

**PATHFINDER INTERNATIONAL
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Submitted by:

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Pathfinder International is pleased to submit this quarterly report of activities conducted under Cooperative Agreement CCP-A-3062-AA-00-2025-00 for the period January through March, 1999. Activities and results are described under the following headings:

- Access
- Quality
- Institutional Sustainability
- Global Initiatives and Administrative Issues

Under each section of the first three sections, the report describes regional and country-level activities supporting each strategic objective.

Access

Africa Region

In its efforts to improve access to family planning/reproductive health (FP/RH) services particularly for under-served groups, Pathfinder continued work under its Africa Regional Initiative for Adolescent Reproductive Health (ARH). Pathfinder coordinated and facilitated the activities of the East African Reproductive Health Network (EARHN), a project undertaken under the auspices of REDSO/ESA. Pathfinder conducted a series of consultative meetings of key country representatives from East African Population Secretariats to prepare for planned ARH study tours, research, and dissemination activities. A local consultant/ARH research expert was recruited to assist EARHN to document activities of the Network. Pathfinder conducted a preparatory trip to meet with local implementing partners in South Africa, Swaziland and Zambia, focussing on ARH to select potential sites for the planned study tour by the EARHN policy makers, program managers and selected youth in mid-April 1999. The group chose to visit South Africa and Zambia based on the following criteria: innovation in addressing the needs of youth; youth involvement; sensitivity to cultural conditions and influences; and incorporation of critical motivation factors that impact on the RH of youth such as educational, occupational/income generation and marital aspirations.

Also related to its ARH Initiative, Pathfinder continued work on the update to the award winning, 1988 film "Consequences" also know as "Yellow Card". The fourth script was prepared and circulated for review by all donors/stakeholders, including the Ford Foundation, USAID/REDSO/ESA, DFID, and Pathfinder. Also, support from DFID was finalized and a contract prepared. Pathfinder finalized it regional programmatic ARH strategy for addressing the RH Needs of Young People in the sub-Sahara for the period 1999-2003. As a regional IEC initiative, Pathfinder began meetings to discuss collaborative efforts with *Africa Alive*, a JHU/PCS project that seeks to bring attention to the spread of HIV/AIDS among young people in Africa and prompt action from national, regional, and international partners, to address the epidemic.

Kenya

To ensure the widest possible range of appropriate FP methods, Pathfinder continued to support Emergency Contraceptive Pill (ECP) services in Kenya's participating service delivery points (SDPs). A survey on ECP distribution and use in this country was conducted, and the data is currently being analyzed. Preliminary findings indicate that providers at the SDPs are providing information and services to attending clients during health talks and individual consultations. Use of Postinor-2 continued to increase in most sites and in others, where Postinor-2 is out of stock, providers promoted the Yuzpe regimen.

Mozambique

Building the pool of qualified service providers is essential to improving both access to and quality of FP/RH services in Mozambique. A significant activity in Mozambique this quarter was the follow-up practical training of trainers (TOT) for community-based reproductive health (CBRH) services, which took place in Nampula. This activity focused on training the individuals from participating organizations and district departments of health who will be responsible for training the CBRH agents ("activistas"). The trainers worked with actual CBRHAs selected from the community (in this case, Ribaué district, through SALAMA), to practice and test the training methodology. In addition, Pathfinder worked closely with CARE in modifying the curriculum for training the agents, which was finalized upon conclusion of the course. The CARE coordinator for RH co-facilitated the course. The selection of CBRH agents for both SALAMA and AMODEFA activities in Nampula began, and a cadre of SALAMA CBRH agents participated in the CBRH TOT/Practicum in Nampula City. AMODEFA began making plans for training its CBRHAs around Nampula City expected to take place in April 1999.

Another significant activity was a study tour in Malawi for Ministry of Health and PVO/NGO partners to observe the Malawi CBD RH program. The study tour was intended to increase awareness and understanding of the value of CBRH activities, and to provide a comparison to programs already observed in other countries. It is expected that the Ministry's understanding of, and support for, CBD programs will help create a more favorable environment for FP/RH services in Mozambique.

South Africa

Pathfinder expanded its collaboration with the Planned Parenthood Association of South Africa (PPASA) to include planning for national ARH and multi-sectoral programs focussing on youth as a step towards improving access for this under-served group. These innovative initiatives will be funded by a variety of private and bilateral donors. The two organizations will develop or refine ARH service delivery models and focus on

strengthening management, monitoring, and supervision of ARH activities. Their progress will be carefully documented and successful models widely disseminated.

South Africa: Pathfinder and PPASA Poised for New Program

Pathfinder and PPASA are set to begin collaboration on an innovative new program that links reproductive health and environmental activities. South Africa's Water Department has inaugurated a program entitled *Working for Water*, a multi-sectoral community development program that provides public works jobs for thousands of disadvantaged South Africans who are in communities experiencing environmental degradation due to the presence of "alien species" – that is, species that are not native to South Africa. These trees and plants reduce South Africa's water table with damaging results. Men, women, and adolescents are given employment in clearing these species, installing irrigation schemes, and digging waterways. One by-product of the program is the use of alien species for income generating activities such as furniture making, weaving, and charcoal production. Another by-product is community mobilization, as Working for Water participants identify long-standing community problems and propose achievable solutions. Yet, a third by-product is the involvement of program participants in community-based reproductive health services. This integrated approach already is paying dividends, and Pathfinder and PPASA plan to work in existing and new sites to expand and strengthen services. In light of South Africa's soaring rates of STIs and HIV transmission, the program will emphasize preventive messages, condom promotion, and behavior modification. Pathfinder and PPASA also use the program as a means of testing and documenting new models of increasing community participation, monitoring, planning, and problem solving. UNFPA is also supporting some aspects of the program.

Tanzania

In keeping with its efforts to improve access to FP/RH services through various service delivery mechanisms, Pathfinder in collaboration with Population Services International (PSI), organized a "Linkage of RH to Social Marketing" meeting to review progress in this area and to discuss Pathfinder-funded NGO contributions to this linkage. The meeting was attended by project directors, field officers, and active community-based distribution (CBD) workers. It concluded with a pledge to pursue and strengthen collaborative efforts between Pathfinder and PSI in the area of social marketing.

Uganda

In Uganda, access to services was improved through the deployment of a team of two nurse/midwives to provide outreach Norplant insertion and removal services in selected sites of the Family Life Education Project (FLEP). These outreach efforts will assist clients who cannot afford to travel 100 kilometers or more for this service. East Ankole Diocese (EAD) has strengthened its referral linkages with TASO, AIC, Marie Stopes and MOH service delivery points. Community reproductive health workers (CRHWs) are now referring clients to other agencies' clinics operating in their areas in addition to the EAD clinics.

Nigeria – CBDs' FP/RH Campaign in the Workplace Yields Dividends

St. Anthony's is a private, for-profit hospital located in the heart of Aba in Abia State in southeastern Nigeria. It provides comprehensive clinical services and serves as a base for home-based care and community-based medical services including FP/RH services. Established four decades ago, the hospital has become solidly entrenched in the community. St. Anthony's has strong ties with local churches, which refer members for services. It also serves as a training center for health workers through its School of Nursing and Midwifery.

The community-based program of St. Anthony's Hospital Project is an anchor for 56 CBD agents comprised of patent medicine dealers, representatives of church women organizations, market women, students, and transport workers. Under St. Anthony's grant with Pathfinder, the CBD agents were trained in January 1999 to distribute non-prescriptive FP methods, conduct peer motivation, and refer clients to St. Anthony's for prescriptive and surgical methods. Soon after their training, the CBDs resolved to improve community awareness of FP/STIs/HIV/AIDS by bringing their campaign to workplaces including markets, churches, and schools in and around Aba. This resulted in a dramatic upsurge in the demand for RH/FP services. Between January and March alone, the CBDs referrals resulted in 1,800 new IUD acceptors and 1,000 new acceptors of injectables, in addition to their distribution of 830 cycles of pills and 14,924 condoms.

It is obvious that the CBD program is stealing the show at St. Anthony's Hospital and has great potential in increasing demand for and distribution of RH/FP services in Aba. Ms. Geraldine Nzeribe, the Project Director is optimistic that given adequate logistic support, the CBD program has even greater prospects.

LAC Region

Bolivia

In Bolivia, Pathfinder has collaborated with the Ministry of Health, the Ministry of Education, and the Vice Ministry of Gender to develop and implement a strategic plan for adolescent services. The plan incorporates sexual education, gender issues and reproductive health.

Brazil

To increase access and availability of FP/RH services in Brazil, Pathfinder through its program with SESAB, has trained a number of service providers in FP/RH services. Currently a total of 206 health posts offer family planning services in the state of Bahia.

During this quarter, Pathfinder in collaboration with its population environment partner FUNATURA, continued to increase FP/RH services for the residents of the Grande Sertão Veredas National Park. With Pathfinder's support, a doctor and nurse from Chapada Gaucha (closest municipality to the park) continued their monthly visits to the park headquarters to provide FP/RH services to park residents. Furthermore, Pathfinder trained health workers from nearby health posts to meet the FP/RH needs of the park residents.

Ecuador

In Ecuador, Pathfinder and the Centro de Estudios e Investigaciones Salud y Nutricion (CEISAN), played an important role in supporting the MOH in the development of the

National Reproductive Health Norms that incorporates ECP into family planning services.

Additionally, Pathfinder International provided technical assistance to CEISAN to develop new strategies for expanding ECP services to the adolescent population as well as to other service delivery sites. One additional service site (the MOH Health Center No. 8) was incorporated into the project. With Pathfinder's support, CEISAN will continue to increase ECP services in Ecuador.

Peru

With the support of Pathfinder's adolescent program in Peru, the local NGO REDESS-Jovenes, completed its objective to develop the National Action Plan in Adolescents and Reproductive Health. The plan focuses on training, service delivery guidelines, IEC materials, and policy and advocacy in ARH services. The action plan was printed and distributed to various organizations, donors, and professionals working with the adolescent population, including the Adolescent Reproductive Health National Program of the MOH. The document will provide a national objective for ARH and it will serve as a guide for both public and private institutions in the implementation of ARH services.

Asia Region

Indonesia

Although the current political and economic crisis continues, Pathfinder, through the Service Delivery Expansion Support (SDES) project in Indonesia, was able to increase access to family planning services through community, clinic, and hospital-based systems. The high inflation impact on the economy has drastically reduced the level of family planning and health services availability because of the dependence on imported materials and equipment. The resulting increase in the cost of services is the main reason for the reduction of private sector use and increased public sector use of these services. Price inflation is also the main reason for the increasing shortage of drugs, medicines, and contraceptives. In response to the crisis, SDES support and assistance has emphasized maintaining current users, preventing dropouts and increasing LTM users; mainly IUD and VS. To achieve these objectives, in October 1998 USAID and Pathfinder reallocated funding to purchase a total of 1,100,000 units of IUD Copper-T 380 A, 228,000 units of Norplant, and associated medical supplies which have been provided to the Government of Indonesia. In addition, the Center for Health Research, University of Indonesia (CHR,UI) has been appointed as the third party to monitor the distribution of USAID contraceptives.

To address the impact of the economic crisis, SDES has provided support for crisis monitoring in 11 BKKBN provinces. The purposes included: providing information on the impact of the economic crisis on the FP program by using several important indicators including method-mix of contraceptives by current users; drop out; availability of contraceptive supplies; and availability of skilled providers and services. These indicators will be reported regularly by BKKBN at the sub-district, district, province and central level to its decision makers within two weeks which will allow them to respond

timely to actual family planning service problems. Dr. Paul Richardson of URC assisted in the development of this center. The Crisis Center is also to maintain family planning services during the crisis period, provide free family planning services to those who cannot pay, and to monitor and address new family planning problems that are caused by the crisis in twelve (including DKI Jakarta) SDES provinces. The Crisis Center began its monitoring activity in April 1999. SDES has also reallocated funding for the development of service delivery activities in Jakarta and on operational research in quality of FP services in Jakarta. The aim of the Jakarta sub-project is to increase access and to maintain the utilization and quality of services in urban slums, while the research will reflect the implications of economic crisis on the quality of FP services in Jakarta. These sub-projects began in March 1999 and will continue in FY 2000.

Of the 638 SDES project activities, as of Quarter 3 for FY 99, approximately 48% of the activities are completed, 39% are ongoing, 4% delayed, and 12% to be planned and implemented. The completed activities include service delivery, IEC, training and project management activities. These include preparing SDPs in several provinces, provision of medical and non-medical equipment for service delivery points to improve access to voluntary surgical contraception (VSC) in government public health centers and to IUD service delivery in clinics and village midwife posts. The low completion of project activities is primarily due to the increase cost of building materials, medical and non-medical equipment, and transportation expenses. In response to the situation of high inflation, Pathfinder has made budgetary adjustments to support current service delivery points, transportation expenses, and general administration. NGO clinics have also undergone budgetary adjustments for renovations, equipment procurement, and administrative support. As previously mentioned, the high-price of medical and non-medical supplies are the main factors affecting the sustainability of NGO clinics.

SDES also funds IEC activities such as outreach visits and the production of IEC materials, which complement the static service sites. IEC outreach activities are conducted to provide information on preventing user drop out, maintaining current users, specific methods and services, and to increase community knowledge and awareness about the benefits and availability of family planning. Outreach activities are not only implemented by field workers, cadres and midwives during home visits, but also through community and religious leaders at community meetings or activities. During these activities printed and mass media IEC materials produced through SDES are used. Following the IEC activities are the visits to the service delivery points. The aim of service delivery visits is to increase the availability of family planning methods in areas where access is limited. Service delivery visits include VSC specialist visits, integrated service visits, IUD home visits by midwives, and service visits by teams of doctors and/or midwives in eleven provinces. In addition, support is provided to village-based midwives to expand their outreach to provide family planning and mother-child health services to clients within their respective communities. Project achievements of Quarter 3, SO I are shown in the attachments.

Quality

Africa Region

Under its regional initiative that promotes HIV/AIDS integration into FP/RH programs, Pathfinder completed the final draft report on the Setting Africa Agenda II Conference. The report was distributed to a selected number of reviewers and will be finalized for distribution in the next quarter.

Ethiopia

Funding for subprojects in Ethiopia was recently switched from USAID field support to a mission cooperative agreement; however, USAID field support continues to fund some direct support to complement subproject activities. In this vein, Pathfinder continued to provide TA to promote quality efforts in Ethiopia. Refresher training was conducted by the Family Guidance Association of Ethiopia (FGAE) and Nazareth Children's Center and Integrated Development (NACID) facilitators in Ethiopia for 31 CBRH agents who had previously been trained for work in Adama and Lome districts. Emphasis was placed on communication and management skills. Marie Stopes International–Ethiopia (MSI-E) also conducted a five-day refresher course for fourteen of its CBRH agents in Addis Ababa, focussing on recording and reporting, updating their FP knowledge, reinforcement on responsibilities/activities of the agents, and strengthening of referrals and follow-up to improve method mix. The Ethiopia Gemini Trust conducted a ceremony during which awards were given to six CBRH agents who had excelled in serving FP clients. Certificates and prizes were also awarded to all the districts and *kebeles* for their cooperation and assistance in promoting the CBRH program in their administrative areas. It is envisaged that this ceremony, which was attended by representatives from the MOH, Addis Ababa Health Bureaus, the Consortium of Family Planning Organizations (COFAP) and FGAE, will boost performance of CBRH agents and garner increased and continued support for the program. In another development, COFAP, the MOH, and Pathfinder organized a two-week TOT for fifteen regional CBRH trainers drawn from Afar, Benshangul, Gumuz, Gambella, Harari, Somali, and Dire Dawa regions. This course was the fourth in a series of TOTs provided with Pathfinder support, the purpose of which is to build the training capacity of both public and NGO institutions. Sixty national and regional trainers have received training in the use of the CBRH curriculum, protocols, and management/supervision manual. Final reports of the client exit interview conducted at selected service delivery points of FGAE and MSI-E have been produced and distributed to relevant departments of NOP, MOH, USAID, libraries of training institutions, FGAE, MSI-E and COFAP, among others. The reports show the status of quality of care in two major NGOs, which provide RH/FP services in the country and suggest areas for further improvement.

Kenya

Community-based reproductive health service providers (CBRHSPs) under Kenya's Maendeleo Ya Wanawake Organization (MYWO) project were trained in home-based care using the curriculum developed with technical assistance from Pathfinder. Revisions of this curriculum were initiated based on field observations on the CBRHSPs'

performance and comments from stakeholders and observers from the communities served.

Mozambique

Pathfinder provided technical assistance to MCDI in Cuamba, Niassa Province of Mozambique, in the preparation and implementation of a RH module for health service providers in that region. This was one part of a series of TOT modules designed to update knowledge and skills of service providers at the health post and community level. This was not only an opportunity for Pathfinder to share its knowledge and experience with MCDI and the southern Niassa region, but also to test whether such an approach is viable in terms of successful training outcomes. A Pathfinder consultant worked with the technical team in Nampula to revise all project indicators to better measure the impact and progress of project activities. This work coincided with the development of a methodology and questionnaire for conducting baseline surveys in all project areas, focusing on individual knowledge, attitudes and practices, combined with a facility-based component. Unfortunately, the baseline surveys have been tabled for the moment due in part to a negative environment for the activity (resulting from the cholera outbreaks), as well as a request from USAID that surveys be deferred in light of possible survey activity conducted by the Mission. The first TOT for Elementary Nurses in Nampula was organized for April 1999, and materials were finalized for that training activity. Pathfinder also assisted AMODEFA to prepare for its CBRHA training, scheduled for April 1999. In an effort to encourage continued cooperation between Pathfinder's other partners, SALAMA staff are also scheduled to help facilitate AMODEFA's training. All training manuals and other materials were finalized during this quarter while supervision and monitoring instruments were developed and are ready to be tested.

Nigeria

During the quarter, Pathfinder improved the quality of services by supplying the eight USAID-supported subprojects with basic FP equipment and IEC materials in the form of books, posters, brochures and pamphlets with messages on FP and STIs/HIV. Ninety-two persons were trained in counselling and provision of non-prescriptive FP methods; specifically, 65 CBDs, 25 patent medicine dealers (PMDs), and two community health extension workers (CHEWs) were trained as FP motivators, distributors of non-prescriptive methods, and as referral links to prescriptive methods. In order to facilitate the delivery of family planning services in Sabo Layi community of Katsina State, 26 youths were trained as peer educators in a three-day interpersonal communication skills development workshop. Pre- and post-natal services were provided while other clients were treated for STI/HIV related diseases. Three sub-projects in Nigeria have extended their IEC activities to brothels, churches, companies/factories, and barracks. FLE campaigns directed at students and teachers were conducted during the quarter.

Senegal

A major quality-related achievement in Senegal this quarter was the abandoning of the female genital mutilation practice (FGM) around St. Louis by fifteen female circumcisors, thanks to the intensive IEC work done by the FP IEC educators working under the St. Louis clinic. The St. Louis' program FGM component is financed in

collaboration with a Canadian organization, Centre Canadien d'Etudes de Coopération Internationale (CECI). Also related to quality of services, in Kaolack, twenty CBD workers, and two trainers and two nurse/midwives received a FP contraceptive technology update course.

Tanzania

Quality of services was improved through several program areas in Tanzania. Choice of method was improved through the introduction of ECP services in Tanzania Occupational Health Services (TOHS) family planning clinics. The Infectious Diseases Centre provided refresher training on syndromic diagnosis and treatment of STIs to 21 service providers from the Organization of Tanzanian Trade Unions (OTTU) and TOHS. In collaboration with TOHS and the Tanzanian MOH, Pathfinder also conducted a similar training, attended by 21 service providers from OTTU, TOHS, and SUWATA, a nation-wide grassroots women's organization. In addition, three assistant clinicians from OTTU attended a three-week RH update course conducted by MOH/INTRAH as a means of enhancing collaboration and quality RH services. In addition, 30 new CBD workers from OTTU and TOHS attended a three-week training while SUWATA CBD and clinic based providers visited the MOH/RH and other CBD programs in Moshi, Dar-es-Salaam, and Coast regions, to learn and share experiences. Forty-five CBD workers attended five days of refresher training.

Uganda

In Uganda, 63 FLEP medical practitioners received a one-day orientation to community participation in monitoring quality of care (QOC). This orientation emphasized the importance of listening to clients' views and perceptions in order to improve the quality of services and clarified the role and functions of the newly deployed "QOC Monitors". Tools being used by the monitors to collect information from the community were further refined. The quality assurance program also focused on IUD insertion and removal services. The theme for the quarter was "IUD as a Safer Method". An initial fourteen-day training in IUD insertion and removal techniques using the "No touch technique" was conducted for twenty FLEP practitioners, two service providers from the EAD project, four service providers from Masindi and nine from Kasese, with MOH and FLEP trainers as facilitators. Another group of 24 practitioners received refresher training as well as an update in contraceptive technology and IUD insertion and removal techniques. In addition, 24 "quality audits" were conducted with specific topics on IUD services.

A review was conducted on the supplies and equipment situation in all NCA-supported subproject clinics in Uganda. At FLEP facilities, over 50% of the clinics lacked equipment. Most of the equipment supplied between 1986 to 1992 was found to have depreciated or was damaged beyond repair. Some clinics lacked contraceptives such as three-month injectables and jelly; Pathfinder is in the process of addressing the FLEP situation. Meanwhile, Pathfinder provided EAD with additional equipment, including examination beds, stethoscopes and BP machines for ten clinic sites. The Masindi Family Health Promotion Project also received supplies and equipment to open four new service delivery sites. A team of three trainers from FLEP provided eight days of technical assistance in setting up these clinics. The Kasese project was boosted with

supplies and equipment to establish IUD insertion and removal services, with a team of three trainers from FLEP providing ten days of TA in setting them up.

A three-day orientation workshop was conducted for 25 managers, district managers and supervisors, to plan for the introduction of home-based care for people living with AIDS and workplace integrated reproductive health services in Pathfinder-funded projects in Uganda. After this training, the management team conducted a preliminary assessment of Kinyara Sugar Works one of the work places selected by the project. This assessment will assist in developing a comprehensive work-based program.

Related to IEC, the films “More Time,” “Time to Care,” “Dilemma,” and one promoting HIV testing were shown in 34 villages reaching over 12,000 people. Message posters and calendars on exclusive breast-feeding were distributed in all FLEP areas, while two flip charts, one on syndromic management of STIs and the other on maternal health education, were distributed to service providers in all FLEP clinics. In Kasese, IEC activities included home visits by the CRHWs, 33 film shows, and distribution of three types of IEC materials — a message poster on breast-feeding, “Health Matters” magazine, and a calendar with messages about exclusive breast-feeding.

LAC Region

Bolivia

During this quarter, Pathfinder in Bolivia has worked with the maternity hospitals of Oruro and Trinidad to develop a training and service delivery workplan for postpartum contraception. Additionally, a TOT on the service delivery and counseling of postpartum contraception was provided for one physician and one nurse from Sucre. Both trainers are expected to provide training at their service delivery sites.

Bolivia

To improve the quality of services in nine MOH health centers in Trinidad, Pathfinder and the MOH implemented the COPE methodology. This methodology has assisted the health centers to identify areas in need of improvement and to develop solutions to address the problem. During this quarter, the Training Center of Trinidad has carried out eight refresher-training courses in IEC and interpersonal communication skills to improve FP/RH services. In the next quarter, the Ministry of Health will evaluate the improvement in services.

Furthermore, Pathfinder is supporting the Ministry of Health in the development of a training curriculum for integrated supervision. During the next quarter, a TOT in integrated supervision will be conducted.

Under Pathfinder’s Social Marketing Subcontract with PSI, Pathfinder is reviewing and adapting its training modules to be used in the training of private physicians in the provision of family planning contraceptives.

Brazil

In Brazil, Pathfinder analyzed data obtained from needs assessment visits conducted in 24 health units participating in the RH-STD/AIDS Integration Program in the states of Bahia and Ceará. Pathfinder's technical team developed detailed needs assessment reports for SESAB/SMS and SESAB/SMDS. In a discussion with the technical teams of the Secretariats of Health in Bahia and Ceará, a consensus was reached on two main issues: (1) the presentation of the data analysis to the participating health units; (2) and the application of the data analysis to improve the integration of services. The results of the needs assessment showed that the provision of quality integrated services needs to be strengthened in the areas of: prenatal care, family planning, STD/AIDS, cervical and breast cancer prevention, client/provider interaction, infection prevention, management and human resources.

Other areas in need of improvement include: the dissemination of service delivery procedures and technical guidelines; logistics/commodities; community involvement; male involvement; adolescent reproductive health care; cross-referral systems; and management systems

During the next quarter, Pathfinder will conduct meetings to present the results of the needs assessments to the health units of the state municipalities. In addition, Pathfinder will hold workshops to determine the quality criteria for integrated services; to develop a workplan; to determine the activities and future role of the health units; and to develop performance improvement tools for service providers.

Pathfinder and Fundação José Carvalho began discussions and negotiations for the extension of the sex education program for rural youth in Brazil. Pathfinder will continue to prepare teachers to provide guidance to students seeking information about FP/RH by forming a core group of trainers among José Carvalho's teachers. These trainers will in turn offer refresher training to their colleagues. Additionally, Pathfinder will conduct activities for parents of students about FP/RH and provide support to the foundations' health fairs. Last year, according to Fundação José Carvalho's officials, Pathfinder's involvement in the program proved to be a resounding success.

To improve the quality of AIDS prevention messages, Pathfinder in Brazil supports four NGOs in Bahia and Ceará. Through its Communication and Culture project, Pathfinder has prepared school children to address the issues of AIDS prevention through their school newspapers. In collaboration with the Institute for Health and Social Development, Pathfinder trained a radio disk jockey to appropriately deliver AIDS prevention messages. During this quarter, Pathfinder developed an evaluation plan with this NGO to measure the impact of messages on the listening audience. This study will be conducted later this year. Additionally, Pathfinder and the AIDS Support and Prevention Group (GAPA) have been providing intensive awareness messages to inform poor communities within Salvador about STDs and HIV/AIDS prevention. Furthermore, Pathfinder in partnership with the Center for Drug Abuse and Prevention (CETAD) has provided information about HIV/AIDS prevention to populations at risk for AIDS infection.

Ecuador

In Ecuador, informational sessions on ECP were conducted for adolescents from the Colegio Universitario Odilio Aguilar. With Pathfinder support, CEISAN is adapting comprehensive health material to address adolescent health issues. CEISAN will develop IEC material specifically for adolescents.

Mexico

In Mexico Pathfinder continues to improve the quality of service through its support to grantee activities. During this quarter, the Instituto de Seguridad para los Trabajadores del Estado (ISSSTE) completed its activities under the Adolescent Reproductive Health Care Program. Pathfinder provided technical assistance for the development of this program, which included service delivery and outreach strategies.

During this quarter, Pathfinder has supported the documentation of six different service delivery strategies completed by the Secretaria de Salud(SSA). This documentation includes rural services, IEC, adolescent services, non-scalpel vasectomy, postpartum contraception, and RH in indigenous communities. Further, to increase providers' technical competency, Pathfinder supported the SSA's production of various manuals on the following subjects: oral contraceptives, injectables, IUD, VSC, and Non-Scalpel Vasectomy.

With Pathfinder support, the four grantees (IMSS, SSA, ISSSTE, and CONAPO) involved in the SDES developed a variety of IEC materials for both providers and clients. These IEC materials will provide information on method choice, reproductive rights, and FP norms. In collaboration with the Instituto Mexicano del Seguro Social (IMSS), Pathfinder supported a pilot project to improve the quality of services for the marginalized urban population. Currently the project has been adopted by the institution.

Peru

During this quarter in Peru, PASARE strengthened the service delivery of MOH hospitals located in USAID/Peru priority areas increasing access to FP/RH services and maximizing the use of resources. Pathfinder also contributed to health education and service delivery activities by donating IEC materials (reproductive health flipcharts, cue cards) to MOH hospitals of Tacna and Moquegua.

Pathfinder has provided training materials and supported competency-based training for service providers in infection prevention and counseling. In coordination with USAID/Peru, MOH, and Regional Health Offices of Huancavelica and Puno, Pathfinder provided technical assistance in the development of a strategy to strengthen family planning and reproductive health services, improving and expanding access to services, and assisting with strategic planning.

Under the PASARE project, Pathfinder and supervisors of Project 2000 have provided technical assistance to develop plans for continuous quality improvement in hospitals located in the cities of Huancavelica and Puno. Follow-up site visits are planned for the next quarter.

Pathfinder, under the Adolescent Program, is completing the final editing phase of the training manual on *Communication Skills and Counseling for Adolescents on Reproductive Health Care*. Comments and suggestions received from various colleagues in the field of adolescents' reproductive health issues, counseling, and communications have been included. Their contribution has improved, expanded, and updated the module. Furthermore, Pathfinder through its adolescent program provided technical assistance to the ALCANCE to organize and conduct a workshop on Adolescent Programming and Counseling for 24 participants of eight local NGOs.

Pathfinder has translated into Spanish five *In-Focus Series* newsletters developed by FOCUS. Currently, Pathfinder is distributing them among public and private sector institutions that conduct adolescent programs. The newsletter will be distributed in Peru, Mexico, and Bolivia. In addition, the document *Guidelines for Adolescent Preventive Services* developed by the American Medical Association was translated into Spanish. In addition Pathfinder continues to translate into Spanish its 15 training curricula, *Comprehensive Reproductive Health and Family Planning Training Curriculum*. The curricula will be produced and disseminated in Peru, Bolivia, and Mexico. During this quarter, Pathfinder's Module No. 13 *Postpartum/Postabortion Contraception* was translated into Spanish.

MEXICO ECP and Adolescents

ECP among adolescents is not well known in Mexico. Although promotion of this contraceptive method has begun, many service providers and clients remain uninformed.

Under the framework of SDES, Pathfinder International supported a collaborative effort between a government health institution (IMSS) and an NGO (MEXFAM). IMSS is the main supplier of contraceptives in the country and MEXFAM has worked extensively with adolescents. The goal of this collaboration was to provide adolescent services and outreach activities through a network of youth promoters in order to improve method choice and increase knowledge and information about ECP.

Mario, a youth promoter, worked with high school students to increase their knowledge and understanding of ECP. Recently, Mario shared with us his experiences with adolescents present at his informational meetings: "When I explained the ECP method, adolescents commonly asked if the method was an abortifacient. The word 'abortion' always invoked a heated discussion. In fact, many conservative groups used the abortion topic to strengthen their arguments against ECP. Unfortunately, due to misinformation or myths, many people believe that ECP aborts pregnancies. Thus, I had to work hard to properly educate the youth population about ECP and the difference between this method and an abortifacient."

Through Mario's hard work and information sessions, a greater number of adolescents have gained a clearer understanding of the ECP method. Moreover, his efforts have assisted in the breakdown of stereotypes about ECP.

