



**Technical Advisors in AIDS and Child Survival Program (TAACS)
2003-2004 Annual Report**

**Contract # HRN-C-00-98-00006-00 (TAACS III)
Contract # GPH-C-00-01-00006-00 (TAACS IV)**

August 1, 2003 – July 31, 2004

OVERALL CONTRACT PERFORMANCE

The total number of TAACS increased by six this contract year, obscuring the number of movements into, out of, or within the TAACS program itself. In addition to the 14 positions currently in the recruitment and hiring phase, CEDPA hired ten new individuals this year; effected the transfer of four current TAACS from one position to another within the program; and coordinated the resignation or completions of tour of eight TAACS. CEDPA first experienced a marked increase in TAACS movements into, out of and around the program during the last contract year, and the trend has continued unabated. This challenge has been met by the TAACS recruiting and backstopping teams through effective application of the TAACS transfer policy; a widening scope of recruitment and networking, clearer guidance regarding professional development under the program, and heightened sensitivity to the environment in which TAACS work, especially in light of the new development initiatives (PEPFAR and MCA most notably) changing the face of development work overseas.

On the program management side, TACOMIS¹, the program's web-enabled management system, was completed and launched to USAID and the TAACS early this contract year. To date, feedback from both the USAID managers and the TAACS themselves has been positive and the system has become integral to the management of the CEDPA TAACS Program. CEDPA will continue to work with its subcontractor WDSG to enhance and refine the system for the evolving needs of the program and USAID.

The TAACS Team and CEDPA's leadership continue to be pleased with our positive working relationship with the program's CTO, Bob Emrey, and our USAID liaison, Dale Gibb as well as the support received from senior managers both in the Global Health Bureau and the Office of Education in the Economic Growth, Agriculture and Trade Bureau. This support was particularly helpful during the periods of turnover between USAID Program Administrators this contract year. Additionally, the appointment of an Education Liaison, John Hatch, to the TAACS Program has enhanced CEDPA's relationship with EGAT and increased the use of available education ceiling under the TAACS Program. We feel that such a cooperative and constructive relationship is the foundation of the program's long-term success.

¹ TACOMIS = Technical Assistance Contracts Online Management Information System

PERSONNEL

Start of Contract

During this contract period, CEDPA placed the following 14 individuals (ten new TAACS and four transfers):

Susan McKinney	Selected as Senior Technical Advisor for Immunization, Research Utilization and Technology Development and Introduction, GH/HIDN/MCH (TAACS III). Ms. McKinney started on August 22, 2003.
Anne Peniston	Selected as Senior Health Advisor, USAID/Nepal (TAACS III). Ms. Peniston started on August 27, 2003.
Susan Wright	Selected as the Senior Reproductive Health Program Advisor, GH/PRH/SDI (TAACS III). Ms. Wright transferred to her new position from USAID/Morocco on October 3, 2003.
Kristin Cooney	Selected as Senior Technical Advisor, USAID/WARP – Accra, Ghana (TAACS III). Ms. Cooney started on October 17, 2003.
Marta Levitt-Dayal	Selected as the HIV/AIDS Multisectoral Team Leader, USAID/Zambia (TAACS IV). Ms. Levitt-Dayal started on October 17, 2003.
Rebecca Adams	Selected as the Education Officer, EGAT/ED (TAACS III). Ms. Adams transferred to her new position from the Latin America and Caribbean Bureau on October 20, 2003.
Sonjai Reynolds-Cooper	Selected as the Education Advisor, USAID/J-CAR – Kingston, Jamaica (TAACS III). Ms. Reynolds-Cooper started on November 17, 2003.
Clifford Olson	Selected as the Program Coordinator, USAID/Bangladesh (TAACS III). Mr. Olson started on January 27, 2004.
John Swallow	Selected as the Basic Education Advisor, Latin America and the Caribbean Bureau (TAACS III). Mr. Swallow started on February 17, 2004.
Karen Shelley	Selected as the HIV/AIDS Senior Policy and Technical Advisor, USAID/Mozambique (TAACS IV). Ms. Shelley transferred to her new posting from USAID/Zambia on February 23, 2004.
Nancy Fitch	Selected as the HIV/AIDS Technical Advisor, USAID/Rwanda (TAACS III). Ms. Fitch started on April 28, 2004.
Norman Rifkin	Selected as the Education Policy Advisor, EGAT/ED (TAACS IV). Mr. Rifkin started on May 28, 2004.

Lisa Luchsinger Selected as the Senior HIV/AIDS Technical Advisor, USAID/Zambia (TAACS III). Ms. Luchsinger started on June 1, 2004.

Jim Griffin Selected as the Senior Health Advisor, USAID/Afghanistan (TAACS IV). Mr. Griffin transferred from GH/PRH/SDI to USAID/Afghanistan on July 21, 2004.

Selected Candidates

As of July 31, 2004, the following three finalist candidates have been selected and are in the course of completing the hiring and placement process (two new TAACS and one transfer):

Paul Mahanna Selected as the Resources and Planning Specialist, GH/OHA (TAACS III). Mr. Mahanna's anticipated start date is August 16, 2004.

Susan Monaghan HIV/AIDS Advisor for Care, Treatment and Support, USAID/Tanzania (TAACS III). Ms. Monaghan's start date with USAID/Tanzania will be September 15, 2004.

Janet Hayman Senior Technical Advisor for HIV/AIDS and Tuberculosis, USAID/India (TAACS IV). Ms. Hayman's anticipated start date with USAID/India is November 1, 2004. She will be transferring from REDSO/ESA (Nairobi).

Recruitment Underway

Recruitment is underway, as of July 31, 2004, for the following twelve positions (six new positions and six replacement positions):

Health

1. Prevention of Mother to Child Transmission and Anti-retroviral Technical Advisor, USAID/Nigeria (TAACS IV).
2. Reproductive Health Advisor for Training and Performance Improvement, GH/PRH/SDI (TAACS III). This is a replacement position for Jim Griffin who transferred to USAID/Afghanistan in July 2004.
3. Senior Prevention and Multisectoral Advisor in HIV/AIDS, REDSO/ESA (TAACS III). This is a replacement position for Janet Hayman who is transferring to USAID/India in November 2004.
4. HIV/AIDS Advisor, USAID/Honduras (TAACS IV).
5. Asia and the Near East Regional Specialist, GH/RCS (TAACS III). This is a replacement position for Cathy Thompson, who resigned her position in July 2004.
6. Senior Maternal and Newborn Health Advisor, GH/HIDN/MCH (TAACS III). This is a replacement position for Patricia Stephenson, who completed her contract with CEDPA in July 2004.

Education

1. Senior Education Specialist, EGAT/ED, formerly known as the Basic Education Field Support Advisor (TAACS III). This position was put on hold in November 2003 and resurrected in March 2004 by USAID. It is the follow-on position to the one held by Mitch Kirby in AFR/SD.
2. Senior Education Advisor, USAID/Yemen (TAACS IV).
3. Primary Education Development Advisor, USAID/Afghanistan (TAACS IV).
4. Higher Education Development Advisor, USAID/Afghanistan (TAACS IV).
5. Senior Education Advisor, Asia and Near East Bureau (TAACS IV).
6. Senior Basic Education Advisor, USAID/Egypt (TAACS III). This is a replacement position for Michelle Ward-Brent, who completes her contract with CEDPA in August 2004.

Positions on Hold

Reproductive and Child Health Team Leader, USAID/Indonesia (TAACS IV). CEDPA received the scope of work and transmittal for this position on February 13, 2004, as a follow-on to Monica Kerrigan, who was scheduled to leave post in June 2004. A month later, CEDPA received an email from Molly Gingerich, Ms. Kerrigan’s supervisor, indicating that Ms. Kerrigan agreed to a one-year extension of her contract. Therefore, the Mission requested this position be put on hold until June 2005 when it may be re-recruited.

Senior Education Policy Officer, USAID/Indonesia (TAACS IV). This position was put on hold in July 2004 the Mission requested that CEDPA terminate negotiations with the selected candidate. The position may be re-announced once the Mission reevaluates its staffing needs.

Contract Renewals and Extensions

At USAID’s request, CEDPA renewed or extended the contracts of the following 15 TAACS:

Mary Ann Abeyta-Behnke	Renewed for two years to November 26, 2005
Massee Bateman	Renewed for two years to January 21, 2006
Andrew Clements	Renewed for two years to July 31, 2005
Gary Cook	Renewed for two years to August 1, 2005
Cornelia Davis	Renewed for two years to September 25, 2006
John Hatch	Renewed for two years to December 31, 2005
Kirk Lazell	Renewed for two years to September 14, 2006
Maureen Norton	Renewed for two years to September 7, 2005
Barbara Seligman	Renewed for two years to July 9, 2006
Stan Terrell	Renewed for two years to June 30, 2006
Murray Trostle	Renewed for two years to August 17, 2005
Emily Wainwright	Renewed for two years to October 14, 2005
David Hausner	Extended for one year to January 23, 2005
Monica Kerrigan	Extended for one year to June 30, 2005
Mitch Kirby	Extended for four months to June 18, 2005

Completion of Tour/Resignations

CEDPA experienced eight completions of tour and resignations during this contract year:

- Barbara Sow resigned effective December 19, 2003 to become the Senegal Country Director for FHI. Barbara was a TAACS for a combined four years, first in Senegal then in Rwanda as the Senior Health Advisor for each Mission.
- Taraneh Milani, the Senior Health Advisor for Maternal and Child Health for USAID/Russia, resigned effective March 6, 2004 to join USAID as a New Entry Professional.
- Janis Timberlake, the NGO Health Sector Advisor, completed her contract with CEDPA on July 6, 2004 after eight years at USAID/Tanzania.
- Patricia Stephenson, the Senior Maternal Child Health and Nutrition Advisor for GH/HIDN/MCH, resigned effective July 9, 2004 to become a direct hire employee of USAID.
- Daniel Halperin completed his contract as the HIV/AIDS Behavior Change Specialist for GH/OHA on July 23, 2004.
- Jerry Jennings, the Biomedical Research Specialist for GH/OHA, resigned effective July 30, 2004 to accept a position at the Department of Homeland Security.
- Cathy Thompson resigned effective July 31, 2004 to join USAID/Namibia as a Population Leadership Fellow. Cathy was with the CEDPA TAACS Program for a combined five years, first serving as the HIV/AIDS and Infectious Diseases Advisor with USAID/Nepal then with GH/RCS as the Asia and Near East Regional Specialist.

FOREIGN SERVICE LIMITED TERM APPOINTMENTS

Numerous TAACS based overseas were approached by mission management to consider conversion to the new, five-year Foreign Service Limited Term Appointment status. As of the end of July 2004, no CEDPA TAACS has accepted this offer.

FACILITY CLEARANCE INSPECTION

The Industrial Security Specialist, a representative of the Defense Security Service, conducted his periodic review at CEDPA on April 20, 2004 and found that CEDPA's facility security program is in compliance with the standards and requirements set forth in the National Industrial Security Program Operating Manual. The CEDPA TAACS Program received a "Commendable" rating, an improvement over the last review conducted in September 2002 when CEDPA received a rating of "Satisfactory." The next facility clearance review will be conducted in October 2005.

ADMINISTRATIVE AND TECHNICAL SUPPORT

At the beginning of this contract year, CEDPA was providing administrative support for 60 TAACS (48 Health and 12 Education); at the end of this contract year, CEDPA was supporting 66 TAACS (54 Health and 12 Education) a net increase of six. CEDPA is completing the hiring process or actively recruiting for an additional 15 positions, which, assuming no dropouts would bring CEDPA to a total of 81 active positions under the CEDPA TAACS Program.

Computers

As the TAACS Program matures, the emphasis of the Washington Decision Support Group's (WDSG) effort has shifted from procurement to a mix of technical support and replacement/upgrades of existing equipment. During this contract year, WDSG procured eight desktop computers, eleven laptop computers and nine printers (desktop and portable) for the TAACS Program. These computers and printers were provided for both new positions and existing positions requiring additional or updated computer equipment. WDSG also provided a significant amount of technical support to many TAACS based in Washington and overseas; this support included technical advice, numerous repairs, and additional materials such as toner cartridges, printer cables, and special purpose software. Procurement, repair and technical support detail can be found in the attached WDSG reports (Attachment 2; please note that these reports cover April 30-June 30 2004 only).

Throughout this contract year, CEDPA and WDSG coordinated extensively on TACOMIS' deployment to USAID and the TAACS. In August 2003, the TAACS Program introduced TACOMIS to key Bureau for Global Health staff for the first time; feedback generated from this presentation was subsequently used to design the travel section of TACOMIS and incorporated into the user's guides developed by the TAACS Team for the system. In October 2003, the TAACS Program presented TACOMIS at the USAID Knowledge Fair. TACOMIS was well received among participants and presenters alike (please see Attachment 3 for the fact sheet distributed at the Knowledge Fair). Later than same month, the CTO and USAID Program Administrator gained working access to the system.

In early November 2003, CEDPA introduced TACOMIS to the Washington-based TAACS via three interactive sessions held at the Ronald Reagan Building. The following week, the overseas TAACS received individual emails with usernames, passwords and detailed instructions for accessing and using TACOMIS. In January 2004, the CEDPA TAACS backstops contacted each TAACS regarding the accuracy and currency of his/her individual data set in TACOMIS. Each TAACS was also invited to provide CEDPA feedback concerning TACOMIS' current features and ideas for new features to be incorporated into the system. CEDPA plans to conduct similar 'data audits and updates' semiannually to ensure TACOMIS' data integrity.

Training

The TAACS Program conducted its semi-annual training course, "Essential Training for PHN and Education Technical Advisors" twice this contract year (December 2003 and July 2004). A total of 51 participants attended from a wide variety of USAID hiring mechanisms including TAACS, Fellows, Foreign Service Nationals, US direct hires, contractor employees, CASUs, and New Entry Professionals. In addition to representing a variety of hiring mechanisms, these participants came from diverse specialties and placements, testifying to the popularity and efficacy of the training course. John Pielemeier, the former TAACS Program Director, facilitated the courses. Evaluation results from the December 2003 training course is included as Attachment 4. (The evaluation results from the July 26-30, 2004 are not available as of this writing.)

In late January 2004, the CEDPA TAACS Program sent out a short questionnaire to participants from the previous three training courses (October 2002, April 2003, December 2003) to elicit feedback regarding the training course's methodology and materials. A copy of the questionnaire and its summary report is included as Attachment 5. The CEDPA TAACS Program, in (hopefully!) enhance the training's effectiveness. Evaluation results from the July course, which will include analysis regarding the new features generated by the January questionnaire, will be shared with USAID when complete and included in CEDPA's next quarterly report.

Professional Development

In November 2003, CEDPA issued formal guidance to all TAACS regarding professional development under the TAACS Program (Attachment 6).

TAACS Newsletter

The fifth and sixth editions of the CEDPA TAACS newsletter, *Connect*, were distributed in October 2003 and June 2004, respectively (Attachment 7). Each edition of the newsletter featured articles by TAACS. In the Fall edition, Milly Howard, USAID/Egypt, Gerald Jennings, GH/OHA, Tim Meinke, GH/SPBO and Pamela Allen, USAID/Ghana contributed articles, while the Spring edition included articles by Mary Ellen Stanton, GH/HIDN/MCH, Cathy Thompson, GH/RCS, Sonjai Reynolds-Cooper, USAID/Jamaica and Tim Clary, USAID/Ukraine. The TAACS Team anticipates that the next *Connect* will be issued in Fall 2004.

Compensation

Due to the US Government's elimination of the ES-6 salary level, which was employed by USAID as the ceiling for salaries for all contract employees, the maximum salary payable by the TAACS Program did not increase from 2003 to 2004. CEDPA, along with all other USAID contractors, is employing the 2003 ES-6 maximum (\$134,000) pending USAID's issuance of updated salary parameters. In early April, the CEDPA TAACS Program sent written guidance to the TAACS to inform them of this issue, and updated information on the 2004 compensation ceilings for salary, post differential and danger pay (Attachment 8).

Obligations, Expenditures and Level of Effort (LOE)

CEDPA received five contract amendments against the TAACS III contract this contract year. The purpose of one of these amendments was to reinstate the lump-sum financial schedule format of the original contract. This amendment did not change the terms of the overall contract nor did it add any monetary value. The other four amendments added monetary value totaling \$12,968,912 to the contract, bringing the cumulative funds obligated to TAACS III to \$57,802,332, or 94 percent of the total value of the contract. As of June 30, 2004, CEDPA expended \$52,589,748 against the TAACS III contract (86% of the ceiling) with six months remaining on the agreement.

CEDPA received four contract amendments against the TAACS IV contract this quarter. The cumulative amount of funds obligated to TAACS IV is \$7,627,524, or 25 percent of the total value of the contract. As of June 30, 2004, CEDPA expended \$3,048,602 against the TAACS IV contract (10% of the ceiling) with two and one-quarter years remaining on the agreement.

Both contracts were amended in December 2003 to include the clause "Reporting of Foreign Taxes" in Section H of each contract.

At the end of March 2004, CEDPA exceeded 75 percent of the TAACS III's total authorized level of effort. Per contract regulations, CEDPA notified the Contracting Officer of this milestone on June 22, 2004 and prepared a plan for USAID's approval to maximize the use of the remaining 25 percent of the contract's level of effort. The Contracting Officer requested that CEDPA resubmit its requested plan of action for the contract's level of effort in October 2004. As of the end of June, CEDPA used 80.3 percent of TAACS III's total authorized level of effort of 3052 person months (Attachment 9).

Personnel Changes

The TAACS Team at CEDPA gained a couple of new members over the course of this contract year under new organizational leadership. CEDPA's new President and CEO, Yolonda Richardson, assumed her position in late October 2003. Amy Feldman joined the TAACS Team in December 2003 as a Program Associate and a new part-time Program Assistant, Lindizgya Banda, joined the team in April 2004. Also, two team members, Bernadette Cooper and Carmelia Macfoy, were promoted from Associate to Senior Associate during this contract year.

