	Upazila Health and Family Planning Officer
UMO	Upazila Medical Officer
NGO	Non-Governmental Organization
MOHFP	Ministry of Health and Family Planning
CPR	Contraceptive Prevalence Rate
TFPO	Thana Family Planning Officer
MLGRD	Ministry of Local Government and Rural Development
SC	Steering Committee
TA	Technical Assistance

Executive Summary

In order to assist the GOB with its stated policy to improve access to family planning services through decentralization, it is proposed that a study tour program of Indonesia for Upazila level officials be organized. Given the innovative community level family planning services available in Indonesia, such a study tour program should act as a catalyst and help the local level Bangladesh officials improve currently available service delivery programs in their localities.

Specifically, the plan proposes:

1. Collaboration with the GOI - Family Planning Coordinating Board (BKKBN) to implement the Indonesia study tour program.
2. Participation of Upazila teams rather than only one or two representatives from each Upazila.

In this regard, it is proposed that during Year I, four groups of Upazila teams be sent to Indonesia. The first three teams will consist of Upazila Family Planning Officers (UFPO), Upazila Health and Family Planning Officers (UHFPO), Upazila Medical Officers (UMO) and an NGO (national and/or local). Each group will consist of a maximum of 20 persons, with the first study tour due to arrive in Indonesia in September 1987. Team Leaders, who will act as facilitators, will be assigned to each group. These team leaders will probably be officials from the district or central MOHFP.

The fourth and subsequent groups will consist of the UFPO, Upazila Chairman, Upazila Executive (Nirbahi) Officer, an appropriate NGO and local religious or social leader if desired.

It is intended that by the inclusion of elected officials, the Upazila health and Family Planning team will be much more likely to be able to successfully implement follow-on projects. It would be preferable if these elected officials could be included with the first three teams. However, although the MOHP^D has approved the participation of the Chairmen, the clearance processes have not yet begun for their inclusion and the team recommends beginning this worthwhile (but large scale) study-tour program as soon as possible.

3. Assignment of a national NGO to work with the Upazila participants before, during and after the study tour to assist putting into action new ideas inspired by the Indonesia site visits.
4. Preparation of orientation materials and pre and post study tour workshops to ensure that all participants fully understand the GOB Family Planning strategy, the role of their particular Upazila in this strategy, major components of action plan development, and Indonesia/Bangladesh cultural differences.

5. Selection of Upazilas will be according to the following criteria:

- (a) Priority to be given to those 150 Upazilas which did not participate in the earlier Thana F.P.O. training program in Indonesia.
- (b) High performing Upazilas (as measured by CPR). When the elected officials are included in the teams, one low performing Upazila may be added.
- (c) Participants in the TFPO training program who have risen to the rank of Deputy Director may be included as Team Leaders or resource persons.
- (d) Good physical health.
- (e) Low priority will be given to those persons who have already received similar training, who are on leave of absence or involved in administrative actions.
- (f) For the fourth and subsequent groups (those teams which include elected officials) selection will be made based on equity of geographic distribution leading to a minimum of two Upazilas from each division. Priority will, of course, be give to Chairman who can accompany those officers from his own Upazila.

The GOB Steering Committee (to be established for this program) will submit the names of the Upazila participants to USAID/Dhaka at least 30 days prior to departure.

6. Preparation of Action Plans by each participating Upazila - technical assistance and funding as necessary to be made available by one of the four mechanisms described below:
 1. Where there is a local NGO operating in the participating Upazila, they will with appropriate approval incorporate the activities with TA and funding by their national level NGO.
 2. Where there is no NGO actively operating in that particular Upazila, a national level NGO may be requested to provide the required TA and funding. Following appropriate approval mechanism.
 3. Where there is no NGO the subvention grant mechanism may be used. Parishad Committee must submit to subvention grant mechanism.
 4. The GOB could fund the activity directly when procedures have been developed.

(Procedures for 1, 2 and 3 above are already established and operational.)

Upon return to Bangladesh, the teams will participate in a 1.5 day workshop during which time, their action

plans will be further developed.