Asia Region

Indonesia

The limited trained providers in clinical skills and the availability of medical and non-medical supplies, which are very expensive, are affecting the quality of services provided through SDES. However, in collaboration with NRC and JHPIEGO, Pathfinder has

successfully supported various training activities in order to maintain current users and increasing the use of IUD and VS services. These include training for doctors and midwives in IUD insertion and removal, for doctors in tubectomy using the minilaparotomy technique, for midwives in IPC counseling, and for fieldworkers in information, identification, screening, referral, VS services (IIPRT), and for doctors in reproductive health.

Pathfinder, using reallocated funds in Quarter 3, has recently concluded a sub-contract with AVSC for the procurement and distribution of essential medical supplies for Implant and VSC services. AVSC is also expected to oversee VSC services at hospitals and public health centers and to ensure that standard procedures are being followed.

The SDES project evaluation is scheduled to cover the period for six months — from December 1998 to June 1999. The objectives of this evaluation is to provide information on the achievements of the SDES Project, the contributions of the project on national family planning programs and lessons learned for the development of further strategies. The evaluation has begun, and it is expected to be completed by the end of June 1999. The evaluation components include quality assessment study (QAS), Program Management Intervention and Sustainability, and Effectiveness of NGOs clinics. These components are in the data collection stage and are scheduled to be completed by the middle of May 1999. The secondary data analysis of DHS, SUSEANAS, and Service Statistics is completed. Secondary data analysis on certain variables including IMR, CPR, TFR will be completed in May 1999 by Dr. Neeraj Kak of the Futures Group, USA and CHR, UI, University of Indonesia will assist with this evaluation.

In addition, CHR, UI has been assigned to monitor the distribution of contraceptive supplies donated by USAID (IUD and Norplant) to verify that these supplies will be distributed free and to pre-welfare and welfare grade 1 families. The monitoring activities were scheduled from November 1998 to October 1999, and the first round of monitoring activities has been conducted in the third quarter. The Project Achievements of Quarter 3, SO II Quality is shown in the attachment section.

Institutional Sustainability

Africa Region

Ethiopia

A two-day theoretical and practical TOT on the use of the new monitoring and evaluation (M & E) instruments was conducted for 25 COFAP staff members in Ethiopia. Training focused on how to complete these materials and produce monthly service statistics. In addition, a set of 11 instruments developed for the new M & E system was distributed to COFAP members for implementation. All Pathfinder-supported NGOs are expected to institutionalize the instruments beginning the current fiscal year. The instruments are meant to standardize the member organizations' data collection and reporting systems and improve their MIS. A two-day orientation workshop on the newly developed M & E

formats was conducted at the zonal level of Hossana and Durame for the supervisors and CBRH Agents. The zonal coordinators and evaluation officer, who had been trained by COFAP in Addis Ababa, served as resource persons. The formats have been distributed and the CBRHAs have started using them. The Southern Regional Planning and Economy Development, the Regional Health Bureau and representatives from the respective zonal offices conducted an evaluation of the CBRH project in Hadiya and KAT. This activity assessed project achievements against objectives and the results will be used to determine the project's future direction.

Kenya/Tanzania

In Kenya, Pathfinder participated in coordination meetings organized by the National Council for Population and Development (NCPD) for NGOs and government ministries involved in the implementation of population-related activities. The Pathfinder country office participated in USAID/Kenya's mid-term review of the bilateral agreement. In an effort to strengthen and improve the RH MIS, the CBD/clinic data collecting and reporting tools developed and pre-tested previously in Tanzania were adopted and all Pathfinder-funded projects are now using them. TOHS reprinted CBD diaries, day-to-day summary forms, referral forms, and monthly report forms.

Mozambique

On program activities, the Memorandum of Understanding (MOU) with MCDI in Cuamba, Niassa Province, Mozambique was refined and signed during this quarter. A meeting of the CBD task group was held in Nampula just before the CBD TOT and CBRHA training occurred. Several PVO partners attended, as well as our NGO sub-grantees and the Nampula DPS. Much of the meeting focused on the upcoming training and on implementing the CBD program. Due to the ongoing epidemic of cholera in Nampula province, Pathfinder continued to assist the provincial department of health in the planning and implementation of activities to decrease cholera transmission and improve diagnosis and treatment. Pathfinder held a contraceptive logistics meeting to coincide with FPLM's visit to Mozambique. During this visit, it was agreed that Pathfinder would compile information regarding contraceptive demand and any data on future projections, in order to assist in the development of a five-year projection for the country.

Nigeria

A one-day meeting was conducted to disseminate the strategic planning document for Nigeria NGO Consultative Forum (NINCOF) prepared in the previous quarter.

South Africa

Pathfinder is collaborating with Abt Associates to assist PPASA in South Africa to enhance its financial management systems and sustainability planning.

Uganda

Twelve women groups in Uganda continued to access micro-credit from FLEP. These groups have also participated in sexuality education sessions that help them to acquire communication skills for condom negotiation and promotion of positive partner behavior

in STIs and HIV/AIDS prevention efforts. A micro-projects finance scheme for the CRHWs of EAD has continued to expand and benefit more members. Thirteen CRHWs received small loans this quarter for income generating activities. FLEP signed eight MOUs with local governments. Seven other communities were prepared to do the same, through two-day workshops conducted in each project area. Participation at these workshops included local government sub-county leaders, health committees of each respective area, and other influential community leaders. FLEP also participated in FY2000 district planning for Iganga, Kamuli, Bugiri, and Jinja districts. FLEP's workplan was presented for inclusion in the overall district plan. Through a series of two-day workshops, all CRHWs and CRHW supervisors/practitioners under FLEP, EAD, Masindi, and Kasese projects were re-oriented to the definitions and meaning of major variables used in reporting on FP and STIs and HIV/AIDS work. A physical count from records was done to establish the number of current FP users by method in each project catchment area. Under the Kasese project, CRHWs were re-oriented to the major child survival indicators and definitions of key variables used in FP reporting. New formats were distributed and all registers updated to capture most important data on the nutrition status of children under 5 and immunization coverage for pregnant women and 0-1 year olds. Pathfinder/Kampala facilitated these workshops, in collaboration with FLEP trainers.

A one-day project annual review meeting was conducted for EAD board members, district leaders from both Mbarara and Ntungamo district and EAD management team. The objective was to review status of project implementation, identify implementation issues, discuss and plan for strengthening of collaboration between local government and EAD project, and develop strategies for FY2000. Working with sub-counties and the local community, EAD is facilitating establishment of a number of static community clinics. During this quarter establishment of 4 clinics has been initiated by local communities.

LAC Region

Bolivia

In Bolivia Pathfinder supported the development of annual workplans for the Ministry of Health (Trinida), PROSALUD and SERVIR.

Brazil

During this quarter in Brazil, Pathfinder continued to provide assistance to SESAB in strengthening existing family planning services within participating health units. Pathfinder provides technical and financial support for the state data collection system, SISMAC. The new SISMAC is comprised of three modules: service statistics, training data and logistics information. The service statistics and training modules have been completed. The service statistics module has been deployed in 20 DIRES as well as in the city of Salvador and in SESAB's headquarters. The training module is centralized at SESAB's HQ. Pathfinder has begun developing the logistics module scheduled to be completed during the 4th quarter of fiscal year 1999. Both in Bahia and Ceará the RH-STD/AIDS integration project has been supported by the State and Municipal Secretariats

of Health. With Pathfinder's support representatives from SESA/SMDS and SESAB/SMS are actively participating in increasing the project's development and sustainability. All activities have been implemented in partnership with Municipal and State Secretariats of Health. The partnership began with a signed Memoranda of Agreements between Pathfinder and the State and Municipal Secretaries of Health. With Pathfinder's support, SESA/SMDS and SESAB/SMS have been providing logistical support at the local and regional levels, sharing activities' direct costs and personnel.

Peru

During this quarter, Pathfinder in Peru facilitated a workshop organized by Project 2000 to assist the Regional Health Office in Puno with the development of its strategic plan.

Asia Region

Indonesia

The high dependence on imported materials and equipment and the resulting high costs that family planning institutions have to face for the provision of services, has clearly affected the sustainability of both private and public sectors. Pathfinder, through SDES, continues to provide management, financial and technical capacities to its grantees, with special attention to NGO clinics and hospitals. The GOI also provides subsidies for family planning and health services at NGO clinics, through the additional support of donor funding. Additional skills for program planning and decision making on how to allocate limited resources and increase coordination among institutions is one of the main reasons for the development of the strategic planning training. SDES has trained more than 300 managers of BKKBN at the central, provincial and district levels as well as managers from NGO clinics have been trained in strategic planning. The main objective is to increase their capability in developing an operational project plan in family planning program related to its local problems. The result of the training has provided better SDES sub-project proposals for FY 2000 focused on addressing local problems. Project Achievements of the third quarter, institution support is shown in the attachment section.

Global Initiatives and Administrative Issues

Administrative Issues

Africa Region

Pathfinder participated in three regional workshops; the annual workplan in preparation for FY 2000; a financial and program management workshop; and an orientation to Pathfinder's New Project Support System (NewPSS). As part of its program development efforts, Pathfinder prepared a proposal for the second phase of the Urban Initiative, which was submitted, for review to REDSO/ESA and Africa Bureau/Washington DC. Approval was obtained and the proposal is currently being implemented.

Kenya

Pathfinder initiated project closure for the Mkomani Clinic Society project. The organization finalized a proposal for private funds to leverage USAID service delivery support for Kabiro Health Care Trust (KHCT). A project manager was recruited and the quarterly donor consultative meetings for KHCT were held. Project proposals for university based peer education using private funds at Egerton and Kenyatta Universities were processed while administrative closures were finalized for the USAID funded projects at these two universities and the Nairobi City Council (NCC). Pathfinder responded to a USAID/Kenya request for applications (RFA) to implement a community-based HIV/AIDS prevention and care support project in selected Kenyan populations.

Mozambique

This quarter saw the finalization of pending internal administrative activities in Mozambique. Both Pathfinder's Maputo and Nampula offices relocated to buildings that are more convenient and a workshop on financial management and systems was conducted with PI staff, whose hiring and orientation was completed. Pathfinder also assisted Mozambique's AMODEFA in final selections of staff for Nampula, Niassa, and Zambezia provinces. By the end of the quarter, all staff had been selected and deployed, with the exception of a coordinator for the Zambezia AMODEFA office. Planning began for the quality of care workshops to be held in Maputo and Nampula during Quarter 4, with Pathfinder technical assistance from headquarters.

Nigeria

In Nigeria, one subproject, NCA/019-1 was closed in January 1999 due to non-payment of staff and hospital rent.

LAC Region

Bolivia

Due to Pathfinder's increased involvement in the provision of technical assistance in the areas of postpartum family planning, post-abortion care, and adolescent services in Bolivia, Pathfinder with the support of USAID/Bolivia has transferred its responsibility to collect and process service statistics of institutions funded by USAID. The logistics management has been transferred to John Snow/FPLM, and the collection of service statistics has been transferred to MSH.

Mexico

In Mexico Pathfinder participated in a meeting with the three service delivery institutions participating in SDES (IMSS, SSA, ISSSTE), to share Pathfinder's perspective and opinion on main achievements and challenges through out the implementation of SDES.

In addition, Pathfinder is participating in a partnership with UNFPA, Schering AG (medical laboratories), and ISSSTE, to develop a client and provider focused manual on adolescent services. This manual will be distributed in Latin American.

Over the course of the SDES project, Pathfinder Mexico developed a series of manuals to address the complex set of issues confronting expansion of RH/FP services in Mexico. The following documents are complete and available:

- *Manual for Service Providers on Adolescents Reproductive Health*
- *Adolescents Reproductive Health: Elements to Support the Activities of Service Providers*
- *Contraceptive Methods for Adolescents*
- *Pathfinder's Experiences in Rural Areas of Mexico*

Final versions of the following documents are pending and will be available soon:

- *Contraception Trends in Rural Areas*
- *STDs and Adolescents: Manual for Service Providers*

Peru

During this quarter in Peru, Pathfinder discussed with USAID/Peru PASARE's funding for calendar year 1999. The local mission office of USAID informed Pathfinder that funding for family planning and reproductive health activities had been cut. Therefore, Pathfinder's participation within the PASARE project will be limited for the next fiscal year. In response to the budget cut, Pathfinder will end its support to hospitals under the PASARE project and will transfer the activities in Huancavelica and Puno developed under the PASARE project to Project 2000 and MOH. Pathfinder developed a work plan for the period March-June 99.

Asia Region

Indonesia

Pathfinder continues to provide programmatic and financial technical support to the SDES grantees through monitoring visits to the eleven SDES provinces and NGOs. Technical support was also provided for project auditing, distribution of medical and contraceptive supplies, and development of the Crisis Center.

Evaluation

In this quarter, the evaluation unit continued to play a major role in the development of Pathfinder's new data recording and analysis system (NewPSS), with all members of the unit involved in weekly meetings devoted to the development and organization of NewPSS activities and indicators. Additionally, the unit began the process of assessing the role and responsibilities of the unit through the end of the NCA period, as well as creating a workplan for the remainder of the NCA period.

In the Asia/Near East Region, the development of a performance-tracking tool for the Rural Service Delivery Partnership in Bangladesh continued. A progress report for Pathfinder UNFPA projects in Pakistan was also reviewed. In Latin America, there was a study of the Bolivia DMPA project. This project includes the training of pharmacists in

the provision of DMPA, and the social marketing of DMPA. Additionally, there was further planning and development of two evaluations to be implemented in several countries, one on quality of care, and the other on client satisfaction. Evaluation unit staff also presented papers at the annual meeting of the Population Association of America that took place from March 25 –28 of this year.

In addition to ongoing evaluation activity work, the documentation, and dissemination of evaluation results has increased. During the quarter, the unit produced four *Evaluation Notes*, summaries of evaluation findings from various countries, and started work on three more. The unit also cooperated closely with other Pathfinder units to produce information useable in advocacy related activities. A draft review of Pathfinder's postabortion care programs was also produced by the unit and then transferred to the communications unit. The unit also submitted several abstracts to the American Public Health Association for the 1999 annual meeting.

LAC Region

Mexico

The completion of the SDES initiative in Mexico brought with it a wide variety of evaluative studies and reports. The following reports, which analyze various aspects of the program, are complete and available:

- *Communication Survey on Family Planning, 1996, CONAPO*
- *The Roll of Midwives in Reproductive Health Activities, IMSS*
- *Evaluation of Reproductive Health Sessions, IMSS*
- *Comparison of IUD Insertion by Medical Personnel and Community Personnel, IMSS*
- *Reproductive Health Sessions and Intensive Primary Health Campaigns*
- *Training of Rural Service Providers, IMSS*
- *Diagnosis for Developing a RH Program Addressing Rural Adolescents, IMSS*
- *Research on Indications for Caesarian Procedures in IMSS Medical Units, IMSS*
- *Evaluation of IEC Materials, IMSS*
- *Synthesis of ENSARE's National Survey on Reproductive Health, IMSS*
- *Evaluation of the Adolescent Reproductive Health Program, SSA*

Peru

In Peru, under the Adolescent RH Program, data analysis continued for the evaluation of the Ministry of Education (MOE) Sexual and Family Life Education Program. Pathfinder participated in several technical meetings with MOE authorities to analyze results of surveys and focus groups and prepare a preliminary report. Findings from this study showed variations in knowledge and sexual behavior among students and teachers who have participated in program training activities from those who have not participated in the program.

First results on the qualitative evaluation conducted by EsSalud (formerly the Social Security Institute) and Tulane University of the Peers Program developed by the IPSS

were obtained. A preliminary report was prepared to be presented in the strategic planning workshop conducted with the representatives of the new twelve sites where the program will be implemented.

Data analysis of the follow-up training evaluation on the effects of training activities on the counseling and communication skills of the MOH service providers was completed. A first draft of the report was developed and submitted to the MOH National Director of the Salud de las Personas Office as well as to the MOH School Students and Adolescent Health Program. In addition, a copy of the document was sent to MOH regional authorities of Tacna, San Martin, and Huanuco. The results of the evaluation indicated an increase in ARH services due to an improvement in services and an improvement in the attitudes of trained service providers.

Information Systems

To improve Pathfinder's data recording and analysis process, Pathfinder's Support System (NewPSS), a global information system, was installed in Bolivia. This new system will improve the flow of information between implementing partners, Pathfinder country offices, regional offices, and headquarters in Boston. A workshop was conducted in Nairobi, Kenya for all Pathfinder offices in the region to focus on implementing NewPSS and understanding the changes global access to data will bring. As a group, the region was able to discuss and see first-hand the power and flexibility of the new system. Additionally, guidelines for use and future development directions were collected.

ACRONYMS AND ABBREVIATIONS

AIDS	acquired immune deficiency syndrome
AMODEFA	Associaçao Mocambicana para o Desenvolvimento da Familia
ARH	Adolescent reproductive health
AVSC	Association for Voluntary and Safe Contraception
BKKBN	National Family Planning Board of Indonesia
CBD	community-based distribution of services
CBRH	community-based reproductive health
CBRHSP	community-based reproductive health service providers
CECI	Centre Canadien d'Etudes de Coopération Internationale
CEISAN	Centro de Estudios e Investigaciones en Salud y Nutricion
CETAD	Centro de Tratamento e Apoio ao Drogado
CHEW	community health extension worker
CHR,UI	Center for Health Research/University of Indonesia
CHW	community health worker
COFAP	Consortium of FP NGOs
CONAPO	Consejo Nacional de Poblacion
CRHW	community reproductive health workers
DFID	British Department for International Development (formerly ODA)
DHS	Demographic and Health Survey
DMPA	Depo Provera
EAD	East Ankole Diocese
EARHN	East African Reproductive Health Network
ECP	emergency contraceptive pill
FGAE	Family Guidance Association of Ethiopia
FLE	family life education
FLEP	Family Life Education Project
FP	family planning
FY	fiscal year
GAPA	Grupo de Apoio e PreveFPSPo a AIDS
HIV	human immunodeficiency virus
KHCT	Kabiro Health Center Trust
IEC	information, education, and communication
IMR	infant mortality rate
IMSS	Instituto Mexicano del Seguro Social
INTRAH	Program for International Training in Health
ISSSTE	Intstituto de Seguridad y Servicios Sociales para los Trabajadores del Estado
IUD	intrauterine device
JAFPP	The Jordanian Association for FP and Protection
JHU/PCS	Johns Hopkins University/Population Communication Services
LTM	long-term method
M&E	monitoring and evaluation
MOE	Ministry of Education
MOH	Ministry of Health

MSIE	Marie Stopes International/ Ethiopia
MYWO	Maendeleo Ya Wanawake
NACID	Nazareth Children's Center & Integrated Development
NCC	Nairobi City Council
NCPD	National Council for Population and Development
NGO	non-governmental organization
NINCOG	Nigeria NGO Consultative Forum
OTTU	Organization of Tanzania Trade Unions
PASARE	Programa de Apoya en Salud Reproductiva
PMD	patient medicine dealers
PPASA	Planned Parenthood Association of South Africa
PSI	Population Services International
PVO	private voluntary organization
QAS	quality assessment study
QOC	quality of care
REDSO/ESA	Regional Economic Development Services Office for East and Southern Africa
RFA	request for applications
RH	reproductive health
SDP(s)	service delivery point(s)
SDES	Service Delivery Expansion Project
SERVIR	Servicios Educativos En Salud Reproductiva
SESA	Secretaria Estadual de Saúde do Caerá
SESAB	Secretaria de Saude do Estado da Bahia
SISMAC	Continuous Assessment and Monitoring System
SMDS	Secretaria de Saúde dp Estadp da Bahia
SMS	Secretaria Municipal de Saúde de Salvador
SSA	Secretariat of Health
STD*	sexually transmitted disease
STI*	sexually transmitted infection
SUWATA	Silika la Wananake Tanzania
TA	technical assistance
TFR	total fertility rate
TOHS	Tanzania Occupational Health Services
TOT	training of trainers
UNFPA	United Nations Population Fund
URC	University Research Council
USAID	United States Agency for International Development
VSC	voluntary surgical contraception

* Pathfinder International recognizes that the term *sexually transmitted infection* is used sometimes in place of STD in many parts of the world, especially in Africa, in reflection of the fact that not all infections become diseases. For the purposes of this document, the term STDs was chosen as it is the most commonly used in the literature.

Achievements

PATHFINDER INTERNATIONAL

Cooperative Agreement: CCP-3062-A-00-2025-00

**PF FISCAL YEAR 1999 through QUARTER 2
ACHIEVEMENTS BY REGION**

		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Cumulative to Date	
	FY 1999 Objectives	Jul-98 Sep-98	Oct-98 Dec-98	Jan-99 Mar-99	Apr-99 Jun-99	Jul-99 Jun-99	Percent Achieved
TOTAL WORLDWIDE							
CYPs Provided	6,305,835	1,372,910	1,707,403	1,318,214	0	4,398,527	69.75%
CYPs Referred	205,748	46,757	47,972	53,622	0	148,351	72.10%
New Users	4,144,333	1,219,462	1,486,322	1,208,279	0	3,914,063	94.44%
Persons Trained	17,335	5,159	2,803	2,960	0	10,922	63.01%
Persons Informed	38,227,160	2,313,642	1,805,760	1,961,341	0	6,080,743	15.91%
Adolescent CYPs	6,425	342	0	0	0	342	5.32%
Adolescents Informed	296,662	80,474	254,819	315,299	0	650,592	219.30%
AFRICA							
CYPs Provided	444,450	88,085	64,528	75,849	0	228,462	51.40%
CYPs Referred	193,578	45,394	47,534	53,222	0	146,150	75.50%
New Users	407,906	162,044	66,582	68,557	0	297,183	72.86%
Persons Trained	3,590	728	153	602	0	1,483	41.31%
Persons Informed	5,723,605	1,907,497	1,166,659	1,166,593	0	4,240,749	74.09%
Adolescent CYPs	6,425	342	0	0	0	342	5.32%
Adolescents Informed	55,002	70,109	123,708	48,735	0	242,552	440.99%
ASIA/NEAR EAST							
CYPs Provided	5,705,300	1,236,071	1,598,158	1,235,103	0	4,069,332	71.33%
CYPs Referred	6,450	1,363	438	400	0	2,201	34.12%
New Users	3,551,779	1,036,603	1,413,078	804,565	0	3,254,246	91.62%
Persons Trained	9,013	2,055	1,463	1,830	0	5,348	59.34%
Persons Informed	1,125,055	194,707	380,237	200,852	0	775,796	68.96%
Adolescent CYPs	0	0	0	0	0	0	N/A
Adolescents Informed	20,460	4,048	5,287	0	0	9,335	45.63%
LATIN AMERICA							
CYPs Provided	156,085	48,754	44,717	7,262	0	100,733	64.54%
CYPs Referred	5,720	0	0	0	0	0	0.00%
New Users	184,648	20,815	6,662	335,157	0	362,634	196.39%
Persons Trained	4,732	2,376	1,187	528	0	4,091	86.45%
Persons Informed	31,378,500	211,438	258,864	593,896	0	1,064,198	3.39%
Adolescent CYPs	0	0	0	0	0	0	N/A
Adolescents Informed	221,200	6,317	125,824	266,564	0	398,705	180.25%

ADOL CYPs represent outputs from projects classified as "Adolescent Service Delivery" projects only.
ADOL INFORMED represents outputs from all projects which include IEC activities targeting adolescents.

[Data reported from previous quarter(s) may have changed as a result of additional reports received]

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PATHFINDER INTERNATIONAL

Cooperative Agreement: CGP-3062-A-00-2025-00

PF FISCAL YEAR 1999 through QUARTER 2 ACHIEVEMENTS BY COUNTRY for AFRICA

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Cumulative to Date	
FY 1999 Objectives	Jul-98 Sep-98	Oct-98 Dec-98	Jan-99 Mar-99	Apr-99 Jun-99	Jul-98 Jun-99	Percent Achieved
TOTAL AFRICA						
CYPs Provided	444,450	88,085	64,528	75,849	0	228,462 51.40%
CYPs Referred	193,578	45,394	47,534	53,222	0	146,150 75.50%
New Users	407,906	162,044	66,582	68,557	0	297,183 72.86%
Persons Trained	3,590	728	153	602	0	1,483 41.31%
Persons Informed	5,723,605	1,907,497	1,166,659	1,166,593	0	4,240,749 74.09%
Adolescent CYPs	6,425	342	0	0	0	342 5.32%
Adolescents Informed	55,002	70,109	123,708	48,735	0	242,552 440.99%
ETHIOPIA						
CYPs Provided	70,663	37,882	9,622	6,360	0	53,864 76.23%
CYPs Referred	9,665	431	404	0	0	835 8.64%
New Users	57,193	52,578	12,373	5,274	0	70,225 122.79%
Persons Trained	1,312	673	77	144	0	894 68.14%
Persons Informed	493,925	736,575	182,222	101,771	0	1,020,568 206.62%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	25,002	59,772	26,130	0	0	85,902 343.58%
KENYA						
CYPs Provided	136,340	18,864	20,203	22,092	0	61,159 44.86%
CYPs Referred	132,455	41,529	42,242	46,939	0	130,710 98.68%
New Users	165,762	91,983	33,272	34,351	0	159,606 96.29%
Persons Trained	360	40	76	29	0	145 40.28%
Persons Informed	4,180,360	820,563	564,385	706,568	0	2,091,516 50.03%
Adolescent CYPs	0	342	0	0	0	342 N/A
Adolescents Informed	0	8,556	93,380	12,924	0	114,860 N/A
MOZAMBIQUE						
CYPs Provided	8,000	0	0	247	0	247 0.00%
CYPs Referred	3,000	0	0	0	0	0 0.00%
New Users	15,000	0	0	197	0	197 0.00%
Persons Trained	210	15	0	95	0	110 52.38%
Persons Informed	10,000	0	0	0	0	0 0.00%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	0	0	0	0	0	0 N/A
SENEGAL						
CYPs Provided	5,271	1,263	1,229	701	0	3,193 60.58%
CYPs Referred	0	0	0	0	0	0 N/A
New Users	7,293	1,489	1,496	1,427	0	4,412 60.50%
Persons Trained	0	0	0	30	0	30 N/A
Persons Informed	190,000	0	33,216	27,183	0	60,399 31.79%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	30,000	1,505	4,198	7,370	0	13,073 43.58%

ADOL CYPs represent outputs from projects classified as "Adolescent Service Delivery" projects only.
ADOL INFORMED represents outputs from all projects which include IEC activities targeting adolescents.

[Data reported from previous quarter(s) may have changed as a result of additional reports received.]

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PATHFINDER INTERNATIONAL

Cooperative Agreement: CCP-3062-A-00-2025-00

PF FISCAL YEAR 1999 through QUARTER 3
ACHIEVEMENTS BY COUNTRY for AFRICA

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Cumulative to Date	
FY 1999 Objectives	Jul-98 Sep-98	Oct-98 Dec-98	Jan-99 Mar-99	Apr-99 Jun-99	Jul-98 Jun-99	Percent Achieved
TANZANIA						
CYPs Provided	127,532	24,505	27,970	32,171	0	84,646 66.37%
CYPs Referred	7,917	1,077	1,252	733	0	3,062 38.68%
New Users	109,189	11,533	14,683	15,119	0	41,335 37.86%
Persons Trained	1,028	0	0	133	0	133 12.94%
Persons Informed	849,320	313,631	386,836	256,998	0	957,465 112.73%
Adolescent CYPs	6,425	0	0	0	0	0 0.00%
Adolescents Informed	0	276	0	9,707	0	9,983 N/A
UGANDA						
CYPs Provided	25,000	5,571	5,504	6,057	0	17,132 68.53%
CYPs Referred	40,541	2,357	3,636	2,713	0	8,706 21.47%
New Users	16,500	4,461	4,758	5,075	0	14,294 86.63%
Persons Trained	336	0	0	58	0	58 17.26%
Persons Informed	0	36,728	0	47,100	0	83,828 0.00%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	0	0	0	1,357	0	1,357 N/A
NIGERIA						
CYPs Provided	71,644	0	0	8,221	0	8,221 11.47%
CYPs Referred	TBD	0	0	2,837	0	2,837 N/A
New Users	36,969	0	0	7,114	0	7,114 19.24%
Persons Trained	344	0	0	113	0	113 32.85%
Persons Informed	N/A	0	0	26,973	0	26,973 N/A
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescent Informed	0	0	0	17,377	0	17,377 N/A

ADOL CYPs represent outputs from projects classified as "Adolescent Service Delivery" projects only.
ADOL INFORMED represents outputs from all projects which include IEC activities targeting adolescents

[Data reported from previous quarter(s) may have changed as a result of additional reports received.]

PATHFINDER INTERNATIONAL

Cooperative Agreement: CCP-3062-A-00-2025-00

**PF FISCAL YEAR 1999 through QUARTER 2
ACHIEVEMENTS BY COUNTRY for ASIA/NEAR EAST**

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Cumulative to Date	
FY 1999 Objectives	Jul-98 Sep-98	Oct-98 Dec-98	Jan-99 Mar-99	Apr-99 Jun-99	Jul-99 Jun-99	Percent Achieved
TOTAL						
ASIA/NEAR EAST						
CYPs Provided	5,705,300	1,236,071	1,598,158	1,235,103	0	4,069,332 71.33%
CYPs Referred	6,450	1,363	438	400	0	2,201 34.12%
New Users	3,551,779	1,036,603	1,413,078	804,565	0	3,254,246 91.62%
Persons Trained	9,013	2,055	1,463	1,830	0	5,348 59.34%
Persons Informed	1,125,055	194,707	380,237	200,852	0	775,796 68.96%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	20,460	4,048	5,287	0	0	9,335 45.63%
INDONESIA						
CYPs Provided	5,705,300	1,236,071	1,598,158	1,235,103	0	4,069,332 71.33%
CYPs Referred	6,450	1,363	438	400	0	2,201 34.12%
New Users	3,551,779	1,036,603	1,413,078	804,565	0	3,254,246 91.62%
Persons Trained	9,013	2,055	1,463	1,830	0	5,348 59.34%
Persons Informed	1,125,055	194,707	380,237	200,852	0	775,796 68.96%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	20,460	4,048	5,287	0	0	9,335 45.63%

ADOL CYPs represent outputs from projects classified as "Adolescent Service Delivery" projects only.
ADOL INFORMED represents outputs from all projects which include IEC activities targeting adolescents.