ATTACHMENTS

1. CEDPA TAACS III and TAACS IV Advisors Summary Tables
2. WDSG Reports (for April-June 2004 only)
3. TACOMIS Fact Sheet
4. Training Course Assessment – December 2003 (without attachments)
5. Training Course Follow-Up Questionnaire Summary Report
6. Professional Development Guidance
7. TAACS Newsletters (Fall 2003 and Summer 2004)
8. Compensation Memo and Guidance Concerning Salary Ceiling for TAACS
9. TAACS III Level of Effort Report
10. Summary Travel Report (for May-July 2004 only)
11. Health Advisors Individuals Reports (for May-July 2004 only)
12. Education Advisors Individual Reports (for May-July 2004 only)

Attachment 1

Last Name	First Name	Cost Center	Location	Contract Start	Contract End	Status
Abeyta-Behnke	Mary Ann	437038	Ethiopia	11/27/2001	11/26/2005	Active
Adams	Rebecca	435400	United States	10/20/2003	10/19/2005	Active
Allen	Pamela	437032	Ghana	9/3/2002	9/2/2004	Active
Allman	James	448033	Tanzania	4/1/2003	3/31/2005	Active
Altaf	Samia	437013	Pakistan	1/28/2003	1/27/2005	Active
Bacheller	Susan	434600	United States	11/4/2002	11/3/2004	Active
Barker	Brad	437043	Senegal	9/5/2001	9/4/2005	Active
Bateman	Osgood	437010	India	1/22/2002	1/21/2006	Active
	Massee					
Bombusch	Alan	440100	United States	12/16/2002	12/15/2004	Active
Bruns	David	437040	Uganda	8/15/2001	8/14/2005	Active
Clary	Timothy	437051	Ukraine	7/11/2003	7/10/2005	Active
Clements	Andrew	433900	United States	8/1/2001	7/31/2005	Active
Cook	Gary	432100	United States	8/2/1999	8/1/2005	Active
Cooney	Kristin	437139	Ghana	10/17/2003	10/16/2005	Active
Cunningham	Amy	448040	Uganda	4/17/2003	4/16/2005	Active
Davis	Cornelia	437249	Kenya	9/26/2002	9/25/2006	Active
Eyango	Vijitha	440400	United States	1/22/2003	1/21/2005	Active
Fitch	Nancy	437168	Rwanda	4/28/2004	4/27/2006	Active
Fox	Elizabeth	431300	United States	8/19/1999	8/18/2006	Active
Friedman	Matthew	437057	Thailand	8/4/2003	8/3/2005	Active
Gibb	Dale	431100	United States	3/1/2001	1/31/2005	Active
Griffin	James	448026	Afghanistan	7/23/2004	7/22/2005	Active
Harbison	Sarah	431500	United States	1/1/2001	8/31/2005	Active
Hatch	John	432900	United States	1/1/2000	12/31/2005	Active
Hausner	David	437024	Cambodia	1/24/2002	1/23/2005	Active
Hayman	Janet	437049	Kenya	1/25/1999	2/24/2005	Active
Howard	Mildred	437121	Egypt	1/28/2001	1/27/2005	Active
Kerrigan	Monica	448017	Indonesia	5/10/2002	6/30/2005	Active
Kirby	Mitchell	448149	Kenya	2/10/2003	6/18/2005	Active
Lans	Deborah	431200	United States	6/1/2001	5/31/2005	Active
Lazell	Charlotte	437067	Namibia	9/15/2000	9/14/2006	Active
	Kirk					
Levitt-Dayal	Marta	448047	Zambia	10/17/2003	10/16/2005	Active
Lewing-Fineman	Tara	431000	United States	1/15/1999	5/14/2005	Active
Lowenthal	Nancy	440300	United States	5/5/2003	5/4/2005	Active
Luchsinger	Lisa	437147	Zambia	6/1/2004	5/31/2006	Active
Malloy	Edward	432800	United States	6/1/1999	5/31/2005	Active
Marshall	Margaret	434000	United States	4/4/2003	4/3/2005	Active
McKinney	Susan	435100	United States	8/22/2003	8/21/2005	Active
Meinke	Timothy	433800	United States	7/9/2001	7/8/2005	Active
Meites	Margaret	434800	United States	7/11/2003	7/10/2005	Active
Monaghan	Susan	437133	Tanzania	9/15/2004	9/14/2006	Active
Morton	Alice	437280	Haiti	7/30/2003	7/29/2005	Active
Norton	Susan	432400	United States	9/8/1999	9/7/2005	Active
	Maureen					
Novak	John	431700	United States	11/1/1998	10/31/2004	Active
O'Rourke	Shelagh	437131	Nigeria	9/24/2001	9/23/2005	Active
Ogden	Ellyn	431800	United States	1/2/1999	12/31/2004	Active
Olson	Clifford	437114	Bangladesh	1/27/2004	1/26/2006	Active

Last Name	First Name	Cost Center	Location	Contract Start	Contract End	Status
Peniston	Anne	437112	Nepal	8/27/2003	8/26/2005	Active
Quain	Estelle	440500	United States	8/7/2002	9/6/2006	Active
Reynolds-Cooper	Sonjai	437082	Jamaica	11/17/2003	11/16/2005	Active
Rifkin	Norman	440600	United States	5/28/2004	5/27/2006	Active
Seligman	Barbara	431400	United States	7/10/2000	7/9/2006	Active
Shelley	Joyce Karen	448064	Mozambique	2/23/2004	2/22/2006	Active
Sonnichsen	Cheryl	437149	Kenya	11/20/2000	11/19/2006	Active
Sow	Christine	448030	Mali	4/1/2003	3/31/2005	Active
Stanton	Mary Ellen	432600	United States	7/1/1999	6/30/2005	Active
Stewart	Lindsay	434900	United States	2/3/2003	2/2/2005	Active
Stout	Maria	437171	Guatemala	7/6/2003	7/5/2005	Active
Swallow	John	435800	United States	2/17/2004	2/16/2006	Active
Taylor	Melinda	437031	Nigeria	4/23/2001	6/30/2005	Active
Terrell	Stanley	437083	Guatemala	10/1/1999	6/30/2006	Active
Timberlake	Janis	437033	Tanzania	4/26/1999	7/6/2004	Active
Trostle	Richard Murray	432500	United States	8/18/1999	8/17/2005	Active
Wainwright	Emily	434400	United States	10/15/2001	10/14/2005	Active
Ward-Brent	Michelle	437021	Egypt	8/29/1999	8/28/2005	Active
Wilson	Melinda	437041	South Africa	6/11/2001	6/10/2005	Active
Wright	Susan	435300	United States	10/3/2003	10/2/2005	Active
Adams	Rebecca	432000	United States	12/7/1998	10/19/2003	Completed
Allman	James	437036	Madagascar	10/1/1998	3/31/2001	Completed
Allman	James	437039	Cote d'Ivoire	4/1/2001	3/31/2003	Completed
Alvarez	Benjamin	434200	United States	11/13/2001	2/21/2004	Completed
Bacheller	Susan	435500	United States	6/26/2001	11/3/2002	Completed
Cavanaugh	Karen	431900	United States	1/8/1999	4/9/2000	Completed
Cavanaugh	Karen	433200	United States	4/10/2000	8/9/2002	Completed
Dixon	Roger	433300	United States	7/17/2000	9/30/2002	Completed
Dykstra	Anne	432200	United States	2/5/2001	2/5/2003	Completed
Etyemezian	Nina	437165	Morocco	7/20/1999	10/12/2001	Completed
Friedman	Matthew	437014	Bangladesh	5/1/1999	8/3/2003	Completed
Gagne	Bernard	437061	Benin	5/19/2000	8/2/2000	Completed
Getson	Alan	431600	United States	10/1/1999	12/31/2002	Completed
Griffin	James	433700	United States	8/19/2002	7/22/2004	Completed
Halperin	Daniel	433600	United States	8/31/2001	7/23/2004	Completed
Halpert	Peter	437042	Guinea	1/14/1999	12/3/1999	Completed
Jenkins	Carol	437124	Cambodia	10/15/2001	7/15/2003	Completed
Jennings	Gerald	434300	United States	3/11/2002	7/30/2004	Completed
Kirby	Mitchell	433400	United States	10/1/2001	2/9/2003	Completed
Landry	Stephen	435700	United States	12/31/1998	3/2/2000	Completed
Landry	Stephen	433100	United States	3/3/2000	4/18/2003	Completed
Milani	Taraneh	437052	Russia	7/3/2002	3/6/2004	Completed
Nolan	Nancy	437380	Haiti	9/18/1998	9/17/2000	Completed
Pressman	Willa	432300	United States	2/8/1999	10/4/2002	Completed
Quain	Estelle	432700	United States	9/1/1999	8/6/2002	Completed
Rambaud	Marylee	435600	United States	1/4/1999	1/14/2000	Completed

Last Name	First Name	Cost Center	Location	Contract Start	Contract End	Status
Range	Elizabeth	434100	United States	6/4/2001	7/11/2003	Completed
Roziewski	Danielle	437081	Nicaragua	9/1/1999	9/30/2002	Completed
Scholl	Edward	437071	Guatemala	3/1/2001	6/9/2003	Completed
Shelley	Joyce Karen	437047	Zambia	6/7/1999	1/26/2004	Completed
Sow	Barbara	437143	Senegal	2/1/1999	7/8/2001	Completed
Sow	Barbara	437068	Rwanda	7/9/2001	12/19/2003	Completed
Stephenson	Patricia	433500	United States	11/1/2000	7/9/2004	Completed
Thompson	Catherine	437012	Nepal	5/1/1999	6/30/2003	Completed
Thompson	Catherine	434700	United States	7/1/2003	7/31/2004	Completed
Timyan	Judith	437080	Haiti	8/31/2001	11/15/2002	Completed
Warren	Marion	437180	Haiti	9/1/1999	8/31/2002	Completed
Wright	Susan	437065	Morocco	10/3/1998	10/2/2003	Completed



WASHINGTON
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***WDSG Quarterly Report
TAACS IV Contract #: GPH-C-00-01-00006-00
April 01 - June 30, 2004***

1.0 Introduction

This is the Washington Decision Support Group's (WDSG) ninth quarterly report submitted to CEDPA under Contract No. GPH-C-00-01-00006-00. Appendix I contains copies of WDSG's monthly reports for the ninth quarter (submitted previously) illustrating expenditures and level of effort to date.

2.0 Accomplishments

2.1. Procurement of Hardware/Software

During this period, hardware/software was purchased for the following TAACS:

- ▼ Norm Rifkin, EGAT/ED - printer, cartridges, cables
- ▼ Jim Griffin, Afghanistan - printer, desktop, monitor, laptop. This equipment already has been ordered and is en route. The Afghanistan Mission changed its mind and now wants to purchase equipment directly. When it arrives, this equipment will be put in inventory and given to another overseas TAACS position.

In addition, equipment has been approved for Don Holsinger, Senior Education Officer/Indonesia. We are waiting for the green light to go ahead and purchase what the Mission requested. We are still waiting to hear back from the Mission in Indonesia regarding equipment for a new TAACS position: Senior Education Technical Advisor.

The Mission in Yemen responded that no new equipment would be needed for the Senior Education Advisor position.

2.2 Technical Assistance

WDSG has begun an inventory of all computer equipment purchased under the TAACSIV contract. In addition, we are cross-referencing this equipment with software licenses. This is a

tedious, and time-consuming process; we are hoping to complete the inventory this coming quarter.

- ▼ Norm Rifkin (EGAT/ED) - set up printer; reconfigured laptop (previously Alvarez)
- ▼ Mitch Kirby (REDSO/ESA) - multiple viruses on his laptop; pickup laptop, remove viruses; update virus definitions and MS definitions, partial rebuild.

2.3. TACOMIS

Significant upgrades to security were made during this period. As a result, these upgrades necessitated “tweaking” of the software application. New versions of perl-DBD-MySQL and jpackage.org were installed on the server. Itext was removed from the TACOMIS package and CFX_query2pdf independently packaged. A kernel was built for 2.4 24-um2 virtual machines; Apache httpd 2.0.49 was installed on Tacomis-public and Tacomis for security fixes. TACOMIS archives were reorganized. The servers were resynch’d; updated documentation on the installation procedure/upgrade was completed.

In addition, a briefing by WDSG, on TACOMIS infrastructure was given to CEDPA staff and a more technical briefing on American fundware and integration was given to the Finance staff.

3.0. Problems Encountered

None.

4.0 Plans for Next Reporting Period

- ▼ technical support as required for all TAACS IV personnel;
- ▼ determination of additional requirements for new recruits;
- ▼ continue procurement, and order equipment as approved;
- ▼ inventory;
- ▼ testing, configuration, shipment of hardware/software for new TAACS;
- ▼ continue refinement (tweaks) of TACOMIS; demonstrations to TAACS, GH.

5.0 Expenditures and Level of Effort

See Appendix I.



TAACSIII
WDSG QUARTERLY REPORT
(April 01 - June 30, 2004)

1.0 Introduction

This is the Washington Decision Support Group's (WDSG) twenty-second quarterly report submitted to CEDPA under Contract No. HRN-C-00-98-00006-00. Appendix I contains copies of WDSG's monthly reports for the twenty-second quarter (submitted previously) illustrating expenditures and the level of effort to date.

2.0 Accomplishments

2.1. Procurement of Hardware/Software

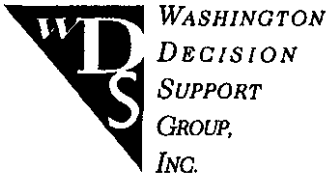
During this period, WDSG purchased hardware equipment for the following positions/TAACS:

- ▼ Senior HIV/AIDS Technical Advisor, Zambia (Lisa Luchsinger): desktop/laptop/ monitor/printer (equipment already shipped);
- ▼ Rwanda (Nancy Fitch): desktop/laptop/ monitor/printer (equipment ordered);
- ▼ printer cartridges for Mary Ellen Stanton (equipment delivered);
- ▼ CDRW for Susan McKinney (equipment delivered);
- ▼ printer cables for Lindsay Stewart and Peg Marshall (equipment delivered);
- ▼ hard drive for Cathy Thompson (equipment delivered);
- ▼ WIFI card for Sarah Harbison (equipment delivered).

In addition, a desktop, laptop, and monitor have been approved for the Senior HIV/AIDS & TB position in India; this is on hold until a candidate has been chosen.

The Missions in Guatemala and Egypt have requested hardware equipment - approval is pending.

Two offices in the RRB have been contacted regarding the procurement of new equipment: no response as of this writing. One office, GH/RCS, stated no additional equipment would be needed for the ANE Regional Specialist position.



2.2. Technical Assistance

WDSG has begun an inventory of all computer equipment purchased under the TAACSIII contract. In addition, we are cross-referencing this equipment with software licenses. This is a tedious, and time-consuming process; we are hoping to complete the inventory this coming quarter.

WDSG provided support for end-users in the RRB and overseas. TA included, inter alia

- ▼ Sarah Harbison - installed wireless card; updated laptop and virus definitions; tested
- ▼ Estelle Quain - set up wireless access via PC card for laptop
- ▼ Deb Lans - picked up the sasser worm and couldn't remove it using the anti-virus software. WDSG picked up the laptop, removed the virus, updated the definitions, and installed old mailbox
- ▼ Susan McKinney - while IRM was installing the new CD-R, the desktop died. WDSG picked up the desktop, ascertained there was a problem with the video card, installed a new one, changed the memory, and tested.
- ▼ Cathy Thompson- tested hard drive in desktop- ok
- ▼ Shelagh O'Rourke - installed new CD/RW-DVD combo drive and necessary IBM software; Tested CD write function; uninstalled NAV2002; downloaded and installed Windows updates; installed NAV2003 and registered; downloaded and installed NAV updates; total System scan.

3.0 Problems Encountered

The problem of storing/disposing of old TAACS computer equipment has not been resolved.

In August 2003, WDSG delivered a desktop for Andrew Clements. Following protocol, IRM removed the hard disk and gave it to WDSG so we could use it for imaging. (WDSG used Clements' machine to build the "image" that we use for RRB and overseas desktops.) We gave IRM a newly imaged drive to put in and asked that it be delivered to Clements. The former contractor, CSC, dropped the ball and a desktop was never delivered. SRA (and new sub Northrup Grumman) are working on it and think they can find it and deliver it. As of this writing, the hard drive is still lost.



4.0 Plans for Next Reporting Period

During the next reporting period (April 01 - June 30, 2004) WDSG plans the following activities:

- ▼ technical support as required for all TAACS III personnel;
- ▼ determination of additional requirements for new recruits;
- ▼ continued evaluation of existing hardware and replace as needed;
- ▼ continue procurement; and order equipment for positions/hardware approved in last quarter;
- ▼ continue inventory
- ▼ testing, configuration, shipment of hardware/software for new recruits;
- ▼ update TAACS database to include new TAACS/positions and other tracking information;

5.0 Expenditures and Level of Effort

See Appendix I.

The Centre for Development
and Population Activities



The CEDPA TAACS Program

Since 1991, CEDPA has assisted USAID in the implementation of priority programs by providing Technical Advisors in AIDS, Child Survival, Infectious Diseases, Population and Basic Education (TAACS). CEDPA is responsible for recruiting, employing and supporting TAACS who provide long term technical and managerial assistance to various USAID technical offices in Washington, DC and missions worldwide; currently, CEDPA supports more than 70 TAACS in 27 countries. CEDPA developed TACOMIS as part of the support it provides the TAACS and USAID offices.

The TAACS Program is managed by the Office of Health, Infectious Diseases and Nutrition in the Bureau for Global Health.

What is TACOMIS?

Developed in collaboration with the program's subcontractor The Washington Decision Support Group, Inc. (WDSG), the Technical Assistance Contracts Online Management Information System is an interactive, web-enabled enterprise application that assists CEDPA and USAID in the day-to-day management of the TAACS Program. TACOMIS is an innovative, flexible management tool designed to capture, organize and analyze disparate contract data for timely program decision making and reporting, available on the Internet worldwide.

Why was TACOMIS developed?

The growth and maturation of the CEDPA TAACS Program necessitated the development of a more comprehensive method of gathering and analyzing program data accessible to USAID and the TAACS. With TAACS in USAID offices worldwide, CEDPA required a tool that could capture contract data in a flexible, contextual format that TAACS around the world could access quickly and securely from their own offices. CEDPA developed TACOMIS as an easily accessible reference and analytical tool to ensure continued transparency, accountability and efficiency for the TAACS Program.

What types of information does TACOMIS house?

TACOMIS stores, organizes and integrates all the information necessary for the day-to-day management of a large, non-direct hire program. Major information categories and examples of the data housed in each category are as follows:

- Recruitment: historical recruitment information and timelines; candidate sourcing; resumes; advertising; scopes of work
- Personnel: medical and security clearances; dependents; emergency contact information; salary histories; post-specific allowances; position scopes of work; focus and function areas (per PHNI definitions)
- Finance: obligations; expenses (imported directly from CEDPA's accounting system); pipeline and monthly burn rates
- Travel: travelers; dates; scopes of work; supervisor approvals; CTO concurrence; costs

What impact has TACOMIS had on the CEDPA TAACS Program?

TACOMIS...

- ...transforms the way CEDPA manages its day-to-day business by cross-tabulating data for dynamic program analysis.
- ...provides ready access to information, thereby enhancing productivity.
- ...centralizes institutional knowledge for both CEDPA and USAID.
- ...allows for quick and accurate information sharing with USAID and the TAACS.
- ...enables USAID Managers to report on and analyze program data quickly for Agency decision making.
- ...cross-tabulates data, thereby optimizing its collection for program decision making.

What type of reporting can TACOMIS produce?

In addition to the ability to view data online, TACOMIS has two types of output functions – reports and queries. Reports contain frequently accessed information and analysis in easy-to-read email and print formats, while queries provide statistical answers to specific questions. All reports are convertible to PDF format and can be emailed directly from TACOMIS.

Who is TACOMIS's audience?

TACOMIS is a distributed database application available to the CEDPA TAACS Program and the USAID TAACS Program Managers. Additionally, each TAACS has access to all his/her contract information, including financial, travel and personnel information. Authorized users are invited to use TACOMIS via a password-protected website on the Internet.

At present, TACOMIS is implemented for the CEDPA TAACS Program. However, it was developed with a view toward possible future application to other non-direct hire programs, technical assistance contracts and cooperative agreements.

What is TACOMIS's infrastructure and security?

TACOMIS is operated on a dedicated, secure server located in CEDPA's Washington office and mounted on its local area network, allowing CEDPA employees rapid and secure access. This server lies behind multiple firewalls and is monitored continuously.

Outside users (TAACS, USAID Managers, etc.) access TACOMIS via a password protected "read only" server located in a secure facility managed by CEDPA's subcontractor WDSG. Data on TACOMIS is written to multiple drive devices and backed up daily, with some copies stored offsite to protect against fire or flood.

What's next for TACOMIS?

TACOMIS will be launched to USAID Managers and the individual TAACS this month. A dynamic product, TACOMIS will continue to be refined over time, including the addition of increasingly complex reports and queries and graphing capabilities. While CEDPA tried to anticipate the needs of the myriad users of TACOMIS, CEDPA expects that the USAID Managers and TAACS themselves will generate ideas for additional features as they use TACOMIS day-to-day. The additions and refinements will allow USAID and the TAACS more flexibility with a wider range of data for analysis.

Please contact Susan Masse, the TAACS Program Manager, at smasse@cedpa.org for more information about TACOMIS.

Attachment 4

EVALUATION OF TAACS TRAINING COURSE

December 1-5, 2003

I. Background

The December 1-5, 2003 course – Essential Training for PHN and Education Technical Advisors – provided training for 24 participants, a smaller number than often in the past and a very good number for this course. They consisted of 3 TAACS, 2 New Entry Professionals (NEPs), 12 Fellows, 2 CASUs and 1 FSN, 2 PASAs, 1 RSSA and 1 other donor (DFID) employee. There was also a better distribution of Washington-based and field based participants in this course than in the April 2003 course when travel was restricted due to the war in Iraq. The largest ever number of education participants signed up for the course. Unfortunately, a major work conflict (completing the education strategy document) led one education participant to completely drop out of the course and severely limited the participation of four other education participants.

The announcement of the course and participant selection was carried out on a timely basis. Demand for the course was high and not all training requests could be accommodated.

Participant attendance of course sessions was generally good, except for the education participants. Approximately 20 participants attended all sessions.

Once again, the course ran on schedule with very few major logistical problems. When snow descended on the Washington area Thursday night, the Monitoring and Evaluation session speaker called early Friday morning to say she would not be able to make her 9 am presentation. She was replaced by the course facilitator, who used her PowerPoint materials. The course facilitator also substituted as co-presenter for the Problem-Solving Techniques session when several past and potential co-presenters were not available for the Thursday afternoon session.

The speakers for the course were once again chosen, with strong CEDPA/TAACS team and USAID input, based on the speakers past performance as assessed by previous participant evaluations and the course facilitator. One new speaker team prepared by attending a "tips for trainers" session provided, pro bono, by Tom Leonhardt.

This course evaluation is based upon: (a) participant evaluation forms completed by 22 participants; (b) comments provided by participants during the "wrap up" session at the end of the course; and (c) the evaluation by the course facilitator. The participant evaluation form requested participants to provide rankings (from 1-10) on the Content and on the Speaker Effectiveness for each presentation. Additional detailed comments on both content and speaker effectiveness were also encouraged.