7. Nomination of a GOB Steering Committee including representation of the Ministry of Local Government and Rural Development (MLGRD). It is felt that representation of MLGRD - the Ministry responsible for the Upazila elected officers - is essential to facilitate the participation of these officials.
8. Clearance of this study tour plan by both the MOHFP and MLGRD.
9. Evaluation of the program after one year to review, among other things, whether it is contributing to the decentralization efforts. If so, it is proposed that the study tour program continue for 5 years with BKKBN receiving 6 groups annually from the second year onwards. Thus, a total of around 500 Upazila Officers and elected officials would be exposed to the Indonesia program and be provided with NGO assistance as necessary to implement follow-on projects.
10. The first nine groups will be supported by the current Family Planning Services Project (PACD 9/30/89). Subsequent groups will be funded by the Family Planning and Health Services Project - expected to be approved by August 1987.
11. The mechanism for funding this program could not be finalized by the team. A decision on this issue has to be taken up at higher levels within the MOHFP and USAID/Bangladesh.

INTRODUCTION

In March at 1980 the GOB began implementing a USAID fund training program consisting of sending groups of Thana* Family Planning Officers (TFPO) to Indonesia. The goal of the program was to inject new ideas into the Thana system on how to decentralize Family Planning Services - ideas inspired by the excellent Indonesian program.

Between March of 1980 and 1982 11 groups of around 30 participants each were sent to Indonesia. The program stopped in 1982 as a result of the freeze on official travel under martial law . However, Bangladesh and USAID did manage to obtain two years of valuable experience in the organization of this innovative but rather complicated program. There was a 1981 evaluation of the program which yielded the following major comments and recommendations:

the TFPOs, did not have a clear understanding of the goals and objectives of the Indonesia Training and did not really understand what was expected of them.

*Thana is the name given to geographic/administrative units which correspond roughly to U.S. counties. In recent years, the name "Thana" has been changed to "Upazila" and several important administrative and developmental functions have been transferred to the Upazila level.

- there was insufficient orientation to the overall strategy of the Bangladesh program so the participants were not ideally prepared to apply what they had observed in Indonesia.
- there was insufficient technical assistance in helping the TFPOs transfer what they saw in Indonesia to the Bangladesh context.
- there had been little or no assistance provided (either technical or monetary) for follow-on projects at the local level upon the groups' return.

Because of the potential usefulness of the activity, the GOB requested USAID to relaunch the Indonesia study project for those 150 Upazilas which did not participate in the first round. As a result, the design team visited Indonesia and prepared a draft study tour program, details of which are provided in the body of this report.

The key new elements are:

- The program should no longer be considered as "training" but rather as a study/observation exercise. Since the last program ended, Bangladesh has had several more years of experience and has progressed to the extent that CPR* has increased from 8.9 percent of MWRA in 1979 to 22.9 percent in 1985 for modern methods.

*Contraceptive Prevalence Surveys.

- rather than just sending the UFPO, a team should be sent from each Upazila. This will help reinforce a collaborative spirit among the team members - a factor particularly important for successful follow-up. The new members of the teams would be the Upazila Chairman and Executive Officer, plus a local religious leader whenever appropriate.

- whenever possible, an NGO should accompany the group. The NGO would then be responsible for working with the Upazila team to implement the action plans designed during the Indonesia study tour visit.

The goal of the GOB/MOHFP is to increase the number of active contraceptive users from the current level of 5.5 million to 9 million by 1990. This ambitious, but necessary goal cannot be achieved without making the current policy of expanded services into rural communities more effective and improving the management systems so that they are more responsive to the challenge of decentralization.

Therefore, above all, the major objective of the revised study tour program is to aid the GOB with its stated policy to improve access to family planning by decentralization.

The following components of the report cover (a) the rationale for the selection of Indonesia as a study tour site, (b) study tour program design and implementation, (c) management of the program, (d) evaluation, (e) next steps. Annex A is the estimated budget.

a. Rationale for the Selection of Indonesia as a Study Tour Site:

Indonesia is the fifth most populous country in the world, with a population estimated at 161 million. 62% of the total population lives on the island of Java whose area comprises only 7% of the total and where the capital Jakarta is located.