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PATHFINDER INTERNATIONAL

Cooperative Agreement: CCP-3062-A-00-2025-00

PF FISCAL YEAR 1999 through QUARTER 2
ACHIEVEMENTS BY COUNTRY for LATIN AMERICA

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Cumulative to Date	
FY 1999 Objectives	Jul-98 Sep-98	Oct-98 Dec-98	Jan-99 Mar-99	Apr-99 Jun-99	Jul-99 Jun-99	Percent Achieved
TOTAL						
LATIN AMERICA						
CYPs Provided	156,085	48,754	44,717	7,262	0	100,733 64.54%
CYPs Referred	5,720	0	0	0	0	0 0.00%
New Users	184,648	20,815	6,662	335,157	0	362,634 196.39%
Persons Trained	4,732	2,376	1,187	528	0	4,091 86.45%
Persons Informed	31,378,500	211,438	258,864	593,896	0	1,064,198 3.39%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	221,200	6,317	125,824	266,564	0	398,705 180.25%
BOLIVIA						
CYPs Provided	56,085	11,918	6,691	7,262	0	25,871 46.13%
CYPs Referred	0	0	0	0	0	0 N/A
New Users	41,848	10,471	6,662	6,938	0	24,071 57.52%
Persons Trained	1,664	48	167	0	0	215 12.92%
Persons Informed	270,500	80,861	34,626	32,116	0	147,603 54.57%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	7,200	1,501	824	1,264	0	3,589 49.85%
BRAZIL *						
CYPs Provided	100,000	8,639	0	0	0	8,639 8.64%
CYPs Referred	5,000	0	0	0	0	0 N/A
New Users	75,000	10,344	0	0	0	10,344 13.79%
Persons Trained	388	35	20	0	0	55 14.18%
Persons Informed	75,000	2,295	3,715	0	0	6,010 8.01%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	0	0	0	0	0	0 N/A
MEXICO ***						
CYPs Provided	0	0	0	0	0	0 N/A
CYPs Referred	0	0	0	0	0	0 N/A
New Users	0	0	0	328,219	0	328,219 N/A
Persons Trained	2,440	2,293	895	528	0	3,716 152.30%
Persons Informed	31,008,000	128,282	220,523	561,780	0	910,585 2.94%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	204,400	4,816	125,000	265,300	0	395,116 193.31%
PERU **						
CYPs Provided	0	28,197	38,026	0	0	66,223 N/A
CYPs Referred	720	0	0	0	0	0 N/A
New Users	67,800	0	0	0	0	0 0.00%
Persons Trained	240	0	105	0	0	105 43.75%
Persons Informed	25,000	0	0	0	0	0 0.00%
Adolescent CYPs	0	0	0	0	0	0 N/A
Adolescents Informed	9,600	0	0	0	0	0 0.00%

* Outputs not available from the Secretaria de Saude do Estado da Bahia

** Outputs not available from the Ministry of Health

*** Mexico receives outputs on a semiannual basis, and not quarterly.

ADOL CYPs represent outputs from projects classified as "Adolescent Service Delivery" projects only.
ADOL INFORMED represents outputs from all projects which include IEC activities targeting adolescents

[Data reported from previous quarter(s) may have
changed as a result of additional reports received.]

Results Frameworks

Africa

Strategic Objective I: Increased access and availability of FP and RH services

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO1	I 1. Expanded public and private sector FP & selected RH services through multiple service delivery systems	I 1.a. Consolidate & strengthen programs at existing sites and initiate CBD program at 3 new sites	E2/ETH 002-1 E2/ETH 003-1 E2/ETH:006-1 E2/ETH: 007-1 E2/ETH 008-1 E2/ETH:013-1 E2/ETH.014-1 E2/ETH 015-1 E2/ETH 016-1 PF/ETH:005-1	No of CBD sites in operation	Raised CBD sites from 31 to 45		32 CBD sites in operation
		I 1.b. Continue providing services at existing market place sites & initiate similar programs at new sites	E2/ETH:002-1 E2/ETH:003-1 E2/ETH:007-1 E2/ETH 008-1	No of marketplace sites	Increased marketplace programs from 1 to 7	1 existing market place in operation	1 market place in operation
		I 1.c. Continue providing services at existing workplace sites & initiate similar programs at new sites	E2/ETH:002-1 E2/ETH.003-1	No of workplace sites	Increased workplace programs from 9 to 11	9 existing workplace programs in operation	9 workplace programs in operation
		I 1.d. Consolidate & strengthen program center clinics; establish additional program center clinics; provide RH/FP services	E2/ETH.002-1 E2/ETH 003-1 E2/ETH.006-1 E2/ETH 007-1 E2/ETH.008-1 E2/ETH:013-1 E2/ETH:014-1 E2/ETH.015-1 E2/ETH:016-1 E2/ETH:017-1 PF/ETH:005-1	No of clinics supported No CYP referred/provided No new acceptors by method	Provide services at 54 clinics (including 8 program centers) 57,193 new users served 70,663 CYPs generated 9,665 CYPs referred	5,274 new users served, 6,360 CYPs generated, 297 CYPs referred	70,225 new users served. 53,864 CYPs generated, 1,132 CYPs referred
		I 1.e. Equip and renovate clinics	E2/ETH:002-1 E2/ETH 008-1 E2/ETH:013-1 E2/ETH.014-1 E2/ETH.015-1 E2/ETH:016-1 E2/ETH 017-1	No of clinics equipped and renovated	Renovate 15 clinics Equip 38 clinics		
SO1	I 2. Expanded access for under-served groups and those at - risk, including young adults, men, and hard-to-reach populations	I.2 a. Strengthen existing adolescent programs at 2 sites, initiate adolescent programs at 4 new sites	E2/ETH.002-1 E2/ETH:003-1 E2/ETH 006-1 E2/ETH:007-1 E2/ETH.008-1	No of adolescent centers providing services to young adults No of young adults informed, counseled & provided clinical services	Provide youth programs at 7 centers 25,002 young adults informed 4,200 young adults counseled 445 young adults provided with contraceptives		85,902 young adults informed, 3,359 counseled, 16,560 post abortion counseling provided.
SO1	I 3. Enhanced environment for use of FP & RH services through selected IEC & advocacy interventions	I 3 a. Conduct IEC activities at clinics, CBD sites, adolescent centers, and workplace sites targeted at different groups, including men, through different channels	E2/ETH:002-1 E2/ETH:003-1 E2/ETH:006-1 E2/ETH:007-1 E2/ETH.008-1 E2/ETH:013-1 E2/ETH 014-1 E2/ETH 015-1 E2/ETH 016 1 E2/ETH: 017-1 PF/ETH:005-1	No of persons informed	493,925 persons informed	101,771 persons informed	1,020,568 persons informed

Ethiopia

Strategic Objective I: Increased access and availability of FP and RH services

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		I.3.b. Develop/adapt and distribute culturally appropriate IEC materials targeted at different groups, including men	E2/ETH:002-1 E2/ETH:003-1 E2/ETH:006-1 E2/ETH:007-1 E2/ETH:008-1 E2/ETH:013-1 E2/ETH:014-1 E2/ETH:015-1 E2/ETH:016-1 E2/ETH:017-1 PF/ETH:005-1 COFAP	No. IEC materials developed/adapted by type No. IEC materials distributed	16,500 copies of 2 posters & 23,000 copies of 2 leaflets developed/adapted 900 copies of FLE booklet printed and distributed		5,000 copies of CBD leaflet, 4,000 copies of one poster developed and 60,000 copies of 5 leaflets on RH translated and distributed
		I.3.c. Strengthen existing Project Advisory Committees (PAC) and establish new ones where new CBD programs are to be initiated and provide sensitization for community leaders	E2/ETH:002-1 E2/ETH:003-1 E2/ETH:006-1 E2/ETH:007-1 E2/ETH:008-1 E2/ETH:013-1 E2/ETH:014-1 E2/ETH:015-1 E2/ETH:016-1	No. PACs established No. community leaders sensitized	No. of PACs increased from 12 to 23 507 community leaders sensitized	12 existing functional PACs. 47 community leaders sensitized.	12 PACs are functional, 540 community and religion leaders sensitized.
		I.3.d. Develop IEC/Counseling guidelines for clinic based providers	E2/ETH:009-1	No. of guidelines developed	IEC/Counseling guideline developed		
		I.3.e. Develop IEC/Counseling curriculum for clinic based providers	E2/ETH:009-1	No. of curriculums developed	IEC/Counseling curriculum developed		
		I.3.f. Develop adolescent life skills/FLE curriculum	E2/ETH:009-1	No. of curriculums developed	Adolescent life skills/FLE curriculum developed		
		I.3.g. In collaboration with FHI, conduct operations research on male involvement and the effectiveness of various service delivery approaches, such as CBD, workplace etc.	COFAP	No. of research outputs produced	2 research results produced		
SO I	I.4. Increased availability of high-quality long-acting methods	I.4.a. Strengthen the capacity of the 7 model clinics to provide long acting methods to increased number of clients; introduce long acting and permanent methods at the new model clinic	E2/ETH:002-1 E2/ETH:003-1 E2/ETH:006-1 E2/ETH:007-1 E2/ETH:008-1 E2/ETH:013-1 E2/ETH:014-1 E2/ETH:015-1 E2/ETH:016-1 E2/ETH:017-1 PF/ETH:005-1	No. of clinics strengthened in long acting methods as evidenced by provision of permanent methods	54 clinics provide long acting and permanent methods	29 existing clinics provide long acting methods and 10 existing clinics provide permanent methods	29 clinics providing long acting methods.

Strategic Objective II: Improved quality of services and contraceptive method mix

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 1. Expanded range of appropriate contraceptive methods available	II 1 a. In collaboration with AVSC, train service providers in IUD/Norplant insertion/removal, and mini-lap and vasectomy	E2/ETH.007-1	No. of providers trained	TBD		
SO II	II.2 Strengthened provider competence to deliver high-quality FP & selected RH services	II 2 a Train service providers in clinic, CBD, workplace, marketplace, & Adolescent programs	E2/ETH 002-1 E2/ETH.003-1 E2/ETH.006-1 E2/ETH.007-1 E2/ETH:008-1 E2/ETH 013-1 E2/ETH.014-1 E2/ETH:015-1 E2/ETH 016-1 E2/ETH.017-1 PF/ETH:005-1 COFAP	No FP providers trained	Practitioners Trained, 988 CBD Agents; 54 marketplace providers; 30 depot holders; 55 workplace providers, 94 Peer Promoters; 112 clinical service providers	48 CBRHAs refresher trained	13 nurses, 301 CBRH agents provided CBRH Basics, 37 adolescent promoters 2 coordinators, 40 peer promoters, 15 supervisors, 5 services providers, 71 male group leaders, 292 CBRH refresher, 7 clinic staff, 3 health assistant provided with refresher training.
		II.2.b. Provide TOT in the use of adolescent curriculum	E2/ETH'009-1	No of persons trained	15 persons trained		
		II.2.c. Train CBRH trainers in home based care to PWAs	COFAP	No of persons trained	15 persons trained		
		II 2.d. Provide CBRH TOT for regional trainers	COFAP	No. of persons trained	15 persons trained	15 persons trained.	15 persons trained
		II.2 e. Develop a national RH/FP training strategy	E2/ETH:009-1	No of strategies developed	RH/FP training strategy developed		
		II 2 e. Develop a national RH/FP training master plan	E2/ETH:009-1	No. of training master plans developed	National training master plan developed		
		II.2 f. Develop a national RH/FP management and supervision guideline	E2/ETH:009-1	No. of management and supervision guidelines developed	National RH/FP management and supervision guideline developed		
SO II	II 3. Enhanced constellation of FP & RH services available, where necessary and appropriate, including referral links	II.3.a. Strengthen & expand integration of HIV/AIDS/STD prevention & control in all service delivery outlets of existing and new sites	E2/ETH:002-1 E2/ETH'003-1 E2/ETH.006-1 E2/ETH'007-1 E2/ETH.008-1 E2/ETH:013-1 E2/ETH:014-1 E2/ETH.015-1 E2/ETH'016-1 E2/ETH'017-1 PF/ETH'005-1	No. SDPs offering FP/HIV/STD integrated services No clients informed/screened/treated/referred for HIV/STDs	HIV/AIDS/STD information and education provided to 184,944 persons STD diagnosis and treatment offered at 9 clinics 5,183 clients screened and treated for STD	3 clinics (existing) provided integrated STD/HIV, all SDPs provided STD/HIV/AIDS information	3 clinics integrated STD/HIV prevention activities; all SDPs provide STD/HIV information and education, 2,135 people informed about STD/HIV
		II.3 b Strengthen & expand the integration of MCH programs in the existing clinics and the new model clinic	E2/ETH:002-1 E2/ETH:003-1 E2/ETH:006-1 E2/ETH.007-1 PF/ETH:005-1	No clinics offering integrated FP and MCH programs	MCH integrated in 15 clinics 5,049 children served 4,657 mothers attended	7 existing clinics provided MCH integrated program; 4,560 children served, 4,336 mother attended	10 clinics provided MCH integrated program, 16,172 children served and 20,739 mothers attended.
		II 3 c Integrate postabortion and postpartum care with FP services	E2/ETH:002-1 E2/ETH:003-1 E2/ETH 007-1	No of SDPs with integrated FP/postabortion care No of SDPs with integrated FP/postpartum care	All SDPs offer integrated postpartum care, all clinics offer postabortion care		

Ethiopia							
Strategic Objective II: Improved quality of services and contraceptive method mix							
Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		II.3.d. Introduce ECP at clinics	E2/ETH:002-1 E2/ETH:003-1	No. of SDPs providing ECP	8 clinics provide ECP		
		II 3 e. Develop HIV/AIDS integration guideline	E2/ETH 009-1	No. of guidelines developed	HIV/AIDS integration guideline developed		
SO II	II 4. Improved quality assurance and quality management systems	II.4.a Provide Infection Prevention and Clinical Service Delivery TOT	E2/ETH: 009-1 COFAP	No. of persons trained as trainers	45 persons trained as trainers in infection prevention and clinical service delivery		
		II.4.b Develop clinical service delivery curriculum	E2/ETH 009-1	No. of clinical service delivery curriculum developed	Clinical service delivery curriculum developed		
		II.4 c. Provide TOT in the use of RH/FP management and supervision guidelines	E2/ETH:009-1	No. of persons trained as trainers	15 persons trained as trainers to use of RH/FP management and supervision guidelines		
		II.4 d Provide TOT in IEC/counseling	E2/ETH.009-1	No. of persons trained as trainers in IEC/counseling	15 persons trained as trainers in IEC/Counseling		
		II.4.e. Strengthen referral linkages between CBD programs & clinics of existing programs and establish referral linkages between new CBD programs & clinics	E2/ETH:002-1 E2/ETH:003-1 E2/ETH:006-1 E2/ETH:007-1 E2/ETH:008-1 E2/ETH:013-1 E2/ETH:014-1 E2/ETH:015-1 E2/ETH:016-1 E2/ETH:017-1 PF/ETH:005-1	No. referral linkages strengthened, No. referral linkages established	All CBD sites to be linked up with clinics	Referral links in operation between 30 clinics and 32 CBRH sites	30 referral links and 32 CBD sites in operation.
		II.4.f Train CBD supervisors in CBD program management and supervision	E2/ETH:002-1 E2/ETH:003-1 E2/ETH:006-1 E2/ETH:007-1 E2/ETH:008-1 E2/ETH:013-1 E2/ETH:014-1 E2/ETH:015-1 E2/ETH:016-1 PF/ETH:005-1	No. CBD supervisors trained in CBD program management and supervision	29 CBD supervisors trained in CBD program management and supervision		12 CBD trainers trained in the use of CBRH supervision checklist and procedure.

Strategic Objective III: Increased management, financial, and technical capacity of local organizations

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III.1 Strengthened program management capabilities of local service delivery organizations	III.1.a In collaboration with FHI, institutionalize the standardized M & E instruments at all levels of the organization	E2/ETH-002-1 E2/ETH 003-1 E2/ETH 006-1 E2/ETH 007-1 E2/ETH-008-1 E2/ETH 013-1 E2/ETH.014-1 E2/ETH 015-1 E2/ETH 016-1 E2/ETH-017-1 PF/ETH:005-1 COFAP	No of M & E instruments institutionalized by type	M & E instruments institutionalized at all levels of the grantees	M & E instruments produced and distributed to members for implementation	M & E instruments produced and distributed to members for implementation
		III.1.b Provide TA in program/finance management	E2/ETH 002-1 E2/ETH 003-1 E2/ETH:006-1 E2/ETH.007-1 E2/ETH-008-1 E2/ETH-009-1 E2/ETH 013-1 E2/ETH.014-1 E2/ETH-015-1 E2/ETH.016-1 E2/ETH:017-1 PF/ETH:005-1 COFAP	No. person-months of TA provided	49 person-months of TA provided	8.5 person-months of TA provided	41.65 person-months of TA provided
	III.2. Improved financial sustainability of local service delivery organizations	III.2.a Implement the master sustainability and the specific sustainability plans, introduce cost-accounting system, and initiate income generation and cost recovery activities, including fee-for-services, cost-based pricing, and contraceptive sales in all the programs of the organization	E2/ETH.002-1 E2/ETH:003-1 E2/ETH:004-1 E2/ETH-006-1 E2/ETH 007-1 E2/ETH-008-1 E2/ETH.013-1 E2/ETH-014-1 E2/ETH:015-1 E2/ETH:016-1 E2/ETH.017-1 PF/ETH-005-1 COFAP	No. plans implemented No.grantees for which cost accounting system is introduced No SDPs with cost-recovery activities Cost/CYP No cost centers established Amount of costs recovered	The master sustainability and the specific plans implemented Cost accounting system introduced at FGAE and MSI-E All SDPs will have some degree of cost-recovery instituted		
		III.2.b. Develop financial management manual for FGAE	E2/ETH-002-1	No manuals developed	A financial management manual developed Accurate & timely submission of financial report	Draft financial and personnel manual provided	Draft financial and personnel manual provided.
SO III	III.3. Improved technical capacity of local service delivery organizations	III.3 a Train managers in sustainability planning and financial management	COFAP	No of persons trained	15 managers trained		

Ethiopia

Strategic Objective III: Increased management, financial, and technical capacity of local organizations

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		III.3.b. Train managers in program/finance management	E2/ETH.002-1 E2/ETH:003-1 E2/ETH:006-1 E2/ETH:007-1 E2/ETH.008-1 E2/ETH:009-1 E2/ETH 013-1 E2/ETH:014-1 E2/ETH 015-1 E2/ETH:016-1 E2/ETH.017-1 PF/ETH 005-1 COFAP	No. of persons trained	126 managers trained		

Strategic Objective I: Increased Access to and availability of FP and RH services

Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	I.1 Expanded FP and selected RH services through multiple service delivery systems (including public, private, clinic-based, hospital-based, workplace-based, CBD, and social marketing)	I.1 a Support community-based FP and RH services	NCA/KEN 001-9 NCA/KEN 032-3 NCA/KEN:034-1 NCA/KEN:033-2 NCA/KEN:035-2	No of New Acceptors CYP No of Referrals No of Persons Informed	Serve 151,662 new acceptors Generate 103,611 CYPs Refer 132,455 persons Inform 1,736,840 persons	34,748 new users served, 22,090 CYPs generated; 46,939 CYPs referred and 714,903 persons informed	99,094 new users served, 63,328 CYPs generated, 114,290 CYPs referred and 1,949,105 persons informed
		I.1 b. Consolidate clinic- and mobil-based FP and RH services	NCA/KEN.032-3 NCA/KEN:033-2 NCA/KEN:035-2	No of New Acceptors No CYP Total No. of SDPs	Support 30 SDPs and 18 mobile clinics Serve 11,500 new acceptors Generate 23,500 CYPs	21 SDPs and 8 Mobile Clinics supported New acceptors = 34,748 CYPs generated = 22,090	22 SDPs and 8 Mobile Clinics supported. New acceptors = 99,094 CYPs generated = 63,328
		I.1.c Support workplace-based FP and RH services	NCA/KEN 032-3 NCA/KEN 034-1	No. of workplace No. of people informed	Work in at least 5 new industries in Mombasa and 8 in Eldoret Inform 31,200 persons	No new industries served in Mombasa and Eldoret during the quarter (persons informed are aggregated in 1.1a above)	12 industries served in Eldoret 54 industries served in Mombasa (persons informed are aggregated in 1.1a above)
	I.2 Expanded access for underserved groups and those at-risk, (including young adults, men, and hard-to-reach regions and populations)	I.2 a. Support postpartum and postabortion FP services at Pumwani Maternity hospital, Kenyatta National Hospital, Machakos, Eldoret and Coast General Hospital Mombasa	NCA/KEN-029-3	No of New Acceptors No of CYP Total no. hospitals providing services	Expand services to 3 additional sites Serve 2,600 new PP/PA acceptors Generate 1,600 PP/PA CYPs	High Risk Adolescent Clinics served 387 new acceptors and generated 315 CYPs	Postpartum and post abortion services expanded to three additional sites To date achievements are, 1,678 new acceptors and 1,021 CYPs generated.
SO I	I.2. Expanded access for underserved groups and those at-risk, (including young adults, men, and hard-to-reach regions and populations)	I.2 b. Redesign and expand university based FLE/peer education to 6 public universities	RF-KE-011 RF-KE-012	No of university-based programs No. of young adult new acceptors No. of young adult confirmed referrals No. of peer educators per university program No. of young adult CYP generated	Number of universities conducting young adults/adolescent RH activities from 2 to 6 FLE/peer education program in 4 additional public universities initiated For young adults, new acceptors TBD CYPs - TBD Referrals - TBD	Activity not conducted as project start dates were changed to April 1, 1999	Activity not conducted as project start dates were changed to April 1, 1999

Kenya

Strategic Objective I: Increased Access to and availability of FP and RH services

Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
	1.3 Enhanced environment for use of FP, RH and MCH services through selected IEC, research and advocacy interventions	1.3.a Support client-focused IEC activities for FP, RH and MCH services (including home visits, community meetings educational talks and IEC materials dissemination)	NCA/KEN.001-9 NCA/KEN:029-3 NCA/KEN:032-3 NCA/KEN.033-2 NCA/KEN:034-1 NCA/KEN:035-2	No of home visits conducted No. of community meetings and educational talks conducted No. of persons informed	Conduct 477,920 home visits Hold 63,980 community meetings and educational talks Inform 2,443,520 persons	No of home visits = 81,003 Meetings held = 5,466 Persons informed = 714,903	No of home visits = 278,221 Meetings held = 18,922 Persons informed = 1,949,125
		1.3.b. Support ECP and dual method use advocacy activities for MOH and implementing partners	Emergency Contraceptive Pill Initiative	No of policy makers sensitized	Conduct sensitization workshop for an additional 50 policy makers (total 170)	Activity not done and is scheduled for 3rd quarter	Activity not done and is scheduled for 3rd quarter
	1.4. Increased availability of high quality long-acting methods	1.4.a. Support provision of long-acting methods	NCA/KEN.032-3 NCA/KEN:033-2 NCA/KEN:035-2	No. of New VSC and implant acceptors No. of CYP Total No of SDPs	Increase VSC sites to 4 by adding Kabiro Kawangware Perform 500 VSC procedures Perform 400 Norplant insertions Generate 7,629 CYPs	No. of VSC procedures performed = 101, No. of Norplant insertions = 94 CYPs generated = 1,586	No of VSC sites = 4 No. of VSC procedures performed = 443 No. of Norplant insertions = 519, CYPs generated = 5,742

Strategic Objective II: Improved Quality of Services

Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 1. Expanded range of appropriate contraceptive methods available	II 1 a Support and expand ECP services and link with ongoing FP services	NCA/KEN 001-9 NCA/KEN 029-3 NCA/KEN 032-3 NCA/KEN 033-2 NCA/KEN 034-1 NCA/KEN 035-2	No of ECP acceptors No of ECP referrals Total no of SDPs offering ECP services	No of ECP acceptors-TBD No of referrals-TBD Incorporate ECP activities into the CBD programs of 5 grantees	58 ECP acceptors served (this figure includes 20 cases served by Mkomani and 38 cases served by the High Risk clinic)	21 static Clinics/sites and 8 mobile clinics offering ECP 169 ECP acceptors served One grantee has incorporated ECP into the CBD program
	II 2 Strengthened provider competence to deliver high quality FP and selected RH services (including MCH and STD and HIV/AIDS)	II 2 a. Conduct refresher-training for service providers in FP, selected RH, and MCH services and integrated service delivery	NCA/KEN.029-3 NCA/KEN:033-2 NCA/KEN.035-1	No.of service providers trained No. of training activities conducted	No of service providers trained - TBD No. training activities conducted - TBD	29 service providers trained (1 e 18 CBDs in Maseno West and 11 workplace distributors in Eldoret)	68 service providers trained.
	II.3 Enhanced constellation of FP and RH services available, where necessary and appropriate, including referral links for MCH, STD and HIV/AIDS services	II 3 a Support clinic managers, providers and trainers to integrate STDs and HIV/AIDS prevention services with FP programs	NCA/KEN 001-9 NCA/KEN 033-2 NCA/KEN:032-3 NCA/KEN 034-1 NCA/KEN 035-2 NCA/KEN:029-3	No of SDPs (including mobile clinics) offering integrated services	At least 30 SDPs plus 50% of the mobile clinics (9) offering integrated services	21 SDPs and 8 mobile clinics offering integrated services	21 SDPs and 8 mobile clinics offering integrated services
		II 3 b Pilot community-based models for STD and AIDS (Home-based) care among coverage populations	NCA/KEN 001-9 NCA/KEN 033-2	No of community members trained on home-based care for People with AIDS	At least 360 community members trained per year	Lack of adequate funding has delayed the implementation of this activity.	Lack of adequate funding has delayed the implementation of this activity.

Kenya

Strategic Objective II: Improved Quality of Services

Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II.4 Improved quality assurance and quality management systems	II.4.a. Strengthen QOC systems, including QOC assessments and use of standard of practice tools/protocols	NCA/KEN:001-9 NCA/KEN:029-3 NCA/KEN.032-2 NCA/KEN:033-2 NCA/KEN:033-1 NCA/KEN.035-2	No of SDPs using QOC standard of practice protocols No. of CBD agents using CBD protocols	30 SDPs and 18 mobile clinics using QOC standard of practice protocols 80% (1,220) of CBD agents using CBD protocols to guide motivational activities	1,508 CBD agents using CBD protocols to guide motivational activities and service delivery	1,508 CBD agents using CBD protocols to guide motivational activities and service delivery
		II.4.b Renovate/upgrade clinics and expand urban initiative for quality input	NCC Mombasa Municipal Council Urban Initiative Project NCA/KEN 032-2	No of clinics renovated/upgraded	Renovate 6 additional clinics at NCC (Nairobi) and 3 at Mombasa Municipal Council	Renovation of St Luke's clinic at Maseno West started	Six clinics in Nairobi renovated through World Bank and equipped through PI's support. Renovation of St Luke's Clinic at Maseno West started

Kenya

Strategic Objective III: Increased management, financial and technical capacity of local organizations and communities

Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III 1 Strengthened program and organizational management capabilities of local service delivery organizations	III 1 a Conduct long-term strategic planning activities with local institutions	NCA/KEN 001-9 NCA/KEN 035-2	Strategic plans developed and in use	Develop strategic plans for two organizations	No further activity in this regard conducted in the quarter	Strategic plans developed for MYWO and Kabiro
		III.1 b Increase development and utilization of management information systems (MIS) for local implementing organizations	NCA/KEN 001-9 NCA/KEN 029-3 NCA/KEN 033-2 NCA/KEN 034-1 NCA/KEN 035-2	No. of institutions with increased utilization of MIS	5 grantees with computerized MIS in place and using it for management decision-making	5 grantees with computerized MIS in place and using for management decision making	5 grantees with computerized MIS in place and using for management decision making
	III 2 Improved financial sustainability of local service organizations	III 2 a Improve financial sustainability and resource diversification efforts	NCA/KEN 001-9 NCA/KEN 029-3 NCA/KEN 033-2 NCA/KEN 034-1	No. of institutions developing resource diversification and sustainability plans	At least 4 institutions assisted to develop resource diversification and sustainability plans	Kabiro Board members, CBD Supervisor & Project Manager visited Mkomani for TA on diversification and income generation	Two institutions (MYWO and Kabiro) assisted to develop diversification and sustainability plans
		III 2 a Improve management of clinic costs, including developing cost-based plans, and cost-recovery/income generation	NCA/KEN 001-9 NCA/KEN 029-3 NCA/KEN 023-3 NCA/KEN 033-2 NCA/KEN 034-1 NCA/KEN 035-2	No. of cost studies/analyses conducted	Conduct detailed cost analysis for Mkomani and Kabiro Kawangware	Activity not yet conducted	Activity not yet conducted

Kenya

Strategic Objective III: Increased management, financial and technical capacity of local organizations and communities

Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III 3 Improved technical capacity of local service delivery organizations	III 3 a Provide TA to local service delivery organizations in QOC, IEC, integration, reproductive health and monitoring and evaluation	NCA/KEN 001-9 NCA/KEN 029-3 NCA/KEN 032-3 NCA/KEN 033-2 NCA/KEN 034-1 NCA/KEN 035-2	No of institutions with in-house capacity to conduct training	At least 4 grantees with in-house capacity for training own staff in QOC, integration and reproductive health	Maseno West, MYWO, Mkomani and Eldoret have in-house capacity for training own staff in QOC, IEC and integration and reproductive health	Maseno West, MYWO, Mkomani and Eldoret have in-house capacity for training own staff in QOC, IEC and integration and reproductive health

Mozambique--2 Year Plan (1999-2001)

Strategic Objective I: Increased access to and availability of FP and RH Services