II. Evaluation Results - a class satisfied with the content (and with the teaching methodology)

The overall program ranking for the course is provided in response to the last question on the evaluation form: "Please rate the overall usefulness of the training course in preparing you for the work you are going to be doing (or in assisting you with the work that you are currently doing)." Nineteen participants (of the 21 who submitted evaluation forms) provided a grade for

the full course. The course score was 8.84, one of the highest grades for the 13 courses that CEDPA and the present course facilitator have conducted since 1995. Thirteen of the nineteen participants ranked the course as either a "9" or "10." All but two participants gave the course a grade of "8" or higher- these two gave the course a "7."

The vast majority of comments made by participants at the wrap-up session and in the evaluation form were positive, and in fact, it was a bit difficult to elicit truly critical comments. Unlike some previous courses, the mix of teaching methodologies seemed to be just right for this class, without any methodology being too dominant. All of the experienced speakers incorporated small group exercises, quizzes or other participation techniques into their presentations. Comments included: "I just thought everything was great;" "terrific training, most useful I have received at USAID;" "course content, training, staff, logistics, food, training room - all excellent;" "extremely competent and pleasant course facilitation."

Participants also had very positive things to say about what they had learned in the course: "Clarified many important day to day activities, jargon, processes, that we face in USAID, VERY USEFUL." At least one participant, possibly a NEP, felt that much of the material presented was not new to him/her: "good overview and introduction but a lot of material was not new to me."

Most of the participants completed Part II of the evaluation form and also in the wrap-up session provided some suggestions on ways to improve the overall course. However, there were fewer critical comments than normally received. These comments are summarized below in relation to (a) Course curriculum and structure; (b) Training methodology; (c) Speakers; (d) Logistics; (e) the course binder; and (f) the course participants. The evaluation rating scores for each individual presentation are found in the annex to this report.

- a) **Course curriculum and structure:** Participants were very pleased with the course curriculum and very few changes were suggested. The only two topics that were identified as "needing less attention" by more than one participant were the Icebreaker and the Knowledge Management sessions, which were viewed as "soft" and largely without any new content. Financial Management, Budget and Procurement were each singled out by at least three participants as topics that should receive more attention. The most useful sessions were Financial Management, Procurement, the visit to Capitol Hill and Budget. The amount of information presented was "a lot, but manageable." Several participants said they were pleased that there was adequate time for discussion and Q&As with speakers. One participant commented that the "mix of USAID/W and field perspective was excellent." The course curriculum and structure, therefore, seem to be about right from the perspective of most participants.

The education participants were somewhat less positive about the curriculum, noting (correctly so) that several speakers were not prepared to give education as well as health examples and sometimes even seemed to forget that education participants were sitting in the training room. One breakout session, Field Support, was conducted for the education participants. The session appeared to be useful, but only three education participants, including the presenter, attended. One participant suggested a separate session to discuss

the Agency structure and strategy as it applies to education. Some mentioned that the binder materials were still heavily weighted towards the health sector.

Several participants indicated in the wrap up and in discussions with the course facilitator that they appreciated the constant availability of the course facilitator to augment and link the content of sessions and to clarify difficult concepts. In addition, they indicated appreciation for his availability for individual and group "follow-up" sessions early each morning before the formal course began.

- b) **Training methodology:** Most participants felt that the course methodology mix was "very good" or "nice," a significant improvement over some previous courses. CEDPA's efforts to encourage speakers to use more interactive techniques have borne fruit. "The small group and role plays were effective". Major small group or interactive exercises were included, in almost every session. Suggestions were made to have more "application" exercises on the model of the field support group exercise, especially for the budget and financial management sessions.

The predominant methodologies of the most highly rated sessions differed significantly unlike in previous years when interactive sessions were the most highly rated. In this course, three of the top six rated sessions were lecture format, two were interactive and one was a panel presentation. The positive response to a variety of primary methodologies may possibly reflect the mix of methodological approaches that is now included in most sessions.

- c) **Speakers:** As corroborated by the participant comments on the individual sessions, the cadre of speakers for this course continues to improve. A number of speakers rated marginal in a past course scored higher in this course after receiving suggestions on their training approaches (e.g., Henderson-O'Keefe, Miller). The speaker rating for the financial management session improved significantly when David Ostermeyer presented the full course, rather than sharing the presentation with a colleague. All three major panels scored well, an improvement over previous courses.

On the other hand, improvements are still needed for some sessions, especially Problem Solving Techniques (where an attempt at reorienting the session failed when a "problem-solving specialist" was not available), Problems of Implementation where a new duo was "effective" but "not very dynamic," and Knowledge Management. The first presenter at the Knowledge Management session was criticized as "too theoretical" and slow. The presentation "could have been done in half the time" and the purpose of the presentation was not clear. This left little time for the professional development opportunities "half" of the session, which most participants found very helpful.

As a whole, however, the participants gave the presenters very high marks as demonstrated by quotes such as: "You assembled an impressive collection of

knowledgeable and experienced USAID staff to act as speakers" and "it was great to have such experienced resource people."

- d) **Logistics:** The comments on course logistics were, as usual, overwhelmingly positive. CEDPA TAACS staffers, Sara Rachmeler, Carmelia Macfoy and Susan Masse, were highly praised for their hard work, helpful support and "great attention to detail." The training setting was "comfortable, friendly and welcoming - good food, great smiles." Susan was also very helpful in making initial contacts with some speakers when the course facilitator was overseas in early November. Sara responded to last minute requests from speakers, participants and the course director with a "can-do attitude" and a smile.
- e) **The Course Binder:** Comments on the course binder and the materials prepared for the course were almost all positive. Many participants carefully used the binder to follow the speakers' presentations - and complained when the speaker did not follow the outline and materials in the binder. Most participants indicated that they would use their binders as resource guides. Some reported that they have seen previous course participants using their binders. One suggested that CEDPA prepare a 3-5 page "quick guide" to the binder to help participants easily find any and all materials in the binder. [CEDPA note: There was a two-page guide in the front of the binder that several participants overlooked.]

Participants were given passwords and other information prior to the course to allow them to access the TAACS technical website. They were encouraged to find and use materials and models on the TAACS technical website that supplemented those in the binder.

- f) **The course participants:** The selection of participants for this course was more effective than in the past in several ways: emphasis was placed on overseas participants and personnel soon to be assigned overseas, which brought a reasonable balance to the course (2/3 USAID/W, 1/3 overseas). In addition, newly hired USAID employees with no practical USAID experience were discouraged from attending and employees with two to six months of experience received preference.

Several participants noted that the class was a good mix of experienced and newer employees, but that very few were truly new to USAID. This corrects a serious problem noted in previous course evaluations. The one truly new USAID employee with less than a week in the bureaucracy (who is being assigned overseas immediately), found the course difficult complaining that it was often "too fast" for her.

The presence of a FSN participant, a DFID exchange employee, and a participant who had previously worked with several UN organizations proved valuable for group discussions.

Yet to be resolved is the problem of how to keep a few very experienced (and very verbal) participants from dominating the Q&A sessions.

III. Key Issues for the Future

a. Meeting the needs of Education participants in the course:

If Education technical advisors are to become regular participants in this course, a good deal more needs to be done to make the course as relevant to them as it is to health advisors. The most basic changes should be: (a) invite more speakers with education or education and health experience; (b) include more educational materials in the binder and on the technical website; (c) ensure that all speakers are aware of the presence of a significant minority of education advisors; and (d) request speakers include education information and examples in their presentations.

b. Training for marginal presenters (repeated):

Each evaluation identifies speakers who either need to improve their speaking/presenting skills or need to be replaced. Prior to the three previous courses, CEDPA was able to provide a very modest level of training for presenters who volunteered to attend a two-hour training session. A highly regarded trainer provided this session free of charge. As demonstrated by the major improvements in the "grade" of the Procurement speaker and the Field Support speakers, this small investment can have a quick positive benefit for the TAACS course and its participants.

Unfortunately, the course facilitator must "beg" trainers to provide pro bono time for this training of speakers. A more responsible approach would be for USAID to provide CEDPA with specific funding to organize a coherent, cohesive set of speaker training interventions so that each marginal speaker is given individual attention in improving his/her skills.

ANNEX -Participant ratings of specific course sessions

Combined (Content &Speaker Effectiveness) Rank Order

Q&A with Senior USAID Officer	Morse
Managing for Results Overview	Henderson
Financial Management	Ostermeyer
The View from the Hill	Flickner, Murray and Fox
New Challenges for BGH	Greene, Rogers and Grayzel
Ethics for Non-Direct Hires	Miller
Field Support	Stone/Lewing
The Emerging Actors	USAID Panel (Wright, Lofgren, Chase)
Monitoring and Evaluation	Kerley (presented by Pielemeier)
Procurement	Horton
Options on Implementing a Strategic Plan	Pielemeier
Budget and the Budget Cycle	McKay
How the USAID Structure Functions	Holfeld and Newton
How PVOs and Contactors see USAID	Panel (Robb, Mackinen and Trayfors)
Icebreaker	Larson
Basic Elements of Implementation	Wright and Hatch
Problem Solving Techniques	Malick and Pielemeier
Information Management/Prof. Opportunities.	Sattah and Turner

Lowest ranked for speaking skills

Sattah
Malick and Pielemeier
Holfeld and Newton
Wright and Hatch

Low ranked for content

Sattah
Malick and Pielemeier
Larson
Wright and Hatch
PVO/Contractor Panel

Attachment 5

Summary of Findings: CEDPA TAACS Training Course Follow-Up Questionnaire

In late January 2004, a short follow-up questionnaire to CEDPA's training course "Essential Training for PHN and Education Advisors" was sent to the participants from the December 2003, April 2003 and October 2002 courses. The purpose of the questionnaire was to solicit feedback regarding the course's methodology and materials, with the goal of enhancing the course's effectiveness for future participants.

Questionnaires were emailed to 75 past course participants over a one-week period. Recipients were asked to return their completed questionnaires to CEDPA by February 20. Overall, CEDPA received 26 completed questionnaires, a return rate of 35 percent. Fifty percent of the December 2003 participants completed and returned the questionnaire. It should be noted that several participants unsuccessfully attempted to send their questionnaires electronically, so the number of responses received (as opposed to completed questionnaires) was slightly higher.

The respondents make up was similar to the demographics of the participants, with the exception of hiring mechanism:

	Questionnaire Respondents	Course Participants
Location		
Washington	77%	82%
Overseas	23%	18%
Focus		
Health	88%	91%
Education	12%	9%
Hiring Mechanism		
TAACS	27%	15%
Fellows	27%	40%
CASUs	27%	10%
NEPs	15%	13%
Other	4%	22%

It should be noted at the outset that the findings from this follow-up questionnaire are not markedly different from those garnered from evaluations completed by participants during the course itself. While the questionnaire was focused on the materials and methodologies used for the course, and the impact the course itself had on the participants' subsequent work, the evaluations distributed and completed during the course focus on the quality of the training and the perceived 'future' impact the course will have on the participant's work with USAID. Both, however, share the common purpose of gathering the participants' insights, experiences and suggestions for analysis to further improve the course's efficacy.

Course Timing in Individual's Tenure with USAID

A majority of the respondents indicated that the timing of the training was appropriate (68%), while a significant percentage (24%) felt the course was later than desirable in their tenure at USAID. All but one of the respondents indicating the course was later than desirable had been in their current positions for more than six months. Both respondents who indicated the course was too early in their tenure with USAID had been in their positions less than one month. This finding reinforces CEDPA's long-held belief that participants should have some work experience with USAID (2-6 months) prior to attending the course; after 6 months, the need to attend the course diminishes. Nonetheless, all respondents (with the notable exception of an education participant) either strongly agreed or agreed that the course was "useful and appropriate to my subsequent work at USAID" and "covered the majority of topics I need to know in my day-to-day work." The lone dissenter felt that the course was "too heavy on health" and "lacked education components." CEDPA recognizes this content problem and is working with the facilitator – and the new Education Coordinator at USAID for the TAACS Program – to address this issue for future courses.

Training Effectiveness

All of the respondents save one indicated that they "strongly agreed" (50%) or "agreed" (46%) that the training course was useful and appropriate to their subsequent work at USAID, and all respondents either "strongly agreed" (23%) or "agreed" (77%) that the training course covered the majority of topics needed in their day-to-day work with the Agency. When posed with the open-ended question of what areas in which the respondent would have liked more information, the responses fell into four general categories (in rank of frequency): (a) the money cycle, including budgeting, funding and procurement; (b) accessing information/knowledge resources; (c) concrete "how-to" skills (e.g., how to make travel arrangements; how to find information, etc.); and (d) Agency information, such as the history/future of USAID, priorities in key topic areas, etc. When asked on what topics they would like less information, 85 percent left the question blank – an indication that for most participants, the course's content is on target. For those who did respond, there was no one issue that stood out – each appeared to be unique to the respondent's individual preferences (health, knowledge management, monitoring and evaluation and managing for results).

All of the respondents felt that the mix of training methodologies was effective, indicating that the combination of presentation styles and activities provided was acceptable to a wide range of participants. One course participant felt that the presenters' skills were uneven, noting that while some presentations were "quite good," other should be "bottled and sold as tranquilizers." The recent emphasis placed on presentation skills – and using small group and individual exercises to emphasize key points – seems to have reaped benefits for the training course.

When posed with the question of what future training courses should focus on, most respondents (72%) indicated that the course should remain "a broad introduction to USAID core procedures, systems and culture." Of the four individuals who indicated the course should focus on "In-depth training on a few operational skills," three felt that the

course came later than desirable in their tenure at USAID, suggesting that the later the timing of the course in an individual's tenure at USAID, the more important it becomes to hone skills in specific operational areas (versus gaining a general understanding of the Agency itself).

Training Binder

The training binder – the bane of all CEDPA program associates tasked with its production each training cycle – by and large received positive responses, although 15 percent of respondents felt that the binder still contained too many materials. (It should be noted that three of these four respondents attended the October 2002 course. Since then, the TAACS Program has made a concerted effort to reduce the amount of materials in the binder to a more manageable size.) Only two respondents reported that they used the training binder “frequently” (8%), while 69 percent reported that they used the training binder for reference “sometimes.” Almost one-quarter of the respondents (23%) reported that they “never” used the binder after the course – a disheartening percentage considering the time and effort involved in the binder's production. Enhancing the binder's usefulness – similar to the effort made in improving the presentations – should be considered for the next training course.

In addition to asking about the usefulness of the materials, participants were asked to identify additional materials that they would like in the binder. Not surprisingly, few responded; of those who provided responses, only two specifically identified materials which could best be described as reference information (a history of USAID and its relationship with the State Department). The general consensus appears to be that the materials provided are more than sufficient and that they should be honed even more to target the needs of the participant group. A ‘pre-training’ questionnaire, included as part of the application process, could aid in this effort. (Currently, the application asks participants to identify “specific areas where this training should be useful to perform your job” which seems to be too open-ended to for this purpose – a type of the “you don't know what you don't know” question.)

Pre-Course Reading

While the issue of pre-course reading is raised prior to each training course, with the idea that there is a need to ensure all participants have a common baseline understanding of the training topics and key USAID issues, CEDPA has yet to developed such materials. When posed with the statement “CEDPA should provide participants with ‘Pre-Course Reading’ so that all participants have the same basic information at the beginning of the course,” 50 percent of respondents “disagreed.” (Interestingly, none “strongly disagreed,” indicating that as a group, they are not adamantly opposed to pre-reading but more disinclined). The other 50 percent of respondents either “strongly agreed” (12%) or “agreed” (38%) that pre-reading should be provided. When asked what type pre-reading should be provided, responses fell into three general areas: (a) budgeting (i.e., the money cycle); (b) an overview of the USAID structure; and (c) miscellaneous ‘tripping’ points for individuals – strategic planning, the ADS and acronyms. A few respondents also indicated that while pre-reading is a good idea in theory, in practice it does not work – specific comments include “who has the time to spend on pre-reading?” and “this won't

work because, honestly, no one will do it anyway no matter how important they may think it is (unless they are a NEP).” One respondent suggested that CEDPA provide the binders to participants prior to the course. This suggestion is not feasible given the current production schedule and potential cost of shipping the binders to each participant, though variations on this idea have been implemented in the past with little success (i.e., giving new participants access to the training website – see results below).

Training Website

The results under this category were discouraging but not surprising. Over 40 percent of the respondents indicated that they did not know there was a training website, and of the remaining respondents, only 12% use the site “sometimes” as a reference for their day-to-day work. Website users indicated that they accessed the site to “find documents” (two) or as a refresher to the training course (one). Given these results, CEDPA needs to examine the utility of maintaining the training website in its current form.

Best and Least and Then Some

At the end of the questionnaire, respondents were asked what they liked best and least about the training course. While many did not complete this section of the questionnaire, those that did had fairly consistent responses in each category. In the “best” category, the respondents indicated that they appreciated the quality of the training facilitation and methodology; the opportunity to interact with colleagues and specialists both in their own technical areas and cross-sectorally; and that they valued the access to and presentations by the senior-level USAID personnel, with several noting Linda Morse’s presentation as being a highlight of the course. In the “least” category, the responses were slightly more varied but broke down in the following categories: (a) paucity of education examples and content; (b) pace/structure of the course; (c) topics were too broad and/or abstract; and (d) quality and content of presentations. These weaknesses in the training course have been mentioned variously in this evaluation.

Some of the respondents had interesting suggestions included in the overall comments/suggestions section of the questionnaire. They are included below verbatim as food for thought and further discussion:

- I suggest that you also offer occasional in-depth and operational information training
- I suggest that you develop presentations that show how education relates to and intersects with other sector activities
- For the procurement section: would have been helpful to have hard copy examples of the different types of procurement instruments - Coop Ag, grant, contract, etc. It would also be helpful to cover what a concept paper is, what a PAD is, what an RFA/RFP is and what they look like.
- There should be a separate course for Washington folks
- We should talk about how to link this in with the USAID plan to start an orientation course. I hope they have already talked to Susan or others (Tom Leonardt specifically)

Suggested Action Items:

1. Include more education examples and content in the training course.
2. Develop 'pre-course' knowledge survey and add to application.
3. Encourage presenters to include more concrete examples into presentations.
4. Increase cohesiveness and time dedicated to the money cycle (budgeting, field support, Financial Management and Procurement).
5. Improve usability of training binder.
6. Rethink training website.
7. Introduce pre-course reading materials (suggested materials include a short history of USAID, acronyms, current key Agency priorities, and a narrative and chart on the Agency's structure).
8. Build in more socializing time for participants [see comments re: pace/structure in the "Best and Least and Then Some" section above]



OFFICE MEMORANDUM

August 9, 2004

To: TAACS New Hires
From: Bob Chase, TAACS Program Director
Subject: Professional Development

It has been called to our attention that there is no extant policy statement regarding attendance by TAACS at professional development opportunities. The following guidance has been cleared by the Cognizant Technical Officer (CTO) and should be considered effective immediately.

The CEDPA TAACS Program permits and pays for all TAACS to attend conferences and courses that will expand their knowledge and networks in ways that have payoff as they pursue their duties and responsibilities under their contracts. (The TAACS training program at CEDPA, and for many, CTO training, are both especially encouraged.) However, since the TAACS Program is not a "career" program, it is important to recognize that the program does not support opportunities of a longer-term, professional development nature.

It is the USAID supervisor's determination as to the overall cost-effectiveness of the initiative that is controlling; evidence of same must be presented to CEDPA for pre or post payment. The time away from prime duties as well as (a) a rationale and (b) an estimate of all costs (any fees, travel costs, and per diem) must be approved by the supervisor. In addition, if the conference or training involves international travel it must be pre-approved by the CTO in the usual fashion. TAACS and their supervisors may wish to anticipate and budget for such initiatives in the process of calculating future obligational requirements for TAACS positions.

CONNECT

Summer 2004

Obstetric Fistula: A Catastrophic Maternal Disability

Mary Ellen Stanton
Senior Reproductive Health Advisor
Maternal and Child Health Division
Office of Health, Infectious Disease and Nutrition
Bureau for Global Health

Complications of pregnancy and childbirth are a leading cause of death and disability among women of reproductive age in developing countries. In addition to more than 500,000 maternal deaths annually, it is estimated that 15 to 20 million women develop disabilities as a result of pregnancy and childbirth. One of the most devastating is obstetric fistula that affects an estimated 2,000,000 women worldwide (WHO, 1989). The problem predominantly affects women in sub-Saharan Africa and south Asia. Each year, an estimated additional 50,000 to 100,000 women are affected.

Obstetric fistula is an abnormal opening between the vagina and the bladder or rectum (or both). Fistula, when connected with pregnancy, is a result of extreme pressure and tissue damage during prolonged or obstructed labor as the fetus attempts to pass through the mother's birth canal. If a timely caesarean section delivery is not available to end the ordeal, the baby is usually stillborn. The fistula that has formed permits the uncontrollable passage of urine and feces into the vagina.

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Photo © 2003 Shaleece Haas

A woman undergoes physiotherapy at the Addis Ababa Fistula Hospital in Ethiopia.