In 1970 the National Family Planning Coordinating Board (BKKBN) was formed, reporting directly to the President and fully responsible for coordinating the implementation of a family planning program whose activities would be integrated into the activities of existing governmental, Non-Governmental and community programs. By 1985-1986, country-wide contraceptive prevalence was almost 60 percent.

Implementing strategies were also prioritized and phased. In accordance with the government's policy to link activities from two or more programs that are mutually supportive to reach a common target group, BKKBN prioritized the clinic-based service delivery approach which could utilize existing national clinic facilities of the Ministry of Health, Armed Forces, and the private sector.

The most attractive features of the Indonesia Family Planning Program are total government commitment, enthusiastic community involvement, flexible and innovative approaches and also the support of religious leaders.

The main components of the National Family Planning Program are:

1. Information, education and communication activities;
2. Contraceptive services at multiple sites; through (a) clinical services in hospitals, family planning clinics, Mobile Family Planning Teams (TKBK); and (b) non-clinical services by family planning fieldworkers, private doctors, private midwives, village contraceptive distribution center (PPKBD) and commercial channels.
3. Education and training.
4. Logistics.
5. Research and Program Monitoring.
6. Integrated Family Planning and Development.
7. Family Planning Income Generation.
8. Integrated Family Planning Agriculture Cooperatives.
9. Scholarships for children of family planning acceptors.
10. Improving the status of women.

In spite of Bangladesh and Indonesia having some religious and cultural similarities, their CPRs are quite different. The overall contraceptive prevalence rate for Bangladesh is 29.6% (1985) as compared to 59.8% (1985-1986) for Indonesia. Similarly to the Indonesian program described above, the GOB - (MOHFP) also has an extensive family planning network which has the potential to provide free or low cost services. Access to family planning is further complimented by a social marketing project which utilizes private sector promotional and marketing techniques, and by Non-Government (NGOs), using a wide range of approaches for delivery of services, including both clinic-based and community-based programs.

The Government of Bangladesh remains strongly convinced that a reduction in the rate of population growth is urgently needed, and remains committed to achieving this objective through an effective public sector family planning and MCH program. In addition, the GOB decentralization initiative has come to be the centerpiece of the government's efforts in rural development. Whatever is accomplished in the countryside, where 85% of the population lives, will ultimately depend on the effectiveness of this initiative. Accordingly, it is appropriate that the MOHFP is concerned with the decentralization effort and interested in adapting its own activities. It has become evident in recent years that strong local government support and participation in planning and decision-making are crucial to successful

provision of family planning services in rural Bangladesh. To this end, observation of the National Family Planning Program of Indonesia is appropriate, since the Indonesian program is known for strong coordination mechanisms, participation of elected and local government officials, active participation of the community, participation of women, and decentralization of management. In Indonesia, study tour participants will learn from successes and weaknesses of what is a relatively strong family planning effort in a Muslim country. Careful attention will be paid to the adaptation of relevant aspects of Indonesia's experience to Bangladesh. An additional benefit of the Indonesia study tour for Upazila teams, is expected to be the development of better working relationships between elected and appointed officials and among the UHFPO, UFPO and NGOs and other relevant participants. All of these individuals will travel together and be exposed to the same experience which will, in turn, strengthen their collegial working relationships and thus positively reinforce family planning efforts.

b. Study Tour Program Design and Implementation

Benefiting from the experience of the Indonesia training of the Thana Family Planning Officers, the current program proposes a) selected visits to those Indonesia programs which

are specifically appropriate for Bangladesh, b) participation of teams from the upazila, and c) emphasis on follow-on activities which could then apply those new ideas to the Upazila context.

The groups will consist of a maximum 20 participants, four to five of whom will represent the same Upazila. In order for an NGO either local or national to be able to provide follow-on support, technical and financial they may be requested to accompany the teams. Each participating Upazila team will be expected to prepare an action plan for activities in their localities-based upon the programs observed in Indonesia.

If outside evaluations after years 1, 2 and 4 find that the program improves the availability of decentralized Family Planning services, it is proposed that approximately 28 Upazila teams be sent to Indonesia beginning in September 1987 and continuing for a five year period. Thus about 500 Upazila officials could be exposed to the innovative outreach program to be found in Indonesia.