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	I.1 Expanded, improved RH delivery system with increased SDPs (public and private)	I.1.a Train MCH and elementary nurses in FP service delivery C10at health posts/centers	NCA/MOZ 001-1	No (%) of health posts/centers capable of providing FP services (with at least 1 trained staff member and functional FP supply system)	80% of health posts/centers in target districts with at least 1 trained staff member and functional support system		Conducted RH training for 15 Elementary Nurses in 4 districts, hosted FPLM consultants for improvement of contraceptive supply system; Prepared materials for TOT course for Elementary nurses (for March/April 1999)
		I.1.b. Train MCH nurses and physicians in adolescent RH skills in focus provinces	NCA/MOZ 001-1	No (%) of targeted SDPs offering adolescent health services (with at least 1 trained provider) in focus provinces	5 SDPs in target cities, focus provinces		Conducted Study Tour for 6 Mozambican participants to Kenya to observe adolescent RH programs; Supported AMODEFA training for 15 adolescent peer counsellors
SO I	I.2. Expanded community based RH services/providers	I.2 a Introduce 3 CBD models	NCA/MOZ:001-1 NCA/MOZ:002-1	No functioning CBD agents per pilot site No of new acceptors per pilot site CYPs per pilot site	100 trained Functioning agents in 3 pilot projects 10,000 new acceptors per year	Conducted CBD TOT/Practicum for Northern Provinces (trained 14 trainers and 21 CBRHAs); began selection of 60 more CBRHAs in Ribauae; Adapted CBD training curriculum format during training, Developed CBD agent operational materials; Conducted study tour to Malawi with 6 Mozambican participants	Conducted Study Tour for 6 Mozambican participants to Kenya to observe CBD programs; conducted workshop to develop CBD curriculum for Mozambique (phase 1), Conducted second phase of CBD curriculum development workshop; developed pilot CBD curriculum
		I.2 b. Train TBAs, basic midwives, and traditional healers	NCA/MOZ:001-1	No (%) of TBAs, PE and healers completing emergency OB course/safe motherhood training per target district (1 district - yr 1)	50% TBAs in target district complete training 80% of those completing course using new skills		Began planning and materials development for TBA TOT course in Nampula for November, Co-facilitated TOT for TBAs with 15 participants from 9 districts in Nampula
SO I	I.3 Functioning alternative delivery systems reaching underserved groups and expanding availability of services (adolescents/youth; men, urban poor)	I.3 a. Set up worksite services	NCA/MOZ 002-1	No of functioning Worksite SDPs CPR among target worksite population CYPs No of new acceptors No. (%) condom use with non regular partners	4 new worksite SDP 200 new acceptors (50 per site)	Developed indicators and questionnaire for use in worksite baseline assessment	Refined AMODEFA proposal for work-site services; Saw potential sites in Nampula
		I.3.b. Establish adolescent peer counselor networks	NCA/MOZ.001-1 NCA/MOZ:002-1	No. of peer activities No. of school focused networks No. of events per year No of new acceptors Condom use among sexually active student target population	40-50 active peer counselors 5 school focused networks in 5 target urban communities 2,000 new acceptors (50 new acceptors per activity per year)	Prepared materials for AMODEFA/Nampula training of urban activitistas (for April)	Supported AMODEFA training for 15 adolescent peer counsellors; Completed Adolescent RH Study Tour to Kenya

Mozambique--2 Year Plan (1999-2001)

Strategic Objective I: Increased access to and availability of FP and RH Services

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	1.4. Increased availability of postpartum and postabortion services	1.4.a. Train medical providers	PI program	No. of providers trained No. of SDP with trained provider and functioning supply system No. (%) of eligible clients receiving postpartum or postabortion counseling/services per annum (vs missed opportunity)	50% eligible clients per SDP receive postpartum and/or postabortion services 8 providers successfully complete CTUs (2 per focus province) 2 sites per focus province offering postpartum and/or postabortion services	Began planning for CTU series in postabortion, postpartum and infection control	Supported 5 nurses to provide RH services at 4 SDPs/SALAMA
		1.4.b. Improve supply systems for related services	PI program	No. of providers trained No. of SDP with trained provider and functioning supply system No. (%) of eligible clients receiving postpartum or postabortion counseling/services per annum (vs missed opportunity)	50% eligible clients per SDP receive PP/PAB services 8 providers successfully complete CTUs (2 per focus province) 2 sites per focus province offering postpartum and/or postabortion services	Jointly hosted FPLM consultant for planning logistics activities through mid CY1999	Supported FPLM logistics consultancy--Nampula target district analysis
SO I	1.5 Increase availability of expanded method mix, including high quality, long acting methods	1.5.a. Expand method mix, including long acting methods	PI program	No. (%) target district or focus provinces participating in at least one CTU per annum No. (%) of SDPs offering at least 3 short acting methods No. (%) of target hospitals offering long acting method (definitive)	8 providers successfully completed 2 CTUs 20 long-term methods for each skilled provider	Health center in Ribaue district provided IUDs, pills and injections	

Mozambique--2 Year Plan (1999-2001)

Strategic Objective II: Improved quality of Services and Contraceptive Method mix

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 1 Strengthened provider competence to deliver high quality RH services, including counseling activities	II 1 a Train MCH and elementary nurses of 3-4 districts, Nampula	NCA/MOZ 001-1	No. of nurses trained % of total target districts % of nurses using skills/providing FP/RH services [of total trained] % of nurses counseling [of total trained] % clients who receive FP counseling/service out of # eligible [or vv "missed FP opportunities"] per SDP or aggregate % increase in FP clients per SDP or over all involved SDPs No. of SDPs offering integrated services No. training materials/guidelines distributed No. of training events offered CYPs No. of new acceptors No. of referrals	80% of all nurses in target districts complete training 80% of SDPs with at least 1 trained nurse providing FP services 80% nurses using skills counseling 75% of "eligible" clients receive service/counseling 50% increase in FP clients 75% of SDPs offering integrated FP/STD/AIDS services Training manual/guidelines developed and distributed 2 training events per type of provider per year Service stats TBD after baseline	Conducted TOT in RH for service providers in Cuamba, Niassa province; Prepared materials for TOT of Elementary Nurses (Nampula)	Conducted MOH nurse training for 3 districts, Produced RH training manuals for MCH nurses (1998 FY) Conducted RH training for 15 Elementary nurses in 4 districts; produced RH training manuals for Elementary nurse training (facilitator and participant guides); produced "Pocket Guide" for RH service providers; began preparing follow-up guide and conducting follow-up visits to MCH and Elementary nurses on site; Participated in CARE course for nurse supervisors; Revised all existing training manuals and materials
		II 1.b. Adolescent RH training for doctors/MCH nurses	NCA/MOZ 002-1	No. of providers trained, % of total in target group, % of trained staff using skills, % of SDPs offering adolescent RH services, No. training manuals/guidelines developed/adapted, No. training materials/guidelines distributed, No of training events offered, CYPs (adolescent), No of new acceptors (adolescent), No of referrals (adolescent)	80% of staff complete training, 75% of SDPs in target group have at least 2 persons trained, 80% of those trained using skills, 50% increase in adolescent clients, Training manual/guidelines developed and distributed, 2 training events per year, Service stats TBD after baseline		Conducted Study Tour to Kenya for 6 Mozambican officials to observe adolescent RH programs/services, Worked on adolescent RH program development--UNFPA; Completed UNFPA program development phase -- received approval and funding for PI/UNFPA/GRM adolescent program; Completed Adolescent RH Study Tour to Kenya

Mozambique--2 Year Plan (1999-2001)

Strategic Objective II: Improved quality of Services and Contraceptive Method mix

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		II.1 c TA to international PVOs in RH	PI Program	Facility assessments [include exit interviews and observation] Training reports Supervisor reports Clinic records No. of PVO TA plans developed (% of total PVOs in 3 focus provinces) No. of PVOs receiving at least 1 TA visit No. of PVO trainers receiving TOT in selected topics [eg SMI or EE RH course, CTU]	100% have TA plan 100% received at least 1 TA visit/intervention 2 trainers per PVO have participated in annual TOT on selected topics	Conducted TOT in RH for service providers in Cuamba, Niassa province (with MCDI)	Conducted CBD Task Group meeting with 5 partner PVOs; Conducted CBD curriculum development workshop with 5 partner PVOs; PVO partner (World Vision) participated in EE training; Began planning assistance to MCDI/Cuamba for RH/FP modules in TOT activities in Niassa; Conducted CBD curriculum development with PVO partners in Maputo; worked with PVO partners in Nampula to conduct TOT/TBA course
		II.1 d. Set up syphilis screening in district hospital	NCA/MOZ:001-1	No. (%) of eligible staff trained % of pregnant women screened % of pregnant women received appropriate treatment Reagent supply [number of stock out episodes per annum]	90% receive training 90% pregnant women screened 100% receive appropriate treatment, including referral <2 stockouts per year		Initial planning of consultancy to develop screening
SO II	II.2. Increased number of SDPs with expanded method choice	II.2.a. Train physician/nurse teams from target districts in surgical methods	PI Program	1 team from each target district successfully completes course in surgical methods No (%) of eligible staff trained	All target districts have at least one team trained All target district hospitals are providing surgical method services or have effective referral system No. of surgical procedures performed % increase		
		II.2 b Expand availability of method choice in 3-4 target districts	NCA/MOZ:001-1 NCA/MOZ:002-1	Method mix % SDPs offering at least 3 methods	75% SDPs offering at least 3 methods	Jointly hosted visit of FPLM consultant to plan logistics activities for following months	Trained Elementary nurses in use of all types of contraceptives, promoting method mix; hosted visit of FPLM consultants to improve contraceptive availability
SO II	II 3. Increased provider skills to deliver postpartum and post abortion services	II.3.a CTU training in postpartum and postabortion services	PI Program	No (%) of eligible providers attending at least 1 CTU No training manuals/guidelines developed/adapted No training materials/guidelines distributed No. of CTU's offered No(%) CBDs providing postpartum and/or postabortion services	80% eligible providers attend at least 1 CTU/yr 100% target districts have at least 2 appropriate individuals trained 75% SDPs providing PP and/or Pab services Training manual/guidelines per topic developed and distributed	Began planning for CTU series in postabortion, postpartum and infection control	Adolescent RH Study Tour included visits to high-risk clinics conducted post-abortion care

Mozambique--2 Year Plan (1999-2001)

Strategic Objective II: Improved quality of Services and Contraceptive Method mix

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II.4 Increased/expanded community level provider skills in RH	II.4 a Train TBAs/Elementary Midwives, community based agents/activistas [CBD], traditional healers,	NCA/MOZ 001-1 NCA/MOZ 002-1	No. of individuals trained per type of community level provider Ratio of community agents to community population or eligible couples No. training manuals/guidelines developed/adapted per type No. training materials/guidelines distributed per type No. of training events offered per type No. (%) of target communities with at least 1 functioning depot site No. (%) of trained individuals actively using their new skills	50 community based providers trained per subgrant partner 1 agent per 200 eligible families Training manual/guidelines developed and distributed 2 training events per type of provider per year Service stats TBD after baseline	Trained 21 CBRH agents in CBD TOT/Practicum in Nampula	Began preparing materials for TBA TOT; conducted curriculum development workshop for CBD agents; began planning CBD TOT; supported training for adolescent activistas with AMODEFA; Co-facilitated TOT for TBAs course with 15 participants from 9 districts; Developed curriculum for training CBD trainers and agents
SO II	II.5 Enhanced referral systems and community linkage with SDPs	II.5.a SDP and catchment community develop referral plans, transport mechanism, referral standards/guidelines	NCA/MOZ.001-1	No. (%) of SDPs with written referral plan (including transport) No. (%) of communities with written referral plan No. (%) of SDPs with written referral guidelines No. of referrals No. (%) confirmed	75% of SDPs and communities with referral plan 75% of SDPs with written guidelines 60% confirmed referrals	Continued baseline planning activities, including revision of indicators and questionnaire development for facilities	Began planning baseline survey for Nampula target districts, including facility assessments
SO II	II.6. Improved quality assurance and quality management systems (CQI)	II.6.a Develop supportive supervisory systems	PI Program	No. (%) providers trained in self/peer assessment tool No. (%) providers using self/peer assessment tool No. (%) supervisors trained No. SDPs with quarterly supervisory visit Assessment tool and supportive supervision guidelines	75% providers trained and using assessment tool 75% supervisors trained 50% of SDPs with quarterly supervisory visit Assessment tool and guidelines developed and disseminated	Developed supervision and monitoring tool for follow-up of trained service providers	Participated in CARE course for nurse supervision; began follow-up of MCH and Elementary nurses on site including development of supervisory checklists; Began development of supervision and monitoring systems/instruments

Mozambique--2 Year Plan (1999-2001)

Strategic Objective II: Improved quality of Services and Contraceptive Method mix

Global SO	Program Outcomes	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		II 6.b Provincial QA guidelines in RH	PI Program	Development of QA Group - provincial and target districts QA Group tasks defined QA guidelines for RH developed and disseminated No. QA Group participate in training	Provincial and target district QA groups developed and meet at least quarterly QA tasks Membership defined QA guidelines written, disseminated 60% of SDPs with copy of guidelines 1 member from each district/provincial QA Groups attend QA workshop/methods training	Began planning for second quality of care workshops (Maputo and Nampula)	Conducted short workshops for AMODEFA and SALAMA in Introduction to Quality of Care
		II 6 c Logistics model	NCA/MOZ:001-1 PI Program	Logistics STTA - assessment and recommendations Training plan Written model No.(%) of SDPs with at least 1 person trained in model No.(%) of SDPs implementing model No (%) of SDPs with <2 stockouts per year	75% of SDPs and with at least 1 person trained 60% of SDPs implementing model 50% of SCPs with <2 stockouts per year	Jointly hosted visit of FPLM consultant to plan logistics activities for following months	Hosted FPLM consultants to Nampula to work with logistics at provincial and district levels

Mozambique--2 Year Plan (1999-2001)

Strategic Objective III: Increased Community Participation and Demand

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I, III	III 1 Enhanced environment for use of RH services [through research and advocacy]	III 1 a Study tours - advocacy group (CBD)	PI Program	No participants Reports and written recommendations No follow-up activities per province	2 trips - 4 provinces (advance groups) plus Maputo 2 follow on activities per province Write paper on CBD policy 2 advocates per province and centrally	Conducted CBD study tour to Malawi with 6 Mozambican participants	Conducted 2 Study Tour groups to Kenya, for CBD and Adolescent RH (6 per group), Completed Adolescent RH Study Tour to Kenya
		III.1.b. Advocacy training	NCA/MOZ:002-1	No. of advocates per target province No. of advocates complete training No. of advocate events/year	2 advocates per target province and centrally 90% complete training 2 events per advocate per year		Participated in Advocacy seminar in Maputo (Policy Project)
		III.1.c Formative research; pretesting IEC messages	NCA/MOZ 002-1	Research protocol Pretest messages Dissemination plan - findings Communications strategy for IEC messages Incorporation of messages into training, other modalities	Formative research protocol Pretesting initial messages 3 main RH IEC messages and related materials developed	Provided input to CARE's operational research plan	Began planning research activities with CARE
		III.1.d. Dissemination plan for target groups in target districts [Nampula and Maputo - yr1]	NCA/MOZ 002-1	Written plan	Written plan and distribution/discussion at target district level		Initiated provincial and central resource document distribution system
		III.1.e Study tour - worksite services [Swaziland]	NCA/MOZ:002-1	No participants Reports and written recommendations No follow-on activities per province	1 trip - 3 provinces plus Maputo Establishment of worksite programs White paper on worksite services		
		III 1 f. Capacity building seminar for grantees on community participation/organization - participatory assessment methods	NCA/MOZ:001-1 NCA/MOZ:002-1	1 seminar per year Year 1 PRA methodology No participants Application of method/findings or new skills in annual workplan	1 seminar per yr per grantee		
SO I, III	III 2 Improved knowledge and attitudes regarding RH in target populations	III 2.a. Community health committees/circles of interest	NCA/MOZ:001-1	No. of CHC and/or COI per target community No. participants No. of CHC or COI events/meetings per quarter No. (%) of respondents with RH knowledge (in relation to 3 messages)	75% of target community have CHC or COI One activity per month per CHC/COI 75% respondents with knowledge about 3 messages	Began planning seminars for community leaders in Ribaue	

Mozambique--2 Year Plan (1999-2001)

Strategic Objective III: Increased Community Participation and Demand

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		III.2.b. Theatre groups	NCA/MOZ:001-1 NCA/MOZ:002-1	No. of theatre groups per province No. of events per month/year No. of participants	2 groups per focus province (1 per target district) 1 event per group per month 50 participants per event		
SO I, III	III.3. Increased community-level participation in RH	III.3 a Sensitization of leaders	NCA/MOZ:001-1 NCA/MOZ:002-1	No. of leaders per target district participate in sensitization exercise	50 leaders per province participate in sensitization exercise Minimum of 2 exercises per year Manual and action plan for mobilization/heightened awareness	Began planning seminars for community leaders in Ribaua	
		III 3.b Activista orientation/training [see III 4.c]	NCA/MOZ:001-1 NCA/MOZ:002-1	Development/adaptation of curriculum/participant materials Trainers guide Onsite exercises No. (%) of activistas/community agents trained	80% of activistas of grantees participate in training	Trained 21 CBRH agents in CBD TOT/Practicum in Nampula	
SO I	III 4 Improved preventive practices among target populations	III.4 a Communication strategy/mode	NCA/MOZ:002-1	Written communication strategy	Communication strategy implemented in Nampula and Maputo		
		III 4 b Production of materials	NCA/MOZ:002-1	Research findings applied to materials development No. of types of materials developed (in accordance with communication strategy) No. of SDPs and associated community networks supplied with at least 1 type of RH communication material	IEC materials developed and distributed to 80% grantee SDPs and 50% of partner health posts and centres in focus districts or communities in Nampula and Maputo IEC materials developed and distributed to all grantee community networks in Nampula and Maputo		Continued development of flip chart for community level and service provider use

Mozambique--2Year Plan (1999-2001)

Strategic Objective VI: Strengthen RH capacity in NGOs and improve public sector capability to utilize NGOs/PVOs to maximize delivery of RH services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		VI.4.d Initiate and maintain RH clearing house and STTA directory	PI Program	Clearing house established Processing monthly requests	Quarterly update of resource list Processing 5-10 requests per quarter		Rudimentary system in place
		VI.4 e. Sponsor study tours [including PVOs, NGOs and public sector] [see III 1 a. and IV.9.a]	PI Program	Reports and recommendations Related policy advocacy activities	2 study tours Policy recommendations Policy advocacy actions/materials	Conducted CBD study tour to Malawi	Sponsored 2 study tours to Kenya for CBD and Adolescent RH (6 participants per group); Began planning CBD Study Tour to Malawi for February 1999

Nigeria

Strategic Objective I: Increased Access to and Availability of FP and RH Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO 1	1.1. Expanded improved or established FP and RH service delivery systems and infrastructure through multiple service delivery points (including public, private, NGOs, clinic, hospital, community, and market-based outlets; cross-sectoral NGOs; and social marketing)	I.1.a. Support newly established community and market-based FP and RH services	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:020-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH STD/HIV mgmt	No. of CBD and market-based project sites No. of new acceptors No. of CYPs No. of referrals	13 CBD and market services established No. of new acceptors-CBD/MBD No. of CYPs-CBD/MBD No. of referrals-CBD/MBD	A total of 1,009 CYPs were generated by 224 CBDs/MBDs/PMDs in 8 NCA sub-projects. 2,837 referrals were made by NCA/021-1 and NCA/025-1. 3,869 new acceptors were recorded through CBDs/MBDs/PMDs	1,101 CYPs were generated by CBDs/MBDs/PMDs in all 8 NCA sub-projects. 2,837 referrals were made by 2 sub-projects. 3,869 new acceptors were recorded through CBDs/MBDs/PMDs
		I.1.b. Support clinic-based FP and RH services at Sagamu community center	STD/HIV mgmt	Clinics operational No. of new acceptors No. of STI/HIV cases counseled and referred	Operational RH services at center 2,106 new acceptors 906 referrals for STIs and HIV 2,106 clients counseled on	20 persons were counseled and screened on STD/HIV infection	673 patients have been counseled and 558 patients treated for STD/HIV infections.
		I.1.c. Support hospital-based FP/RH services at St. Vincent and Ogun State University Hospital (OSUTH) facilities	STD/HIV mgmt	No. of CYP generated No. of STD/HIV patients treated No. of STD/HIV cases screened No. of sites with upgraded RH service	Upgrade RH service implemented at 2 sites No. CYP generated-TBD 5,530 STI/HIV cases/patients	Procurement and supplies of clinic and laboratory equipment have been completed in the 2 project sites.	Procurement and supplies of clinic and laboratory equipment have been completed in the 2 project sites.
		I.1.d. Support FP/RH service delivery through private for-profit practitioners in 8 locations	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:020-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1	No. of operational FP/RH clinics No. of CYP generated No. of new acceptors served with FP/RH services	Increase clinic-based FP/RH services from 10-13 38,689 CYP generated 24,755 new acceptors of FP services	18 service delivery sites provide services. 7,212 CYPs were generated by the 8 NCA sub-projects. 3,245 new acceptors were seen by the 8 sub-projects.	18 service delivery sites provide services. 12,389 CYPs were generated while 5,569 new acceptors were seen by NCA sub-projects.
		I.1.e. Design new program to increase FP/RH service delivery through Muslim Sisters Organization and community organization at Kano and Nembe	Ford/RH	No. of programs developed and implemented	2 community-based programs addressing FP/RH needs of the high risk and underserved groups designed, implemented and operational in Kano and Nembe	No measurable progress	Accommodation has been secured for health clinic services and women development center at the 2 communities.

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Strategic Objective III: Increased Community Participation and Demand

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		III.4.c Training of health providers and activists to use materials: condom use/safe sex; planned pregnancies	NCA/MOZ:001-1 NCA/MOZ:002-1	No. (%) of total activists/community agents of grantees trained to use RH communication materials No. (%) of total activists/community agents of grantees effectively using RH communication materials No. (%) SDPs in target districts with at least 1 provider trained to use RH communication materials Activista Manual [pocket guide] Curriculum for Activistas [use of communications materials]	80% of total activists/community agents of grantees trained to use RH communication materials 80% of total activists/community agents of grantees effectively using RH communication materials 50 (%) SDPs in target districts with at least 1 provider trained to use RH communication materials [Nampula, Maputo]	Trained 21 CBRH agents in CBD TOT/Practicum in Nampula (included use of flip charts)	Conducted TOT for TBAs and developed CBD curriculum, both including sections on community education and communications
		III 4 d. Community members receiving and using RH communication	NCA/MOZ:001-1 NCA/MOZ:002-1	No of individuals receiving any form of RH communication through grantee community networks Age breakdown of DHS data - current practices No (%) of respondents currently practicing safe sex No (%) of respondents with knowledge about safe sex No (%) of respondents with knowledge of at least 1 modern method of FP CPR	50% total eligible TBD		

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Strategic Objective IV: Expand adolescent RH services/decrease teen pregnancies and STDs

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	IV 1 Increased SDPs offering quality adolescent RH services	IV.1 a. Train staff and equip school focussed SDPs in Maputo and Nampula, Zambezia	NCA/MOZ 002-1	No. of SDPs with at least 1 trained staff member and appropriate equipment/material to provide adolescent RH services	5-10 SDPs (3 in Maputo, 1 in Nampula and 1 in Zambezia) with at least 1 trained staff member and equipment/materials to provide adolescent RH services or refer to trained provider	AMODEFA/Nampula selected and trained activists from 3 schools, met with school directors to plan activities	Completed and approved AMODEFA subgrant with adolescent component, Continued work on UNFPA adolescent proposal, Completed UNFPA adolescent proposal, received approval and funding
SO I	IV 2 Increased number of providers with specific adolescent RH skills	IV.2.a Adolescent RH training for doctors/nurses/counselors working in grantee adolescent RH clinics/centres	NCA/MOZ:002-1	No. (%) of providers trained out of total needed to service grantee adolescent SDPs	5 SDPs per year with at least 2 trained staff members each		Trained elementary nurses in 4 districts, including introduction to adolescent RH issues
		IV.2 b. Adolescent RH TOT for provincial providers from target districts	NCA/MOZ:002-1	No. (%) of target districts with at least 1 trainer participating in TOT for adolescent RH	6 each year		
SO I	IV.3. Increased numbers of school related RH services for adolescents	IV.3.a TOT for peer counselors and professors	NCA/MOZ:002-1	No. (%) of peer counselors trainers (coordinators) and professors trained in adolescent RH life skills curriculum out of total needed for all grantee school based programs	80% of professors and peer counselor trainers needed for 5 school programs per yr		
		IV.3.b Activistas/peer counselor training in adolescent RH counselling and communication	NCA/MOZ:001-1 NCA/MOZ:002-1	No. Activistas trained per network Development per modules, materials	40-50 trained peer counselors (10 per network) per year		Supported 5-day training of adolescent activists of AMODEFA
SO I	IV.4. Increased adolescent/youth peer networks linked with counselling sites/service centers	IV.4 a Development of peer networks	NCA/MOZ:002-1	No. of school focused networks in 5 urban sites	5 networks in 5 target urban communities [50 activistas peer counselors]		Supported update training of Maputo peer counsellors/AMODEFA
		IV.4.b Implementation of ARH "Events" per school network	NCA/MOZ:002-1	No events per year per all networks No. of beneficiaries per year from all events [not including individual counseling contacts] No. of individual contacts for all activistas per year No. of new acceptors per all networks per year No. of continued acceptors per all networks per year No. of referrals into participating SDP or counseling center per year	30 events per year 1,000 beneficiaries from all events 6000 contacts from all activistas 2000 new acceptors		

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Strategic Objective IV: Expand adolescent RH services/decrease teen pregnancies and STDs

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	IV 5 Functioning adolescent RH training site/clinic/community centers in 2 provinces	IV 5 a Initiate adolescent RH training site/clinic in Maputo [yr 1] and 2 school sites in Maputo	NCA/MOZ 002-1	No staff hired and oriented No facilities renovated No staff trained No. clients No new acceptors No. continued users Method mix CYP	1 RH clinic fully staffed 1 clinic renovated and equipped for service (counseling, direct clinical services or referral) 80% staff at RH clinic trained 500 new acceptors Other data TBD		Developed plans for AMODEFA--Maputo and Zambezia
SO I	IV.6 Effective mass communication strategy and dissemination plan for adolescent RH	IV.6 a Develop mass communication strategy and dissemination plan for adolescent RH; introduce in Maputo and Zambezia	NCA/MOZ:002-1	Development of strategy and plan	Introduction of plan for subgrantees and partners		
SO I	IV 7 Available, widely disseminated IEC RH messages and related materials specific for adolescents/youth	IV 7 a. Pretest messages; revise messages and incorporate into training materials, communication strategy	NCA/MOZ 002-1	Pretest results Messages	Pretest results Key messages (3) developed and incorporated into training modules for nurses, community agents		
SO I, III	IV.8. Active Intersectoral Committee for Adolescent Development	IV.8.a Technical support, capacity building CIADAJ	PI Program	Measurable Indicators	Workplan Technical support plan		Participated in CIADAJ meetings, planning
SO III	IV 9. Supportive policy environment at provincial and national levels	IV.9.a. Study tours - adolescent programs	NCA/MOZ:002-1	Reports and recommendations Related policy advocacy activities	Policy recommendations Policy advocacy actions/materials		CBD and adolescent study tours; Nascent advisory groups (4 provinces), Completed Adolescent RH study tour in Kenya
		IV 9.b. Adolescent policy/planning technical forum for decision makers	NCA/MOZ:002-1	No forum No participants	1 forum per yr, 25 participants		
		IV.9.c. Regional program exchanges/meetings	NCA/MOZ:002-1 PI Program	No. of program exchanges (intra and inter provincial/national) No participants/organizations involved	4 exchanges per yr, 2-5 organizations; 10 individuals		2 study tours; CBD Tsak Group meeting; curriculum development
		IV.9.d. Advocacy package and training - adolescent RH	NCA/MOZ:002-1 PI Program	No. of advocates per target province No. of advocates complete training No. of advocate events/yr	2 advocates per focus province and centrally 90% complete training 2 events per advocate per yr		Study tour (2 provinces and MOH)
		IV.9 e. Utilization of data for policy decisions [DHS, PSI, formative research findings]	NCA/MOZ:002-1 PI Program	No summary reports with research results or data analysis ["user friendly" presentation] No. forum to discuss policy implications of data	2 forum per yr [yr 1 DHS - and PSI data, results from initial formative research]		Included presentation on adolescent RH in PVO forum in November

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Strategic Objective IV: Expand adolescent RH services/decrease teen pregnancies and STDs

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		IV.9.f. Adolescent RH clearing house/resource library	NCA/MOZ:002-1 PI Program	Clearing house established Processing monthly requests	Quarterly update of resource list Processing 5-10 requests per quarter		Rudimentary library established

Strategic Objective V: Strengthen NGO management capacity/capability

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	V 1. Strengthened NGO program/institutional management capacity	V 1 a. Annual institutional assessment with implementation of institutional capacity building (ICB) action plan	PI Program	Assessment report and ICB action plan	Annual ICB assessment and plan		AMODEFA strategic plan (1998 FY); Initiated plans with AMODEFA
		V.1.b. Strategic plan implementation and monitoring	NCA/MOZ 001-1 NCA/MOZ:002-1	Per monitoring plan	Monitoring plan	Finalized SALAMA operational and monitoring plans	Finished SALAMA strategic plan; began developing annual workplan and monitoring plan, Continued work with SALAMA on operational plan, with monitoring
		V 1 c. National and/or provincial annual meetings/workplan development	NCA/MOZ:001-1 NCA/MOZ 002-1	National meeting agenda proceedings for each grantee National, provincial and/or district plans per grantee	1 national meeting and workplan AMODEFA 1 provincial meeting and workplan per focus province District plans per each target district	Began planning next national workplan meetings of SALAMA and AMODEFA	Finalized plans for AMODEFA national assembly; began plans for SALAMA general assembly; AMODEFA national assembly held; SALAMA general assembly held, AMODEFA and SALAMA 1-year operational plans developed
		V 1.d Develop organizational database (membership, volunteers, training, health services)	NCA/MOZ:001-1 NCA/MOZ:002-1	3-4 databases - software and instructions for system implementation/maintenance	3-4 systems (membership, volunteers, training, health services/impact) adapted for each grantee	Began planning consultancy for database development	Initiated plans for AMODEFA database
SO II	V.2. Improved financial systems and sustainability of partner NGOs	V 2.a Grantee financial officer training	NCA/MOZ.001-1 NCA/MOZ 002-1	No. of people participating in training	1 officer per grantee attends at least 1 training per year (in-country or external)	Held financial management workshop for financial officers from SALAMA and AMODEFA	AMODEFA Financial Officer attended course in Kenya (1998 FY), Initiated 1-1 training/AMODEFA; Planned grantee financial officer workshop for January 1999
		V.2 b Seminars in grant management and cost monitoring	NCA/MOZ 001-1 NCA/MOZ:002-1	No. of seminars No. of participants	2 seminars per year (including both grantees), 5-10 participants	Financial management workshop included grant management topics	Assisted AMODEFA and SALAMA in finalizing grant proposals, including identification of indicators, narrative writing, and budget preparation; Regional office Financial Officer worked with PI/Nampula and SALAMA in developing grants management systems
		V.2 c. Implement revised financial monitoring/reporting system per grantee	NCA/MOZ:001-1 NCA/MOZ:002-1	Financial monitoring system Quarterly reports	Financial monitoring system and instructions per grantee Quarterly financial reports per grantee	Both AMODEFA and SALAMA produced quarterly financial reports according to PI system	Introduced project monitoring and reporting systems to AMODEFA and SALAMA
		V.2 d. Develop and implement sustainability plan, including revenue generation plan	NCA/MOZ:001-1 NCA/MOZ 002-1	Sustainability plan	Sustainability plans in progress for each grantee		
SO II	V 3 Expanded NGO capability in human resources and MIS	V 3 a. Develop procedures/personnel manuals	NCA/MOZ 001-1 NCA/MOZ 002-1	Manuals per grantee	1 manual per grantee		Assisted AMODEFA in developing personnel guidelines, hiring procedures