Women who suffer from fistula have not only, in most cases, lost their babies, but also constantly leak urine and feces, producing a foul odor. In addition, some of these women also suffer neurological damage that can affect their ability to walk. Women with fistula usually feel shamed or disgraced, and are often deserted by their husbands and cut off from family, friends and daily activities, resulting in a life of isolation and destitution.

The young and the poor are disproportionately affected. The women most at risk include the very young, women having their first birth, and women whose growth has been stunted due to malnutrition and childhood illness. Women who live in rural areas without access to services and women who use home delivery and traditional care are at highest risk. While most women suffering from

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A Note from the Director



Dear TAACS colleagues,

Let me just share with you a few notes about recent and prospective activities at this end as summer nears:

- We have been pleased at the level of interest and engagement in the program on the part of CEDPA's new President and CEO, Yolonda Richardson. Yolonda has briefed herself thoroughly on our systems and activities, has met with the CTO and key bureau managers in USAID, and carefully reviews individual performance appraisals in the process of making decisions about salary increases. She makes an effort to meet all the new TAACS during their orientation, as well as to visit with those who come by the office on TDY. Don't hesitate to reciprocate!
- There have been a variety of recent ways in which the spotlight has been raised on the critical role of education in an effective US government development portfolio: heightened Congressional interest; significant increases in appropriations for basic education; a new education strategy for USAID; prominence in the new guidance regarding determinations for Millennium Challenge Account eligibility; and (closer to home) a major increase in the number of TAACS positions that have recently been processed in the education sector (e.g., Jamaica, Indonesia, Afghanistan, Egypt, as well as several in Washington). We expect by midyear there will be 15 education TAACS in the system, and while this number is – and will remain – modest compared to the health related disciplines, it constitutes a significant increase over recent years. Much of the credit for this new contribution rests with John Hatch, himself a TAACS in the Bureau for Economic Growth, Agriculture and Trade (EGAT), who has been serving as the ad hoc liaison and expeditor for these purposes with us, with EGAT, with the regional bureaus and field offices, and with our CTO.
- I once again remind all TAACS to touch base with us as soon as you are asked to work on (and before you start) any design or procurement action that might involve CEDPA, and thus a possible conflict of interest. A formal

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CEDPA is a non-profit international organization whose mission is to empower women at all levels of society to be full partners in development.

TAACS Team

Program Director: Bob Chase
Program Manager: Susan Masse
HR Manager: Helen Farinella
Sr. HR Associate: Bernadette Cooper
Program Associates: Carmelia Macfoy
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Iraq Health Program: A USAID TAACS Perspective

Cathy Thompson

Asia/Near East Regional Specialist

Office of Regional and Country Support, Bureau for Global Health

Detailled to the Office of Iraq Reconstruction

A Snapshot

The health program in Iraq is very complex and unlike any other work that I have experienced while working with USAID. USAID functions in Iraq under the auspices of the Coalition Provisional Authority (CPA), whose health advisor, Jim Haveman was the de facto Health Minister until early April 2004.

The CPA's health advisors work in collaboration with Iraqi counterparts to run the Ministry of Health (MOH). USAID received money through the first congressional supplemental in 2003 to carry out development activities and with that, the USAID health program funded a contract and two grants to start programs in Iraq, with one year awards going to Abt Associates, WHO and UNICEF. These awards will soon be completed;

USAID recently issued a request for proposals to utilize funds allocated to USAID from the FY 2004 Iraq supplemental to continue its work in Iraq.

The health statistics in Iraq continue to be grim. While recent studies have not been feasible, the data reported by UNICEF in CY 2000 paints a solemn picture: the infant mortality rate is 102, the under-five mortality rate is 125 and the maternal mortality ratio is 294. The total fertility rate of 5.4 is much higher than others in the region; the most common causes of childhood deaths are diarrheal disease and pneumonia – both preventable and treatable. Chronic malnutrition is at 20 percent and 60 percent of the population is dependent on

- monthly food rations now being delivered by the World Food Program and the CPA.

- A major cause of concern is human resources. Iraqi health professionals have been isolated from the international community for at least the past 10 to



Thomas HartweMUSAID

- 15 years and have not been able to keep current with new technologies and approaches. Most countries now recognize the importance of preventive care with an increase in the use of family practice specialties, a primary health care emphasis and use of highly trained nurses to take on many of the routine health activities. A majority of the doctors in the country are trained in specialty areas, leaving primary health care and family practice severely short-staffed. There is also a lack of health care managers in the country to efficiently manage the hospitals and primary health care centers.

- Another aspect of the human resource problem is the shortage of nurses, with doctors outnumbering nurses and with most current nurses lacking adequate training. In the past, the health care system relied heavily on foreign nurses to run the hospitals and clinics. After the Gulf War, these nurses left the country and did not return. A solution to this shortage is complicated by the fact that nursing is not considered a career for a religious woman and those practicing nursing are

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Transitions

New Staff

Lindizgya "Linda" Banda joined the CEDPA TAACS Team in April 2004 as its part-time Program Assistant. Originally from Malawi, Linda graduated from the University of Maryland's School of Behavioral and Social Sciences with a BA in economics; she also received a citation in international studies. Currently, she is a student at American University pursuing an MA in international development with a concentration in health. She has a particular interest in HIV/AIDS and AIDS orphans in the African context.



Kristin Cooney joined the CEDPA TAACS Program in October as the Senior Technical Advisor in Reproductive Health and Child Survival for USAID's West Africa Regional Program. Based in Accra, her work covers eighteen countries in West Africa.



Kristin has worked extensively in Africa since 1990 and most recently served as the Country Director for PRIME II/Intra in Rwanda. She has over eighteen years experience implementing integrated and gender-sensitive approaches

to family planning/reproductive health, child survival and maternal child health programs. Kristin holds an MA in government from Georgetown University and a BA in political science and French from James Madison University.



Amy Feldman joined the CEDPA TAACS Team as Program Associate in December 2003. Most recently she worked on the Department of State's International Visitor Program at Meridian International Center. Prior to Meridian she was a Peace



Corps Volunteer in Bangladesh. In addition to teaching English and training primary school teachers, she worked with staff at local and international NGOs, including SETU, CARE and Action on Disability and Development. She has also served as an AmeriCorps volunteer in Seattle, Washington and Charleston, South Carolina. Amy holds a bachelor of fine arts degree in jewelry and metalsmithing from the Tyler School of Art at Temple University.



Nancy Fitch is the HIV/AIDS Technical Advisor for USAID/Rwanda. Prior to becoming a TAACS she



worked in Armenia as a Primary Health Care Advisor with the Armenia Social Transition Program for Abt Associates. Nancy has over twenty years' experience working in the US in primary health care delivery, clinical medicine, quality of care

and public health. From 1990 to 2001 she served as the Director of University Health Services for the University of Montana. Nancy has a doctorate of medicine from Duke University and a BA from Brown University.



For over 25 years **Marta Levitt-Dayal** has worked in the global health field, providing technical assistance and leadership for research, strategic planning, training, social mobilization and service delivery programs in Asia, the Pacific, and now Africa. Marta has worked for CEDPA for six years, first as Chief of Party/Country Director for CEDPA in India and now, in her new role, as the Multi-Sectoral HIV/AIDS Team Leader for USAID/Zambia. Marta worked for ten years at the Ministry of Health in Nepal as a Senior Advisor in the areas of maternal health, child survival, family planning and STI/HIV/AIDS where she spearheaded the development and social marketing of the Sutkeri Samagri disposable clean delivery kit. She is a founding member of the Safe



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Transitions, continued from previous page

Motherhood Network in Nepal and the White Ribbon Alliance in India. Marta received her master of public health degree and doctorate of medical anthropology from the University of Honolulu and population certificate in conjunction with the East West Center.

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Lisa Luchsinger accepted the position of Senior HIV/AIDS Technical Advisor for USAID/Zambia. She will be joining the CEDPA TAACS Program in June as the primary manager of the President's Emergency Plan for AIDS Relief planning and related activities, and reporting for the Mission's health-related HIV/AIDS program. Lisa previously worked as a Centers for Disease Control and Prevention TAACS in Honduras and a Population Leadership Fellow in Washington, DC. She holds a BA in psychology from the University of Wisconsin-Eau Claire and an MA in public health in health education and health behavior from the University of Michigan.

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Clifford Olson joined USAID/Bangladesh as the Program Coordinator of the Population, Health and Nutrition Team in January 2004. Cliff has worked for seventeen years as a private consultant in the health and population sector. Much

of his work has focused on information systems and logistics. Most recently, he served as the Chief of Party for a USAID reproductive health project in Albania. Earlier, Cliff served as Chief of Party for USAID health projects in Lesotho and India. In total, he has worked in 37 countries. At the USAID Mission in Dhaka, Cliff supervises projects in social marketing and logistics.

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Sonjai Reynolds-Cooper began her work as the Education Advisor to the Caribbean Center for Excellence in Teacher Training at USAID/Jamaica in November 2003. Sonjai has extensive experience in managing basic education projects



and providing technical training in the areas of primary teacher training, partnership development and enhancing parental involvement in education. She holds postgraduate and graduate degrees in international education policy. Her TAACS position in Jamaica signals the beginning to her work in educational development in the Caribbean, though she has over 15 years experience in educational development in Africa. Sonjai is "excited to have this opportunity to contribute to such an important Caribbean educational development initiative."

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In May 2004, **Norman Rifkin** joined the CEDPA TAACS Program as Policy Advisor in the Education Office of the Bureau for Economic Growth, Agriculture and Trade. Norman is a former secondary school principal and schools superintendent who has served as a Country Director for the US Peace Corps in Cameroon. He then served as a USAID Foreign Service Officer in Ivory Coast (REDSOW), Mali, Senegal and Indonesia, with tours in Washington as Head of the Africa Bureau, Latin America Bureau and the former Global Bureau's Education Office. Norman also served as Director of Policy and Programs for the Global Bureau's Education Office. He served four years as Director of International Cooperation for ORT, a London based international NGO specializing in vocational and technical training. Norman has undertaken several consultancies over the past few years in Zambia, Macedonia and India. Most recently, he was the



Senior Education Advisor for the Office of Iraq Reconstruction at USAID. Norman, who holds degrees from SUNY Binghamton, Hofstra University and New York University, is married with four children and rides a Harley Davidson for recreation.

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The Caribbean Center for Excellence in Teacher Training:

Achieving Results and Building on Success Across the English Speaking Caribbean

Sonjal Reynolds-Cooper
Education Advisor
USAID/Jamaica

Two important studies prepared by the National Research Council (1998) and the National Reading Panel (2000) have contributed greatly to what is known about learning to read and reading, informing both the design and implementation of the Caribbean Center for Excellence in Teacher Training. One key finding is that delayed development of reading skills affects vocabulary growth, alters children's attitudes and motivation to read and leads to missed opportunities to develop comprehension strategies. Another finding is that when children fall behind in the growth of critical reading skills, they have fewer opportunities to practice reading. Children who are poor readers during the first three years of elementary school rarely acquire average level reading skills by the end of elementary school. Moreover, there is an ever increasing demand for higher level literacy skills in society, and children who do not develop strong literacy skills grow up to become adults with low levels of literacy, putting them at a disadvantage in societies that require effective reading skills.

It is against this background that the Caribbean Center for Excellence in Teacher Training has begun setting examples and building on success in improving the way reading is taught, and developing and enhancing the literacy skills of children in the early primary years. The Caribbean CETT is an important intervention because low school achievement levels plague the hemisphere, with approximately 30 percent of primary schools students failing to acquire the basic cognitive skills necessary for success at the secondary school level. Lower English literacy is even more pronounced within lower socioeconomic groups, in remote areas, and among Creole-speaking communities. In addition, most teachers and school administrators have limited teaching materials, little



Delhia Palmer

support in the classroom and training that is not suited for dealing with the needs of disadvantaged students. Yet the Caribbean region acknowledges the pivotal role of education in socioeconomic development and continues to make considerable investments to education in general, and to primary education in particular. CETT is one of its significant and innovative investments.

The Caribbean Center of Excellence for Teacher Training is one of three educational centers in a hemispheric initiative announced by President George W. Bush at the April 2001 Summit of the Americas. CETTs in Central America (Peru) and Latin America (Honduras) and the Caribbean (Jamaica) aim to upgrade the skills of classroom teachers so that they become more effective early primary grades (1-3) reading instructors. CETT also assists teacher training institutions in producing highly skilled and motivated teachers who will teach

Continued on next page

and promote reading in their classrooms. The initiative's five central components include:

- Diagnostic tools to assess student performance;
- Materials development focused on addressing key reading problems;
- Teacher training to improve pedagogical skills;
- Action research to enhance tools, materials and teacher training; and
- Information and communication technology aimed at improving the linkages between participating institutions and disseminating training materials.

The Caribbean CETT Approach

In the Caribbean, CETT is managed by the University of the West Indies, Joint Board of Teacher Education and targets the English-speaking Caribbean. At present, the five countries participating in CETT include Jamaica, Guyana, St. Lucia, St. Vincent and the Grenadines, and Belize. In conjunction with national teachers colleges, approximately six to seven primary schools benefit from CETT interventions in each country. Rural and urban poor communities, especially those in remote areas, and schools with a significant enrollment of Creole speakers are targeted. The Caribbean CETT approach is to assist schools in identifying factors that may inhibit students from mastering reading, and lend support in designing interventions that will help students overcome the challenges they face in learning to read. The initiative uses action research to provide continuous improvements in teacher training, teaching and learning materials, the use of information and communication technology, and the mobilization of parents or communities as appropriate. These interventions are also enhanced by professional development activities for teachers both in the participating colleges and schools.

CETT represents an innovative approach to enhancing the teaching and learning of reading because it is completely grounded in the most up-to-date research findings about the importance of reading and effective strategies for teaching

reading. CETT has trained and encouraged teachers to use action research in developing teaching strategies for their classroom that are specific to the individual needs of their classes. Classroom teachers are also encouraged to utilize more child-centered, participatory methods and approaches to teaching and learning.

Another pioneering effort that forms part of the CETT model is the public/private partnership component. Public/private partnership supports the Global Development Alliance initiative announced by Secretary of State Colin Powell in May 2001 and helps leverage significant resources, expertise, creative approaches and new technologies to address international development issues. In the Caribbean, the public/private partnership support has enabled CETT to enhance the classroom libraries in over 60 schools, facilitate regional trainings and improve information and technology (e.g., website design). An interesting byproduct of this private/public sector support is that parental involvement in some schools has also increased.

Accomplishments

After only 17 months of implementation, significant accomplishments achieved through the Caribbean CETT include:

- Development and ratification of common standards for the preparation of primary school teachers in reading instruction by all teacher training colleges in the Caribbean region;
- Development of standards for literacy achievement in grades 1-3, which are currently with the Caribbean Community (CARICOM) Ministers of Education for adoption as the official standards of the Caribbean; and
- Training of over 215 teachers in reading instruction.

On an anecdotal level the results of the Caribbean CETT can be seen as well: According to Mrs. Johnson, a first grade teacher in Jamaica, "I have developed a real understanding of how a [big] book can be used on several occasions to teach for

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Improving Maternal and Infant Health in Ukraine

Tim Clary

**Senior Technical and Policy Advisor for HIV/AIDS and Reproductive Health
USAID Mission to Ukraine, Belarus and Moldova**

The call from the mission's reception desk informed me that the head of the obstetrics department from Donetsk Clinical Hospital #6 was in the office to see me about an urgent matter regarding USAID's Maternal and Infant Health Project. On the one hand I was surprised, because not only did I not have an appointment with this person, but also Donetsk is at least a seven-hour drive from Kiev. On the other hand, I wasn't surprised in the least – two chief physicians from maternity hospitals in Kiev had done something similar in the last few months. One of them had been calling me weekly, sending me letters and invitations to visit his hospital, and telling me how his colleagues' hospitals were of much poorer quality than his. Why all of this intense interest and competition to be included in USAID/Ukraine's Maternal and Infant Health Project? Simple – in the eighteen months since its initiation the project is producing significant results.

Despite having nearly 100 percent literacy, Ukraine's maternal mortality rate is at least three times higher than Western European countries and its infant mortality rate is at least twice as high. These rates are based on official statistics that often grossly underestimate the true severity of the problem. Additionally, approximately 70 percent of pregnant women in Ukraine experience pregnancy-related health problems and are subsequently hospitalized, and 10 percent of all pregnant women suffer life-threatening complications during pregnancy. Some of the root causes for these statistics are outdated training of medical professionals, treatment protocols and medical equipment, and poor referral systems. The result is that there is a low regard for the health care system and thus, pregnant women perceive little or no need to receive perinatal care unless an emergency arises.

John Snow, Inc. (JSI) is implementing the four-year Maternal and Infant Health Project, for which I am the Cognizant Technical Officer. It is currently being implemented in three oblasts (Donetsk, Lviv, and Volyn) and the Autonomous Republic of Crimea. [An oblast is equivalent to a small US state.] Each oblast presents a unique challenge yet they also share many commonalities. The needs assessment conducted at the beginning of the project revealed a number of findings that had to be addressed. For example, the process of labor and delivery was over-medicalized with women receiving unnecessary antibiotics, episiotomies, and having labor induced when not needed. There was little privacy, no family involvement, an overly long postpartum stay, and poor practices in caring for newborns, including a lack of cohesive counseling on breastfeeding.

To address these and other concerns about the low level of maternal and infant health in Ukraine, USAID designed a project that would improve perinatal counseling and services at the primary health care level; enhance the skills of both specialists and family health practitioners to identify pregnancy complications; enhance newborn care through techniques such as improved neonatal resuscitation, breastfeeding and infection control; strengthen family planning services during both the postpartum and post-abortion period; improve linkages between relevant service providers; foster family-centered maternity care; and institute a monitoring and evaluation system to provide programmatic feedback. All of the activities under this project are aimed at reducing by 20 percent, on average, the maternal and infant mortality rate in the project site oblasts.

Continued on next page

To date JSI has focused on providing the sites with basic needed equipment, distributing information, education, and communication materials to pregnant women, strengthening postpartum reproductive health counseling, and in general introducing and training the health care providers in international evidence-based practices for the antenatal period, birthing period and neonatal period. What has also been particularly effective is that the mission has, in a sense, partnered this project with another one of our projects that focuses

on reproductive health. This project is being implemented by The Futures Group/The POLICY Project. The POLICY Project has been working the last few years in Ukraine on revising national protocols in the areas of reproductive and maternal health to make them more evidence-based and in conformance with



international standards. By involving JSI's project and its participants in the POLICY Project's Policy Development Group, we have created a beneficial feedback loop. In other words, JSI's local level work is able to ground-truth the development of the national level protocols and the POLICY Project's national level work is thus more reflective of what is needed at the clinical level. Both projects have also very wisely given the Ukrainian Ministry of Health a prominent role in the development process, thus ensuring the Ministry's buy-in and also cultivating an advocate within the greater discussions of the Government of Ukraine.

So what are some of the results that this project is achieving that has so many physicians and health administrators interested? The most striking example is what has occurred in Donetsk Maternity Hospital #3: the percentage of deliveries involving

an episiotomy decreased from 21.5 percent before the training to 11.5 percent after the training; cesarean sections have dropped from 18 percent of deliveries to just over 11 percent; the average daily weight increase per baby has increased by seven grams; and the number of normal deliveries (as defined by a vaginal delivery without medical stimulation, forceps and episiotomy) has increased from a total of 22 in 2002 to 68 for the last four months of 2003 after training. Perhaps most dramatic is that the percentage of newborns

experiencing hypothermia has dropped from 63 percent pre-training to virtually 0 percent after training. In short, these hospitals are becoming more mother, family and baby friendly.

As I was finishing writing this short article there was a knock on my office door. A

USAID/Ukraine colleague had a letter

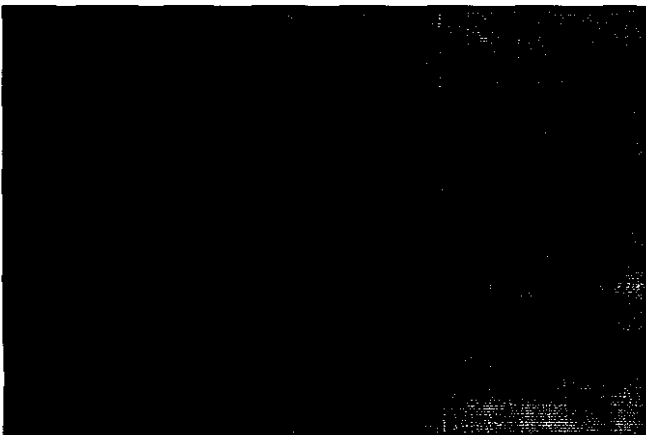
for me from a First Deputy Minister for the Ukrainian Ministry of Health. It read in part "Assistance rendered under the mother and child health project has helped develop obstetrics and gynecology assistance protocols in Ukraine based on modern approaches... To most expeditiously introduce clinical protocols into health practice at all levels of obstetrics and gynecology assistance... We request that you consider the issue of helping arrange training workshops for oblast obstetricians and gynecologists, for health care university and medical vocational school faculty." Not only has this project had an impact in its first eighteen months, and not only do we expect it to have an impact for the remainder of the project's life, but now we have the opportunity to have a lasting impact on how maternal and infant health services are delivered in Ukraine for years to come.

different objectives." As a result of training received through CETT, teachers are becoming more effective in teaching and reading; through the application of strategies and the material resources provided to schools, the CETT approach is having a positive impact on student's reading achievement.