The GOB will nominate by May 30, 1987 a Steering Committee (SC) consisting of representatives of MOHFP and MLGRD to provide technical direction to the program. In addition, the GOB/MOHFP will nominate a technical monitor to devote at least 50 percent of his/her time to the study tour program.

Selection of the Upazila Teams:

The first three groups going to Indonesia , will represent four or five Upazilas each one consisting of the following participants:

UFPO

UHFPO

UMO

NGO

Team Leader

The fourth and subsequent groups will include elected officials, thus their composition will be as follows:

Upazila Chairman

Upazila Executive Officer

UFPO

UMD (selected)

NGO

Upazila Religious or Social Leader (optional)

It would be preferable if these elected officials could be included with the first three teams. However, although the MOHFP has approved their participation, the clearance processes have not yet begun. It is anticipated that such clearances will not be obtained until early 1988. the team does not recommend waiting until then to begin the program because (a) the need to augment decentralization of F.P

services is so urgent that very worthwhile contributions can be made by sending the Upazila Health and Family Planning teams only, and (b) the experience of sending the three initial groups will no doubt improve the efficiency of the activities and thus the elected officials will be joining a better organized program.

The Upazilas will be selected by the GOB-SO, according to the following criteria:

- (a) Priority will be given to those 150 Upazilas which did not participate in the earlier Thana F.P.O. training program in Indonesia.
- (b) High performing Upazilas (as measured by CPR). When the elected officials are included in the teams, one low performing Upazila may be added.
- (c) Participants in the TFPO training program who have risen to the rank of Deputy Director may be included as Team Leaders or resource persons.
- (d) Good physical health.
- (e) Low priority will be given to those persons who have already received similar training, who are on leave of absence or involved in administrative actions.

- (f) For the fourth and subsequent groups (those teams which include elected officials) selection will be made based on equity of geographic distribution leading to a minimum of two Upazilas from each division. Priority will, of course, be give to Chairmen who can accompany those officers from their own Upazilas. The GOB-SC will submit the names of the participants to USAID at least 30 days prior to departure.

Agenda of the Study Tour Program:

- Day 1 Upazila teams arrive in Dhaka for orientation.
- Days 2-3 Orientation program consisting of:
- i) Overview of the GOB/MOHFP Family Planning Strategy.
 - ii) Review of F.P. activities including NGO involvement in each of the participating Upazilas.
 - iii) Review of the components of the Action Plans, with examples and group case study exercises.
 - iv) Indonesia/Bangladesh cross-cultural differences.
- Day 4 Depart for Indonesia.

Day 5 Arrival in Indonesia.

Days 6-7 Orientation to the Indonesia Family Planning Program and introduction to the role of their coordinating board (BKKBN).

Days 8-16 Site visits to action programs in Indonesia. The programs to be visited should demonstrate:

- i) Strong support of local political leaders for family planning services.
- ii) Innovative IEC programs.
- iii) Active community participation.
- iv) Participation of local Islamic leaders in the F.P. program.

During these site visits, the BKKBN facilitators should familiarize the participants to the following aspects of family planning management:

- i) Supervisory systems.
- ii) Logistics/inventory control.

- iii) Methods of collecting service statistics.
- iv) Monitoring.
- v) Ways of reducing discontinuation rates.
- vi) The relationship between national and local level planning.
- vii) The role of community groups and how decisions are made about where they are active and what their programs encompass.

Day 17 Team returns to Jakarta.

Days 18-19 Preparation of Action Plans with guidance from BKKBN

Day 20 Depart Indonesia - arrive Dhaka.

Days 21-22 Debriefing in Dhaka including review of action plans and preparation of program of activities to help develop the plans. If appropriate, an NGO will develop an in-depth technical assistance plan with each Upazila team to implement the proposed activities once plan approvals have been obtained.

Day 22 Upazila teams leave Dhaka.