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Strategic Objective V: Strengthen NGO management capacity/capability

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
		V.3.b Develop membership orientation guides/training	PI Program	Orientation guide No. of members trained	1 guide per grantee Associated training materials 50% old members re-oriented 90% new members oriented		Assisted AMODEFA in developing draft membership orientation guide
		V.3.c. Salary structure review, refinement of position descriptions	PI Program	Salary review Revised structure and position descriptions	Revised salary structures per grantee Position descriptions and qualification for each employee per grantee	SALAMA revised salary structure, began refining position descriptions	Initiated descriptions to revise AMODEFA salary scales; Assisted SALAMA in revising organogram and developing position descriptions for new staff
		V.3.d Develop/refine personnel evaluation and personal development plans	NCA/MOZ:001-1 NCA/MOZ:002-1	Revised personnel evaluation forms/system No. personal development plans	50% of employees have personal development plan		
		V.3.e Seminars for implementation and use of PSS [including related analysis]	NCA/MOZ:001-1 NCA/MOZ:002-1	No seminars No. of participants PSS analysis and implication reports	2 seminars 1 per year thereafter [including both grantees] 5-10 participants Quarterly PSS reports with analysis of program implications	Participated in ARO workshop on new PSS for monitoring and evaluation	
		V.3.f. Seminar on data for decision making; baseline study results and program implications	NCA/MOZ:001-1 NCA/MOZ:002-1	1 seminar per year per grantee No. of participants	1 seminar per year, 5-10 participants per grantee		Began planning baseline survey with SALAMA and AMODEFA in Nampula Province
		V.3.g. QA workshop and plan/intervention development	PI Program	No workshops per year [including both grantees] No. participants QA plan	1 workshop per year, 5-10 participants [both subgrantee and district partners] QA plan	Planned second QA workshops with SALAMA and AMODEFA (May/June)	Conducted short workshops with SALAMA and AMODEFA in Introduction to Quality of Care
		V.3.h Develop GIS system per grantee and PI	NCA/MOZ:001-1 NCA/MOZ:002-1	GIS system and instructions	Working on development of GIS system per grantee		

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Strategic Objective VI: Strengthen RH capacity in NGOs and improve public sector capability to utilize NGOs/PVOs to maximize delivery of RH services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	VI 1 Improved RH coordination among PVOs	VI 1.a Facilitate provincial RH task groups in focus provinces	PI Program	No meeting per yr/province Development of subgroups, objectives and operating guidelines Products/key decisions No (% of total) health PVOs/NGOs participating	1 RH task group in each focus province, 6 meetings per yr per province with written minutes, written membership and objectives, guidelines for each RH task group, 80% of health PVOs [100% USAID funded] participation	Re-scheduled RH task group meeting for June	Began planning for RH task group meeting in Nampula
		VI.1.b Host NGO administrative practices forum	PI Program	No participating NGOs/PVOs Production of common administrative guidelines, esp for per diems	1 forum per year 90% participation of USAID funded health PVOs Per diem guidelines		
		VI 1 c. Facilitate PVO health for a - national and provincial	PI Program	No forum per year	1 national, 1 northern provincial/yr		Planning for Oct/Nov forum; Co-facilitated PVO health forum, with one day for RH presentations
		VI.1.d. Facilitate communication and programmatic exchange between PVOs and between PVOs and NGOs	PI Program	No of inter-program visits, joint activities	3 per year	Participated in several multi-PVO meetings to coordinate SALAMA activities, assisted MCDI to conduct RH course for service providers	Participated in 2 NGO coordinating meetings in Nampula; Conducted TOT for TBAs jointly with 3 other PVOs, began planning SALAMA activities with partner PVOs and SALAMA
SO II	VI.2 Strengthened district and provincial planning capacity in RH, incorporating NGOs/PVOs	VI.2 a Annual target district RH work planning exercise with subgrantee and public sector officials	NCA/MOZ:001-1	No. (%) of target districts with workplans integrating efforts of subgrantee NGOs	4	Assisted DDS/Ribaue in developing annual workplan	Worked with SALAMA, DPS and CARE in developing short and longer-term workplans; Initiated collaboration plan with AMODEFA/World Vision
		VI.2.b. GIS workshop for NGOs/PVOs/public sector	PI Program	Workshop report No. organizations, districts/provinces attending No districts/provinces or NGO/PVOs implementing GIS	3		
		VI.2.c Perform district RH inventories, mapping in target districts	NCA/MOZ:001-1	No. target district inventories completed/updated	4		
		VI 2.d Perform baseline facility assessments	NCA/MOZ.001-1 NCA/MOZ:002-1	No PVO assessments completed/analyzed per focus province	Representative sample for each target district per grantee	Developed indicators and questionnaires for baseline facility assessments	Began preparations for baseline facility assessment in all target districts across 3 provinces, Began planning baseline survey for target districts, including facility assessments

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Strategic Objective VI: Strengthen RH capacity in NGOs and improve public sector capability to utilize NGOs/PVOs to maximize delivery of RH services

Global SO	Program Outcome	Activities	PIs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I, II	VI 3 National NGO/PVO guidelines/protocols/clinical standards for quality RH services	VI 3 a Facilitate development of NGO/PVO RH clinical protocols and treatment [eg family planning, STDs, safe motherhood and early infant home case management of common illnesses]	PI Program	No of approved protocols per year	1-2 approved protocols per yr		
		VI 3.b. Develop NGO/PVO guidelines for quality RH services, consistent with GRM norms	PI Program	No of approved guidelines per year	1-2 approved/implemented per yr	Began discussions with MOH, DPS regarding how to prepare RH guidelines	
		VI.3.c Assist in development/implementation of common NGO/PVO RH program indicators	PI Program	USAID approved RH indicators for SO3	USAID approved RH indicators for SO3	Coordinated with CARE and World Vision in developing set of baseline indicators for assessments and survey	Initiated plan; Began planning baseline survey, to include indicators for partner activities
		VI 3.d. Assist in development of common NGO/PVO RH and facility and program assessment instruments	PI Program	No. approved assessment instruments	1 per yr	Coordinated with CARE and World Vision in developing instrument for facility assessments and survey	
		VI.3.e. Facilitate CBD Task Force	PI Program	No. meetings per yr No. organizations participating No. events sponsored or key recommendations made [CBD curriculum and CBD design - yr 1]	3-4 meetings/yr 75% of member organizations participating in at least 2 meetings or sponsored activities/yr CBD curriculum development workshop CBD design workshop	Conducted CBD task group meeting	Coordinated national CBD task group meeting in Maputo; Facilitated CBD Task Group meeting day in conjunction with PVO Forum
SO I	VI 4. Expanded RH services among international PVOs	VI 4 a Perform PVO needs assessments and develop TA plans/MOU	PI Program	No PVO assessments completed No TA plans/MOUs signed	6 assessments MOUs and TA plans - across all 3 provinces		Began developing MOUs between PI and MCDI, CARE, WW, Concern and SCF
		VI.4 b Provide RH TOTs for PVO trainers	PI Program	No TOTs per yr No organizations receiving TOTs No participant trainers	1 TOTs per yr 6 PVOs 15 participants	Conducted RH TOT for service providers in Cuamba for MCDI	Initiated plans for EE and CBD TOT; Developed materials for EE and CBD TOT; Began planning assistance to MCDI TOT in RH/FP for health post level service providers
		VI 4 c Facilitate PVO technical seminars and contraceptive technology updates (CTUs) on selected topics	PI Program	No CTUs No of PVOs receiving CTU No of participants	1-2 peryr 6 PVOs 15 participants	Began planning series of CTUs on technical topics, PVOs to participate	

Nigeria

Strategic Objective III: Increased Management, Financial and Technical Capacity Local and Communities

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
		III.2.a. Develop/strengthen financial management systems that are linked to the organizations' MIS for all local partners through workshops, on-site training and development of guidelines/manual and promote the utilization of established systems	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH Ford/ICB PF/NIR:010-1 STD/HIV Mgmt	No. of program staff participating in financial sustainability management workshop No of NGOs with effective financial management system and sustainability plan in place	31 institutions with improved financial management system and sustainability plan 62 financial staff participating in workshop	All the NCA and STD/Mgt. projects have shown improved financial mgt. in their reporting. Also, all the 8 NCA have sustainability plans in form of cost recovery for commodities dispensed.	All the NCA and STD/Mgt projects have shown improved financial mgt. in their reporting. Also all the 8 NCA sub-projects have sustainability plans in form of cost recovery for commodities dispensed. 20 NCA project staff attended the 7-day MIS/Financial mgt training conducted in the 2nd quarter. In attendance were also 16 STD/HIV management project staff and 26 Ford project personnel.
SO III		III.2.b. Provide TA to local implementing partners to improve sustainability plan, management of clinic and community based costs, including developing cost based plans	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH Ford/ICB PF/NIR:010-1 STD/HIV Mgmt	No. of NGOs with cost-based plans No. of NGOs with established cost recovery/income generating and pricing plans for CBD and clinic-based programs	31 local implementing partners with established systems to track income generated, cost recovery activities and using pricing plans for services and sales of commodities	All the NCA sub-projects have put in place cost recovery system. Plans are ongoing for STD/HIV projects.	All the NCA sub-projects have put in place cost recovery system. Plans are ongoing for STD/HIV projects.
	III.3 Develop capacity of Management and Clinical Services Network	III.3.a. Provide support to Network as an organization to strengthen its strategic approach, forward planning and options for growth	Ford/ICB	No of training activities and consultants' programs implemented by NW organization	Network organization is operationalized implementing activities as per one year action plan No. of training activities implemented - TBD	No measurable progress	No measurable progress

Nigeria

Strategic Objective III: Increased Management, Financial and Technical Capacity Local and Communities

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
		III.3.b. Continue to strengthen select Network members' capacity to provide TA to local NGOs under the ICB initiative	Ford/ICB	No. of Network members participating in update/review workshops	20 Network members with updated skills and knowledge in capacity building and process consulting	No measurable progress	15 Nigerian Network Management Network (NMN) members received a 3-day update training in process consulting and organizational development.
	III.4 Strengthen community development and resources including community mobilization, income generation, education and literacy, and women's empowerment	III.4.a. Continue to support social women empowerment activities among the high risk and under served population in Otukpo, Sagamu, Kano and Nembe	STD/HIV mgmt Ford/RH	No. of activities/type organized and conducted for women No of women empowered through participation in vocational training programs	Improved economic status of women 60 women empowered through participation in vocational training programs	This training has been suspended for now.	Vocational training for empowerment will commence in quarter 4 of STD/HIV management project.

Strategic Objective I: Increased Access to and Availability of FP and RH Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	1.2. Enhanced environment for use of FP, RH and MCH services through selected IEC, research and advocacy interventions	1.2.a Support client-focused IEC activities for FP, RH and MCH (including home visits community meetings, educational materials for dissemination)	NCA/NIR:017-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:023-1 NCA/NIR:024-1 Ford/RH STD/HIV mgmt	No. of home visits and community meetings conducted No. IEC program-specific materials developed No. of persons informed	98,650 home visits, community meetings conducted by health workers, peer/CSW educators, male motivator and MSO members 143,900 persons informed 234,400 IEC materials distributed	9,315 persons were visited in 2,018 home visits made by 6 NCA projects that reported this activity. 80 community meetings with 8,320 participants were conducted by 5 NCA projects. All the 8 NCA projects utilized 6 different IEC materials on RH/STD/HIV produced. 1 STD/HIV mgmt project made 99 home visits to 130 persons while 6 stakeholders groups reached 24,625 people with STD/HIV messages.	12,039 persons were visited in 2,801 home visits made so far. 80 community meetings with 8,320 participants were conducted. All the 8 NCA projects utilized 6 different IEC materials on RH/STD/HIV produced. 298 home visits were made while 66,288 people were reached through IEC/community meetings by STD/HIV mgmt. project.
		1.2.b. Strengthen community level participation through sensitization/advocacy/stakeholders meetings and joint participation in project management	NCA/NIR:017-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:023-1 NCA/NIR:024-1 Ford/RH STD/HIV mgmt	No. community leaders sensitized and stakeholders meetings conducted	1,000 community leaders sensitized 12 stakeholders meetings conducted	1 sensitization seminar were held with 20 top mgt. personnel of a company by an NCA sub-project. 20 community leaders were reached by 1 DFID sub-project.	757 community and women leaders were sensitized on FP services, prevalence of STI/HIV and its prevention. And 20 top mgt staff of a company were sensitized 20 community leaders were reached by DFID sub-project.
		1.2.c. Revise/develop targeted IEC strategies/approaches to reach high risk underserved populations	Ford/RH STD/HIV mgmt	No. of IEC materials developed and implemented	87,000 appropriate IEC materials developed/distributed	STD/HIV Sagamu site conducted IEC material devt. Workshop this quarter and production of IEC materials is ongoing.	IEC materials development for STD/HIV project is ongoing.
		1.2.d. Conduct operational research on FP/RH programs	Ford/RH STD/HIV mgmt	Result of operational research conducted	Better designed FP/RH programs incorporating funding recommendations and lessons learned	No measurable progress	A new research proposal with focus on the pattern of STD/HIV infection among CSWs was developed and is currently being reviewed for OSUTH based project.

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Strategic Objective I: Increased Access to and Availability of FP and RH Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
	I.3. Increase availability of high quality, long-acting methods	I.3.a. Support provision of long-acting methods at 8 private institutions	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1	No. of new acceptors No CYPs achieved Total number of SDPs	12,214 new acceptors of long-acting methods 32,955 CYPs achieved 8 clinics offering VSC, IUDs, and injectables	1,684 new acceptors of long acting methods were reported by all 8 NCA projects (3 BTL, 684 IUD and 997 Injectables). These, generated 1,914 CYPs.	2,017 new acceptors of long acting methods were reported by the NCA projects (1 VSC, 13 BTL, 855 IUD and 1,148 Injectables). These, generated 2,504 CYPs.

Nigeria

Strategic Objective II: Improved Quality of Services and Contraceptive Method Mix

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II.1 Expand range of appropriate contraceptive methods available	II.1.a Support provision of VSC services at 9 private institutions	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1	No. of VSC performed No. CYP achieved	Expanded services at 8 private institutions 2,035 CYPs achieved 188 VSC performed	37.5 CYPs achieved. 3 BTL performed. These were achieved by 2 NCA projects.	175 CYPs achieved 13 BTL and 1 VSC performed
		II.1.b. Expand ECP services under the UCH project	PF/NIR 010-1	Increased no. of FP clinical sites providing ECP services	Expanded ECP services in the South West of Nigeria ECP introduced to 5 new (10 total) FP clinical sites		PF/011-1 project was not extended beyond Dec. 31, 97.
	II 2. Strengthened providers' competence to deliver high quality FP and selected RH services (including MCH and STIs and HIV/AIDS)	II.2.a. Train/retrain CBDs/MBDs/Health workers to provide integrated health services (FP, selected RH and MCH) at all participating sites, including ECP training	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH STD/HIV Mgmt PF/NIR:010-1	No/type of trained CBD/MBD agents No/Type of staff/Cadre trained No. of peer educators trained	Increased technical competence of service providers at all levels of service delivery 1,284 service providers trained	3 NCA projects conducted training for 26 Peer Educators, 60 CBDs and 7 CHEWs. Training conducted by STD/HIV mgt. projects were; 1-day report writing workshop for 26 Otukpo-based project staff; 40 CSW PEs training; 40 in-sch. Adolescent PEs training; Guardian Counselor's training for 67 Parents and teachers.	23 NCA staff members received a 1-week CTU. Eleven NCA CSPs received Basic FP training. 65 project staff from NCA, STD/HIV and Ford participated in MIS/Financial Mgt. workshop. 3 NCA projects conducted training for 26 Peer Educators, 60 CBDs and 7 CHEWs. Training activities conducted by STD/HIV mgt. project were: 147 project staff trained in Syndromic mgt.; Guardian Counselor's training for 82 teachers/parents, PE training for 103 CSW, 25 Cyclist and 155 adolescents; laboratory training for 4 staff, advocacy workshop for 21 Hotel Directors.

Nigeria

Strategic Objective II: Improved Quality of Services and Contraceptive Method Mix

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
		II.2.b. Review/Update curricula, protocols, standard of practice (SOP) for all cadres of service providers including ECP	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH STD/HIV Mgmt PF/NIR:010-1	No/Type of curricula, protocols SOPs reviewed and updated	22 updated curricula, protocols, SOPs for all cadres of providers	NCA projects will not have protocols. Pre-testing of draft protocol developed by STD/HIV mgt. project is still being pretested by stakeholders.	Protocols for AIDS home-based care and syndromic management training were developed for STD/HIV management project. Draft copies of protocol developed are still being pretested by Stakeholders. NCA projects will not have protocols
		II.2.c. Conduct TOT for STI Management Technical Working group	STD/HIV Mgmt	No. of persons trained to provide TA on STI Management	Availability of STD Management Technical Resources 25 people trained in TOT	Refresher training is planned for next quarter.	A total of 147 Health workers of different cadre were trained by 7 stakeholders. 48 staff members have been trained on AIDS Patient Care and Management in Mildmay 1 & 11 Training.
SO II	II.3. Enhanced integration of STIs and HIV/AIDS services into FP programs (including referrals)	II.3.a. Strengthen and consolidate integration of STD and HIV/AIDS prevention control in all service delivery points; continue support to CBD home based care for people with AIDS (PWA) at Otukpo	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 STD/HIV Mgmt PF/NIR:010-1	No. of sites with FP and STI and HIV/AIDS integrated services No. of people with AIDS cared for by the CBDs No. of STI/HIV persons counseled, screened and treated	STI and HIV/AIDS fully incorporated into 9 SDPs 15,000 persons with STI and HIV/AIDS provided with services 400 PWAs cared for by CBDs 13 sites with FP and STI/HIV/AIDS integrated services	All the 8 NCA projects have fully incorporated STI/HIV/AIDS treatment into their services. 56 PLWHAs received home based care treatment in N2/001-1. 512 persons were counseled and screened while 200 cases were treated for STD/HIV infections.	All the 8 NCA projects have fully incorporated STI/HIV/AIDS treatment into their services. 11 sites are offering FP and STI/HIV/AIDS services in STD/HIV Management project. A Total of 1,534 were counseled and 1,222 treated by STD/HIV management project.
		II.3.b. Develop/strengthen referral linkages between CBD/MBD, peer educators; clinics; hospitals and other STIs and HIV/AIDS referral centers in all project sites	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH STD/HIV Mgmt	No. of cases of STD/HIV/AIDS referral linkages established and functioning	Availability of effective referral linkages 13 referral linkages established 2,000 cases of STI/HIV/AIDS referred	Effective referral linkage is in place in NCA/017-1, 020-1, 021-1, 022-1, 024-1 and 025-1. Referral linkages within the 6 Otukpo based projects were strengthened in the quarter.	Effective referral linkage is in place in NCA/017-1, 020-1, 021-1, 022-1, 024-1 and 025-1. Referral linkages have been established within the 6 Otukpo STD/HIV based sub-projects.

Strategic Objective II: Improved Quality of Services and Contraceptive Method Mix

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
		II.3.c. Establish community-and clinic-based models for STI and HIV care among Otukpo community and at St. Vincent Hospital	STD/HIV Mgmt	No. of models for STI and HIV care established	No. established models for STI and HIV care - TBD	4 projects site models; N2/004-1, 001-1, 003-1 and 008-1	4 projects site models; N2/004-1, 001-1, 003-1 and 008-1
SO II	II.4. Improved quality assurance and quality management systems	II.4.a. Introduce/ strengthen QOC system, including Quality Improved Self Assessment tools, development of protocols; infection prevention checklist at all project sites	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH STD/HIV Mgmt	No. of project sites with effective QOC system	Improved quality of care at all 14 project sites	The following exist in all NCA projects; Minimum of 3 modern methods, clinic is opened at least 5 days a week, staff trained on methods and counseling on side effect provide services, environmental hygiene and use of gloves during insertion is fair and emergency drugs are available. There has been national stock out for condoms since January 1999.	The following exist in all NCA projects; Minimum of 5 modern methods, clinic is opened at least 5 days a week, staff trained on methods and counseling on side effect provide services, environmental hygiene and use of gloves during insertion is fair and emergency drugs are available. The STD/HIV management project has in place pre and post counseling sessions for clients, trained staff. There has been national stock out for condoms since January 1999.
		II.4.b. Conduct on site training on utilization of QOC systems, tools, checklist and protocols	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH STD/HIV Mgmt	No. of sites with effective QOC systems (using tools, checklist)	QOC systems protocols tools/checklist finalized and in use	National FP guidelines have been made available to all NCA projects. Quarterly monitoring visits are conducted to project sites to ensure compliance with national standards. Monthly monitoring rounds are conducted for STD/Management projects and TA provided regularly to ensure QOC is in place.	National FP guidelines have been made available to all NCA projects. Quarterly monitoring visits are conducted to project sites to ensure compliance with national standards. Monthly monitoring rounds are conducted for STD/Management projects and TA provided regularly to ensure QOC is in place.

Nigeria

Strategic Objective II: Improved Quality of Services and Contraceptive Method Mix

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
		II.4.c. Equip and renovate 33 SDPs/clinics	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH STD/HIV Mgmt	No. of clinics equipped No. of clinics renovated	33 clinics/SDPs with appropriate equipment and environment to promote QOC	8 NCA projects were supplied with basic FP equipment.	8 NCA projects were equipped with IUD kits. 6 NCA projects were renovated. Supply of basic FP equipment and computers is in progress. All the STD/HIV management projects have been renovated, equipped with clinic equipment. Plans are underway to equip the Peer Educators with kits.
		II.4.d. Update laboratories and technicians' skills at Otukpo and Sagami	STD/HIV Mgmt	No. of laboratories and technicians' skills upgraded	2 laboratories upgraded (at Otukpo and Sagami) 4 technicians' skills upgraded	Procurement and supplies of laboratory equipment was completed this quarter.	Laboratory equipment were procured and supplied to the 2 sites. With the supplies of these equipment, project laboratory staff were training on a 1-week laboratory and equipment management. This will be followed by on-site visits to project sites.

Nigeria

Strategic Objective III: Increased Management, Financial and Technical Capacity Local and Communities

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III 1 Strengthened program management capabilities of local service delivery organizations.	III.1.a. Conduct strategic planning activities with 13 local NGOs	Ford/ICB	No. of NGOs with strategic plan No. of NGOs participating in strategic planning activities	10 NGOs with strategic plan 10 NGOs participating in strategic planning activities	Strategic planning conducted for NINCOF was disseminated this quarter in a 1-day meeting conducted by PI.	No measurable progress
		III.1.b. Provide on-site TA to develop/strengthen local partners' human resources to design, manage and evaluate FP/RH programs	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH PF/NIR:010-1	No. of institutions/CBDs/NGOs provided with on-site TA No. of program managers with management skills	16 institutions CBOs/NGO with improved program management 16 program managers with management skills	On-site TA was provided to project staff on project management and on financial and programmatic reporting.	8 NCA projects received project management skills training. On-site TA was provided to project staff on project management and on financial and programmatic reporting.
		III.1.c. Continue the provision of TA on capacity building to 13 local NGOs and plan for expansion to include 5 more	Ford/ICB	No. of local NGOs receiving TA under ICB initiative	Increased number of NGOs from 13 to 18 benefiting from ICB initiative	No measurable progress	ICB activities have been rounded up with 13 NGOs in anticipation of possible extension.
		III.1.d. Conduct workshops/training to strengthen local management committees (LMC) at Otukpo and Sagamu to better manage the STD/HIV management project	STD/HIV mgmt	No. of workshops and/or trainings conducted for LMC members No. of LMC members that participated in workshop training	Improved management skills of LMC at the 2 project sites 2 workshops and 10 members trained	Monthly LMC meetings convene at Otukpo and Sagamu STD/HIV project sites.	Monthly LMC meetings convene at Otukpo and Sagamu STD/HIV project sites.
		III.1.e. Finalize development of manual/guidelines on Management and Supervisory Skills Development (MSSD) for Nigerian NGOs	Ford/ICB	Completed MSSD manual No. of copies of MSSD manual produced and distributed	A self explanatory MSSD manual for Nigerian NGOs produced 100 copies distributed	Ongoing	Ongoing

Nigeria							
Strategic Objective III: Increased Management, Financial and Technical Capacity Local and Communities							
Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
		III.1.f. Develop/strengthen ICB partner NGOs, Board of Directors capacity to function more effectively	Ford/ICB	No. of NGOs Boards that participated in development activities No. of NGOs with functional Board No of board development activities/type	18 NGOs with internal governance to ensure proper accountability 13 NGO boards participating in depot activity 13 NGOs with functional boards 3 board development activities conducted		13 NGOs supported by Ford/ICB participated in the 7-day MIS/Financial Management Workshop
SO III		III.1.g. Provide TA on development and utilization of MIS by all local implementing partners	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH Ford/ICB PF/NIR:010-1	No. of project staff participating in MIS workshop No. local NGOs/institutions with effective MIS in place No. of follow-up visits/TA provided to local implementing partners	Improved MIS in place and being used 21 project staff with MIS skills 30 local NGOs with MIS in place 10 follow-up visits 50 project staff participating in MIS workshop	All 8 NCA sub-projects received on-site TA on MIS during monitoring visits. The 8 STD/HIV mgt. projects received monthly TA on MIS.	All 8 NCA sub-projects received on-site TA on MIS during monitoring visits. The 8 STD/HIV mgt. projects received monthly TA on MIS. NCA and FORD/RH projects benefited from the 7-day MIS/Financial Management workshop this quarter. 20 NCA project personnel, 16 STD/HIV management project staff and 26 Ford project staff received training on MIS.
		III.1.h. Provide site TA on commodity logistics to improve capacity to forecast, prepare, warehouse and distribute equipment and supplies	NCA/NIR:017-1 NCA/NIR:018-1 NCA/NIR:019-1 NCA/NIR:020-1 NCA/NIR:021-1 NCA/NIR:022-1 NCA/NIR:023-1 NCA/NIR:024-1 NCA/NIR:025-1 Ford/RH Ford/ICB PF/NIR:010-1 STD/HIV Mgmt	No of NGOs/institutions with established commodity logistics system in place	31 project sites with improved commodity logistics systems	NCA/025-1 was supplied with additional FP commodities retrieved from NCA/019-1 that was closed.	NCA/025-1 was supplied with additional FP commodities retrieved from NCA/019-1 that was closed. Seed stock of high quality commodities have been supplied to 8 NCA project sites.

Senegal

Strategic Objective I: Increased Access to and Availability of FP and RH Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO 1	I 1 Expanded, improved or established FP and selected RH service delivery systems through two service delivery points	I 1 a Continue to support clinic-based services in and around Kaolack and St Louis	NCA/SEN 001-2	No. of new acceptors	7,293 new acceptors	609 new acceptors recruited at the two clinics while 818 new acceptors recruited by CBD agents	2,142 new acceptors recruited at the two clinics while 2,270 new acceptors recruited by CBD agents
		I.1 b. Continue to support community-based RH services in and around Kaolack and St. Louis	NCA/SEN 001-2	No. of CYPs provided	5,271 CYPs provided	Total of 701 CYPs generated	Total of 3,193 CYPs generated
SO 1	I 2. Expanded access for underserved groups and those at risk such as young adults and men	I 2 a Provide peer counseling services at the University of St. Louis	NCA/SEN 001-2	No. of young adults informed	30,000 young adults informed	7,370 young adults informed	13,073 young adults informed
		I 2 b Explore the possibility of affiliating youth services with those of an IPPF funded Youth Center 100km from St Louis	NCA/SEN:001-2	No. of young adults informed	30,000 young adults informed	Youth services ongoing at the IPPF funded Youth Center at Richard-Toll, a town 100km from St Louis. 7,370 young adults informed, almost double last quarter's achievement.	13,073 young adults informed
		I 2 c Support outreach services to men in and around the St. Louis and Kaolack target population	NCA/SEN:001-2	No. of condoms distributed	123,552 condoms distributed	26,444 condoms distributed	68,196 condoms distributed
SO 1	I 3 Enhanced environment for use of FP, RH and MCH services through selected IEC, and advocacy interventions	I.3 a. Continue to support FP IEC campaigns through "causeries" conducted by CBD agents and volunteer FP educators	NCA/SEN 001-2	No. of people informed	190,000 people informed	Total of 34,553 people informed	Total of 121,908 people informed
		I.3.b. Sensitize and involve community members	NCA/SEN:001-2	No. of adults informed	160,000 adults informed	27,183 adults informed	81,652 adults informed

Senegal

Strategic Objective II: Improved Quality of Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 1. Strengthened provider competence to deliver high quality FP and selected RH services	II.1.a. On-site training follow-up and documentation of experiences with CBD agents and peer counselors	NCA/SEN/001-2	No. of new users recruited and people informed	(Achievements combined with those under I.1.b and I.1.3.a)	(Achievements combined with those under I.1.b and I.1.3.a)	(Achievements combined with those under I.1.b and I.1.3.a)
		II.1.b. Continue to support the integration of MCH and STDs/HIV/AIDS services into FP services at St. Louis and Kaolack clinics	NCA/SEN/001-2	No. of new users recruited and people informed	(Achievements combined with those under I.1.b and I.1.3.a)	(Achievements combined with those under I.1.b and I.1.3.a)	(Achievements combined with those under I.1.b and I.1.3.a)

Strategic Objective III: Increased management, financial and technical capacity of local organizations and communities

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III.1 Strengthened program and organizational management capabilities	III.1.a. Hold workshop to provide TA to key ASBEF staff for Strategic Plan follow up and implementation	NCA/SEN-001-2	No. people trained through workshop	No. people trained through workshop -TBD	Discussions held with ABT Associates for feasibility studies on ASBEF's income generation activities.	Informal workshop held with key ASBEF staff and volunteers to propose income generation activities geared towards sustainability of the program after Pathfinder's departure. Discussions on this held with ABT Associates.
	III.2 Improve financial sustainability and resource diversification efforts	III.2 a. The above mentioned workshop will also select resource mobilization strategies for implementation	NCA/SEN-001-2	No. people trained through workshop	No. people trained through workshop - TBD	Pathfinder has negotiated a subcontract to ABT Associates to conduct the feasibility study for ASBEF to determine the viability of previously proposed income generation projects.	Specific income generation activities to be undertaken by ASBEF were proposed during above workshop, including; a hotline for answering RH questions from the public, scanning services at both St Louis & Kaolack, a revolving fund for the purchase and re-sale of pharmaceutical products, a flour-grinding mill, a taxi and commercial fishing. ABT Associates have been identified to conduct the feasibility study to determine viability of these proposed income generation activities.