Mrs. Smart, a grade three teacher in another Jamaican primary school relates the significance of the classroom library in encouraging her students to read. "One day, I decided to read a story to the class. Chevaughn, a boy who had never shown interest in books, selected the book that I should read to the class. It was Peter and the Wolf. After reading the story, Chevaughn asked me to read the story again. Everyday, he would try to read this book. One day, he came and read the book for me. It brought tears to my eyes. Chevaughn is now one of my star students."

One teacher in St. Lucia observes that a partnership is being developed between teachers and parents to develop classroom environments more conducive to learning. Parents have supported the teacher by providing large pieces of cloth to make curtains and constructed shelving for the books contributed through CETT.

While these are yet a few examples of practical successes, the Caribbean CETT is still in its infancy, having become fully operational in 2002-2003. Future plans include greater information, communication and technology via Wide Area Network connectivity, and the expansion to additional English-speaking islands in the Caribbean.



CEDPA Highlights

2004 Perdita Huston Human Rights Award given to CEDPA Partner and Alumna

CEDPA is pleased to announce that longtime partner and alumna, Madame Fatoumata Traoré, was awarded the 2004 Perdita Huston Human Rights Award on May 6th in Washington. The



award, administered through the United Nations Association of the National Capital Area, recognizes the life and work of outstanding advocates for women's rights in the Third World. Madame Traoré also provided a briefing on Capitol Hill about her globally recognized work to promote women's reproductive health and women's rights in Mali. At the briefing she was joined by CEDPA's President & CEO, Yolonda Richardson, in an informative discussion of the pressing issues of women around the world. "It is clear that one cannot speak of human rights, or women's rights, without taking into account both economic and social as well as cultural rights," Madame Traoré said at the briefing.

She also emphasized the need to provide financial, training and leadership support for local organizations: "Decentralization and democratization go hand in hand with work at the grassroots level. In the countries of sub-Saharan Africa, we can never talk about our three "Ds" – decentralization, democratization and development-without involving the NGO community and the private sector. Our governments and our NGOs complement each other's work at the community level. No government can reach the community all alone."

A longtime partner and an alumna of CEDPA's leadership training program, Madame Traoré is the Executive Director of the Association for the Development of Population Activities (ASDAP) of Mali, a nongovernmental organization based in Bamako. From her work to provide reproductive health and family planning services to women in

some of the most remote and isolated parts of the world, she tells of amazing struggles by women to grapple with issues such as female genital cutting, access to health care providers for the delivery of babies, and the impact of HIV/AIDS on Malian communities.

For more information on the Perdita Huston award, please visit www.perditahuston.org.

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Nepal – Adolescent Reproductive Health

CEDPA/Nepal is launching a new project in adolescent reproductive health. Funded by USAID through the CATALYST consortium, this project seeks to build reproductive health awareness among adolescent girls in conflict-affected districts in Nepal. Through local partners, CEDPA will work with girls both in and out of school to provide literacy training and nonformal education based on CEDPA's Choose a Future curriculum as well as linking girls to formal education and health services.

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New Headquarters Staff

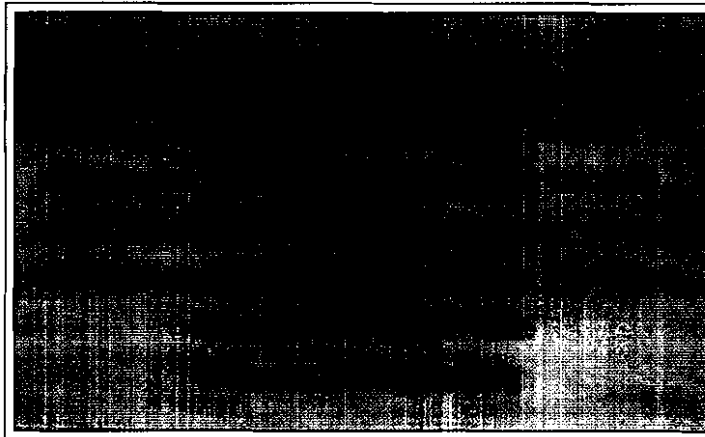
We are pleased to announce that two new technical experts in HIV/AIDS and monitoring and evaluation will be joining CEDPA in mid-June. CEDPA's new Senior Technical Advisor for HIV/AIDS is Karen Nurick. She has more than 25 years experience as a Foreign Service Officer with USAID, designing and managing programs and providing technical assistance in health, nutrition, child survival and HIV/AIDS in over 35 developing countries. CEDPA's newly appointed advisor for monitoring and evaluation, Jill Posner, is a seasoned social scientist with more than 25 years experience conducting research and evaluation on projects and issues related to health, education and psychology. She has spent 20 years working in West Africa, Latin America and other parts of the developing world.

fistula acquired this disability as a result of prolonged obstructed labor, reports from eastern Democratic Republic of Congo record traumatic fistula as a result of rape in war.

Prevention

In the industrialized world, obstetric fistula is almost unknown. The reason is that most cases have been prevented. Access to skilled care including surveillance in labor is key. Whether or not a woman delivers at home, or in a health facility, there is time to detect prolonged labor and take action before the mother has prolonged, significant pressure on soft tissues to cause damage to her internal urinary, intestinal and reproductive systems.

One proven tool is the partogram that assists midwives and doctors to plot the progress of labor, as well as the condition of the mother and fetus. If any deviation from normal progress is noted on the partogram, the birth attendant is given a visual cue to be on the alert and to take action.



This tool can be used in all settings where there is a skilled birth attendant and will allow timely initiation of transfer of the laboring mother, if necessary, and get her to a place where assisted delivery can be performed. In addition to skilled attendants and availability of emergency obstetric care, there needs to be a functioning referral system in place so that timely transfer to life saving care, in most cases a caesarean section, can be achieved.

Fistula Repair

In the event that prolonged or obstructed labor is not detected in time to prevent the problem, surgical repair is possible, but often inaccessible. A large proportion may have a relatively "simple" tear that requires fairly straightforward surgical repair. Complicated cases of fistula involving extensive tissue damage and scarring need sophisticated surgical expertise. For all cases of repair, surgical

expertise needs to be coupled with excellent postoperative care, including high quality nursing care as well as psychosocial support. Currently, infrastructure and surgical capability to provide repair is profoundly inadequate. Dr. Kees Waaldyk has noted, "If no more fistula occurred in Nigeria starting today, with existing capacity... it would take 40 years to repair every one."

Rehabilitation

Women who come for repair are often ashamed. Likewise, they are typically unemployed and have been rejected or isolated by their families. They lack support systems and persons to help them with this personal catastrophe. Experts working with

fistula patients have found it

essential to support skills training and psychosocial reintegration to move beyond only surgical repair to social rehabilitation. The Addis Ababa Fistula Hospital has led the way in modeling approaches to social rehabilitation involving communities to decrease the stigma

associated with this problem. In some cases, these women are reintegrated with their communities. In other cases, especially where repairs are not completely effective, they need to develop new community systems to cope with the problem.

Taking Action

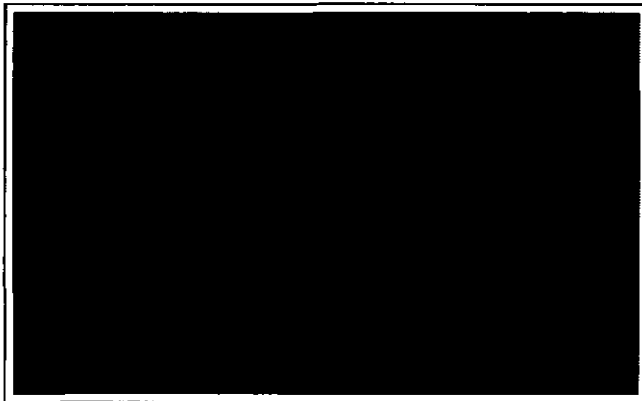
UN agencies have taken a very active role in addressing this problem. Funding from The Bill and Melinda Gates Foundation and technical leadership from EngenderHealth are adding much needed advocacy and programs to tackle this problem.

In the past, USAID has supported programs aimed at prevention with focus on public awareness that urges women to postpone marriage and childbearing until after the teenage years, community awareness about the problem of prolonged labor and preparation for emergencies,

Continued on next page

increased attendance of skilled personnel at delivery, and improved access for women to emergency obstetrical care.

Starting in 2004, there will be an enhanced role for USAID to address the problem of fistula. Activities will be started in south Asia and sub-Saharan Africa to improve the data base concerning the causes, prevalence and severity of obstetric fistula disability. In addition, programs will be supported to improve services for surgical treatment of obstetric fistula and model rehabilitation programs that address the psychosocial trauma and stigma associated with this catastrophic disability.



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Transitions, continued from page 5



In February 2004, John Swallow joined the TAACS Program as the Senior Education Advisor in the Bureau for Latin America and the Caribbean (LAC). He has held numerous positions within USAID including Director of

the Office of Democracy and Human Rights in the LAC Bureau, and as the Division Chief for Human Resources Development in USAID/Nicaragua. Most recently he served as Director of the Office of Democracy and Governance, Education and Gender in USAID's Bureau for Asia and the Near East. John has served as Chief of Party under a contract in Chile involving one Canadian and four US universities, Deputy Director of a project at Indiana University to train young educators from

Saudi Arabia, Legislative Aide/Research Assistant in the US Senate, and as a Peace Corps Volunteer in the Dominican Republic. He has done consultancy work in Africa, the Middle East, and in South and East Asia, in addition to Latin America and the Caribbean. John received his BA in political science from Hanover College, and an MA and PhD from Indiana University in government/Latin America studies and international and comparative education/higher education.

Transitions

Rebecca Adams assumed the position of Education Advisor in the Office of Education, Bureau for Economic, Growth, Agriculture and Trade in October 2003. She transferred to this position after working for five years as the Basic Education Technical Advisor in the Bureau for Latin America and Caribbean.

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In February 2004 Karen Shelley became the HIV/AIDS Senior Policy and Technical Advisor for USAID/Mozambique. Her work in Mozambique focuses on the expansion of preventing mother-to-child transmission and providing technical support to the National AIDS Council and the Ministry of Health. Prior to transferring to Mozambique, Karen spent almost five years working as the Senior Technical Advisor for HIV/AIDS with USAID/Zambia.

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Susan Wright was appointed Senior Reproductive Health Program Advisor in the Service Delivery Improvement Division of the Office of Population and Reproductive Health, Bureau for Global Health in October 2003. She is the private sector team leader for the division, working to increase both for-profit and not-for-profit involvement in family planning and reproductive health programs. Previously, Susan served four years as the Population, Health and Nutrition Technical Advisor/Team Leader for USAID/Morocco.

Continued on page 15

stigmatized. Given this situation, Iraq has a considerable number of male nurses and a critical shortage of female nurses.

The Ministry of Health is working to move Iraq toward a preventive community based referral system, but the knowledge and skills to do this need to be developed. USAID plans to assist the MOH with this important effort to revitalize and decentralize the health system after 20 years of neglect.

USAID's Work in Iraq

USAID has been working since April 2003 with the CPA, the MOH and through its implementing partners WHO, UNICEF and Abt Associates. The vaccination program is now reaching the majority of children and includes monthly catch-up vaccination days to ensure that children are fully immunized. Water purification and solid waste plants are being rehabilitated in most parts of the country. Development of a national health strategy is underway and working groups have been established to address each area of concentration. The MOH working groups have received assistance from the USAID Iraq Health Systems Strengthening Project, implemented by Abt, to develop long-term strategies to improve health professional cadres to international standards and to meet the needs of the health care delivery system in Iraq.

The next phase of the USAID health program will be implemented through a new contract that will overlap with current activities to ensure continuity. The contract will deliver the following activities:

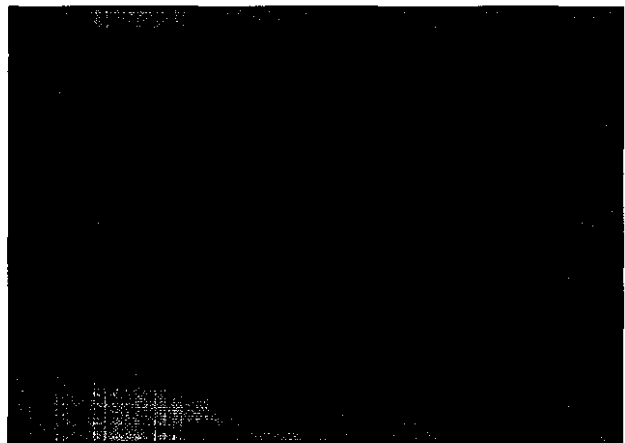
- Health policy and systems strengthening support to operationalize recommendations for policy and institutional reform to be presented in the National Strategic Health Plan for the Improvement of Health of the Iraqi People, now under development;
- Technical and operational support to improve the quality and impact of MOH maternal and child health promotional and service delivery programs;
- Strengthen the nursing training in Iraq. Through support to the MOH and the

Ministry of Higher Education, the contractor will develop Iraqi capacity to deliver international-level nursing education to meet the priority health needs of Iraq;

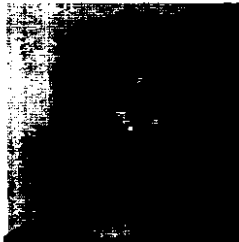
- Small grants program to augment the MOH programs and reach vulnerable populations; and
- MOH implementation support to address additional technical assistance needs from the MOH as requested.

However, the security situation in Iraq makes development work very difficult. The USAID Mission is located in the highly protected Green Zone, but the implementing partners are working throughout the country. WHO and UNICEF were evacuated out of Iraq after the bombing of the UN headquarters and the resulting devastating loss of life in August 2003. Since that time their technical staff have been located in Amman, Jordan working through the local Iraqi staff, but activities are not moving as quickly as planned. In the first week of April, due to the recent spate of violence and kidnappings, many of the international contract staff temporarily joined their WHO/UNICEF colleagues in Amman, again trying to continue activities with their local staff.

Once Iraq becomes more secure the programs have a great capacity to develop quickly. The Iraqi personnel are highly trained and qualified and ready to move forward to create an equitable health system for their country. USAID is poised to assist them in any way possible.



Departures



Jennifer Bonetti left the CEDPA TAACS program in October 2003 to join Family Health International as an Associate Program Officer with its Francophone Africa program.

▪ in Russia tremendously ... this
▪ has truly been an enriching and
▪ learning experience for me and
▪ I am confident that my working
▪ as a TAACS will continue to
▪ serve me in my professional life
▪ in the years to come."



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Tara Milani left the TAACS Program in March 2004 to continue her career with USAID as a Foreign Service Officer. For the past year and a half, Tara served as the Senior Health Advisor for USAID/Russia overseeing the maternal and child health portfolio. In her new capacity she will have the opportunity to work with a wide range of health related activities and development projects. According to Tara, "I have enjoyed my assignment

▪ **Barbara Sow** completed her contract as the Senior Health Advisor for USAID/Rwanda in December 2003. Barbara represented USAID, and all bilateral agencies involved in Rwanda's fight against AIDS, on the Country Coordinating Mechanism. Barbara is currently working as the Country Director in Senegal for Family Health International. Barbara summarized her time with the TAACS program as "a very fulfilling experience."

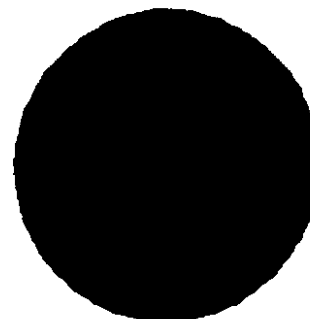
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Make a Difference – Become a TAACS!

CEDPA recruits for TAACS positions throughout the year. All TAACS must be US citizens who can be approved for US Government security clearance. Assignments are for two years; renewals and extensions are possible. Strong candidates are mid to senior-level technical experts with extensive experience in their respective fields.

Current openings include:

- Senior Education Advisor, USAID/Yemen
- Asia/Near East Regional Specialist, Office of Regional and Country Support, Bureau for Global Health
- Reproductive Health Advisor for Training and Performance Improvement, Service Delivery Improvement Division, Office of Population and Reproductive Health, Bureau for Global Health
- Prevention of Mother to Child Transmission and Antiretrovirals Technical Advisor, USAID/Nigeria
- Senior Education Technical Advisor, USAID/Indonesia



Position descriptions and new openings can be found at www.cedpa.org/jobs/taacs/index.html
TAACS' efforts address challenges facing developing countries in the areas of child and maternal health, nutrition, population, HIV/AIDS, infectious diseases and basic education.

Please contact Helen Farinella, TAACS Human Resources Manager, at taacsjobs@cedpa.org for more information.



Note, continued from page 2

notification to me personally (with a cc to Susan) is the preferred way to proceed; I can usually get back to you quickly with an indication of CEDPA's likely interest. While a positive readout from CEDPA often will require you to step away from such duties, this is not necessarily true in all cases. If we catch this early enough, and depending upon the nature of CEDPA's participation in the project, it may be that an appropriate role can be fashioned with the approval of cognizant USAID staff.

- Many of you know that CEDPA concurrently is managing two TAACS contracts, TAACS 3 (which terminates at the end of this calendar year) and TAACS 4 (which terminates in September 2006). Please be assured that those of you who are assigned to TAACS 3 and expect to continue with CEDPA beyond this December will not be "lost between the cracks." Steps are well under way to insure that you will

be transferred to the TAACS 4 contract (contact your backstop or Susan if you have any questions). Similarly, we are advised that a follow-on competitive mechanism will be in place well before October 2006 to provide seamless employment for those of you still with the program as that time approaches.

- The CEDPA TAACS Team will be hosting the next semi-annual TAACS training course the last week of July, and we look forward to seeing many of you there.

Regards, and best wishes for the summer,

Bob Chase



1400 16th Street NW
Suite 100
Washington, DC 20036



OFFICE MEMORANDUM

August 9, 2004

To: Overseas TAACS

From: Bob Chase

Subject: Salary-Related Compensation Ceilings for 2004

The CEDPA TAACS team would like to bring to your attention the salary-related compensation ceilings that apply to the TAACS contracts. Although the impact of these changes touches few of you now, we felt it was desirable to provide this information to you all.

The three categories of compensation that we refer to are base compensation (salary); post differential (hardship allowance); and danger pay. These compensation categories have specific regulations capping the dollar amount that can be derived from each. Those regulations, and the relevant 2004 limits, are as follows:

- A. The maximum base compensation allowed is \$134,000 (Per AAPD 03-02, citing the ES-06 salary ceiling).
- B. Post differential plus base compensation cannot exceed \$158,100 (per DSSR Section 552, Ceilings on Payment citing the Executive Level (EX) II salary ceiling).
- C. Post differential plus base compensation plus danger pay cannot exceed \$175,700 (per DSSR 656.2 and CFR Title 5, Part 530 Subpart B, citing the Executive Level (EX) I salary ceiling).

In a manner somewhat analogous to Social Security contributions, at that time in the calendar year when you reach the relevant ceilings, your next paycheck would reflect the cut off in allowance.

Please contact Susan Masse or me if you have any questions regarding these salary-related regulations.

NB: this analysis (and the regulations that apply) only address salary and salary-related differentials and does not apply to other contract-provided allowances (e.g., post allowance, living quarters allowance, education allowance, etc.).