In order to implement the action plans prepared by each participating Upazila, technical assistance and funding will be made available by one of the four mechanisms described below:

- 1) Where there is a local NGO operating in the participating Upazila, they will with appropriate approvals incorporate the proposed Action Plan activities - with TA and funding to be provided by their national level NGO.
- 2) Where there is no NGO actively operating in that particular Upazila, a national level NGO may be requested to provide the required TA and funding, following the appropriate approval mechanism.
- 3) Where there is no NGO, the subvention grant mechanism may be used. The Parishad Committee must-submit the plan to the subvention grant mechanism.
- 4) The GOB could fund the activity directly - once procedures to do so have been developed.

(Procedures for options 1-3 above are already established and operational.)

During year 1, four groups will be sent to Indonesia. During years 2-5, six groups will be sent. The attached calender illustrates the proposed timing of the groups. The first two years will be funded from USAID's current bilateral Family Planning Services - Project 388-0050 (PACD 9/89). Subsequent funding will be obtained under the new Family Planning and Health Services Project, expected to be signed by August 1987.

PROPOSED STUDY TOUR CALENDAR
UPAZILA STUDY TOUR IN INDONESIA

YEAR	JAN	FEB	MAR	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL	PARTICIPANTS
1987									# 1				1	20
1988	# 2				# 3			# 4			# 5		4	80
1989	# 6		# 7		# 8		# 9	X	# 10		# 11		6	120
1990	# 12		# 13		# 14		# 15		# 16		# 17		6	120
1991	# 18		# 19		# 20		# 21		# 22		# 23		6	120

Notes:

1. Batch # 1, # 2, # 3 consists of UFPO, UHFPO, UMO, NGO --
 2. Batch # 4, # 24 consist of UFPO, UC, UNO, NGO ---
 3. X = (PACD) Project Action Completion Date of the Family Planning Services Project 388-0050, September 30, 1989.
- Therefore, first 9 batches funded under FPS Project and batches # 10 - # 23 funded under new Family Planning and Health Services Project, FY'87-'91 (expected to be approved by August 1987).

c. Management of the Study Tour Program

In order to make sure that the study tour project will have a concrete and positive impact on the decentralization program, great emphasis will be placed on preparation of briefing and debriefing activities, liaison with NGOs, and technical cooperation with BKKBN. In addition, the program will be very demanding in terms of logistics (travel, per diems, in-country transport, translations, secretarial services, preparation of materials, etc.) in both Bangladesh and Indonesia. As the elected officials join the program, it becomes even more important that operations proceed smoothly so that logistical problems do not distract attention from the overall objective of this program.

USAID recommends that the services of a centrally funded contractor (via a "buy-in") be obtained to provide the logistical support services necessary. Specifically, the contractor would be expected to:

- 1) Establish office facilities and recruit personnel in Indonesia and Bangladesh. This will include arranging for transfers of funds and preparing and signing a contract with BKKBN.
- 2) Assist in the design and production of the orientation program and related materials.

- recruit specialized consultants as necessary.
 - arrange for the location for the orientation meetings.
 - organize transport, per diems and lodging for the participants.
 - produce, reproduce and distribute materials.
 - arrange for special speakers at the orientation workshops as necessary.
- 3) Collaborate with BKKBN for the design of the Indonesia study tour program and provide the services of specialized consultants, as necessary.
 - 4) Provide transport and per diem of participants from Bangladesh to Indonesia.
 - 5) Monitor the implementation of the Study Tour Program and inform GOB, USAID and Dhaka Office of progress. Provide resources to BKKBN to modify the program as necessary.
 - 6) Accompany participants to and from Dhaka airport and arrange debriefing program. (includes tasks specified in 2).

- 7) Arrange for participation of Upazila Chairmen and Executive Officers for those occasions where they did not accompany the teams.
- 8) Prepare program of follow-on activities with participants, MOHFP-SC, NGOs and USAID.
- 9) Provide and coordinate support services as necessary to NGOs and Upazilas to implement follow-on activities.
- 10) Arrange for the evaluations of the study tour program.

Other funding options may be recommended by the GOB.

d. Evaluation of the Study Tour Program

The importance and need for continuous evaluation of the Study Tour program and its field effectiveness cannot be over emphasized.