South Africa

Strategic Objective I: Increased management, financial, and technical capacity of local organizations

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	I 1 Implementation of long-term strategic plan	I 1.a Conduct strategic plan review to ensure PPASA's implementation of plan's specific activities, strategic approach, forward planning, options for growth	Support to PPASA	Strategic plan reviewed, enhanced annually Indicators, tracking process implemented	Timely implementation of planned activities System for annual review and plan tracking implemented	Facilitated first annual strategic plan review workshop; up-dated plan. Beginning initiative to institutionalize PPASA's strategic plan at all levels	First strategic plan review workshop
	I 2 Improve program planning, implementation procedures, and systems.	I 2.a Implement new protocols, guideline tools, indicators for program planning, development and monitoring	Support to PPASA	No of managers trained in planning and use of new protocols, guidelines, tools and indicators No of branches using new planning systems, tools, protocols, guidelines, No. of monitoring visits using new tools	At least 20 managers trained in program planning Guidelines to strengthen program planning, design monitoring completed, disseminated At least 8 branches and national office using new systems No of monitoring visits - TBD	Provided on-going TA in program management. Discussed new tools/ guidelines for program coordination and planning	Trained 14 managers in program planning Facilitated 1999 PPASA Program Planning and Review Workshop
		I 2.b. Conduct CBD Study Tour so that PPASA's capacity to implement effective systems that support effective CBD programs is enhanced	Support to PPASA	No persons on Study Tour	CBD tour for 6 persons conducted	No Data Reported	No Data Reported
	I.3. Enhanced management systems	I 3.a. To implement MIS/monitoring, evaluation systems; new guidelines, protocols, formats, tools, indicators, Review computer needs; computerize selected MIS/M & E/computer use	Support to PPASA	New and re-designed MIS, planning, and other management systems, tools, protocols, guidelines, formats introduced No of MIS/M&E applications, developed installed No of MIS/M&E workshops conducted by type No. staff trained in MIS use No staff trained in computer skills upgrade	Enhanced MIS, planning, and management systems in place Protocols, guidelines, formats introduced Better use of data by managers, MIS/M&E computer software applications developed and installed At least 20 managers, technical analysts trained	Provided on-going MIS TA.	Trained 20 managers in MIS
			Support to PPASA	MIS expanded to include financial data No. managers trained in upgraded financial management system Indicators, tracking process, upgraded financial management systems	Enhanced financial management and computerized systems At least 10 managers trained in upgraded financial management system use	Implemented first phase of PPASA financial management system upgrade Follow-on TA to be finalized.	Implemented first phase of PPASA financial management system upgrade Follow-on TA to be finalized.
		I 3 b. Expand MIS to track financial, fund raising data	Support to PPASA	No. of staff trained in data analysis	Improved data analyses skills; increased use of data for planning, monitoring, evaluating, resource allocation; at least 2 persons from Provincial office and 4 from National office trained	No Data Reported	No Data Reported

South Africa

Strategic Objective I: Increased management, financial, and technical capacity of local organizations

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I		I.4 b Prepare specific fundraising proposal to diversity and increase available resources	Support to PPASA	No of new fundraising proposals, strategies, guidelines developed Amount of new revenue generated/branch or National Office	At least 3 new fundraising proposals, strategies, guidelines developed % of budget from new revenues TBD	Continued participation on National Fund-raising Task Force; developed first major diversification proposal for innovative RH-environmental program.	Provided TA in developing draft PPASA "case statement" for fund raising; completed planning proposal for innovative RH-environmental program.
		I.4 c. Develop/design computerized donor and fundraising database	Support to PPASA	MIS upgraded to include fundraising data component	Donor database designed Substantial new revenues/resources available to support PPASA work and PI/PPASA partnership	Provided on-site TA to finalize software application capabilities for donor data base.	Fund-raising data base soft-ware application components determined.

Tanzania							
Strategic Objective I: Increased Access to and Availability of FP and RH services							
Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO 1	I 1 Expanded, improved or established FP and selected RH (including MCH) service delivery systems and infrastructure through multiple service delivery points (private, private, clinic-based, hospital-based, workbased-based and CBD)	I 1 a Expand coverage of community-based FP and RH services by increasing the number of CBD agents in SDA and TOHS sites	NCA/TAN 004-5 NCA/TAN 009-1	No of new acceptors CYP No of referrals No of persons informed	70,168 new acceptors 5,423 cases referred 85,066 CYP distributed 849,320 persons informed	15,119 new acceptors 733 cases referred 32 171 CYP distributed 266,705 persons informed	41,335 new acceptors 3,062 cases referred 84,646 CYP distributed 967,448 persons informed
		I 1 b Support clinic-based FP and RH services	NCA/TAN 004-5 NCA/TAN 007-1 NCA/TAN 009-1 NCA/TAN 010-1 NCA/TAN 011-1	No of new acceptors CYP No of referrals Total no of child welfare visits No of antenatal visits No of STD cases treated	8,340 new acceptors 1,627 referrals 18,564 CYP distributed 66,094 child welfare visits 57,326 antenatal visits 4,627 STD cases treated	(See I.1 a above) 30,101 child welfare visits 11,969 antenatal visits 1,643 STD cases treated	(See I 1 a above) 106,348 child welfare visits 33,269 antenatal visits 4,831 STD cases treated
		I 1 c Support hospital based FP and RH services	NCA/TAN 004-5 NCA/TAN 009-1	No of new acceptors CYP No of childwelfare visits No of antenatal visits No of STD cases treated	3,579 new acceptors 7,956 CYP distributed 28,326 child welfare visits 24,569 antenatal visits 4,627 STD cases treated	(See 1 1 b above) 27,216 child welfare visits 10,127 antenatal visits 1,033 STD cases treated	(See I 1 b above) 103,463 child welfare visits 33,269 antenatal visits 4,831 STD cases treated
		I 1 d Support workplace-based FP and RH services	NCA/TAN 007-1 NCA/TAN 009-1	No of new acceptors CYP No of referrals No of condoms distributed	22,547 new acceptors 15,946 CYPs 522 referrals 349,350 condoms distributed	(See I.1 c. above) 870,632 condoms distributed	(See I 1 c. above) 870,632 condoms distributed
SO 1	I 2 Expanded access for underserved groups and those at-risk, (including young adults and men)	I 2 a Expand the USDM RH project for youth to two new sites	NCA/TAN 010-1	No of new acceptors CYP No. of referrals No. of condoms distributed	4,555 new acceptors 6,425 CYPs 345 referrals 337,312 condoms distributed	No data provided	33 new acceptors 1566 CYPs 4,077 persons informed
		I 2 b Introduce postabortion services into the existing RH activities at TOHS Hospital	NCA/TAN 009-1	No of new acceptors		Postabortion not yet introduced	Postabortion not yet introduced
		I 2 c Support male-friendly services at SUWATA clinic	PF/TAN 019-1	No of new acceptors No of CYP distributed No of condoms distributed No of STD cases treated	TBD	Part of, money obtained activities to start Q3	Part of, money obtained activities to start Q3
SO 1	I 3 Enhanced environment for use of FP, RH and MCH services through IEC, and advocacy	I 3 a Support client-focused IEC activities for use of FP, RH and MCH services (including home visits, community meetings, educational talks, material adaptation, and dissemination)	NCA/TAN 004-5 NCA/TAN 007-1 NCA/TAN 009-1 NCA/TAN 010-1	No of persons informed No of IEC materials adapted No of IEC materials distributed	849,320 persons informed 5 IEC materials adapted 1,000 IEC materials distributed	(see I 1 a above) 10,000 IEC materials adapted 40,493 IEC materials distributed	(see I 1 a above) 10,000 IEC materials adapted 420,696 IEC materials distributed
		I 3 b Support advocacy meetings for community leaders to strengthen community participation in FP, RH, and MCH	NCA/TAN 004-5 NCA/TAN 007-1 NCA/TAN 009-1 NCA/TAN 010-1 NCA/TAN 011-1	No of meetings for community leaders held	44 meetings for community leaders held	10 meetings for community leaders held	74 meetings for community leaders held

Tanzania

Strategic Objective II: Improved quality of services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 1 Expanded range of appropriate contraceptive methods at clinic sites	II 1 a Introduce ECP services and link with ongoing FP services	NCA/TAN 007-1 NCA/TAN.009-1 NCA/TAN.010-1 NCA/TAN 011-1	No of clinics providing ECP services	15 clinics providing ECP services	15 clinics providing ECP services	15 clinics providing ECP services
SO II	II 2 Strengthen provider competence to deliver high quality FP and selected RH services (including MCH and STD and HIV/AIDS)	II.2 a Train service providers in basic and comprehensive FP and selected RH and MCH services	NCA/TAN:004-5 NCA/TAN 007-1 NCA/TAN:009-1 NCA/TAN.010-1 NCA/TAN:011-1	No of providers trained in basic and comprehensive FP and selected RH and MCH services	25 service providers trained in basic and comprehensive FP and selected RH and MCH services	No service providers trained in basic and comprehensive FP and selected RH and MCH services	28 service providers trained in basic and comprehensive FP and selected RH and MCH services
		II 2 b Train service providers in ECP	NCA/TAN 007-1 NCA/TAN.009-1 NCA/TAN 010-1 NCA/TAN 011-1	No of providers trained in ECP	25 service provider trained in ECP	No service provider trained in ECP	18 managers attended ECP Sensitization meeting
		II 2 c Train service providers in syndromic diagnosis and management of STDs	NCA/TAN 004-5 NCA/TAN 007-1 NCA/TAN:009-1 NCA/TAN 010-1 NCA/TAN.011-1	No of service providers trained in syndromic diagnosis and management of STDs	45 service providers trained in syndromic diagnosis and management of STDs	24 service providers trained in syndromic diagnosis and management of STDs	24 service providers trained in syndromic diagnosis and management of STDs
		II.2.d. Conduct refresher-training for CBDs in FP, selected RH and MCH services	NCA/TAN.004-5 NCA/TAN.007-1 NCA/TAN:009-1 NCA/TAN:010-1 NCA/TAN:011-1	No. of CBD agents re-trained in FP, selected RH and MCH services	800 CBD agents re-trained in FP, and selected RH services	47 CBD agents re-trained in FP, and selected RH services	47 CBD agents re-trained in FP, and selected RH services
		II 2 e Conduct refresher-training for clinic-based service providers in FP and selected RH and MCH services	NCA/TAN.004-5 NCA/TAN 007-1 NCA/TAN 009-1 NCA/TAN 010-1 NCA/TAN 011-1	No. of clinic based service providers re-trained in FP, selected RH and MCH services	40 service providers trained in CTU and reproductive health updates	No service providers trained in CTU and reproductive health updates	No service providers trained in CTU and reproductive health updates
		II 2 f Conduct refresher-training for peer educators in counseling and IEC	NCA/TAN:009-1 NCA/TAN 010-1	No. of peer educators re-trained in counseling and IEC	30 peer educators re-trained in counseling and IEC	35 peer educators re-trained in counseling and IEC	52 peer educators re-trained in counseling and IEC

Tanzania

Strategic Objective II: Improved quality of services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II.3 Enhanced constellation of FP and RH services available, where necessary and appropriate, including referral links for MCH, STD and HIV/AIDS services.	II.3.a. Strengthen the integration of STD/HIV/AIDS/CS/SM components into FP services in all PI-funded clinics	NCA/TAN 004-5 NCA/TAN 007-1 NCA/TAN.009-1 NCA/TAN.010-1 NCA/TAN 011-1	No. of SDPs providing integrated services	32 SDPs providing integrated services	33 SDPs providing integrated services	33 SDPs providing integrated services
		II.3.b Strengthen the integration of STD/HIV/AIDS/CS/SM components into FP services in all PI-funded community based projects	NCA/TAN 004-5 NCA/TAN 007-1 NCA/TAN 009-1 NCA/TAN 011-1 PF/TAN.019-1	No. of CBD sites providing integrated services	10 CBD sites providing integrated services	34 CBD sites providing integrated services	34 CBD sites providing integrated services
		II.3.c. Strengthen referral links for selected FP/RH/MCH services	NCA/TAN 004-5 NCA/TAN:007-1 NCA/TAN.009-1 NCA/TAN.010-1 NCA/TAN.011-1	No. of referrals for STD and FP services	5,423 cases referred for FP services and 238 cases referred for STD treatment	733 cases referred for FP services and 1,827 cases referred for STD treatment	(See I.1.b)
		II.3.b. Adapt IEC materials for integrated services	NCA/TAN:004-5 NCA/TAN:007-1 NCA/TAN.009-1 NCA/TAN.010-1 NCA/TAN:011-1 PF/TAN.019-1	No. of IEC materials adapted No. of IEC materials distributed	3 IEC material adapted for integrated services 400 IEC materials distributed	10,000 IEC material adapted for integrated services 40,493 IEC materials distributed	10,000 IEC material adapted for integrated services 70,696 IEC materials distributed
SO II	II.4. Improved quality assurance and quality management systems	II 4 a Strengthen QOC systems, including assessments techniques and adapt appropriate tools	NCA/TAN:004-5 NCA/TAN.007-1 NCA/TAN.009-1 NCA/TAN.010-1 NCA/TAN:011-1 PF/TAN 019-1	No. of SDPs using the adapted tools	32 SDPs using the adapted tools	33 SDPs using the adapted tools	40 SDPs using the adapted tools

Strategic Objective III: Increased management, financial and technical capacity of local organizations and communities

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III.1. Strengthen program and organizational management capabilities of local service delivery organizations	III.1.a. Conduct long-term strategic planning activities with local institutions	NCA/TAN.004-5 NCA/TAN.009-1	No. of institutions with strategic plans	2 institutions with strategic plans	1 institution with strategic plans	1 institution with strategic plans
		III.1.b. Strengthen organizational capacity to design and manage community-based FP and RH services	NCA/TAN:004-5 NCA/TAN:007-1 NCA/TAN:009-1 NCA/TAN:010-1 NCA/TAN:011-1 PF/TAN:019-1	No. managers trained in planning and management of community-based FP and RH services	30 managers trained in planning and management of community-based FP and RH services	25 managers trained in planning and management of community-based FP and RH services	25 managers trained in planning and management of community-based FP and RH services
		III.1.c. Increase development and utilization of management information systems for local implementing organizations	NCA/TAN:004-5 NCA/TAN:007-1 NCA/TAN:009-1 NCA/TAN:010-1 NCA/TAN:011-1 PF/TAN:019-1	No. of managers trained in collection and use of data	30 managers trained in collection and use of data	5 local partners using new MIS/PMP indicators for data collection	3 Managers trained in Monitoring/Evaluation; 93 Supervisors/CBD workers trained in MIS; 5 local partners using new MIS/PMP indicators for data collection
SO III	III.2. Improved financial sustainability of local service delivery organizations	III.2.a. Improved budgeting, financial planning and management of local organization by providing on-the-job training to financial managers	NCA/TAN:004-5 NCA/TAN:007-1 NCA/TAN:009-1 NCA/TAN:010-1 NCA/TAN:011-1	No. of financial managers trained	3 financial managers trained	25 managers trained in development of sustainability plans 5 sustainability plans developed	5 financial managers trained in recordkeeping and reporting; 25 managers trained in development of sustainability plans; 5 sustainability plans developed
		III.2.b. Strengthen utilization of standard accounting and auditing systems by reviewing current system and providing instant feedback	NCA/TAN:004-5 NCA/TAN:007-1 NCA/TAN:009-1 NCA/TAN:010-1 NCA/TAN:011-1 PF/TAN:019-1	No. of project finance managers receiving on-the-job training in financial management and accounting	5 project finance managers receiving on-the-job training in financial management and accounting	5 project finance managers receiving on-the-job training in financial management and accounting	13 project finance managers receiving on-the-job training in financial management and accounting
		III.2.c. Improve financial recordkeeping and reporting of local organization through on-the-job training of financial managers	NCA/TAN:004-5 NCA/TAN:007-1 NCA/TAN:009-1 NCA/TAN:010-1 NCA/TAN:011-1 PF/TAN:019-1	No. of financial managers trained in recordkeeping and reporting	5 financial managers trained in recordkeeping and reporting	No data provided	5 financial managers trained in recordkeeping and reporting

Tanzania

Strategic Objective III: Increased management, financial and technical capacity of local organizations and communities

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III.3. Improved technical capacity of local service delivery organizations	III.3.a. Provide technical assistance to local service delivery organizations in QOC, integration, reproductive health, financial management, and MIS	NCA/TAN:004-5 NCA/TAN:007-1 NCA/TAN:009-1 NCA/TAN:010-1 NCA/TAN:011-1 PF/TAN:019-1	No. of person-days of TA provided in the following areas: QOC, integration, financial management, reproductive health, and MIS	577 person-days of TA provided in the following areas: QOC, integration, financial management, reproductive health, and MIS	No data provided	No data provided

Uganda

Strategic Objective I: Increase access to and availability of FP and RH services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
SO 1	I.1. Expanded, improved, or established FP and RH services delivery system and infrastructure through multiple service delivery approaches (including public, private, hospital based, work based, CBD, home-based and social marketing)	I.1.a. Review CBD catchment areas to determine RH needs, resource requirements and rational allocation/distribution of CBDs	UCA/UGA 001-1 UCA/UGA.002-1 UCA/UGA 003-1 UCA/UGA 004-1 UCA/UGA 005-1	Cost per CYP No. of homesteads per CBD	Significant decrease in cost per CYP 100-150 homes per CBD	Reduced No. of homesteads per CRHW to 100 Relocated referral clinics in EAD to improve proximity, closed non-productive mobile clinic sites, increased number of CRHWs in some areas in Masindi project	Conducted review of all CRHW catchment areas in FLEP, EAD, Masindi and Kasese projects Rationalized deployment of CRHWs, re-located referral clinics in EAD, re-organized referral system in 4 projects, closed non-productive mobile clinic sites, established clinic services and increased number of CRHWs in some areas in Masindi project.
		I.1.b. Increase number of CBDs in Masindi and Luwero district	UCA/UGA 002-1 UCA/UGA.004-1	Increase in number of CBDs in target district Increase in number of catchment areas	25 new CBDs in Masindi 25 new CBDs in Luwero 4 new areas of operation in Luwero	Selected 30 new CRHWs in Masindi.	Luwero project closed in August 1998. Selected 30 new CRHWs in Masindi project
		I.1.c. Introduce home-based care for PWAs in FLEP, Kasese, IMAU, Masindi for HIV/AIDS services	NCA/UGA 001-3 UCA/UGA:003-1 UCA/UGA:004-1 UCA/UGA:005-1	No. of home-based care givers trained No. of HIV/AIDS patients served by trained home care givers	750 home-based care givers trained At least 750 patients served	Conducted a two-day orientation workshop for 35 people - district officials, directors, managers and supervisors.	Conducted a two-day orientation workshop for 35 people - district officials, directors, managers and supervisors.
		I.1.d. Introduce work-based RH services at two sites each in Jinja, Masindi, Kasese	NCA/UGA.001-3 UCA/UGA 004-1 UCA/UGA 005-1	No. of workplaces providing FP and RH services No. of clients served	6 workplaces providing RH services 2,400 clients served	Conducted one-day orientation for 35 people from 4 projects - district officials, directors, managers, and supervisors. Conducted an assessment of Kinyara Sugar Works and Hima cement factory as possible sites where work-based services will be established.	Conducted one-day orientation for 35 people from 4 projects - district officials, directors, managers, and supervisors. Conducted an assessment of Kinyara Sugar Works and Hima cement factory as possible sites where work-based services will be established.
		I.1.e. Pilot cervical cancer screening in Jinja FLEP clinic	NCA/UGA:001-3	No. of facilities equipped No. of service providers trained No. of clients served	Jinja and Kamuli FLEP clinics equipped 12 service providers trained 300 clients served		Two FLEP managers/trainers participated in three-day regional workshop on management of Cervical cancer management initiatives
	I.1.f. Support CBD services in 11 districts	NCA/UGA.001-3 NCA/UGA.004-2 UCA/UGA:001-1 UCA/UGA:002-1 UCA/UGA:003-1 UCA/UGA.004-1 UCA/UGA 005-1	No. of new acceptors No. referrals No. of CYP No. of active CBD agents per subproject	206,023 new clients 11,054 referrals 45,330 CYP CBD agents: 172 FLEP, 86 EAD, 60 YWCA, 80 SDA, 57 IMAU, 55 Masindi, 95 Kasese	---- new clients, ---- revisits, ---- CYPs, CBD agents: 172 FLEP, 84 EAD, 55 Masindi, 95 Kasese	---- new clients, ---- revisits, ---- CYPs, CBD agents: 172 FLEP, 84 EAD, 55 Masindi, 95 Kasese	

Uganda

Strategic Objective I: Increase access to and availability of FP and RH services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
SO I	I.2 Expanded services for undeserved groups and those at risk [male, youth, refugees]	I.2 a Provide services to youth	NCA/UGA:001-3 UCA/UGA:001-1 UCA/UGA:004-1 UCA/UGA:005-1	No of sexuality education sessions held for youth No. of peer counselors trained No. of types of IEC materials distributed No. of schools participating No. of educational activities for youth	456 session in school or groups 38 schools participating 380 peer counselors trained Distribute 4 types of IEC materials Organize at least two quiz competitions, debates, Q&A sessions per school	45 sexuality education sessions conducted. 18 in FLEP, 15 in Masindi and 12 in Kasese.	115 sexuality education sessions conducted, targeted 27 schools and 6 youth groups, 6 types of materials distributed
		I.2 b. Provide services to young women	NCA/UGA:001-3 UCA/UGA:001-1 UCA/UGA:005-1	No of sexuality education sessions held for young women No. of peer counselors trained No. of types of IEC materials distributed No of groups participating	2310 sessions conducted for 36 groups 10 sexuality educators trained in Kasese 3 IEC materials reproduced and distributed 36 women groups participating	27 sexuality education sessions conducted for women in 12 groups.	94 sessions conducted, 24 women groups participating and 5 types of IEC materials distributed
		I.2.c. Provide services to men	NCA/UGA:001-3 UCA/UGA:004-1 UCA/UGA:005-1	No of male only group talks conducted No. of CBDs trained in male motivation skills No. of peer counselors trained, specialized services provided to target group	Train Masindi and Kasese CBDs in male motivation skills Train peer counselors in Kasese and Masindi Open a male clinic in Masindi and Kasese Support activities outlined in the STD strategy	Film shows and IEC materials for STD strategy were distributed.	97 film shows, 3 drama shows and 2 types of IEC materials for STD strategy were distributed. These activities were conducted in 4 projects and targeted men
		I.2 d. Provide services to low income women	NCA/UGA:001-3	No. of sexuality education sessions conducted for target group No. of clients served per service No. of women participating in loan revolving scheme Pre-payment scheme established	70 sessions conducted 6 groups participating in loan revolving scheme Pre-payment scheme established for low income women	16 women groups participating in loan scheme	16 women groups participating in loan scheme.
SO I	I.3 Enhanced environment for use of FP and RH services through selected IEC and advocacy interventions [male, youth, refugees]	I.3 a. Support community health fair and campaign in CBD catchment areas	NCA/UGA:001-3 NCA/UGA:004-2 UCA/UGA:001-1 UCA/UGA:002-1 UCA/UGA:003-1 UCA/UGA:004-1 UCA/UGA:005-1	No of health fairs conducted	Conduct at least 121 health fairs	34 film shows were shown in the 4 projects.	21 health fairs organized, 8 types of IEC materials distributed. These activities were conducted in 4 projects with participation of TAŞO, AIC, schools within the catchment areas and other community based organizations. Health fairs had a variety of activities including displays, film and drama, music presentations and counseling and clinic services.

Strategic Objective I: Increase access to and availability of FP and RH services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
		I.3.b. Distribute IEC materials	NCA/UGA:001-3 NCA/UGA:004-2 UCA/UGA:001-1 UCA/UGA:002-1 UCA/UGA:003-1 UCA/UGA:004-1 UCA/UGA:005-1	No. of types of IEC materials distributed % of target population reached by type of material	Distribute 4 types of IEC materials Reach 80% of target population	Four types of IEC materials were distributed. Three materials with nutrition messages and one with message promoting HIV testing.	12 types of IEC materials with messages on FP, maternal health, nutrition and STD, HIV/AIDS prevention. These materials were distributed by CRHWs, service providers and community leaders.
		I.3.c. Support community IEC campaigns focused on men to increase awareness, knowledge and adoption of STI, HIV/AIDS prevention practices	NCA/UGA:001-3 UCA/UGA:004-1 UCA/UGA:005-1	No. of campaigns conducted Increase in utilization of service by men Change in men's knowledge and attitudes	Conduct at least 67 campaigns targeting men Double the number of male clients Change in men's knowledge and attitudes		Organized 97 film shows and 3 drama shows targeting men. These community activities included distribution of IEC materials. The number of vasectomy clients in FLEP increased from an average of 6 per quarter to 9.
		I.3.d. Conduct district campaigns for HIV testing/counseling and family planning	DISH contract	No. of campaigns per district conducted	Conduct 2 campaigns per district		
		I.3.e. Produce two 25 minute episodes of "Time to Care" video with HIV testing and counseling messages	DISH contract	No. of episodes produced	2 episodes produced		
		I.3.f. Show "Time to Care" videos in the communities surrounding rural rapid testing sites	DISH contract	No. sites where video shown	Video shown at 20 sites		

Uganda							
Strategic Objective II: Improve quality of service and contraceptive method mix							
Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 1. Expand range of appropriate contraceptive methods available	II 1 a Establish VSC services in EAD by equipping facility and training doctor/nurse team	NCA/UGA'004-2	Facility equipped Doctor/nurse team equipped and deployed	One facility equipped One team trained and deployed	Not to be done (cancelled)	Not to be done (cancelled)
SO II	II.2. Strengthen provider competence to deliver high quality FP and selected RH services	II 2.a Train nurse/midwives from CBD referral clinics in comprehensive RH including life-saving skills	NCA/UGA'001-3 NCA/UGA'004-2 UCA/UGA'001-1 UCA/UGA'002-1 UCA/UGA'003-1 UCA/UGA'004-1 UCA/UGA'005-1 DISH	No of service providers trained and providing services	239 service providers trained and providing services (42 supported under NCA and UCA, 197 trained under DISH)	Conducted initial training of 38 service providers in IUD insertion and removal. Provided refresher training in IUD insertion and removal to 24 practitioners and contraceptive technology up-date to 32 service providers	53 service providers trained in comprehensive RH services Conducted initial training of 38 service providers in IUD insertion and removal Provided refresher training in IUD insertion and removal to 24 practitioners and contraceptive technology up-date to 32 service providers
		II 2 b Provide nutrition training to Kasese CBDs and supervisors	UCA/UGA'005-1	No. of persons trained	78 CBDs and 13 supervisors trained in nutrition	Done earlier- in June	78 CBDs and 13 supervisors trained in nutrition
		II 2 c. Re-enforce IEC skills of CRHWs	NCA/UGA:001-3 NCA/UGA:004-2 UCA/UGA:001-1 UCA/UGA:002-1 UCA/UGA:003-1 UCA/UGA:004-1 UCA/UGA:005-1	No. of trained and active CRHWs	545 CRHWs trained and active	Supplied safe motherhood flip charts to 45 VHWs and demonstration kits to 94 VHWs	258 CRHWs trained, supplied with additional IEC materials (demonstration kits, flip charts)
		II 2.d Conduct training in PAC for midwives and nurses	DISH contract	No. of nurses and midwives trained	20 nurses and midwives trained		
		II.2.e. Conduct follow-up support supervision of nurses and midwives in PAC	DISH contract	No. PAC trainees supervised at least 3 times	20 trainees supervised at least 3 times		
		II.2.f. Conduct follow-up support supervision of nurses and midwives in integrated services	DISH contract	No. of integrated services trainees supervised at least two times	850 trainees supervised at least 2 times		
SO II	II.3 Improve quality assurance and quality management systems	II 3 a Conduct workshop to develop tools to monitor the impact of integration and its shortcomings	NCA/UGA'001-3 NCA/UGA:004-2 UCA/UGA'001-1 UCA/UGA'003-1 UCA/UGA'004-1 UCA/UGA'005-1	No of NGOs monitoring progress of integration using the tools	7 NGOs using the NGOs	Refined tool used by "Quality of care monitors" to collect community views and perception about the quality of services.	Refined tool used by "Quality of care monitors" to collect community views and perception about the quality of services.
		II 3.b Develop QOC center of excellence [training and demonstration site]	UCA/UGA'005-1	No. of service providers trained No of QOC facilities developed	15 service providers trained Kasese St Paul Health center developed as QOC center of excellence		

Strategic Objective II: Improve quality of service and contraceptive method mix

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
		II.3.c. Train nurse/midwives from CBD referral clinics in QOC	NCA/UGA:001-3 NCA/UGA:004-2 UCA/UGA:003-1 UCA/UGA:005-1	No. of nurse/midwives trained and deployed in QOC	72 persons trained		63 medical practitioners trained in QOC
		II.3.d. Institute self-assessment approach to monitor and improve QOC	NCA/UGA:001-3 NCA/UGA:004-2 UCA/UGA:003-1 UCA/UGA:005-1	No. of SDPs using self-assessment approach No. of assessments conducted	69 SDPs using self-assessment approach 2 assessments per year in 78 clinics	62 SDPs using self assessment approach 24 quality audits conducted in FLEP	Continued to use self assessment approach in 49 FLEP clinics and strengthened system in EAD, introduced it in 7 Kasese clinics and 4 Masindi clinics. Conducted special quality audits in all sub-projects (At least 1 audit per clinic per quarter).
		II.3.e. Renovate selected health facilities in DISH districts.	DISH contract	No. of facilities renovated	No. of facilities renovated - TBD		
		II.3.f. Conduct focus group and client satisfaction surveys	DISH contract	No. of surveys conducted and disseminated	No. of surveys conducted - TBD		
		II.3.g. Coordinate IEC operations research on client attitude, knowledge and behavior	DISH contract	Operations research conducted and disseminated	TBD		
		II.3.h. Prepare 1999 community and facility surveys	DISH contract	Written implementation plan	TBD		

Uganda

Strategic Objective III: Increased management, financial, and technical capacity of local organizations