Advisor	Start Date	Aug-03	Sep-03	Oct-03	Nov-03	Dec-03	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Annual Total
Wright	10/03/98	0.744	0.744	0.613	0.613	0.831	0.741	0.793	0.837	0.875	0.878	0.788	8.76
Novak	11/01/98	0.875	0.744	0.875	0.613	0.744	0.700	0.831	0.853	0.878	0.875	0.788	8.58
Adams	12/07/98	0.784	0.755	0.350	0.831	0.788	0.668	0.782	0.831	0.875	0.831	0.831	8.33
Ogden	01/02/99	0.729	0.788	0.875	0.875	0.744	0.641	0.875	0.875	0.613	0.875	0.875	8.76
Lewing	01/15/99	0.670	0.700	0.668	0.668	0.788	0.576	0.733	0.821	0.733	0.809	0.695	7.86
Hawman	01/24/99	0.175	0.700	0.831	0.831	0.767	0.767	0.831	0.853	0.788	0.848	0.306	7.67
Timberlake	04/25/99	0.583	0.438	0.788	0.831	0.700	0.634	0.815	0.875	0.613	0.739	0.831	7.85
Friedman	05/01/99	0.845	0.831	0.831	0.788	0.744	0.438	0.831	0.875	0.744	0.875	0.798	8.59
Thompson	05/07/99	0.838	0.656	0.831	0.788	0.788	0.639	0.875	0.865	0.585	0.733	0.656	8.25
Malloy	06/01/99	0.700	0.536	0.668	0.700	0.668	0.000	0.289	0.700	0.700	0.700	0.788	6.45
Stanton	06/30/99	0.845	0.640	0.394	0.875	0.788	0.784	0.821	0.777	0.875	0.875	0.394	8.07
Cook	08/02/99	0.591	0.739	0.766	0.831	0.690	0.675	0.777	0.831	0.875	0.875	0.722	8.18
Trosle	08/18/99	0.831	0.831	0.777	0.831	0.744	0.729	0.831	0.875	0.846	0.859	0.782	8.74
Fox	08/19/99	0.670	0.788	0.875	0.875	0.788	0.671	0.831	0.875	0.831	0.656	0.875	8.74
Ward Brent	08/29/99	0.700	0.831	0.766	0.831	0.656	0.554	0.671	0.831	0.430	0.777	0.777	7.83
Harbison	09/01/99	0.875	0.656	0.831	0.875	0.788	0.671	0.831	0.875	0.831	0.875	0.613	8.72
Norton	09/08/99	0.860	0.700	0.459	0.766	0.788	0.576	0.815	0.831	0.875	0.700	0.569	7.94
Terrill	10/01/99	0.850	0.788	0.875	0.760	0.793	0.409	0.821	0.875	0.662	0.859	0.788	8.48
Hatch	01/01/00	0.747	0.744	0.917	0.536	0.788	0.773	0.831	0.875	0.875	0.875	0.580	8.44
Seligman	07/10/00	0.845	0.569	0.831	0.788	0.755	0.584	0.799	0.875	0.831	0.788	0.769	8.43
Seigman	09/15/00	0.875	0.788	0.875	0.831	0.831	0.321	0.481	0.875	0.875	0.744	0.744	8.24
Lazell	11/01/00	0.875	0.487	0.788	0.831	0.831	0.624	0.782	0.875	0.471	0.831	0.831	8.23
Stephenson	11/20/00	0.857	0.624	0.355	0.700	0.668	0.394	0.831	0.875	0.772	0.561	0.350	6.99
Sonnichsen	01/28/01	0.816	0.744	0.131	0.755	0.666	0.759	0.700	0.875	0.821	0.826	0.804	7.89
Howard	03/01/01	0.845	0.788	0.744	0.493	0.733	0.744	0.831	0.656	0.438	0.853	0.831	7.93
Gibb	04/23/01	0.670	0.831	0.744	0.875	0.700	0.525	0.788	0.788	0.788	0.875	0.656	8.24
Taylor	06/01/01	0.729	0.744	0.875	0.875	0.788	0.759	0.831	0.875	0.875	0.875	0.744	8.97
Wilson	06/11/01	0.729	0.875	0.875	0.875	0.831	0.759	0.809	0.875	0.875	0.878	0.875	9.06
Bacheller	06/26/01	0.714	0.831	0.875	0.875	0.788	0.759	0.821	0.870	0.875	0.875	0.875	9.11
Melnke	07/09/01	0.875	0.000	0.394	0.788	0.744	0.554	0.760	0.831	0.875	0.875	0.788	7.48
Clements	08/01/01	0.816	0.668	0.722	0.875	0.722	0.569	0.727	0.875	0.821	0.845	0.739	8.38
Bruns	08/15/01	0.875	0.394	0.525	0.831	0.788	0.690	0.569	0.875	0.547	0.875	0.875	7.84
Halperin	08/31/01	0.788	0.607	0.646	0.744	0.700	0.729	0.809	0.831	0.875	0.591	0.678	8.00
Barker	09/05/01	0.670	0.831	0.788	0.831	0.831	0.584	0.831	0.875	0.656	0.875	0.744	8.52
O'Rourke	09/24/01	0.875	0.744	0.525	0.831	0.350	0.759	0.788	0.831	0.788	0.875	0.444	7.91
Wainwright	10/15/01	0.656	0.809	0.631	0.831	0.613	0.543	0.771	0.788	0.481	0.350	0.744	7.42
Abeyta-Behnke	11/27/01	0.780	0.831	0.788	0.875	0.634	0.584	0.831	0.438	0.831	0.875	0.350	7.82
Baleman	01/22/02	0.547	0.831	0.744	0.744	0.727	0.496	0.777	0.656	0.656	0.875	0.438	7.62
Hausner	01/24/02	0.438	0.821	0.831	0.569	0.831	0.554	0.804	0.875	0.656	0.831	0.744	7.95
Jennings	03/11/02	0.875	0.831	0.875	0.831	0.788	0.671	0.700	0.875	0.875	0.875	0.788	8.98
Griffin	08/19/02	0.845	0.569	0.831	0.831	0.525	0.678	0.793	0.782	0.875	0.831	0.744	8.30
Allen	09/03/02	0.784	0.831	0.831	0.656	0.525	0.718	0.673	0.788	0.438	0.454	0.788	7.49
Davis	09/26/02	0.685	0.766	0.788	0.788	0.788	0.496	0.831	0.875	0.788	0.700	0.788	8.29
Altal	01/28/03	0.875	0.831	0.875	0.875	0.831	0.788	0.875	0.875	0.875	0.875	0.831	8.41
Stewart	02/03/03	0.613	0.788	0.788	0.831	0.599	0.700	0.875	0.851	0.656	0.875	0.831	8.42
Marshall	04/04/03	0.747	0.831	0.831	0.788	0.542	0.623	0.875	0.875	0.605	0.875	0.831	8.42
Stout	07/06/03	0.806	0.766	0.875	0.727	0.809	0.616	0.831	0.865	0.706	0.875	0.809	8.69
Metts	07/10/03	0.875	0.821	0.831	0.831	0.788	0.759	0.812	0.777	0.831	0.788	0.816	8.93
Clary	07/11/03	0.875	0.831	0.831	0.831	0.746	0.781	0.778	0.656	0.831	0.788	0.788	8.74
Morton	07/30/03	0.379	0.831	0.788	0.810	0.788	0.700	0.875	0.875	0.646	0.788	0.875	8.37
McKinney	08/22/03	0.029	0.760	0.831	0.875	0.788	0.788	0.865	0.875	0.875	0.875	0.788	8.35

TAACS III - Level of Effort (HRN-C-00-98-00006-00)
 August 2003 - March 2004

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Advisor	Start Date	Aug-03	Sep-03	Oct-03	Nov-03	Dec-03	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Annual Total
Peniston	08/27/03		0.744	0.700	0.831	0.831	0.788	0.831	0.831	0.875	0.744	0.831	8.01
Cooney	10/17/03			0.438	0.875	0.744	0.788	0.831	0.831	0.831	0.875	0.875	7.09
Reynolds-Cooper	11/17/03					0.788	0.759	0.831	0.831	0.780	0.875	0.744	5.59
Olson	01/27/04							0.875	0.875	0.809	0.788	0.831	4.18
Swallow	02/17/04							0.175	0.875	0.875	0.777	0.831	3.53
Fitch	04/28/04									0.000	0.831	0.831	1.66
Luchsinger	06/01/04											0.875	0.88
Total Advisors													472.21
Director		0.284	0.503	0.591	0.640	0.613	0.656	0.271	0.602	0.556	0.646	0.459	5.82
Manager		1.514	1.346	1.471	1.488	1.488	1.418	1.581	1.641	1.575	1.535	1.565	16.62
Associate		1.869	1.544	2.136	2.258	2.733	2.891	2.887	3.203	2.505	2.943	2.743	27.71
WDSG		0.256	0.359	0.214	0.267	0.109	0.200	0.129	0.160	0.112	0.568	0.102	2.46
Other													0.00
Subtotal													52.83
Total LOE (10.5 person months)													624.84

contract ended 8/15/00
 contract ended 1/7/00
 contract ended 12/3/99
 contract ended 10/12/01
 contract ended 8/31/00
 resigned 8/9/02
 switched to T IV 8/7/02
 resigned 8/30/02
 resigned 10/4/02
 contract ended 8/30/02
 contract ended 8/30/02
 resigned 11/15/02
 resigned 12/31/02
 completed 2/4/03
 switched to TIV 12/31/03
 switched to TIV 4/1/03
 resigned 4/18/03
 resigned 6/9/03
 resigned 7/11/03
 resigned 7/15/03
 on TIR from 1/1/03 to 8/15/03
 resigned 12/19/03
 contract ended 2/21/04
 switched to TIV 2/23/04
 contract ended 3/6/04

TAACS Contract LOE: 3052.0
 LOE Used: 80.3%

TAACS Travel Report

<u>Traveler</u>	<u>Destination</u>	<u>Travel Dates</u>	<u>Fare</u>	<u>Fee</u>	<u>Total Fare</u>	<u>Business Class Used</u>	<u>Travel Agent</u>	<u>Purposes</u>
Bacheller, Susan	Dominican Republic Santo Domingo	4/18/2004 4/24/2004	\$920.40	\$90.00	\$1,010.40	No	Executive Travel Associates	Support to the Field Project Monitoring
Barker, Brad	South Africa Johanesburg	6/3/2004 6/12/2004	\$1,574.70	\$38.00	\$1,612.70	No	Diplomat Travel	N/A
Clements, Andrew	Laos Vientiane, Pakse, Savannakhet	6/29/2004 7/10/2004	\$4,426.50	\$260.00	\$4,686.50	Yes	Executive Travel Associates	Support to the Field
Eyango, Vijltha	Pakistan Islamabad	5/14/2004 5/22/2004	\$6,397.90	\$38.00	\$6,435.90	Yes	Diplomat Travel	N/A
Fox, Elizabeth	Switzerland Geneva Johannesburg, South Africa	5/31/2004 6/14/2004	\$6,473.70	\$200.00	\$6,673.70	Yes	Executive Travel Associates	Support to the Field Representative/ Presenter
Friedman, Matthew	Cambodia Siem Reip	4/21/2004 4/23/2004	\$299.00	\$0.00	\$299.00	No	Other	N/A
Friedman, Matthew	Thailand Mae Sot	5/12/2004 5/14/2004	\$98.03	\$0.00	\$98.03	No		N/A
Griffin, James	United States Tampa	4/20/2004 4/23/2004	\$178.20	\$45.00	\$223.20	No	Executive Travel Associates	Representative/ Presenter
Hatch, John	Malawi Lilongwe Dar es Salaam, Tanzania Phnom Penh, Cambodia	6/26/2004 7/21/2004	\$8,720.35	\$38.00	\$8,758.35	Yes	Diplomat Travel Services	N/A
Jennings, Gerald	United States Atlanta	4/27/2004 4/27/2004	\$504.20	\$32.00	\$536.20	No	Diplomat Travel	N/A
Jennings, Gerald	South Africa Johannesburg New Delhi, India	6/1/2004 6/6/2004	\$4,215.00	\$38.00	\$4,253.00	No	Diplomat Travel Services	N/A

TAACS Travel Report

<u>Traveler</u>	<u>Destination</u>	<u>Travel Dates</u>	<u>Fare</u>	<u>Fee</u>	<u>Total Fare</u>	<u>Business Class Used</u>	<u>Travel Agent</u>	<u>Purposes</u>
Lans, Deborah	Switzerland Geneva Paris, France	5/26/2004 6/1/2004	\$2,892.00	\$160.00	\$3,052.00	No	Executive Travel Associates	N/A
Luchsinger, Lisa	Zambia Lusaka Washington, DC, United States Johannesburg, South Africa	5/31/2004 6/13/2004	\$5,430.50	\$160.00	\$5,590.50	Yes	Executive Travel Associates	N/A
Marshall, Margaret	Trinidad & Tobago Port of Spain	4/21/2004 4/25/2004	\$1,081.00	\$38.00	\$1,119.00	No	Diplomat Travel Services	N/A
Marshall, Margaret	Brazil Brasilia	5/23/2004 5/29/2004	\$2,740.50	\$38.00	\$2,778.50	No	Diplomat Travel Services	N/A
McKinney, Susan	France Ferney Geneva, Switzerland	4/25/2004 4/30/2004	\$6,073.30	\$160.00	\$6,233.30	No	Executive Travel Associates	Donor Coordination
McKinney, Susan	Switzerland Geneva	5/31/2004 6/4/2004	\$6,113.20	\$160.00	\$6,273.20	Yes	Executive Travel Associates	Donor Coordination
Meites, Margaret	Yemen Sana	6/2/2004 6/14/2004	\$2,993.70	\$38.00	\$3,031.70	No	Diplomat Travel Services	Support to the Field
Novak, John	United States Chapel Hill Atlanta, United States	5/12/2004 5/14/2004	\$779.80	\$32.00	\$811.80	No	Diplomat Travel Services	Project Monitoring Participant

TAACS Travel Report

<u>Traveler</u>	<u>Destination</u>	<u>Travel Dates</u>	<u>Fare</u>	<u>Fee</u>	<u>Total Fare</u>	<u>Business Class Used</u>	<u>Travel Agent</u>	<u>Purposes</u>
O'Rourke, Shelagh	United States	4/30/2004	\$5,741.26	\$0.00	\$5,741.26	No	Other	N/A
	District of Columbia	6/16/2004						
	Detroit, United States							
	Johannesburg, South Africa							
Ogden, Eilyn	India	6/1/2004	\$5,449.80	\$0.00	\$5,449.80	Yes	Executive Travel Associates	Support to the Field
	New Delhi	6/12/2004						
Quain, Estelle	South Africa	5/31/2004	\$6,013.40	\$200.00	\$6,213.40	Yes	Executive Travel Associates	Participant
	Johannesburg	6/12/2004						
	Geneva, Switzerland							
Rifkin, Norman	France	6/28/2004	\$5,002.60	\$38.00	\$5,040.60	Yes	Diplomat Travel Services	N/A
	Paris	7/2/2004						
Sow, Christine	South Africa	6/6/2004	\$1,821.95	\$0.00	\$1,821.95	No	Other	N/A
	Johannesburg	6/13/2004						
Stanton, Mary Ellen	United States	4/28/2004	\$150.10	\$45.00	\$195.10	No	Executive Travel Associates	Representative/Presenter
	New Haven	5/1/2004						
	New York, United States							
Stanton, Mary Ellen	South Africa	6/7/2004	\$3,533.40	\$160.00	\$3,693.40	No	Executive Travel Associates	N/A
	Johannesburg	6/13/2004						
Stephenson, Patricia	Israel	5/16/2004	\$2,833.30	\$160.00	\$2,993.30	No	Executive Travel Associates	Support to the Field
	Tel Aviv	5/29/2004						
Stout, Russell	United States	6/11/2004	\$867.50	\$0.00	\$867.50	No	Diplomat Travel Services	N/A
	District of Columbia	7/11/2004						

TAACS Travel Report

<u>Traveler</u>	<u>Destination</u>	<u>Travel Dates</u>	<u>Fare</u>	<u>Fee</u>	<u>Total Fare</u>	<u>Business Class Used</u>	<u>Travel Agent</u>	<u>Purposes</u>
Swallow, John	Mexico	6/23/2004	\$1,484.91	\$160.00	\$1,644.91	No	Executive Travel Associates	N/A
	Cancun	7/2/2004						
Terrell, Stanley	Belize	5/17/2004	\$390.00	\$0.00	\$390.00	No	Other	N/A
	Belize City	5/18/2004						
Trostle, Richard Murray	France	6/5/2004	\$5,988.40	\$38.00	\$6,026.40	Yes	Diplomat Travel Services	Representative/ Presenter
	Lyon	6/10/2004						
Wright, Susan	Nicaragua	5/10/2004	\$924.50	\$90.00	\$1,014.50	No	Executive Travel Associates	Project Monitoring
	Managua	5/14/2004						

TAACS Travel Summary

	30	21	12	63
	\$100,571.89	\$62,375.65	\$27,159.80	\$190,104.34
	\$3,352.40	\$2,970.13	\$2,263.32	\$3,017.53
	\$4,525.00	\$739.10	\$0.00	\$5,264.00
	\$150.83	\$35.19	\$0.00	\$83.56
	4.30%	1.20%	0.00%	2.70%

AFR	8	\$40,313.95	\$5,039.24	5	\$6,150.97
ANE	10	\$44,910.38	\$4,491.04	7	\$4,908.90
E&E	2	\$10,583.40	\$5,291.70	0	\$0.00
LAC	10	\$14,925.51	\$1,492.55	0	\$0.00
OTH	6	\$2,294.70	\$382.45	0	\$0.00
WE	13	\$52,707.00	\$4,054.45	5	\$6,086.36
Total	49	\$165,735.74	\$3,382.36	17	\$5,620.53

* Reflects travel booked through CEDPA's travel agents that are pending or completed

Mary Ann Abeyta-Behnke, TAACS Ethiopia

Quarterly Report

April 21 – July 20, 2004

Summary of Major Activities Implemented This Period:

1. IR 2 Family Planning/Reproductive Health

Participated in a national meeting to celebrate achievements made by Community-Based Reproductive Health agents; certificates of recognition were given by the President of Ethiopia. Also participated in the Quarterly Technical Review meeting of Pathfinder in Oromia Region and went to Uganda for the Africa meeting on Best Practices and Repositioning of Family Planning.

2. Overall SO Support

Continued to advise on how to maximize population resources within the new Strategic Objective now known as SO14 and includes health and education. Was Acting Deputy in June while the Office Chief was at the SOTA in South Africa. Prepared a speech and a press release for the American Ambassador; she opened a new shelter for women who have been trafficked.

Major Accomplishments of the Period:

1. IR 2 Family Planning / Reproductive Health

Technical discussions and coordination with the Heads of the Family Health Division and the National Office of Population are producing good results in terms of promoting and enhancing reproductive health activities.

Provided comments to the DELIVER Project, on their revised National Forecast of Contraceptive Procurement for Ethiopia; distributed copies to all donors and requested financial assistance to meet the \$8 million need for 2005. The Minister of Health appreciated having a 10-year projection. The MOH also purchased \$250,000 worth of contraceptives, a first for the Ministry. I am still coordinating with other donors to assist in contraceptive procurement. Continued working with DELIVER and the MOH in developing a work plan for the project that includes a long term resident advisor, purchase of four-wheel drive vehicles, roll-out training on contraceptive logistics for health providers and technical assistance to the federal and regional levels of health on logistics management.

Suggested that DELIVER utilize two interns from the Fritz Institute to assist the Ethiopian Government in logistics and communications; both interns are from the University of Washington, the Department of Public Affairs. This is a Global Development Activity for the Mission and a first for Fritz and USAID.

A Foreign Service National that I supervise visited the DELIVER projects in Bangladesh and Nepal to view their integrated logistics systems. I advertised and hired another FSN for the vacant Reproductive Health Specialist position; Dr. Kidist begins work in late July.

I participated in a message harmonization meeting with all family planning partners, organized by Pathfinder, Johns Hopkins and the Health Communications Partnership Project. This event will be followed next month by a message harmonization for HIV/AIDS and the linkages with family planning.

I called two meetings of the Population RH Donors Group during this quarter to present the updated National Forecast for Contraceptive Procurement and to prepare for the Uganda Best Practices Conference on Repositioning Family Planning where 27 Ethiopians attended. The goal identified by the Ethiopian team that they will work on for the next 18 months is on the integration of family planning into VCT and PMTCT sites in 8 of the 11 regions of the country.

I chaired a meeting of all family planning partners to discuss best practices in female genital cutting, interventions used, indicators and successes in achieving the objectives. FGC funds have been added to the Flex Fund grantees through the Acquire agreement.

2. Overall SO Support

I was Acting Chief of the HAPN Office while the Chief attended the SOTA in South Africa. Finalized the Semi-Annual Review sheets for each of the HAPN projects that USAID funds or supports; this includes over 30 projects.

Major Activities Planned for July 21 – October 20, 2004

1. Assist the Ministry of Health in developing an operational plan for implementing the Reproductive Health Strategy approved by the MOH in Geneva at the World Health Conference in May.
2. Assist the MOH in integrating family planning into VCT and PMTCT sites.
3. Meet with the National Office of Population and the USAID Mission Director to discuss how the Policy project can assist the NOP with high level advocacy for population and family planning and population analysis for Federal and Regional Government Officials.
4. Participate in the Annual Review Meeting of the donors and the MOH.
5. Prepare for year end data collection and analysis for the Semi-Annual Review of the SO.