The study tour program - its duration, course content, methodology, strategy, and number of participants would need evaluation and analysis to effect any modification. In order to evaluate each course and the degree of receptivity of the participants, a pretest and a post test will measure the knowledge, attitudes and skills of the participants in the areas covered in the program.

An outside evaluation is proposed at the end of Year I, the objectives of which would be:

1. to conduct a comprehensive evaluation of the Indonesia Study Tour Program coordinated and implemented at the BKKBN, including the Bangladesh-side components (orientation, follow-up workshop and development and implementing of Action Plans). The systems to be evaluated include the selection, composition, orientation, management, monitoring and assistance of participants during the study tour, pre-departure orientation and follow-up workshops, as well as overall management and administration of the Study Tour Program both in Bangladesh and Indonesia including logistical support.
2. To assess the relevance of the study tour in terms of design, development process, approval, funding and implementation of Study Tour Action Plans;
3. To assess current and future management, administrative and technical needs both in Bangladesh within the MOHFP, and in Indonesia within the BKKBN;
4. To assess all current and future funding needs for the study tour program;

5. To make recommendations for the second year (1988-1989) and the future years (1989-1991) for financial, material, administrative and technical support needed for the Study Tour Program from BKKBN, MOHFP and USAID/Dhaka.

Timing

The first evaluation of the study tour should cover the period June 1987-July 1988 during which time four (4) teams of twenty (20) people per team would have participated in the study tour.

Data Collection

This first evaluation should use the following data:

1. pre and post training questionnaires from the four groups.
2. interviews with participants, MOHFP, BKKBN, CA and USAID/Dhaka.
3. study tour program itself, including its duration, course content, materials used, field studies, methodology and strategies.

e. Next Steps

The GOB and USAID hope that the first group of participants can arrive in Indonesia in September 1987. If this is indeed to be possible, the following timetable must be adhered to:

TIMETABLE OF NEXT STEPS FOR YEAR I - ASSUMING
FIRST GROUP ARRIVING IN INDONESIA SEPTEMBER 1987

<u>TASKS</u>	<u>DEADLINE</u>	<u>RESPONSIBLE</u>
1. Visit of Dr. Santoso of BKKBN-with BKKBNs proposal.	3/7-3/13/87	USAID
2. Finalize scope of work and implementation plan of study tour program.	3/30/87	Design Team
3. Approval of implementation plan by GOB - MOHFP/MLGRD and USAID.	5/30/87	USAID/GOB
4. PIL drafted and signed.	5/30/87	USAID/GOB
5. Nominate GOB Technical Monitor (TM).	5/30/87	GOB
6. Financial mechanism finalized, e.g. "buy-in".	6/7/87	USAID
7. Prepare, clear and sign Memorandum of Understanding (MOU).	6/15/87	GOB-GOI
8. Intermediary recruits personnel and office facilities in Bangladesh as necessary.	6/30/87	Intermediary

<u>TASKS</u>	<u>TIMING</u>	<u>RESPONSIBLE</u>
9. Establish membership and Scope of Work of Steering Committee.	6/30/87	GOB
10. Contract prepared with BKKBN for study tour program.	7/15/87	Intermediary
11. Indonesia management staff recruited and office facilities obtained.	7/30/87	Intermediary
12. BKKBN staff recruited and trained as necessary.	8/15/87	BKKBN
13. Design of orientation program and related materials. (Dhaka)	8/15/87	Intermediary
14. Design of participant follow-up program including participation of Upazila Chairman.	8/15/87	Steering Committee/ Intermediary
15. Indonesia study tour program designed and approved.	8/15/87	BKKBN/SC/GOB-TM/ USAID/Intermediary
16. Official submission by GOB of Upazila health team participants for first	8/15/87	GOB/SC