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-date Achievements
SO III	III.1. Strengthen program management capabilities of local service delivery organizations	III 1.a Facilitate formal signing of memorandum of understanding between FLEP and districts [sustainability strategy]	NCA/UGA'001-3	Signed memorandum Contribution from local government	4 memorandums signed Local government contribution to 25 clinics	8 memoranda signed with local government	25 memoranda signed, 17 in FLEP, 2 in Masindi and 6 in Kasese
		III 1 b. Facilitate development of marketing strategy [resource diversification strategy]	NCA/UGA'001-3	Marketing strategy developed	Strategy developed	Strategy not ready	Strategies not ready but prepared five proposals for FLEP including an RFP for a nutrition project, and one proposal for Masindi. Preliminary results of the technical proposal show FLEP in the lead although final award is not yet granted the rest of the four FLEP proposals were funded and Masindi proposal was also funded
		III.1.c. Modify HMIS service statistics application to become a more open platform	DISH contract	No. of non-DISH districts (and MOH) using application	No. of districts using application - TBD		
SO III	III.2. Improve financial sustainability of local service delivery organizations	III.2.a. Conduct consultative meetings with district and sub-county level officials [solicit contribution and participation in FLEP sustainability efforts]	NCA/UGA:001-3	No. of meetings conducted	72 meetings conducted	16 meetings conducted at 8 sub-counties	58 meetings conducted at sub-county level
		III.2 b. Facilitate management of FLEP's endowment from USAID	NCA/UGA.001-3	Endowment funding well-managed	Endowment fund invested in USA		
		III 2.c. Develop financial management systems to monitor cost-effectiveness and efficiency	NCA/UGA'001-3	Financial management system developed	System developed in FLEP		
		III.2.d Provide TA to UNICEF on TOT for FFS and financial management	DISH contract	No. of people trained on TOT	No. of people trained - TBD		
		III 2 e Train 4 hospitals in const-sharing by establishing fee-for-service programs	DISH contract	No. of hospitals participating in training	4 hospitals participating in training		

Results Frameworks

Asia

Indonesia							
Strategic Objective I: Increased Access to and Availability of FP and RH Services							
Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievement	Quarter 3 Achievements	Year-To date Achievements
SO 1	I.1 Ensured Availability of Low Cost FP Services for Poor and Near Poor Populations	I.1 a. Procure contraceptive supplies	SDES	Copper-T IUDs Norplant	1,100,000 Copper-T IUDs 228,000 Norplant		1,100,000 IUD + 288,000 Norplants received by BKKBN
		I.1.b. Identify target populations and criteria for distribution of IUD and Norplant in 11 SDES Provinces	SDES	Terms of Reference for distribution	Terms of Reference for contraceptive distribution developed		691 village midwife posts supported 818,000 contraceptive labels 60,000 guidebooks produced
		I.1.c. Monitor distribution of contraceptives by BKKBN	SDES	Report on distribution	Report on distribution of contraceptives completed		496,937 USAID IUDs distributed and 55,000 Norplant implants Distributed
	I.2. Ensured Access to FP Services through Multiple Service Delivery Systems	I.2 a. Support clinic-based FP and RH services and ensure access to long-acting sustainable contraceptive methods (particularly IUD and VS)	NCA/IND:055-4 NCA/IND:057-4 NCA/IND:058-4 NCA/IND:059-4 NCA/IND:060-4 NCA/IND:061-3 NCA/IND:062-3 NCA/IND:063-2 NCA/IND:064-2 NCA/IND:065-2 NCA/IND:066-2 NCA/IND:067-2 NCA/IND:068-2 NCA/IND:069-2	No. new acceptors by method	3,551,779 new acceptors served by all grantees	804,565 new FP acceptors served by all grantees	3,253,175 new FP acceptors served by all grantees
				No. of SDPs renovated, equipped or receiving administrative support	428 SDPs renovated, equipped, or receiving administrative support including, 92 village midwife posts; 203 gov't clinics and hospitals; 133 NGO clinics	104 SDPs renovated, equipped, or receiving administrative support	301 SDPs renovated, equipped or receiving administrative support
		I.2 b. Maintain access to FP and RH services through NGO clinics	NCA/IND:055-4 NCA/IND:057-4 NCA/IND:059-4 NCA/IND:067-2 NCA/IND:068-2 NCA/IND:069 2	No. of NGO clinics providing services	134 NGO clinics providing services		144 NGO clinics providing services
				No. of NGO clinics renovated and equipped	133 NGO clinics renovated, equipped, or receiving administrative support	32 NGO clinics renovated, equipped or receiving administrative support	103 NGO clinics renovated, equipped ore receiving administrative support
				No. of FP clients served through NGO clinics	36,305 new acceptors served through NGO clinics		26,389 new acceptors served through NGO clinics
		I.2 c. Conduct medical team visits to provide IUD and VS services in areas where access is limited	NCA/IND:058-4 NCA/IND:060-4 NCA/IND:061-3 NCA/IND:062-3 NCA/IND:063-2 NCA/IND:064-2 NCA/IND:065-2 NCA/IND:066-2	No. of team visits conducted	1,046 VSC Visiting Specialist Visits 14,118 Integrated Service Visits 6732 IUD home visits 960 Specific Visits by IBI/IDI 96 NGO mobile visits	1,107 VSC visiting specialist visits conducted 2,534 Integrated service visits conducted 15,422 IUD home visits conducted by midwives 771 IBI/IDI service visits conducted 412NGO mobile visits conducted	1,758 visiting specialist visits conducted 3,016 integrated service visits conducted 23,128 IUD home visits conducted by midwives 1,132 IBI/IDI service acivities conducted 460 NGO mobile visits conducted

Indonesia

Strategic Objective I: Increased Access to and Availability of FP and RH Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-To date Achievements
SO I		1.2.d. Provide FP and RH services through midwives at the village level	NCA/IND:058-4 NCA/IND:060-4 NCA/IND:061-3 NCA/IND:062-3 NCA/IND:063-2 NCA/IND:064-2 NCA/IND:065-2 NCA/IND:066-2	No. of village midwife posts supported	92 village midwife posts supported	643 village midwife posts supported (renovated or equipped)	691 village midwife posts supported
				No. of village midwife service visits conducted	119,837 Midwife service visits conducted	68,092 midwife service visits conducted	120,377 midwife service visits conducted
		1.2.e. Maintain access to contraceptive supplies distributed through combined medicine and contraceptive distribution posts (PAKBD/POD) at the village level	NCA/IND:058-4 NCA/IND:060-4 NCA/IND:062-3 NCA/IND:063-2 NCA/IND:064-2 NCA/IND:066-2	No. of PAKBD/POD supported to distribute contraceptives	119 PAKBD/POD supported	99 PAKBD/POD supported (renovated/equipped)	163 PAKBD/POD supported (renovated/equipped)
	1.3. FP Services Maintained and Promoted	1.3.a. Develop IEC materials to promote use of IUD and VS and other FP methods	NCA/IND:055-4 NCA/IND:059-4 NCA/IND:060-4 NCA/IND:061-3 NCA/IND:062-3 NCA/IND:063-2 NCA/IND:064-2 NCA/IND:065-2 NCA/IND:066-2 NCA/IND:069-2	No. and type of IEC materials produced and distributed	86,000 printed IEC materials 6,200 mass media materials	49,026 printed IEC materials produced 5,822 mass media materials produced	96,545 IEC materials produced 11,867 mass media materials produced
		1.3.b. Support IEC activities to maintain contraceptive use and promote use of sustainable, long-acting methods	NCA/IND:055-4 NCA/IND:058-4 NCA/IND:059-4 NCA/IND:060-4 NCA/IND:061-3 NCA/IND:062-3 NCA/IND:063-2 NCA/IND:064-2 NCA/IND:065-2 NCA/IND:066-2 NCA/IND:069-2	No. of IEC outreach visits conducted, No. of IEC meetings conducted; No. of people informed through IEC outreach and meetings	212,935 IEC outreach visits conducted; 10,889 IEC meetings conducted; 1,609,957 persons informed through IEC outreach and meetings	66,981 IEC outreach visits conducted 1,101 IEC meetings conducted 200,852 people informed through IEC visits and meetings	110,343 IEC outreach visits conducted 3,162 IEC meetings conducted 775,598 people informed through IEC visits and meetings
			No. of people attending orientations/seminars	5,045 people attending orientations 155 people attending workshop on VSC	11,445 people attending orientations	15,879 people attending orientations	
1.4. Health Effects of the Economic Crisis Monitored	1.4.a. Collaborate with BKKBN, USAID and other CAs on conducting research that monitors the health effects of the economic crisis.	SDES	Review impact of crisis on FP use as part of the SDES evaluation	Report on impact of crisis on FP use to be included in SDES evaluation	Report on the impact of the crisis on FP completed. The BKKBN Crisis Center is being developed.	Report on the impact of the crisis on FP completed. The BKKBN Crisis Center is being developed.	

Indonesia							
Strategic Objective II: Improved Quality of Services and Contraceptive Method Mix							Year-to-Date
Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date
SO II	II 1. Strengthened Provider Competence to Deliver High Quality FP Services	II 1 a Train doctors and midwives in target areas in IUD and VS	NCA/IND.058-4 NCA/IND.060-4 NCA/IND 061-3 NCA/IND 062-3 NCA/IND 063-2 NCA/IND 064-2 NCA/IND 065-2 NCA/IND 066-2	No. of midwives trained in IUD insertion and removal	662 midwives trained in IUD	766 village midwife trained in IUD insertion and removal	1,218 Village midwife trained in IUD Insertion and removal
				No. of providers trained in VS	218 providers trained in VS	140 providers trained in VS clinical skills	249 providers trained in VS clinical skills
		II 1 b. Train midwives and field workers to improve counseling skills	NCA/IND 058-4 NCA/IND 060-4 NCA/IND 061-3 NCA/IND.062-3 NCA/IND.063-2 NCA/IND 064-2 NCA/IND.065-2 NCA/IND 066-2	No. of midwives and field workers trained in counseling	773 midwives and 952 field workers trained in counseling	742 midwives and 112 field workers trained in IPC/Counseling	1,300 midwives and 418 field workers trained in IPC/C counseling
		II 1 c Develop standard guidelines for village midwives/providers	NCA/IND 055-4 NCA/IND.057-4 NCA/IND.058-4 NCA/IND 060-4 NCA/IND 062-3 NCA/IND.063-2 NCA/IND 064-2 NCA/IND.065-2	No. of guidebooks and manuals produced and disseminated	54,300 guidebooks and manuals for providers developed	3000 pocket guides for providers developed	7,600 pocket guides for providers developed
		II.1.d. Conduct Peer Review activities for midwives	NCA/IND 067-2	No. of midwives trained in Peer Review	23 midwives trained in Peer Review		
				No. of Peer Review activities conducted	48 Peer Review activities conducted		
				No. of midwives trained as trainers	48 midwives trained as trainers	791 midwives trained as trainers	791 midwives trained as trainers
		II 1 e Support Village Midwife Apprenticeship program at IBI clinics	NCA/IND 067-2	No. of IBI clinics conducting Apprenticeship program	10 IBI clinics conducting village midwife apprenticeship program		
				No. of village midwives trained through apprenticeship program	120 village midwives trained through apprenticeship program		
		II 1 f Support the National Clinical Training Network	NCA/IND 060-4	No. of Trainers Trained	60 provincial trainers trained instandardization of clinical skills and 40 trainers trained in IPC/Counseling		40 trainers trained in IPC/Counseling
				No. of Training Manuals produced	3,300 guidebooks produced (1,200 IUD, 1,600 pocket guides, 500 IPC/Counseling)		1,700 training manuals produced (1,200 IUD and 500 IPC/counseling)

Strategic Objective II: Improved Quality of Services and Contraceptive Method Mix

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 2 Improved Quality Assurance and Quality Management Systems	II 2 a Conduct Quality Assessment as part of the SDES evaluation	NCA/IND 060-4	Quality Assessment conducted	Report of Quality Assessment produced	Started data entry and analysis stage	SDES Evaluation Consultant hired PPKUI identified as the agency to undertake the assessment Enter data entry and analysis stage
		II 2.b Conduct Quality Assurance Team Visits to monitor quality of services	NCA/IND 058-4 NCA/IND.060-4 NCA/IND.061-3 NCA/IND.062-3 NCA/IND 063-2 NCA/IND 064-2 NCA/IND:065-2 NCA/IND 066-2	No of QA team visits conducted	554 QA team visits conducted	463 QA team visits conducted	803 QA visits conducted

Indonesia							
Strategic Objective III: Increased Management, Financial and Technical Capacity of Local Organizations							
Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III 1 Strengthened Program Management Capabilities of Local Organizations at all levels	III 1 a In collaboration with the POLICY project, train central BKKBN and provincial staff in strategic planning	SDES	No of staff trained in strategic planning	390 provincial BKKBN staff trained in strategic planning	306 people trained	443 people trained
		III 1 b Train NGO staff in clinic management and program planning	NCA/IND 059-4 NCA/IND 067-2 NCA/IND 068-2 NCA/IND:069-2	No of NGO staff trained	395 NGO staff trained in clinic management 86 NGO staff trained in financial management	95 NGO staff trained in clinic management and 45 NGO staff trained in financial management	291 NGO staff trained in clinic management 45 NGO staff trained in financial management
		III 1 c Support two Central BKKBN staff for training in logistics management	NCA/IND 060-4	No of staff trained	2 people trained		

Results Frameworks

Latin America and the Caribbean

Bolivia

Strategic Objective I: Increased Access to and Availability of FP and RH Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievement	Year-to-date Achievements
SO 1	1.1 Expanded Access to and availability of FP and RH service delivery systems and infrastructure through multiple service delivery points (including public, private clinic-based, hospital-based, workplace-based, CBD cross-sectional NGOs)	1.1.a. Support community based FP and RH services	NCA/BOL:019-5 NCA/BOL:022-1 NCA/BOL:024-2 NCA/BOL:901-2	No. of new acceptors No of CYPs	10,772 new acceptors 2,580 CYPs	PSS Report	All method specific data are aggregated. See Quantitative report for outputs
		1.1.b. Support clinic and hospital-based services	NCA/BOL:016-5 NCA/BOL:019-5 NCA/BOL:022-1 NCA/BOL:024-2 NCA/BOL:028-1 NCA/BOL:029-1 NCA/BOL:030-1 NCA/BOL:901-2	No. of New Acceptors No of CYPs	31,076 new acceptors 53,505 CYPs	PSS Report	All method specific data are aggregated. See Quantitative report for outputs
		1.1.c. Support integrated services including FP and RH	NCA/BOL:016-5 NCA/BOL:019-5 NCA/BOL:022-1 NCA/BOL:024-2 NCA/BOL:028-1 NCA/BOL:029-1 NCA/BOL:030-1 NCA/BOL:901-2	No of SDPs Total no. of pregnant women with at least one prenatal control before 5th month Total no. of pregnant women with four or more prenatal control	161 SDPs 24,283 pregnant women with at least one prenatal control before 5th month 24,283 pregnant women with four or more prenatal controls		101 SDPs 7,088 pregnant women with at least one prenatal control before 5th month 17,963 pregnant women with four or more prenatal controls
	1.2. Expanded access for undeserved groups and those at-risk including young adults, men, and hard-to-reach regions and populations	1.2.a. Support adolescents projects	NCA/BOL:901-2 NCA/BOL:022-1 NCA/BOL:024-2	No. of first consultations by adolescents No. of adolescents who receive RH/FP services No. of adolescents who receive PP/PA services	7,200 first consultations by adolescents 1,800 adolescents who receive RH/FP services 180 adolescents who receive PP/PA services		
		1.2.b. Support postpartum projects	NCA/BOL:016-5 NCA/BOL:019-5 NCA/BOL:022-1 NCA/BOL:024-2 NCA/BOL:029-1 NCA/BOL:030-1 NCA/BOL:901-2	No. of PP new acceptors	2,618 PP new acceptors	178 PP new acceptors	1,392 PP new acceptors
		1.2.c. Support postabortion projects	NCA/BOL:016-5 NCA/BOL:019-5 NCA/BOL:022-1 NCA/BOL:024-2 NCA/BOL:029-1 NCA/BOL:030-1 NCA/BOL:901-2	No. of PA SDPs No. of PA new FP acceptors before discharge No of PA new FP acceptors 7 days after discharge No of PA women who return to a follow-up visit during 7 days after discharge No SDPs	63 PA SDPs 2,930 PA new FP acceptors before discharge 436 PA new FP acceptors 7 days after discharge 1,802 PA women who return to a follow-up visit during 7 days after discharge 5 SDPs		

Strategic Objective I: Increased Access to and availability of FP and RH Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 2 Achievements	Year to Date Achievements
SO I		1.2.d. Incorporate PA care protocols to the hospitals' norms	NCA/BOL:901-2	No. of hospitals utilizing a post-abortion flowchart	5 hospitals utilizing a post-abortion flowchart	3 hospitals utilizing a post-abortion flowchart	3 hospitals utilizing a post-abortion flowchart
		1.2.e. Expand services to hard-to-reach populations and regions	NCA/BOL:028-1	No. of new users No. of CYPs No. of SDPs No. of CBD agents	567 new users 1,125 CYPs 2 SDPs 72 CBD agents	127 new users 26 CYPs 1 SDPs 69 CBD agents	303 new users 165 CYPs 1 SDPs 69 CBD agents
	1.3. Enhanced environment for use of FP, RH and MCH services through selected IEC, research and advocacy interventions	1.3.a. Support client-focused IEC activities for FP, RH and MCH services through selected IEC, and advocacy interventions	NCA/BOL:019-5 NCA/BOL:022-1 NCA/BOL:024-2 NCA/BOL:028-1 NCA/BOL:029-1 NCA/BOL:030-1 NCA/BOL:901-2	Total number of home visits No. of adults informed No. of IEC activities No. of PA patients who received counseling before discharge	87,510 home visits 262,500 adults informed 177,097 IEC activities 3,815 PA patients who received counseling before discharge	PSS REPORT	All method specific data are aggregated. See Quantitative report for outputs
		1.3.b. Support IEC activities for adolescents	NCA/BOL:022-1 NCA/BOL:024-2 NCA/BOL:901-2	No. of adolescents informed No. of meetings with adolescents		PSS REPORT	All method specific data are aggregated. See Quantitative report for outputs
		1.3.c. Support IEC activities for adolescents through community interventions	NCA/BOL:016-5 NCA/BOL:019-5 NCA/BOL:022-1 NCA/BOL:024-2 NCA/BOL:028-1 NCA/BOL:029-1 NCA/BOL:030-1 NCA/BOL:901-2	No. of promoters carrying IEC activities for adolescents No. IEC materials reproduced/disseminated	15 promoters carrying IEC activities for adolescents 100,000 IEC materials reproduced or disseminated	6 promoters carrying IEC activities for adolescents	6 promoters carrying IEC activities for adolescents
		1.3.d. Support the reproduction of IEC materials	FOCUS	No. of organizations motivated and contacted through the adolescents Program	50 Organizations motivated and contacted through the adolescents program	8 Organizations motivated and contacted through the adolescents program	8 Organizations motivated and contacted through the adolescents program
		1.3.e. Increase and strengthen community-level participation in FP, RH and MCH (advocacy)	FOCUS	Baseline development	3 Baseline development		
		1.3.f. Support research on FP, RH and MCH, (including epidemiological and demographic or impact surveys, catchment area surveys, KAP studies, client or provider focus groups, program evaluations and needs assessments	FOCUS	Qualitative research	3 Qualitative research	2 Qualitative research are being developed	2 Qualitative research are being developed

Bolivia

Strategic Objective I: Increased Access to and availability of FP and RH Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year to Date Achievements
SO I		I.3.g. Development of an evaluation tool for adolescents programs	FOCUS	Evaluation tool developed	1 Evaluation tool developed		
		I.3.h. Evaluation of adolescents programs	FOCUS	No. of RH services on adolescents evaluated	3 RH services on adolescents evaluated	1 RH services on adolescents evaluated	1 RH services on adolescents evaluated
	I.4 Increased availability of high quality long acting methods	I.4 a Introduce and distribute long acting methods at clinic sites	NCA/BOL 016-5 NCA/BOL:028-1 NCA/BOL:029-1 NCA/BOL:030-1 NCA/BOL:901-2	No. of new institutions providing DMPA	5 new institutions providing DMPA	2 new institutions providing DMPA	2 new institutions providing DMPA

Strategic Objective II: Improved Quality of Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 1 Expanded range of appropriate contraceptive methods available	II 1 a Introduce additional modern contraceptive methods	NCA/BOL 016-5 NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 028-1 NCA/BOL 029-1 NCA/BOL 030-1 NCA/BOL 901-2	No of new institutions with VSC services available No of institutions with DMPA services available	2 new institutions with VSC services available 8 institutions with DMPA services available	2 new institutions with VSC services available 3 institutions with DMPA services available	2 new institutions with VSC services available 3 institutions with DMPA services available
		II 1 b Reduce policy barriers to expanding method mix	NCA/BOL 901-2	VSC norms elaborated, validated and disseminated	1 VSC norms elaborated, validated and disseminated	No data reported	No data reported
		II 1 c Support to the National Services Subcommittee		No of meetings held at national level	10 meetings held at national level	3 meetings held at national level	9 meetings held at national level
		II 1 d Expansion of the National Subcommittee to Local Subcommittees in other cities		No of Local Subcommittees	2 Local Subcommittees	No data reported	No data reported
	II 2 Strengthened provider competence to deliver high quality FP and selected RH services	II 2 a Train service provider in FP and selected RH and MCH integrated service delivery	NCA/BOL 016-5 NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 028-1 NCA/BOL 029-1 NCA/BOL 030-1 NCA/BOL 901-2	No of providers trained No of training sessions held	808 providers trained 86 training's held	114 providers trained	All method specific data are aggregated See Quantitative report for outputs
		II 2 b Conduct refresher training for service providers in FP, selected RH and MCH services and integrated service delivery	NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2	No of providers trained No of refresher training sessions held	650 providers trained	236 providers trained	236 providers trained
		II 2 c Conduct training in adolescents integrated health services	NCA/BOL 901-2	No of providers trained No of training sessions held	75 providers trained 3 training sessions held	43 providers trained 3 training sessions held	No data reported
		II 2.d Train service provider in PA care including PA contraception	NCA/BOL 901-2	No of providers trained No of training held	22 providers trained 2 trainings held	No data reported	No data reported
		II 2 e Disseminate FP/RH/MCH training materials, including training guidelines and standards, curricula and other training tools produced by Pathfinder or FOCUS	NCA/BOL:016-5 NCA/BOL:019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 028-1 NCA/BOL 029-1 NCA/BOL 030-1 NCA/BOL:901-2 NCA/BOL 903-1 FOCUS	Training materials disseminated/distributed Norms and protocols for adolescent care disseminated and validated Training curricula on adolescents interviewing techniques and training developed No of trainers trained	5 Training materials disseminated/distributed 1 norm and protocol for adolescent care disseminated and validated 1 training curricula on adolescents interviewing techniques and training developed 13 trainers trained		3 training modules disseminated/distributed 13 trainers trained

Bolivia

Strategic Objective II: Improved Quality of Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II		II 2 f. Train health providers in RH services for adolescents	NCA/BOL 901-2 NCA/BOL 022-1 NCA/BOL 024-2 FOCUS	No of providers trained No of providers who are applying the adolescents records National plan of integrated health developed	75 providers trained 60 providers who are applying the adolescents records 1 national plan of integrated health developed	186 providers trained 9 trainings held	186 providers trained 9 trainings held
		II 2 g Dissemination of the National Adolescents Program	FOCUS NCA/BOL 901-2	National Plan of RH developed	1 National Plan of RH developed	1 National plan developed	1 National plan developed
	II 3 Enhanced constellation of FP and RH services available, where necessary and appropriate, including referral links for MCH, STD HIV/AIDS services	II 3 a Strengthen services to integrate STD diagnosis and treatment into FP and RH services	NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 030-1 NCA/BOL 901-2	No of reference clinics offering integrated services	12 reference clinics offering integrated services	6 reference clinics offering intergrated services	6 reference clinics offering intergrated services
		II 3 b. Incorporate clinical protocols to enhance adolescents participation in STD prevention and care	NCA/BOL 901-2 NCA/BOL 022-1 NCA/BOL 024-2	No of districts involved	3 districts involved	2district involved	2 district involved
	II 4 Improved quality assurance and quality management systems	II 4 a Introduce or strengthen QOC systems, including QOC assessments and tools, development of protocols or establishments of quality improvement partnerships	NCA/BOL 901-1 NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 029-1 NCA/BOL 030-1	No of SDP implementing QOC standards systems	51 SDP implementing QOC standards systems	10 SDP implementing QOC standards systems	10 SDP implementing QOC standards systems
		II 4 b Conduct training of quality of care	NCA/BOL 016-5 NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 028-1 NCA/BOL 029-1 NCA/BOL 030-1 NCA/BOL 901-2	No of trainers trained	21 trainers trained		
		II.4 c. Conduct an adolescent client satisfaction survey	FOCUS	No of institutions that will apply the survey	3 institutions that will apply the survey		

Bolivia

Strategic Objective III: Increased management, financial and technical capacity of local organizations and communities

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III 1 Strengthened program and organizational management capabilities of local service delivery organizations	III 1 a Collect data for USAID's Results Framework from institutions funded by USAID	NCA/BOL 902-1	No of institutions that report to Pathfinder No of institutions that report timely information	35 institutions that report to Pathfinder 20 institutions that report timely information		
		III 1 b Increase development and utilization of management information systems for local implementing organizations	NCA/BOL 902-1	Implementation of an Information Monitoring Tool for institutions that report to Pathfinder (Y/N)	Implementation of an Information Monitoring Tool for institutions that report to Pathfinder = Y	Implementation of an Information Monitoring Tool for institutions that report to Pathfinder = Y	Implementation of an Information Monitoring Tool for institutions that report to Pathfinder = Y
		III 1 c Provide statistical information to local organizations and USAID	NCA/BOL 902-1	No of reports submitted	94 reports submitted	20 reports submitted	24 reports submitted
		III 1 d Improved budgeting, financial planning and management of local organizations	NCA/BOL 016-5 NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 022-1 NCA/BOL 028-1 NCA/BOL 029-1 NCA/BOL 901-2	No of institutions with accurate budgeting and financial planning	6 institutions with accurate budgeting and financial planning	6 institutions with accurate budgeting and financial planning	6 institutions with accurate budgeting and financial planning
	III 2 Improved financial sustainability of local service delivery organizations	III 2 a Strengthen utilization of standard accounting and auditing systems	NCA/BOL 024-2	Accounting system implemented Y/N	Accounting system implemented = Y	Accounting system implemented = Y	Accounting system implemented = Y
		III 2 b Improve financial reporting of local organizations	NCA/BOL 016-5 NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 028-1 NCA/BOL 029-1 NCA/BOL 901-2	No. of institutions with accurate financial reports	7 institutions with accurate financial reports	5 institutions with accurate financial reports	5 institutions with accurate financial reports
		III 2 c Improve financial sustainability in selected NGOs	NCA/BOL 024-2 NCA/BOL 022-1	A commercial plan to increase income generation vis a vis sustainability developed	2 commercial plans to increase income generation vis a vis sustainability developed	1 commercial plans to increase income generation vis a vis sustainability developed	1 commercial plans to increase income generation vis a vis sustainability developed
		III 2.d Develop pricing plans for private sales of commodities	NCA/BOL 902-1	No of institutions that are charging defined prices of commodities as part of the strategy to replace selected donated commodities with social marketing commodities	9 institutions that are charging defined prices of commodities as part of the strategy to replace selected donated commodities with social marketing commodities	5 institutions that are charging defined prices of commodities as part of the strategy to replace selected donated commodities with social marketing commodities	5 institutions that are charging defined prices of commodities as part of the strategy to replace selected donated commodities with social marketing commodities
		III 2 e Develop pricing plans for services	NCA/BOL 022-1 NCA/BOL 024-2	No of institutions with pricing plans for services	2 institutions with pricing plans for services	2 institutions with pricing plans for services	2 institutions with pricing plans for services

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Strategic Objective III: Increased management, financial and technical capacity of local organizations and communities

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year- to- Date Achievements
SO III	III 3 Improved technical capacity of local service delivery organizations	III 3 a Provide TA to local organizations on utilization and application of management information systems (IMT, SNIS)	NCA/BOL 902-1	No persons-month used to provide TA	3.75 persons-month used to provide TA	1.5 persons month used to provide TA	1.875 persons month used to provide TA
		III 3 b Provide TA to local organizations on indicator conceptual framework	NCA/BOL 902-1	No persons-month used to provide TA	1.25 persons-month used to provide TA	1.25 persons-month used to provide TA	1.25 persons-month used to provide TA
		III 3 c Provide TA for development and evaluation of performance indicators for USAID funded institutions	NCA/BOL 902-1	No of regular meetings	40 regular meetings	10 regular meetings	10 regular meetings
		III 3 d Improve efficiency of training activities	NCA/BOL 016-5 NCA/BOL 019-5 NCA/BOL 022-1 NCA/BOL 024-2 NCA/BOL 028-1 NCA/BOL 029-1 NCA/BOL 901-2	A supervision tool developed Y/N	A supervision tool developed = Y		
		III 3 e Improve capacity to forecast, procure, warehouse and distribute equipment and supplies	NCA/BOL 902-1	No of institutions that make accurate forecast needs through CPTs	6 institutions that make accurate forecast needs through CPTs	4 institutions that make accurate forecast needs through CPTs	4 institutions that make accurate forecast needs through CPTs
		III 3 f Improved use of monitoring tools for commodities management	NCA/BOL:902-1	No of institutions that are using monitoring tools correctly	9 institutions that are using monitoring tools correctly	5 institutions that are using monitoring tools correctly	5 institutions that are using monitoring tools correctly
		III 3 g Training in Logistics Management System	NCA/BOL:902-1	No of training activities held	12 training activities held	12 training activities held	12 training activities held

Strategic Objective I: Increased Access to and Availability of FP and RH Services

Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	1.1 Expanded, improved or established FP and select RH (including MCH) service delivery systems and infrastructure through multiple service delivery points	1.1 a. Support clinic-based FP and RH services	NCA/BRA 901-2 NCA/BRA 088-1	CYP New Users	100,000 CYP 75,000 New Users		8,639 CYPs and 10,344 New Users (preliminary data, about 50% of data entered for 1st quarter)
		1.1 b. Support hospital-based FP and RH services	NCA/BRA. 901-2	CYP New Users	Data captured in I 1.a.	See I.1.a	See I 1 a
		1.1 c. Support work-based FP and RH services	NCA/BRA 083-1	No. of people informed	7,500 people informed	3715 workers informed	6,010 workers informed
		1.1 d. Support social marketing and contraceptive sales initiatives for FP and RH services	NCA/BRA.911-1 S2/BRA.901-1	No. of injectable units sold to public sector No. of pharmacies visited	40,000 injectable units sold to public sector 1,500 pharmacies visited	SOMARC is official "reporter" of data	
		1.1 e. Support FP and RH serv.delivery through referrals from other sectors (including environmental and educational NGOs)	NCA/BRA:080-1 NCA/BRA:081-1 NCA/BRA:084-1 S2/BRA:001-2 S2/BRA 902-1	No. of referrals	2,500 referrals		
	1.2. Expanded access for underserved groups and those at-risk (including young adults, men, and hard-to-reach regions and population)	1.2.a. Support young adult (15-24 years) projects	S2/BRA.902-1 NCA/BRA:084-1 NCA/BRA:087-1	No. of referrals	1,451 referrals		
		1.2 b. Support postpartum (PP) projects	NCA/BRA:901-2	New Users	Data captured in I.1.a.	See I 1 a	See I.1.a
		1.2.c. Support postabortion (PA) projects	NCA/BRA 901-2	CYPs New Users	Data captured in I.1.a.	See I.1.a	See I 1.a
		1.2 d. Expand services to hard-to-reach populations	NCA/BRA 080-1 NCA/BRA 081-1 NCA/BRA 084-1 NCA/BRA 086-1 NCA/BRA:087-1 S2/BRA:001-2 S2/BRA.902-1	No. of referrals	2,543 referrals		
		1.2.e. Support FP and RH projects for men	NCA/BRA 905-1	No. of New Users	1,000 New Users		
	1.3 Enhanced environment for use of FP, RH and MCH services through selected IEC, research and advocacy interventions	1.3.a Support client-focused IE&C activities for FP, RH and MCH services	NCA/BRA:080-1 NCA/BRA:081-1 NCA/BRA 084-1 NCA/BRA.085-1 S2/BRA.001-2	No. of activities	15 activities	28 activities	32 activities
		1.3.b. Support provider-focused IEC activities to increase support for and reduce provider biases toward FP and to maximize access to a wide range of methods	S2/BRA:902-1 NCA/BRA:080-1 NCA/BRA:910-1 NCA/BRA:905-1	No. of professionals trained	20 professionals trained		
		1.3.c Increase and strengthen community-level participation in FP, RH and MCH	NCA/BRA 080-1 NCA/BRA.081-1 S2/BRA 001-2	No. of meetings	50 meetings		2 meetings were held

Brazil							
Strategic Objective I: Increased Access to and Availability of FP and RH Services							
Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 2 Achievements	Year-to-Date Achievements
SO 1		1.3.d. Support IE&C and advocacy activities at national level to create an improved policy environment for FP, RH and MCH	S2/BRA.904-1	No of meetings	5 meetings		4 meetings held by Depo-Provera Program (NCA/BRA:911-1 S2/BRA.901-1)
		1.3.e Support IE&C activities targeting underserved/at-risk populations	NCA/BRA.080-1 NCA/BRA.081-1 NCA/BRA.084-1 NCA/BRA.086-1 NCA/BRA.087-1 S2/BRA:001-2	No of activities	30 activities	18 activities	73 activities
		1.3.f Support research on FP, RH and MCH	S2/BRA.001-2	Research results	TBD		
	1.4. Increased availability of high quality long-acting methods	1.4.a. Introduce and distribute long-acting methods at clinic sites	NCA/BRA.901-2 NCA/BRA.911-1 NCA/BRA.910-1 S2/BRA.901-1	CYP New Users	Data captured in I 1.a	See I 1.a	See I 1.a

Brazil

Strategic Objective II: Improved Quality of Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II 1 Expanded range of appropriate contraceptive methods available	II 1.a Introduce additional modern contraceptive methods	NCA/BRA:901-2 NCA/BRA.910-1	CYP New Users	Data captured in I 1 a	See I 1 a	See I 1.a
		II 1.b. Reduce policy barriers to expanding method mix	S2/BRA.904-1	TBD	TBD		
		II 1.c. Introduce, support or expand ECP services and link with ongoing FP services	NCA/BRA 910-1	New Users	500 New Users		
	II.2 Strengthened provider competence to deliver high quality FP and selected RH services (including MCH and STD and HIV/AIDS)	II.2.a. Train service providers in FP and select RH and MCH services and integrated service delivery	NCA/BRA.901-2 S2/BRA:904-1 NCA/BRA:903-2 NCA/BRA:906-1 NCA/BRA.080-1 NCA/BRA:081-1 NCA/BRA:088-1 NCA/BRA:089-1 S2/BRA:001-2	No. of providers trained in clinical services	100 providers trained in clinical services		
		II 2 b Conduct Training of Trainers (TOT)	NCA/BRA 901-2	No. of professionals trained in clinical service delivery	20 professionals trained in clinical service delivery		
		II.2.c. Develop and disseminate FP/RH/MCH training materials, including guidelines, standards, curricula	TA HQ	No. of materials produced (guidelines)	1 material produced (guidelines)		
	II 3. Enhanced constellation of FP and RH services available, where necessary and appropriate, including referral links for MCH, STD and HIV/AIDS services	II.3 a Support clinic managers, providers and trainers to integrate STDs and HIV/AIDS prevention services	NCA/BRA.088-1 NCA/BRA:089-1 NCA/BRA:903-2 NCA/BRA.906-1 NCA/BRA:907-1 NCA/BRA:908-1 NCA/BRA:909-1	No.of trained providers in STD/AIDS R/H	50 providers trained in STD/AIDS RH		
		II.3.b. Strengthened referral links for select FP/RH/MCH services	NCA/BRA:903-2 NCA/BRA:906-1 NCA/BRA:907-1 NCA/BRA.908-1 NCA/BRA:909-1 NCA/BRA:080-1 NCA/BRA:081-1 NCA/BRA:083-1 NCA/BRA 088-1 S2/BRA.001-2	No referrals	3,000 referrals		
		II 3 c Introduce clinic-based models for STD and AIDS care among coverage population	NCA/BRA:088-1 NCA/BRA 903-2 NCA/BRA.906-1 NCA/BRA:907-1 NCA/BRA 908-1 NCA/BRA 909-1	No of pilot initiatives developed for integration of STD and RH services	5 pilot initiatives developed for integration of STD and RH services	No new pilot initiative initiated during this quarter	2 pilot initiative started (SESAB and SESA-CE)

Brazil							
Strategic Objective III: Increased Management, Financial and Technical Capacity of Local Organizations and Communities							
Global SO	Country Program Outcome	Country Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III.1. Strengthened program and organizational management capabilities of local service delivery organizations	III.1.a Conduct long-term strategic planning activities with local institutions	NCA/BRA:081-1	No of strategic meetings held	1 Strategic Meeting Held		1 Strategic Meeting Held
		III.1.b Strengthened organizational capacity to design, manage, and evaluate FP, RH and MCH services	NCA/BRA:080-1 NCA/BRA:081-1 NCA/BRA:083-1 NCA/BRA:086-1 NCA/BRA:087-1 NCA/BRA:901-1 S2/BRA:901-2 S2/BRA:902-1	No of professionals trained	40 professionals trained	20 professionals trained	30 professionals trained
		III.1.c Strengthen human resource capacity to manage FP and RH services	NCA/BRA:080-1 NCA/BRA:081-1 NCA/BRA:083-1 NCA/BRA:086-1 NCA/BRA:087-1 S2/BRA:001-2	No of professionals trained in project management	5 Professionals trained in project management	No output this quarter	5 Professionals trained in project management
		III.1.d Increase development and utilization of MIS systems for local implementing organizations	NCA/BRA:901-2 S2/BRA:001-1	No of MIS systems developed	4 MIS systems developed		2 MIS Systems being developed
		III.1.e Improve capacity to forecast, procure, warehouse and distribute equipment and supplies	NCA/BRA:901-2	No. of professionals trained in logistics	30 professionals trained in logistics		No data reported
	III.2. Improved financial sustainability of local service delivery organizations	III.2.a Improve budgeting, financial planning and management of local organizations	NCA/BRA:080-1 NCA/BRA:081-1 NCA/BRA:084-1 NCA/BRA:085-1 S2/BRA:001-2	No.of professionals trained in project finance	3 professionals trained in project finance		No data reported

Strategic Objective III: Increased Management, Financial and Technical Capacity of Local Organizations and Communities

Global SO	Country Program Outcome	Country Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 2 Achievements	Year-to-Date Achievements
SO III		III.2 b. Strengthen utilization of standard accounting and auditing systems	NCA/BRA 081-1 NCA/BRA.085-1	No of institutions improved	3 institutions improved	1 institution being improved	1 institution being improved
		III.2 c. Improve efficiency of training activities	NCA/BRA 080-1 NCA/BRA:081-1 S2/BRA:001-2 NCA/BRA:901-2	TBD	TBD		
	III 3 Improved technical capacity of local service delivery organizations	III 3 a Provide TA to local service delivery organizations in reproductive health	NCA/BRA 080-1 NCA/BRA:081-1 NCA/BRA:083-1 NCA/BRA:084-1 NCA/BRA.085-1 NCA/BRA.086-1 NCA/BRA 087-1 S2/BRA:001-2 S2/BRA:902-1	No of professionals trained in RH	40 professionals trained in RH	10 professionals trained in RH	20 professionals trained in RH
		III.3 b Support skills development, income generation and social empowerment activities of women and girls	NCA/BRA 080-1 NCA/BRA.081-1 S2/BRA.001-2	No of empowerment activities (seminars and community meetings)	30 empowerment activities (seminars and community meetings)		

Brazil

Strategic Objective IV: Increased sustainable and effective programs to prevent sexual transmission of HIV among major target groups

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	IV.1. Most effective program interventions identified and disseminated	IV.1 a Develop and implement integrated services for STI and HIV/AIDS detection and treatment and general reproductive health services	NCA/BRA:088-1 NCA/BRA:903-2 NCA/BRA:906-1 NCA/BRA:907-1 NCA/BRA:908-1 NCA/BRA:909-1	No. of service delivery posts with integrated services	2 service delivery posts with integrated services 20 service delivery posts with integrated services		Needs Assessment Completed
		IV.1.b. Cross train RH and HIV/AIDS/STI providers to provide integrated services	NCA/BRA:088-1 NCA/BRA:089-1 NCA/BRA:903-2 NCA/BRA:906-1 NCA/BRA:907-1 NCA/BRA:908-1 NCA/BRA:909-1	No. of providers trained	100 providers trained		Needs Assessment Completed
		IV.1.c. Train staff of maternity hospitals in detection and treatment of HIV/AIDS/STI in pregnant and postpartum women	NCA/BRA:903-2 NCA/BRA:906-1 NCA/BRA:907-1 NCA/BRA:908-1 NCA/BRA:909-1	No. of providers trained	50 providers trained		Needs Assessment Completed
	IV 2 Management capacity of selected HIV/STI/family planning institutions (to provide STI and HIV services) increased	IV.2.a. Technical Assistance for institutional development, especially referral systems to support integrated services	NCA/BRA:088-1 NCA/BRA:903-2 NCA/BRA:906-1 NCA/BRA:907-1 NCA/BRA:908-1 NCA/BRA:909-1	No. of professionals trained	100 professionals trained		Needs Assessment Completed
		IV 2 b Establish Institutional linkages to community groups and mechanisms for community involvement	NCA/BRA:086-1 NCA/BRA:903-2 NCA/BRA:906-1 NCA/BRA:907-1 NCA/BRA:908-1 NCA/BRA:909-1	No. of referrals	5,000 referrals		Needs Assessment Completed

Strategic Objective I: Increased access to and availability of FP and RH services

Global SO	Country Program Outcome	Country Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO 1	1.1 Expanded public and private sector FP and selected RH services through multiple service delivery systems	1.1.a Support clinic-based ECP services	NCA/ECU 004-1	No. of SDP providing ECP services No. of new acceptors of ECP through clinic-based services	4 SDP providing Ecp services 200 ECP new acceptors	4 SDP providing ECP services 200 ECP new acceptors	4 SDP providing ECP services 15 ECP new acceptors
		1.1.b Support hospital-based FP and RH services	PF/ECU:008-1	No. of hospitals providing quality FP and RH services No. of FP acceptors, by method No. of CYP generated	PAC activities introduced in 1 MOH hospital TBD FP acceptors, by method		
		1.1.c. Support FP and RH service delivery through private practitioners	PF/ECU:008-1	No. of midwives participating No. of midwives providing PA counseling	40 midwives participating 40 midwives providing PA counseling		
		1.1.d. Strengthen PA care and FP with MOH hospitals, reinforcing counseling, clinical skills, and infection prevention practices	PF/ECU:008-1	% of clients counseled in PA % of PA acceptors, by method No. of hospitals providing quality PA care	100% of PA patient receiving FP/PA counseling 60% of PA clients leaving the hospital with method See 1.1.c for hospitals providing quality PA care		
	1.2. Expanded access for underserved groups and those at-risk (including young adults, men, and hard-to-reach populations)	1.2.a Increase access for young adults to ECP services	NCA/ECU:004-1	No. of SDP providing services to young adults and adolescents No. of new ECP acceptors No. of young adults informed and counseled	2 SDP providing ECP services to young adults TBD new young adult ECP acceptors TBD young adults informed and counseled	1 SDP providing ECP services to young adults 22 young adults informed.	1 SDP providing ECP services to young adults 22 young adults informed.
		1.2.b Support post-abortion projects	PF/ECU:008-1	No. of MOH Hospitals with PA services in operation No. of PA patients leaving the hospital with method	See 1.1.c MOH Hospitals with PA services in operation See 1.1.e % of PA patients leaving the hospital with method		
	1.3 Enhanced environment for use of FP, RH and MCH services through selected IEC, research and advocacy interventions	1.3.a. Support client-focused IEC activities for FP, RH and ECP services (educational talks, material development and dissemination, client ECP use packets)	NCA/ECU 004-1	No. of people informed, by mode of communication No. of client-focused IEC materials developed, printed and distributed by type and topic	300 women receive information on ECP 500 brochures, 500 posters and 500 ECP packets distributed 2,000 copies of PA/FP methods distributed	420 women received information on ECP; 121 brochures, 40 ECP packets distributed.	420 women received information on ECP 121 brochures 40 ECP packets distributed
		1.3.b Support provider-focused IEC activities to increase support for and reduce provider biases toward ECP	NCA/ECU:004-1	No. of professionals informed through orientation sessions	100 professionals informed through orientation sessions		
		1.3.c Support IEC activities targeting underserved/at-risk populations	NCA/ECU:004-1 PF/ECU:008-1	No. of young adults informed about FP, including ECP No. of IEC materials produced and distributed, by type No. of PA women informed	TBD young adults informed about FP, including ECP TBD IEC materials produced and distributed, by type TBD PA women informed	22 young adults informed about FP, including ECP.	22 young adults informed about FP, including ECP.
		1.3.d. Evaluate and document introduction of ECP services in Ecuador	NCA/ECU:004-1	No. of studies conducted, by type	1 baseline conducted to assess KAP of providers		

Ecuador							
Strategic Objective II: Improved Quality of Services							
Global SO	Country Program Outcome	Country Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3-Achievements	Year-to-Date Achievements
SO II	II 1 Expanded range of appropriate contraceptive method available	II 1.a Introduce and integrate ECP into regular FP/RH services	NCA/ECU 004-1	No of sites introducing ECP	Introduce ECP in 4 additional clinics	ECP introduced in 1 additional clinic	ECP introduced in 1 additional clinic
	II 2 Strengthened provider competence to deliver high quality FP and selected RH services (incl MCH and STD and HIV/AIDS)	II 2.a Support training in post-abortion FP counseling and clinical services	PF/ECU 008-1	No of service providers trained in FP PA care and counseling, by type of provider and type of type of training No of training activities held No. of service providers providing services in which they trained	10 OB/GYN trained in PA care and MVA 40 midwives and 6 nurses trained in PA counseling 2 training courses held TBD service providers providing services in which they trained		
		II 2.b Train providers who deliver FP and selected RH services to underserved/at-risk population to provide ECP as part of their RH services	NCA/ECU 004-1	No of providers trained, by type of training	50 providers trained to provide ECP	1 service provider trained to provide ECP	1 service provider trained to provide ECP
		II 2.c. Conduct orientation seminars for midwives on PA Care	PF/ECU 008-1	No of seminars on PA Care held No of participants		4 orientation seminars 60 participants	
		II 2.d Develop and disseminate FP/RH/MCH training materials, including training guidelines and standards, curricula and other training tools	NCA/ECU:004-1 PF/ECU 008-1	No of training materials adapted/ disseminated, by type of material	200 copies of service delivery guidelines to be disseminated 20 copies of PAC training modules distributed	200 copies of service delivery guidelines printed	200 copies of service delivery guidelines printed
		II 2.e Conduct orientation seminars for physicians and other providers on ECP	NCA/ECU 004-1	No of participants at orientation seminars	100 participants at 4 orientation seminars	120 participants at 3 orientation seminars	
	II 3 Enhanced constellation of FP and RH services available, where necessary and appropriate, including referral links for MCH, STI and HIV/AIDS	II 3.a. Introduce MVA for the treatment of incomplete abortion in MOH hospitals and health centers	PF/ECU 008-1	No of SDP using MVA for treatment of incomplete abortion No of hospitals with high quality PAC services No of health centers with high quality PAC services		1 MOH hospital using MVA for treatment of incomplete abortion and with high quality PAC services (same hospital mentioned in I.1.c)	
II 3 b Integrate select RH activities with FP/RH services		PF/ECU 008-1	No of SDPs offering FP/RH services		1 MOH hospital offering FP/RH integrated services (same hospital mentioned in I.1 c)		

Ecuador

Strategic Objective III: Increased management, financial, and technical capacity of local organizations

Global SO	Country Program Outcome	Country Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO III	III.1. Improved technical capacity of local service organizations	III.1.a. Provide TA to local service delivery organizations in QOC, IEC, RH	PF/ECU:008-1 NCA/ECU.004-1	No. of institutions receiving TA, by type of TA	3 institutions provided with TA in IEC and QOC (medical protocols on PA and IP)	1 institution provided with TA in ECP services	1 institution provided with TA in ECP services

Mexico							
Strategic Objective I: Improve the quality of services							
Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	I.1. Strengthened provider competence to deliver high quality family planning and selected reproductive health services	I.1.a. Train providers who deliver FP and selected RH services to undeserved/at risk groups: rural, marginal urban, and adolescents	NCA/MEX:044-1 NCA/MEX:045-1 NCA/MEX:046-1	No. of service providers trained by type of provider and by subject, according to PSS categories	548 people trained in adolescent RH	30 service providers trained	555 service providers trained
		I.1.b. Train providers on FP norms, counseling and informed consent	NCA/MEX:044-1 NCA/MEX:045-1 NCA/MEX:046-1	No. of service providers trained by type of provider and by subject, according to PSS categories	1,320 people trained on FP norms, counseling and informed consent	498 service providers trained	1,323 people trained on FP norms, counseling, and informed consent
	I.2. Improve provider-client interaction and facilitate client informed choice as well as to strengthen user's empowerment by providing IEC materials and improving counseling skills of service providers	I.2.a. Support client-focused IEC activities and materials to reinforce counseling and informed consent	NCA/MEX:044-1 NCA/MEX:045-1 NCA/MEX:046-1	No of brochures No of posters, flyers & flipcharts No of videos No of other IEC material No of manuals Total No of IEC materials No of adolescents informed No of adults informed Total No of persons informed	2,392,440 brochures 738,985 posters, flyers, & flipcharts 420 videos 27,819 manuals 2,885 others 341,510 Adolescents informed 341,510 adults informed 545,910 persons informed	2,926,119 brochures 125,250 posters, flyers, and flipcharts; 19,325 videos; 6,700 manuals; 5,500 technical documents; 54,970 others; 265,300 adolescents informed; 561,700 adults informed	4,176,119 brochures; 375,250 posters, flyers and flipcharts; 19,445 videos; 21,700 manuals; 5,500 technical documents; 54,970 others; 390,300 adolescents informed; 782,223 adults informed.
	I.3. Increase understanding of family planning and reproductive health, and of available services, through mass media and local IEC efforts	I.3.a. Support TV and radio mass media campaigns to disseminate informed consent and reproductive rights	NCA/MEX:047-1	No. of mass media products by type No of radio spots No of TV spots	28 radio spots 12 TV spots	35 radio spots; 10 TV spots.	63 radio spots; 22 TV spots
	I.4 Improve quality assurance and quality follow-up systems	I.4.a To develop evaluation studies on quality of services including clients perception	NCA/MEX:048-1	No. of final results documents by type and subject	11 final evaluations on quality of service	11 documents on evaluation and research results 11,600 copies in total.	11 documents on evaluation and research results 11,600 copies in total.

Strategic Objective I: Increased access to and availability of FP and RH services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO I	I 1 Expanded public and private sector FP and selected RH services through multiple service delivery systems	I 1.a Support clinic-based FP and RH services	PASARE	No. of clinics providing FP and RH services No. of acceptors by method No. of CYP generated No. of regions participating in program	14 hospitals providing FP/RH services TBD acceptors, by method TBD CYP generated by method.	14 hospitals providing FP/RH services	14 hospitals providing FP/RH services 32,059 acceptors (9% IUD, 20% OC, 42% Injec, 25% Barrier, 4% VSC) 43,268 CYPs generated.
		I 1.b Support hospital-based FP and RH services	PASARE	No. of hospitals providing PA/FP services No. of hospitals providing quality FP/RH services	10 hospitals providing quality FP/RH services	10 hospitals providing quality FP/RH services	10 hospitals providing quality FP/RH services
		I 1.c Strengthen PP/PA care and FP with MOH hospitals, reinforcing counseling, clinical skills, and infection prevention practices	PASARE	% of clients counseled in PP/PA % of PP/PA acceptors by method No. of hospitals providing quality PP/PA care	100% of clients counseled in PP/PA 60% of PP/PA acceptors by method		60% of clients counseled; 40% of PP/PA acceptors
	I 2 Enhanced environment for use of FP, RH and MCH services through selected research and advocacy interventions	I 2.a Support young adults (15-24 years) projects through multidisciplinary clinics within MOH hospitals and centers and NGO	FOCUS/NCA	No. of SDP providing services to young adults and adolescents No. of young adult new acceptors by method No. of young adults informed and counseled	10 SDP providing services to adolescents 2,800 young adult new acceptors 9,600 adolescent informed and counseled	14 SDP providing services to adolescents	14 SDP providing services to adolescents
		I 2.b Support client-focused IEC activities for FP, RH and MCH services (home visits, community meetings, educational talks, maternal development and dissemination)	PASARE FOCUS/NCA	No. of people informed, by mode of communication No. of IEC materials developed, printed and distributed by type and topic No. of workshops conducted No. of local communications campaigns developed.	56,880 persons informed 600 educational talks 2 types of brochures produced 1 type of poster produced 50,000 copies of brochures and posters distributed	15 cue cards set distributed 1000 brochures on infection prevention distributed.	413 FP posters 5,902 brochures 84 cue cards set 6,520 "La Regla" device distributed.
		I 2.c. Support provider-focused IEC activities to increase support for and reduce provider biases toward FP and to maximize access to a wide range of methods	PASARE	No. of providers informed No. of provider-focused IEC activities conducted No. of plans developed and implemented to improve client-provider communication No. of self-instructional materials for health personnel and community-level health workers in MCH topics	88 providers informed 4 provider-focused IEC activities conducted		

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Outputs not available from the Ministry of Health

Per instructions from the local USAID mission all training activities on FP/RH topics have been assumed by the Ministry of Health

PERU

Strategic Objective I: Increased access to and availability of FP and RH services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO 1		1.2 d. Support IEC activities targeting underserved/at-risk populations	PASARE FOCUS/NCA	No. of underserved/at risk population informed No. of adolescents informed No. of IEC materials produced and distributed, by type	22,600 adolescents informed 4 IEC brochure produced targeting adolescents 55,000 copies of brochure distributed	5 IN-FOCUS series translated into Spanish 1,000 copies of each printed and being distributed.	12 IN-FOCUS series translated into Spanish 2,000 copies of each printed and being distributed 2,000 copies of brochure with info about FOCUS activities printed
		1.2 e. Support IEC and advocacy activities at national level to create an improved policy environment for MCH and ARA	FOCUS/NCA	No. and type of activities conducted to create improved policy environment	Support development of global workplan re. Adolescent sex and RH	Final version of the Action Plan developed and being distributed .	Final version of Action Plan printed and distributed
		1.2 f. Support research on FP, RH and MCH, (inc. epidemiological and demographic or impact survey, catchment area surveys, KAP studies, client or provider focus groups, program evaluations, and needs assessments)	FOCUS/NCA	No. of research reports developed and disseminated No. of program evaluations developed	2 research reports developed and disseminated 1 PAC program evaluation developed 6 baseline KAP study surveys, re Adolescent RH	Data analysis of 1 evaluation study with MOE re ARH completed 1 Data analysis of research study re Project IPSS Joven completed. 1 follow-up training evaluation on Communications Skills and Counseling preliminary data analysis completed and a final report prepared	Data analysis completed for 2 survey studies (MOE and MOH) Data analysis completed for Follow-up training evaluation and final report prepared
	1.3 Increased availability of high quality long-acting methods	1.4.a. Introduce and distribute long-acting methods at MOH clinic sites and NGOs clinics	PASARE	No. of SDP distributing long-acting methods CYP generated from long-acting methods Proportion of long-acting vs. short-term methods	32 SDP distributing long-acting methods TBD CYP generated from long-acting methods TBD proportion of long-acting vs. short-term methods		22,955 CYPs generated from long-acting methods Proportion of long-acting (53%) vs short-term (47%)

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Strategic Objective II: Improved Quality of Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II.1. Expanded range of appropriate contraceptive method available	II.1.a. Introduce additional modern contraceptive methods both at private and public sector	PASARE	No. of sites where one or more new method is introduced Percentage of new method within method mix	10 MOH hospitals introduced new methods		
	II.2. Strengthened provider competence to deliver high quality FP and selected RH services (including MCH and STD and HIV/AIDS)	II.2.a. Train service providers in FP and selected RH and MCH services and integrated service delivery	PASARE	No. of service providers trained in FP, RH, and MCH services by type of provider and type of type of training No. of training activities held No. of service providers providing services in which they trained	199 providers trained in FP/RH (30% physicians; 50% nurse/midwives; 20% technicians) 16 training activities held 16 SP providing services in which they were trained		As per local Mission instructions, all training activities on FP/RH topics will be assumed directly by MOH.
		II.2.b. Train providers who deliver FP and selected RH services to underserved/at-risk populations	FOCUS/NCA PASARE	No. of trained SP, by type of SP and type of training	8 training courses on (contraceptive technology; reproductive health, communication skills) 279 service providers		1 training course on CTU and Counseling. 15 providers trained
		II.2.c. Conduct CTU and RH updates	PASARE	No. of CTU and RH updates held No. of participants, by type of SP and type of CTU	8 CTU/RH updates held 128 service providers		As per local Mission instructions, all training activities on FP/RH topics will be assumed directly by MOH.
		II.2.d. Develop and disseminate FP/RH/MCH training materials, including training guidelines and standards, curricula and other training tools	PASARE FOCUS/NCA	No. of training materials adapted/ disseminated, by type of material	1 set of training guidelines adapted in RH/FP for Adolescents 8 modules developed 3 videos developed 8 flipcharts developed 10 cassettes developed 700 RH Guides and 300 pocket guides to be distributed	Revision of Handbook on Communication Skills and Counseling for Adolesc. On RH completed and in edition process.	273 RH Guides and 317 pocket guides distributed. Training Guidelines in ARH being developed.
		II.2.e. Conduct TOT, provide training in curriculum or material development, or establish training facilities or centers	PASARE FOCUS	No. of TOT conducted No. of trainers trained, by type of training	3 TOT conducted on teaching methodology 40 trainers trained		1 TOT conducted 15 trainers trained.

Outputs not available from the Ministry of Health

Per instruction from the local USAID mission, all training activities on FP/RH topics have been assumed by the Ministry of Health

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Peru

Strategic Objective II: Improved Quality of Services

Global SO	Program Outcome	Activities	PINs or Programs	Measurable Indicators	Target	Quarter 3 Achievements	Year-to-Date Achievements
SO II	II.3. Enhanced constellation of FP and RH services available, where necessary and appropriate, inc. referral links for MCH, STD and HIV/AIDS	II.3.a. Integrate select MCH activities with FP/RH services	PASARE	No. of SDP that offer integrated services	10 MOH hospitals offering integrated services		10 MOH hospitals offering integrated services
		II.3.b. Strengthen referral links for select FP/RH/MCH services	PASARE	No. of referrals links in operation	10 MOH hospitals with referrals links in operation		7 MOH hospitals with referrals links in operation
	II.4. Improved quality assurance and quality management systems	II.4.a. Introduce or strengthen QOC systems, inc. QOC assessments and tools, establishment of QOC	PASARE	No. of hospitals and health centers with IP practices No. of clinics implementing QOC standards	10 SDP with IP practices 3 SDP implementing QOC standards		12 SDP with IP practices and 3 SDP with QOC standards implemented
		II.4.b. Conduct training for QOC	PASARE	No. of QOC training events No. SP trained in QOC and IP	7 QOC training events 72 SP trained on QOC aspects 10 training courses in IP for 120 participants.		3 QOC training workshop conducted for 58 participants. 3 training courses in IP for 31 participants.
		II.4.c. Renovate/upgrade clinics	PASARE FOCUS/NCA	No. of SDP renovated/ upgraded No. of SDP equipped	25 SDPs renovated/equipped		14 SDP (PASARE) and 1 SDP (FOCUS) renovated/equipped

Strategic Objective III: Increased management, financial, and technical capacity of local organizations

Global SO	Program Outcome	Program Activities	PINs or Programs	Measurable Indicators	Expected Achievements	Quarter 3 Achievements	Year-to-Date
SO III	III 1 Strengthened program and organizational management capabilities of local service delivery organizations	III 1 a Conduct long-term strategic planning activities with local institutions	PASARE	No. of functional networks with strategic plans No. of program managers trained in strategic planning	52 program managers trained in strategic planning	1 Strategic Planning workshop for 20 participants	1 Strategic Planning Workshop for 20 participants
		III 1 b Strengthen organizational capacity to design, manage and evaluate FP, RH and MCH Programs	PASARE	No. of NGOs and SDP participating in program design and management activities	6 SDP participating in program design and management activities		
		III 1 c Strengthen human resource capacity to manage FP and RH services	PASARE	No. of program managers trained, by type of training	17 program managers trained in management		
	III 2 Improved financial sustainability of local service delivery organizations	III 2 c Improve training capabilities, training systems of institutions and trainers	PASARE FOCUS/NCA	No. of trainers receiving TOT No. of NGOs receiving TA in training efficiency	40 trainers receiving TOT TBD NGOs receiving TA in training efficiency		15 trainers receiving TOT 10 Peru Office staff trained as trainers in EPI-INFO
III 3 Improved technical capacity of local service organizations	III 3 a Provide TA to local service delivery organizations in QOC, IEC, RH	PASARE	No. of SDP receiving TA, by type of TA No. of hospitals receiving TA, by type of TA	10 hospitals receiving TA in RH/FP/IEC TBD workshop meetings conducted TBD participants	2 hospitals received TA in RH/FP/IEC	7 MOH hospitals received TA in RH/FP	

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Outputs not available from the Ministry of Health

Per instructions from the local USAID mission, all training on FP/RH activities topics will be assumed by the Ministry of Health