! Priorities for this quarter—20 April- 20 July 2004

1. Hold meetings and attend workshops with key reproductive health partners being organized by the ACQUIRE project, which will be the flagship project in the health SO's new strategy, which begins operation in October 2004.
2. Visit Kigoma and the Jane Goodall Institute community health project to begin plan for collaboration with our Natural Resources Management office and JGI for health, population and environment activities
3. Work with the Controllers office, the health team and zonal training centers in Arusha and Iringa to develop new project to be supported by USAID
4. Complete THIS lab work and plans for data dissemination
5. Begin planning of the next Demographic and Health survey with NBS and MACRO
6. Work with the Deliver project team, MOH, other donors and partners on commodities security needs.

Activities and Accomplishments

1. I attend several workshops and meetings with the ACQUIRE team. Design activities are moving along and a work plan will be completed by the end of October 2004.
2. I visited the Jane Goodall Institute's community health project to begin planning for joint health-natural resources management activities in Kigoma. See attached trip report.
3. We completed a SOW for an assessment of our activities with the Zonal Training Centers (ZTCs). It will be conducted during the last two weeks of July and will assist us in developing new projects with the ZTCs.
4. The Tanzania AIDS indicator survey (THIS) is almost complete, except more tests need to be run to complete analysis. A stock out of appropriate kits has slowed finalization, but it should be completed in the weeks ahead.
5. Several meetings were held with MACRO staff and the National Bureau of Statistics as well as key partners to prepare the next DHS which we expect to get underway in September 2004.
6. Key meetings have been prepared for contraceptive security activities and a new JSI/Deliver senior adviser is being briefed to assist the Mission with this as well as procurement of ARV and other AIDS commodities.

Priorities for next quarter, 20 July-20 October

1. Attend the ACQUIRE regional meeting in Kigoma and do coordination with Jane Goodwill Institute, first week in August.
2. Field visit to Manyara and Arusha 14-20 July to begin preparation of health and environment activities.
3. Take the SAFE course in DC while on R&R/TDY in September
4. Assist in preparation of the 2004 DHS, and dissemination of 2004 THIS
5. Meetings with nutrition partners to develop work plan
6. Develop contraceptive security activities plans with Deliver and MOH

TRIP REPORT

Kigoma & Gombe Stream National Park with visits to three TACARE Villages (Zashe, Bugamba & Mtanga) 16-19 May 2004.

Jim Allman

I traveled to Kigoma with an NRM team (Asukile R. Kajuni (USAID), Shidum Mawe (Africare Ugalla Community Conservation Project) and Alfred G. Kalaghe (Africare Agro-Environment Advisor) 16-19 May 2004. The program of visits prepared by the Jane Goodall Institute is attached. Since the NRM team will do reports on the visit I will only note here a few key points relevant to AIDS and health activities.

1. Dr. Emmanuel Mtiti (TACARE Director) noted that if funding were available from PEPFAR, TACARE could move quickly to develop a rural oriented ART program. In the communities where TACARE has been working since 1994, it should be possible to enroll over 100 people in the program fairly quickly. In addition, TACARE would be interested in PMTCT activities, strengthening Focused Antenatal Care (FANC), care and support for people living with AIDS, and boarder preventive activities focusing on youth and other at risk groups.
2. TACARE Community based distribution (CBD) activities have been popular and successful in increasing FP access and use, so TACARE hopes to strengthen and expand these in the future. Ways to develop collaboration with other USAID partners such as the DELIVER project, the ACQUIRE project, the SDA health services in Kigoma, and the Kigoma MOH/RMO and ZTC might help TACARE increase the efficacy of its CBD efforts, for example in developing referral services for LTM, improving contraceptive security, etc. In addition some USAID partners might learn from TACARE approaches in both MCH and FP as well as their impressive environment, education and community mobilization approaches.
3. As USAID's NRM develops its new program to implement the Mission's 2005-2014 strategy, which will get underway in October 2005, the health and AIDS teams should follow activities closely so that potential implementing partners like TACARE could develop programs which include health and AIDS components. The Program Support Objective (PSO) should encourage and favor this process. There might also be scope for including input from the DG program through PACT or CLUSA, since strengthening community capacity remains a need in the communities where TACARE and other NGO and FBO partners work.

4. A geographical focus at the district and regional levels seems advisable both for health & NRM projects. In developing possible activities with TACARE the target area might focus on the district of Kigoma Rural (pop=322,000) which includes Gombe stream NP, the communities directly surrounding the Park, and the 80 plus communities directly or indirectly impacting the Park.

Samia Altaf M.D., MPH
Senior Health Advisor
USAID/Pakistan
Quarterly Report
April to June 2004.

In early April, the Mission was host to Secretary of Health and Human Services Tommy Thompson and his team of senior staff, including Dr. Anthony Zerhoni, Director of the National Institutes of Health in Bethesda, Maryland, and Dr. Julie Gerberdine, Director of Centers for Disease Control in Atlanta, Georgia. Secretary Thompson and the team were briefed on the USAID health program with special reference to polio and the efforts of the Pakistani government to eradicate it from the country. The team met with the President of Pakistan, General Pervez Musharraf, Prime Minister Jamali, and the State Minister of Health, Muhammad Nasir Khan. Secretary Thompson reiterated the commitment of the US government to help Pakistan eradicate polio, within the country itself and within South Asia. I was the control officer for the visit, responsible for coordinating meetings and accompanying Secretary Thompson and staff. The visit was considered a success.

Most of the Mission program activities are now in the implementation stage. The Reproductive Health Program is being implemented by two social marketing organizations, Greenstar Social Marketing and Key Social Marketing. The National Health Facility is being implemented and managed by Abt. Associates, Bethesda, Maryland, and Options UK, who have set up a local office in Islamabad. Family Health International is implementing the Mission's HIV/AIDS Program and the WHO and UNICEF are working with the Pakistani government in communicable disease control, focusing especially on polio and tuberculosis.

The security situation in Pakistan continues to be challenging, creating constraints and challenges that require quite a bit of creativity on the part of the Mission staff. Since May 2004, the new Health Officer joined the mission. This quarter was spent orienting him to the Missions program and activities,

TAACS Quarterly Report April 20 – July 20, 2004
Susan Bacheller, BGH/HIDN/ID

/ Major activities for this period:

1. **TB Team Leadership and Organization:** Regular bi-weekly TB team meetings were held, agendas prepared ahead of time, and minutes documented. I provided technical and managerial guidance to various TB team members in the following areas: research, communications/advocacy, child survival and health grants, and new drug development. I followed up on activities in human resources development with the Office of HIV/AIDS, and in health franchising with the office of population and RH. I provided extensive comments on the TB on line training modules and participated in meetings with the technical designers of this activity.
2. **Guiding and Monitoring BGH TB programs:** I provided extensive support for the development of a Task Order Request for a GH core task order for TB. I helped prepare the guidance and feedback regarding Gorgas TB initiative activities, including input on key decisions about the future direction of this initiative. I reviewed and commented activities and plans for HCP, VOA, CDC, WHO, CSHGP, and the Alliance for TB Drug Development. I provided technical and strategic guidance to TB team members working on diagnostics, lab strengthening, communications, and TB/HIV-AIDS co-infection. I am providing ongoing technical input to the design of the TBCTA follow-on, including survey of missions, assessment of needs, and development of draft framework.
3. **Support to Missions:** I provided technical support assistance through field visits to USAID TB programs in The Dominican Republic (DR), Kazakhstan, and The Philippines. I participated in a joint monitoring mission of the TB program in the DR, and in particular, provided recommendations to help the program respond to likely disruptions and staff turnover following an upcoming election. My findings were incorporated into the team report. I participated in a high-level mission to Kazakhstan, to call attention to the problem of TB and multi-drug resistant TB in that country. The mission was successful in raising awareness about the continued need for support for TB control in Kazakhstan, while simultaneously mounting a rational approach to deal with the problem of MDR TB. I also participated in a joint evaluation of the CDC public-private mix DOTS program in the Philippines, and I contributed significantly to the report preparation and debriefing. I participated in a retreat for the design of the regional and sub-regional ID initiatives for Latin America, and in conference calls to assist the USAID program in Mexico. I worked with USAID missions in Uganda, Peru, Pakistan, Indonesia, Russia, and Kenya to facilitate country-level support for the ISAC initiative. Finally, I assisted with planning for the TB sessions of the Africa Bureau health officers SOTA.

4. **Program Management:** I reviewed and commented on: the draft USAID communications strategy, STOP TB plan for resource mobilization and a resource mobilization task force, and the ISAC paper. I responded to numerous inquiries from Congress and constituents regarding USAID's TB programs. I assisted and guided a NEP who served as the acting CTO for the TBCTA, including reviews of pipelines and burn rates.
5. **Global Leadership:** I participated in the STOP TB Coordinating Board conference calls on resource mobilization and advocacy, and the DOTS expansion working group core team. Assisted with interagency coordination and planning related to the ISAC initiative. I gave presentations on USAID's TB program to visiting Ministry of Health officials from West Africa and Russia, and at a TB Seminar at the American Red Cross. I organized technical presentations at USAID, inviting outside speakers, on the following: Modeling the impact of DOTS; GDF; and health franchising.
6. **Reaching out to partners:** I worked with USAID missions and regional bureaus to explore collaboration with the ISAC initiative. Groups that I have met with during this reporting period include: CDC, IUATLD, UAB, PAHO, EURO, WPRO, STOP TB Secretariat, TBCTA, PSI, Health Franchising Initiative, and GDF.
7. **Budget development:** I worked with regional advisors and BGH TB staff to revise and finalize FY 2004 TB budget scenarios, and I finalized the BGH TB budget in consultation with other team members.

Quarterly Report 1/22/04 – 4/21/04
Brad Barker, MPH MBA
TAACS/Senegal

Major Activities Planned for the Period:

Infectious Diseases

- Train health care providers within USAID supported Districts in IPT w/ SP and combined therapy treatment of malaria in children.
- Conduct the evaluation of the trial test of the voucher system to provide ITN to pregnant women and children and identify ways to strengthen and expand this program in 2004.
- Ensure that the three USPVOs who have been provided with Grants to conduct community-level tuberculosis and malaria activities are effectively underway.

Child Survival

- Continue to implement and monitor the newborn care package and the community management of ARI pilot tests in view of eventual policy workshops on these questions.
- Finalize discussions with AID/W, the World Bank, UN partners and the Ministry of Health to pursue a policy framework to facilitate micro-nutrient fortification in Senegal.

STI/AIDS

- Implement the program to provide female condoms to women at-risk of STI.
- Assist the Ministry to Health to define a clear vision of and begin implementation of the program to expand prevention of mother to child transmission of HIV (PMTCT).
- Work with Food For Peace PVOs in Senegal to increase the supply of USG donated food to benefit persons living with HIV/AIDS.

Reproductive Health (RH) & Family Planning (FP)

- Present the results of the study to assess demand and supply constraints to increased use of IUD in the Thies region as well as the study of a simplified algorithm for the prescription of oral contraceptives and develop an implementation plan based on these results.
- Reach a consensus with the MoH on how to increase access and use of injectable contraceptives via “social marketing” as culturally appropriate.

Decentralized Health Care Planning & Financing

- Complete the planning and budgeting process for 142 local government units.
- Begin actual field implementation of the Association of Community Health Workers (ARPV) concept.

Major Accomplishments of the Period

Infectious Diseases

The training of health care providers within USAID supported Districts in IPT w/ SP and combination therapy treatment of malaria in children began and will be completed by mid-June.

The evaluation of a trial test of the voucher system to provide ITN to pregnant women and children and identify ways to strengthen and expand this program in 2004 was conducted. Results confirm that this mode is effective at increasing access to ITN for the target population and that the commercial is willing, indeed interested in continuing and expanding the intervention.

The community-level tuberculosis and malaria activities of three USPVO are effectively underway.

Child Survival

Field research activities to develop a coherent newborn care package and to strengthen community management of pneumonia continue. Presentation and policy dialogue workshops are planned for September and June respectively. Preliminary results are very encouraging.

STI/AIDS

Senegal has identified three sites outside of Dakar where the PMTCT are scheduled to begin. Two of these sites are in regions already supported by USAID. These sites were visited and a plan to implement this intervention developed.

With guidance and assistance provided by USAID, two Food For Peace partner firms have developed and submitted proposals to provide FFP foodstuffs and technical assistance to improve the nutritional status of Persons Living With HIV. These proposals are currently under review by FFP/Washington.

Reproductive Health (RH) & Family Planning (FP)

In addition to the PMTCT and IPT activities cited above, no significant achievements occurred in the FP component.

Decentralized Health Care Planning & Financing

Integrated local health plans and budgets were completed and signed in 142 local government units.

Approximately 120 Associations of Community Health Promoters (ARPV) were established and training of the members commenced. Soon, contracts will be signed with these Associations to conduct a wide range of promotional activities on topics ranging from gender in decentralization to family planning, child survival and HIV/AIDS.

Major Activities Planned for the Next Period:

Infectious Diseases

- Complete the training of health care providers within USAID supported Districts in IPT w/ SP and combination therapy for the treatment of malaria in children.
- Expand the use of a voucher system to provide ITN to pregnant women and children and identify ways to better use womens' associations to sell ITN within communities.
- Ensure the putting in place of an effective but safe way to address the treatment of malaria at the community level and ensure that USPVO Grantees are applying this policy.

Child Survival

- Conduct a policy workshop to decide how and where the community management of ARI pilot test results will be applied elsewhere.
-

STI/AIDS

- Implement the program to provide female condoms to women at-risk of STI.
- Assist the Ministry to Health to define a clear vision of and begin implementation of the program to expand prevention of mother to child transmission of HIV (PMTCT).

Reproductive Health (RH) & Family Planning (FP)

- Present the results of the study to assess demand and supply constraints to increased use of IUD in the Thies region as well as the study of a simplified algorithm for the prescription of oral contraceptives and develop an implementation plan based on these results.
- Reach a consensus with the MoH on how to increase access and use of injectable contraceptives via "social marketing" as culturally appropriate.

Decentralized Health Care Planning & Financing

- Train all members of the 120 Associations of Community Health Workers (ARPV) and commence contracted activities.

Quarterly Report 4/22/04 – 7/21/04
Brad Barker, MPH MBA
TAACS/Senegal

Major Activities Planned for the Period:

Infectious Diseases

- Complete the training of health care providers within USAID supported Districts in IPT w/ SP and combination therapy for the treatment of malaria in children.
- Expand the use of a voucher system to provide ITN to pregnant women and children and identify ways to better use womens' associations to sell ITN within communities.
- Ensure the putting in place of an effective but safe way to address the treatment of malaria at the community level and ensure that USPVO Grantees are applying this policy.

Child Survival

- Conduct a policy workshop to decide how and where the community management of ARI pilot test results will be applied elsewhere.

STI/AIDS

- Implement the program to provide female condoms to women at-risk of STI.
- Assist the Ministry to Health to define a clear vision of and begin implementation of the program to expand prevention of mother to child transmission of HIV (PMTCT).

Reproductive Health (RH) & Family Planning (FP)

- Present the results of the study to assess demand and supply constraints to increased use of IUD in the Thies region as well as the study of a simplified algorithm for the prescription of oral contraceptives and develop an implementation plan based on these results.
- Reach a consensus with the MoH on how to increase access and use of injectable contraceptives via "social marketing" as culturally appropriate.

Decentralized Health Care Planning & Financing

- Train all members of the 120 Associations of Community Health Workers (ARPV) and commence contracted activities.

Major Accomplishments of the Period

Infectious Diseases

The doctors, nurses and midwives working in the health centers, maternities and health posts of the USAID supported Health Districts were trained in the application of Senegal's malaria prevention and treatment policies. These policies call for a universal application of intermittent preventive treatment (IPT) with S.P. to prevent malaria in pregnancy and a combination therapy for the treatment of febrile cases using S.P. in combination with Amodiaquine. Epidemiological research and financial analyses support this choice as it is as efficacious and is less expensive than alternative combinations.

An important policy dialogue was held from which the MoH adopted the policy of applying subsidies to the sale of insecticide treated nets (ITN) for both pregnant women and children under five years of age and to establish FCFA 2,500 (approximately 5 \$US) as the amount of the subsidy. This will allow USAID/NetMark to expand the "voucher" system (field tested last year) to an additional four Health Districts.

When the original combination therapy policy for health centers and posts was adopted, little was specified about what should be done to treat febrile cases at the community (health hut) level. In the absence of a specific policy authorizing community level combination therapy, USPVOs working to support community aspects of the national malaria and tuberculosis programs were constrained. This issue was raised and a decision taken that PVOs could support combination therapy provided that a District level Memorandum of Understanding was developed between the National Program, the District Medical Officer and the PVO. The meetings to develop these MoU will take place in late July.

Child Survival

Upon the completion of 18 months of field research conducted jointly with UNICEF to determine to what extent community health workers could effectively diagnose, treat and refer cases of acute respiratory infection (ARI), a workshop was held by the MoH. The workshop participants that included government and university officials, pharmacists, representatives from PVOs and donors were presented with the results of the research. These results demonstrated rather convincingly that literate CHW with proper training, a few key tools and proper oversight could differentiate simple cough from pneumonia and pneumonia from severe pneumonia and apply the advise, treat or refer algorithm they were taught, as appropriate. At the conclusion, the workshop participants unanimously recommended that the MoH expand this intervention to all health districts where the Chief Medical Officer felt that there were enough literate CHW to effectively use and apply these tools.

STI/AIDS

240,000 female condoms were received and made available to the Ministry of Health's Division of STI/AIDS and a local Association that works with vulnerable women. STI patients and women with multiple partners are targeted in this intervention. Discussions were concluded with the KfW and the GoS to add a female condom to the range of products sold through a local social marketing NGO.

Significant progress was made to develop appropriate policies and implementation modalities to expand mother-to-child transmission of HIV services to three additional regions. Training of health care providers and an evaluation of a pilot test is underway.

AID/W Food For Peace Office approved one DAP and is in the process of reviewing a DAP amendment that would provide FFP food to Persons Living with HIV/AIDS. These foodstuffs will contribute significantly to improving the survival of PLWH in Senegal and complement USAID's assistance in the areas of psycho-social support and nutritional advice.

Reproductive Health (RH) & Family Planning (FP)

Results of a study to assess demand and supply constraints to increased use of the IUD in the Thies region as well as the study of a simplified algorithm for the prescription of oral contraceptives will be presented during a national workshop planned for August 2004. This presentation will introduce a discussion on how to 're-position' the IUD and then lead into a larger discussion of contraceptive security.

Market and policy research continued in view of introducing an injectable contraceptive into the social marketing program. The social marketing program anticipates GoS approval of the proposal by the end of 2004.

A Maternal Mortality Technical Committee was established and held several meetings. A proposal to amend current practices in favor of a systematic administration of oxytocine to prevent post-partum hemorrhaging was presented and received with considerable interest on the part of the MoH and the Committee.

Decentralized Health Care Planning & Financing

Approximately 3,000 Community Health Workers from 125 Community Health Worker Associations were trained in a wide variety of messages and communication techniques. Contracts to conduct promotional activities were signed between these Associations and the local government units, under the direction of the Chief Medical Officers and Nurses.

Several new Community Based Organizations (CBO) were identified that will be able to develop into Mutual Health Organizations (MHO) and offer a "health insurance" program to approximately 1,000 families.

Major Activities Planned for the Next Period:

- Train as many Community Health Workers as is possible to implement community-level combination therapy for the treatment of febrile illnesses.
- Implement an expanded voucher system intervention while respecting the MoH's policy to subsidize ITN for pregnant women and children in the amount of 2,500 FCFA (approximately 5\$US).

Child Survival

- Prepare for implementation in 2005 of the recent policy decision to allow Community Health Agents (under certain conditions) to manipulate cotrimoxazole for the treatment of pneumonia in children.
- Complete the research activities and organize a national workshop to decide on a new and comprehensive policy for newborn care both at the clinical and the community levels.
- Establish a micro-nutrient fortification working group and develop an approach to assess market demand and supply capacity and constraints.

STI/AIDS

- Implement PMTCT in the Regions of Thies and Kaolack.
- Integrate FFP foodstuffs into ongoing care and support activities in favor of PLWHA and their families.
- Improve the functioning of the Country Coordinating Mechanism (CCM) of the Global Fund and ensure a better coordination between USAID, Global Fund and World Bank funded activities.

Reproductive Health (RH) & Family Planning (FP)

- Develop action plans to implement recommendations from the upcoming IUD and Contraceptive Security workshop that will increase the demand for the IUD and that will involve additional partners with the procurement of contraceptives for Senegal.
- Implement the social marketing of an injectable contraceptive program.
- Pursue the issue of the systematic application of oxytocine during the third stage of pregnancy.
- Finalize the RH Formative Supervision tools and oversee their effective use in USAID supported Districts.

Decentralized Health Care Planning & Financing

- Implement the health promotion contracts of 120 Associations of Community Health Workers (ARPV).
- Prepare for the development of 2005 integrated local community health plans and budgets in light of the phasing out of the matching grants program.