<u>TASKS</u>	<u>TIMING</u>	<u>RESPONSIBLE</u>
batch (according to approval selection criteria). After the first batch, the GOB will submit the names of participants to USAID/Dhaka <u>30</u> days before the departure for Indonesia.	8/15/87	GOB/SC
17. Obtaining visas for participants.	9/1/87	GOB
18. First group arrives in Dhaka for orientation and then leaves for Jakarta.	9/7/87	Intermediary
19. Review Action Plan and organize follow-up TA and funding as necessary via NGOs.	Periodic to begin 10/7/87	GOB-TM/NGO/ Intermediary
20. Repeat of steps (16) - (19) for subsequent batches.	Periodic	GOB/NGO/USAID/ Intermediary
21. Official submission by GOB of UFPO/Upazila Chairmen and Executive Officers for fourth batch.	3/30/88	GOB
22. End of first year evaluation.	8/1/88	USAID/GOB

BUDGET PROPOSAL FOR
STUDY TOUR OF BANGLADESHI FAMILY PLANNING OFFICIALS
1987/1988

I. PROJECT PREPARATION

1. Ad Hoc Committee Meeting : June '87 - Sept '87 : 10 meeting X 10 Person X Rp 25.000 = Rp. 2.500.000,-	= Rp. 2.500.000,-
2. Collecting and Translation of material (proposal, curriculum, syllabus, guide book) 1000 pages X Rp. 2.500,-	= Rp. 2.500.000.-
3. Duplicating Materials : 5 books X 100 expl X Rp. 5000,-	= Rp. 2.500.000.-
4. Honoraria for Steering Committee : 7 persons X 10 meeting X Rp. 75.000,-	= Rp. 5.250.000.-
5. Communitation	= Rp. 750.000.-

SUB TOTAL I = Rp. 13.500.000.-
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II. MANAGEMENT COST :

1. Training Director : 1 person X 12 months X Rp. 500.000,-	= Rp. 6.000.000.-
2. Assistant Director : 1 persons X 12 months X Rp. 300.000,-	= Rp. 3.600.000.-
3. Secretary : 1 person X 12 months X Rp. 250.000,-	= Rp. 3.000.000.-
4. Treasurer : 1 person X 12 months X Rp. 250.000,-	= Rp. 3.000.000.-
5. Staff (messenger, janitor, clerk) : 3 person X 12 months x Rp. 150.000,-	= Rp. 5.400.000.-
6. Local Consultant : 1 person X 12 months X Rp. 300.000	= Rp. 3.600.000.-
7. Office Supplies : 12 months X Rp. 200.000	= Rp. 2.400.000.-
8. Communication : 12 months X Rp. 150.000	= Rp. 1.800.000.-
9. Office Rental : 12 months X Rp. 300.000	= Rp. 3.600.000.-
10. Office Equipment : - Typewriters : 2 X Rp. 1.500.000 - Duplicator : 1 X Rp. 1.000.000 - Calculator : 2 X Rp. 50.000. - Furniture : 10 set X Rp 300.000 - Computer : 1 set x Rp. 3.000.000,-	= Rp. 3.000.000.- = Rp. 1.000.000.- = Rp. 100.000.- = Rp. 3.000.000,- = Rp. 3.000.000,-

SUB TOTAL II = Rp. 42.500.000.-
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III. TRAINING COST/BATCH :

1. Honoraria for classroom lecturers: 24 hrs x Rp. 30.000,-	= Rp. 720.000,-
2. Honoraria for Field Trainers: 3 days x 4 persons x Rp. 50.000,-	= Rp. 1.600.000,-
3. Rental Classroom: 5 days x Rp. 50.000,-	= Rp. 250.000,-
4. Honoraria for Interpreters : 2 persons x 14 days x Rp. 25.000,-	= Rp. 700.000,-
5. Education & Training Materials: 1 batch x Rp. 2.500.000,-	= Rp. 1.500.000,-
6. Translation of Training Materials, for field training 1000 pages x Rp. 2.500,-	= Rp. 2.500.000,-
7. Travel Cost for Field Training : 26 persons x Rp. 250.000,-	= Rp. 6.500.000,-
8. Local Transport for Field Training : 1 bus x 3 days x Rp. 150.000,-	= Rp. 1.200.000,-
9. Local Facilitators: 4 persons x 4 days x 2 Province x Rp.25.000,-	= Rp. 800.000,-
10. Health care : 20 persons x Rp. 25.000,-	= Rp. 500.000,-
11. Preparation for Field Training: - Perdiem : 2 pers x 2 location x 3 days x Rp.50.000,-	= Rp. 600.000,-
- Trans : 2 persons x Rp. 225.000,-	= Rp. 450.000,-
12. Boarding/Lodging for Participants : 20 persons x 14 days x Rp. 40.000,-	= Rp. 11.200.000,-
13. Transport Local in Jakarta: 5 days x Rp. 150.000,-	= Rp. 750.000,-
14. Local Administrative Cost: 3 location x 2 Province x Rp. 300.000,-	= Rp. 1.800.000,-

GUB TOTAL III.....	= Rp. 32.070.000,-
COST FOR 4 BATCH : 4 x Rp.32.070.000,-	= Rp.128.070.000,-
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IV. REPORT & EVALUATION :

1. Training Report : 4 batch X Rp. 500.000	= Rp. 2.000.000.-
2. Evaluation :	
- Perdiem : 4 person X 7 days X Rp. 150.000	= Rp. 4.200.000.-
- International Travel (Jakarta-Dacca-Jakarta) : 4 persons X US \$ 1.350 x Rp. 1.650,-	= Rp. 8.910.000

GUB TOTAL IV	= Rp. 15.110.000.-
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V. CONTIGENCY :

5 % X (Rp. 13.500.000 + Rp. 43.300.000 + Rp. 128.070.000 + Rp. 15.110.000)	= Rp. 10.274.000,-
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GRAND TOTAL : (I + II + III + IV + V) = Rp. 215.754.500,-
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OUTLINE OF UPAZILA STUDY TOUR (INDONESIA)

Team Members:

Government of Bangladesh: Mr. Azizul Karim, Deputy Chief Planning Cell, MOHFP.

USAID: Ms. Sigrid Anderson, Population Officer.

Other: Dr. M. Alauddin, Country Representative, Pathfinder Fund.

Dr. Sara Seims, Deputy Director, FPMT Project, Management Science for Health.

Question to be addressed by the Team:

1. What are the major objectives of the Indonesia study tour program?
 - Short term objectives
 - Long term objectives.
2. Who should participate?
 - Criteria for selection of upazilas.
 - From which upazilas should just the UFPO participate and from which should a upazila team participate?
 - What should be the composition of the upazila team and should the composition be the same for each upazila?
3. What are the major organizational and logistical factors to be considered?
 - What are the bureaucratic mechanisms for selecting the participants - who is responsible?
 - What are the clearances which have to be obtained for the upazilas?
 - What are the mechanisms for obtaining the clearances for the participants from the upazilas?
 - Who is responsible for briefing the participants, accompany them, arranging for travel/per diem and related expenses, liaising with Indonesia for the organization of the study tour?

4. What should be covered during the study tour of Indonesia?
 - What aspects of the Indonesian program would be most appropriate for the participants to see?
 - How long should the study how last?
 - What training activities should take place in Indonesia?
 - What should be the maximum number of participants be in each group?
 - What should be the timing of the study tours for UFPOs and upazila teams?
 - What support services are needed from the Indonesian side and which organizations can provide it?
 - What are pre mechanisms to obtain these support services in Indonesia?
5. How should the participants be prepared for the study tour?
 - What is expected of the UFPOs and the other members of the upazila team?
 - What should be covered by briefing in Bangladesh prior to departure? How long should these briefings be?
 - Should special informational packages be developed for the participants if so, what should they contain - who is responsible for their preparation?
 - Who is responsible for organizing the pre-departure briefings?
 - Who from Bangladesh should accompany the group?
6. What activities should take place upon the return to Bangladesh?
 - What assistance is required to help participants to prepare proposals for upazila level FP efforts?
 - What debriefings should take place and who is responsible for organizing them?
 - What should be the role of the NGOs?
7. What are the immediate actions which need to be taken upon the return of the team from Indonesia and when should those actions take place?
 - Role and responsibilities of 4 BG, USAID Team.

8. Summary and recommendations:

9. Other:

- Evaluation plan
- Budget
- Other administrative/management issues.