Quarterly Report 21 April 2004 – 20 July 2004
O. Masee Bateman
USAID/India

Overview of the Quarter

This quarter has, as usual, been an active one. We made substantial progress on improving teamwork within the PHN office, staffing and organizing the CS Division within PHN, improving collaboration with other USAID offices, procuring an urban health project, contributing to the development of the national RCH program - not to mention all of the day to day workload. Work Objectives for the next year were developed during this quarter and are attached. I took one month of home leave during this quarter, and had 3 days of consultations with USAID in Washington. The following therefore reflects about 2 months of work in India.

Activities and Achievements by Work Objective

Work Objective 1: The Child Survival Division with PHN is established and effective.

Performance Indicators:

1. Additional senior FSN Project Management Specialist recruited and integrated into the Child Survival Division.
2. PHN Child Health Program Strategy revised

Activities and Accomplishments:

- A PHN office retreat was held, where a number of issues of the staffing, objectives, and means to work together were sorted out that provided guidance and broader buy-in to CS Division development and activities
- One existing FSN staff has been allotted 50% time in the CS division, roles and responsibilities and associated work objectives have been worked out.
- A Senior FSN position has been redefined, PD developed and recruitment for this position is in the final stages.
- An immunization focus has been developed, with staffing from a fellow (in another division) as an adjunct member of the CS division, with technical backstopping by the CS Division.
- The revised child health strategy has been moving forward with brown bag presentations and discussions on specific technical matters, and discussions with HIDN staff when I was in Washington DC the last week of June. This will be a focus for the next quarter.

Work Objective 2: Lead the mission in the implementation of the USAID urban health activity.

Performance Indicators:

1. Urban child health activities initiated in 3-4 cities.
2. Urban Health Task Order developed and procured.
3. Urban Health technical assistance and support mechanism institutionalized in India

Activities and Accomplishments:

- The urban health task order was developed and procured during this quarter. It is a bridging task order to carry the program through July 2005. Discussions were initiated with USAID/W on options for funding and program management for the subsequent period.
- Urban health activities are proceeding as planned in Indore, Agra, and Calcutta (Kolkata). The program is stalled in Jamshedpur (state of Jharkhand) as some larger issues of USAID assistance and relationships at the state level need to be sorted out before we can proceed there.
- The institutionalization of the current urban health program, which has become the nodal institution for providing TA and support to the GOI on urban health matters, has been successfully included in the task order that was procured. A workplan has been developed and work on institutionalization has begun. Readiness to accept a contract funded from foreign sources (one acid test for successful institutionalization from a bureaucratic point of view) is expected in March 2005.

Work Objective 3: USAID technical leadership in child health issues established and continued.

Performance Indicators:

1. RCH II design and implementation effectively supported in the area of child health
2. Effective mechanisms developed to support other PHN divisions in child health matters

Activities and Accomplishments:

- Participated in a pre-appraisal mission in July – a collaborative mission of all donors and the GOI in preparation for RCH II
- Through continued advocacy and the good efforts of many people, CARE has successfully developed a relationship with state and national RCH teams with the promise of bringing over a decade of USAID supported child health activities into the mainstream in India.
- A new Zinc initiative is being developed with the PPRIME division of PHN, and with the support of the ANE bureau and key Indian partners
- The CS division is very actively engaged in planning for NFHS III (the third round of DHS in India).
- Management mechanisms have been developed to improve communication and planning for the support of the cross-cutting CARE RACHNA program that is managed in the CS division. This program

includes CS, POP, HIV, and Title II funds – all in significant levels. Coordination and co-management is necessary with the Office of Social Development, as well as all divisions within PHN.

Work Objective 4: Indo-US Scientific cooperation established to address key child health issues

Performance Indicators:

1. USAID resources are targeted to priority neonatal health research activities
2. Neonatal health implementation activities supported by USAID are well evaluated and documented.

Activities and Accomplishments:

- Strategic Planning process and final meeting with IndiaCLEN accomplished, workplan for the next year finalized and letter of agreement to fund it was issued.
- A specific Newborn Health Research Initiative meeting (within the IndiaCLEN program) was held and specifics of the newborn health research initiative were finalized.
- A similar meeting for the IndiaCLEN micronutrient program meeting was held and the detailed research agenda finalized
- Collaboration between JHU and IndiaCLEN continues to benefit from vigilant support – and the relationship is burgeoning and productive.
- Numerous discussions were held with IndiaCLEN on organizational development issues as it has outgrown older, informal decision-making, governance, and management arrangements. This is a work in progress.
- We initiated planning for a consultation on “neonatal health among the urban poor” – to be held in September. Among other outputs will be a research agenda.
- I gave numerous presentations on urban health, neonatal health, and related child health matters in local and national meetings.

TAACS Quarterly Progress Report
4/21/04-7/20/04
Alan H. Bornbusch
GH/PRH/CSL

Work Objective 1: Promote, expand, and integrate contraceptive security concerns within the broader international community.

- Provided technical backstopping for USAID participation in the Reproductive Health Supplies Coalition.
- Provided technical guidance for design of USAID-funded activities in support of the Coalition – advocacy mapping, harmonization of contraceptive projections.
- Completed editing, with Tanvi Pandit, of final draft of *Strategic Pathway to Reproductive Health Commodity Security: A Framework and Guide for Assessment, Planning, and Implementation* (SPARHCS).
- Provided technical guidance to INFO Project on design and production of SPARHCS.

Work Objective 2: Promote and strengthen USAID planning, programming, and implementation for contraceptive security.

- Continued participation in core technical group for development of a contraceptive security index. Made final revisions using peer reviews and developed publication plan.
- Participated in graduation working group.
- Provided technical guidance for placement of a Michigan Fellow in the field for contraceptive security.

Work Objective 3: Promote and strengthen contraceptive security planning, programming, and implementation in USAID country programs.

- Continued to provide technical guidance for West Africa regional initiative for reproductive health commodity security, with UNFPA, World Bank, and West Africa Health Organization.
- Provided technical guidance for West Africa media seminar on contraceptive security.
- Provided technical backstopping on contraceptive program needs in Bangladesh, Jordan, and West Africa subregion.
- Continue to provide technical supported to USAID/Kiev for development of a new FP/RH program; provided technical guidance for formative assessments.

Work Objective 4: Effective leadership and management provided to contraceptive security team.

- Worked with management coach to improve team leadership skills.

- Assisted with 360 reviews of team members (conducted interviews, synthesized comments)
- Began planning for second contraceptive security team retreat.

Tim Clary
Employee Self-assessment
July 11, 2003 – June 18, 2004*

Senior Technical and Policy Advisor
HIV/AIDS and Reproductive Health
USAID Mission to Ukraine, Belarus and Moldova

Below I've listed my major achievements for July 11, 2003 to June 18, 2004. It should be noted at the outset that a number of these achievement were the results of not only my efforts, but of others within the Mission and colleagues at AID/W.

Achievements

1. Finalized USAID/Ukraine's HIV strategy 2003-2008 including participating in the Office of HIV/AIDS review, responding to resulting issues paper, helped to finalize the budget, obtaining approval to make HIV/AIDS a Special Objective, contributed to writing the Congressional Notification, and suggesting possible supplementary activities ;
2. Finalized USAID/Kyiv's Project Approval Document for the new HIV/AIDS strategy;
3. Served as primary drafter of the RFA (including subsequent amendments) for the \$8.2 million new HIV/AIDS program;
4. Served on the TRP for the HIV RFA. This also included helping with the selection of the members, organizing the logistics, and finalizing the TEC memo and subsequent follow-up questions and responses;
5. Assisted in the drafting of an Annual Program Statement (APS) for USAID/Kyiv's upcoming HIV/AIDS programs and organizing the subsequent TRP. Finalized the TEC memo for round 1 of the APS. Served on the TRP for round 2 of the APS and assisted in drafting of the TEC memo;
6. Served as primary lead for HIV monitoring and evaluation (also for reproductive health and maternal and child health). This included organizing and managing two in-country workshops and a working group meeting (approving SOWs, agendas, and budgets), liaising with The FUTURES group on a worldwide coverage survey and arranging for the presentation of results, and working with UNAIDS, The World Bank, and USAID/W on an E&E regional M&E workshop;
7. Served as Cognizant Technical Officer on the \$6 million/4-year mother and infant health task order contract implemented by John Snow Inc. This included approving the 2nd year work plan, travel, vouchers, quarterly reports, financial reports, new hires, rest and recreation leave, and VAT exemptions. Also, wrote letter requesting MoH cooperation based on MoU and modified the TO to increase the project ceiling by \$1 million and expanding the SOW. This also included getting the necessary waivers;
8. Served as acting CTO on a \$1 million/ two-year grant for primary health care and HIV/AIDS work. Conducted a site visit to observe project implementation ;
9. Supervised two Foreign Service Nationals and provided partial technical supervision for two others. This includes approving their works objectives, CAJES, and

- professional development. Provided mentoring and guidance to another FSN serving in Moldova;
10. Served as Acting Office Director when needed (11 days total);
 11. Participated in overall health budget programming, review of pipelines, and staffing and travel/professional development issues;
 12. Served as the Ambassador's control officer for a proposed event in Kharkiv. This included preparing all necessary materials and logistics;
 13. Organized and managed a reproductive health assessment done by POPTECH. This included approving the Scope of Work, budget and arranging logistical support. Reviewed, edited and finalized the draft report. Also, approved and provided assistance for the team to present findings for AID/W;
 14. Organized and managed a PMTCT review done by POPTECH. This included approving the Scope of Work, budget and arranging logistical support. Reviewed, edited and finalized the draft report. Also, approved and provided assistance for the team to present findings for AID/W;
 15. Provided technical assistance to Moldova office in writing and editing the "Priority Health Issues" and subsequent Project Approval Document for a \$6.2 million four year project to address HIV, safe medical practices, and hepatitis. Assisted with the mission review and approval process. Assisted in finalizing the task order;
 16. Wrote concept paper for new reproductive health activity. Assisted in the drafting of an RFA done by AID/W TDYer;
 17. Participated in the discussions and the design for a new TB activity in Ukraine;
 18. Assisted USAID/Moldova in the resolution of issues with its TB implementer;
 19. Assisted USAID/Belarus in obtaining performance funds for HIV prevention activities. This included writing the request memo, providing indicators, and arranging for technical assistance for follow-on;
 20. Involved in GFATM issues including meeting with other different stakeholders, drafting of priority cable, and mitigating the effects after Ukraine's grant suspension. Represented USAID as an observer at two proposal reviews. ;
 21. Served as activity manager then the supervisor of the activity manager of an HIV/AIDS and reproductive health project implemented by the POLICY Project. This included approving work plans, budgets and staff changes;
 22. Assisted in the development of an NGO workshop for Ukrainian NGOs to better advocate for themselves around GFATM issues. Follow-up to this involved the development of an NGO Coalition and the approval of its work plan and budget;
 23. Reviewed two proposals under the E&E Bureau's Values APS, unsolicited proposals submitted by AMICALL, TPAA, and UUARC (drafted response letters), reviewed anti-trafficking PAD and participated in the SO and mission review, reviewed NIH proposal submitted to US Embassy, reviewed and wrote letter of support for PATH's proposed PMTCT work under a CSH grant, and reviewed unsolicited proposal from WHO for TB work in Ukraine;
 24. Wrote and/or edited numerous briefs and reports including USAID/Kyiv's programs for the Child Survival and Health report, talking points on HIV and primary health care, USAID/EU cooperation on HIV/AIDS, part of OHST's section in the Annual Report, the Mission Director's talking points for the Parliamentary hearings on HIV/AIDS, a US Embassy op-ed piece on HIV/AIDS, the health section of

- USAID/Moldova's Annual Report, the HIV section of the MPP, a brief on HIV's economic impacts for the Embassy, a brief on HIV and human rights for the Embassy, talking points for Administrator Natsios' visit, the Mission Director's talking points for USAID/Kyiv's HIV project close-out, HIV talking points for the CSEC meeting, responding to the in-coming DCM's inquiries on HIV, and the 3 in 1 cable;
25. Wrote and/or edited SOWs and assisted in the completion of MAARDS for Synergy (Ukraine & Belarus), NHA/PHR+, BUCEN/POLICY rider survey, Moldova DHS, DELIVER HIV commodities assessment, DELIVER RH commodities assessment, PSP contraceptive assessment, MSM KAP, DCOF/Holt;
 26. Represented the mission as required with the Government of Ukraine and international organizations such as UNAIDS, SIDA, UNICEF, World Bank, GFATM, Gates Foundation, WHO, EU, UNDP, UNFPA along with numerous cooperating agencies (AFEW, Global TB Alliance, CDC, JHPIEGO, IRD, World Services, AED, PHR+, Catalyst, UCAN, SOCIS, Red Cross, International HIV/AIDS Alliance, PRI, Winrock, PAUCI, NIDA, MEC, AMICALL, Synergy Project, AIHA, CII, PATH, CRDF, UREP, and the Ukrainian Foundation);
 27. Hosted a USAID/W HIV team, a RH assessment team, an AID/W NEP, and assisted with the scheduling for AID/W TA from the CSL division;
 28. Served on the mission's awards committee and wrote and/or edited three nominations;
 29. Oversaw the sending of eight Ukrainian participants to the HIV International Conference;
 30. Nominated participants and advocated for their acceptance into the Embassy's International Visitor's Program and Open World Program;
 31. Participated in the USAID/Ukraine's leadership group;
 32. Gave presentation at the U.S. Embassy in Ukraine, an OSI-funded conference, two local high schools, a meeting for donors to Ukraine, and for a university based study tour;
 33. By request provided technical assistance to USAID/Albania, USAID/Armenia, USAID/CAR, Embassy Estonia, USAID/Macedonia, USAID/Romania, USAID/RSC, and USAID/Russia;
 34. Participated in the mission's phase-out planning for Ukraine, Belarus, and Moldova with a specific emphasis on reviewing indicators;
 35. Participated in and helped OHST prepare for the mission's portfolio review of SO5 and SpO8;
 36. Assisted AID/W in the planning of the HIV sessions for the E&E Health Workshop;
 37. Participated on the Technical Advisory Board for the SmartWorks HIV prevention in the workplace project;
 38. Finalized the schedule and assisted in the preparations for a joint AID/W-UNICEF visit;
 39. Attended and participated in a hepatitis conference in Kiev;
 40. Wrote an article about the MIHP Project for which I am the CTO for the CEDPA TAACS newsletter.

Quarterly Report (May – Jul 2004)

Andrew Clements, Infectious Disease TAACS, USAID/Asia and Near East (ANE) Bureau

1. ANE Regional HIV/AIDS and Infectious Disease Program

- Worked with the regional mission in Thailand on programming FY 2004 regional infectious disease funds and hiring a new ID advisor for the mission.
- Participated in a meeting on monitoring antimalarial drug quality in the Mekong region of Southeast Asia to review results to date and develop work plans for the upcoming year.
- Discussed with partner organizations (e.g. World Health Organization, Centers for Disease Control and Prevention, Management Sciences for Health, U.S. Pharmacopeia) new and continuing activities for FY 2004 so that work plans can be developed for the upcoming year.
- Met with a representative of the Canadian International Development Agency to discuss the possibility of collaborating on TB activities.

2. Technical assistance to missions/countries

- Reviewed and provided technical feedback on new health strategies submitted by the mission in the Philippines and E. Timor.
- Briefed the new health officer in Pakistan and the Ambassador in Papua New Guinea on on-going TB and malaria activities in their countries and discussed possible activities for the future.

3. Technical assistance to USAID/W

- Provided input on the content of the upcoming ANE State of the Art training course for PHN officers.
- Provided input on a Strategic Vision summary for the ANE Bureau.
- Created a draft model to assist in determining which ANE countries have the greatest need for TB funding.
- Participated in a panel to select a new pharmaceutical advisor for GH.
- Participated in continuing discussions with GH to update USAID's surveillance strategy.

Quarterly Travel Plans (Aug – Oct 2004): None currently.

Quarterly Report for Gary Cook
Senior Health Policy Advisor in ANE/TS
April 21 to July 20, 2004

This is the twentieth quarterly report of my work as Senior Health Policy Advisor in the Asia Near East Bureau.

General Assistance to the PHN Program of the Asia Near East Bureau:

- Served as acting ANE/PHN team leader since the Foreign Service Officer, Jed Meline, left his assignment. After serving eight months of his tour, Jed was seconded to serve as a USAID liaison for humanitarian and relief work at the National Security Council. A replacement is not expected until December requiring a prolonged period where I will be acting team leader.
- Received "Outstanding Leadership Award" from the Population Leadership Program of the Public Health Institute. A ceremony was held during a reception at the Global Health Council meeting at the Omni Shoreham Hotel in Washington, D.C. The award cited abilities and dedication to mentoring new colleagues in the health sector of USAID. Other recipients included Margaret Neuse and Mark Rilling both of the Office of Population and Reproductive Health.
- Provided input to the external evaluation of the Catalyst project, based on my experience with that project in Egypt, Yemen, and Pakistan.
- Continued as member of the technical evaluation panel for the follow-on to the BASICS II project.
- Orchestrated and led the development of the PHN section of the ANE/TS Strategic Vision.
- Continued orientation of Bill Jansen, new member of the PHN team to cover MCH activities especially in Iraq. Also brought on and oriented Mary Seagall, a new health officer for Iraq on the ANE/Office of Iraq Reconstruction. Continued to orient Sonali Korde, PLP Private Sector and Sustainability Advisor.
- Continued coordination of the planning for the ANE State of the Art training course in New Delhi in October. Assembled field input to course curriculum.
- Negotiated USAID response to USAID Indonesia strategy on health. Important factor was the compliance with USAID policy on the use of CSH funds in an integrated program of water, environment and health.
- Reviewed USAID/East Timor health strategy to assure that it will focus and limit the health activities and to assure that family planning was included.
- Consulted with visiting PHN staff from numerous missions in the region regarding their programs and needs from the Bureau.
- Interviewed candidates for two vacant positions in the Bureau for Global Health/Regional and Country Support Office. The two senior positions will provide support to the ANE region.
- Provided input via the PHN Sector Council to the GH strategic framework and strategy.

- Participated in the NEP Graduation panel of Aye Aye Thwin. Provided input to areas for continued emphasis in her development. The panel approved her readiness for assignment to the Philippines.
- Provided mentoring and advise to a variety of NEPs in the NEP class number 10.
- Maintained and updated the FY '04, '05, and '06 CHS and ESF budget tables for all missions in the ANE region.
- Participated in and provided input to the Bureau discussions on possible future activities and management structures in Libya.
- Brought the PD&L budget to completion and prepared for transfer of funds to GH for obligation to the appropriate projects.

Afghanistan:

- Presented the progress on clinic construction to the Afghanistan Inter-Agency Operational Group (AIOG) at the State Department. The PowerPoint presentation provided an overall picture of USAID assistance in the health sector as well as progress and issues associated with the construction activity.
- Participated in and reported on meeting at Pentagon regarding HHS and DOD assistance in the health sector. Provided input and cautions to their plans for the management of hospitals in Kabul.
- Recruited and oriented new TAACS, Jim Griffin, for his one year tour in USAID/Afghanistan. He will be the first long term health officer to be assigned inside USAID/Afghanistan. He departs for post on July 23.
- Provided continuing financial guidance to the Mission and to ANE on program plans and requirements.

Iraq:

- Briefed the new HHS Health Attaché on the USAID health portfolio.
- Recruited and orientated various staff members for USAID/Iraq and the Iraq Reconstruction Office her in Washington.
- With the departure of the ANE/PHN team leader, I returned to a supervisory role in the USAID/Washington health team support for USAID/Iraq.
- Engaged on the issue of which USG agency will have the lead role in Iraq: HHS, DOD or USAID. Meetings at State department.
- Continued to negotiate and liaise with the issue of the Basra Children's Hospital. This involves dealings with NSC, the Hill, OMB, Project HOPE, and the Mission.

Pakistan:

- Facilitated the Mission's possible support to a family planning workshop to be hosted by AKU in Karachi.
- Briefed the Deputy Mission Director designate on the issues and problems of the health program.
- Continued to liaise with the new FS PHN Officer, Chris McDermott, who is now at post. He has engaged in the issues and is taking a dynamic leadership role with the existing PHN staff at post.

Yemen:

- Provided orientation and support to a two-person team to Yemen in the development of the Performance Monitoring Plan (PMP). Liaised with Nahoko Nakayama and Peggy Meites during their TDY.
- Supervised the development of a multi-year obligation plan for USAID/Yemen's health portfolio.
- Consulted with PHR+ and Catalyst projects regarding their launch activities in Yemen.

Gary Cook/July 13, 2004: ANE/SPOTS/gcook/CEDPA/20th quarterly report

**TAACS
QUARTERLY REPORT**
**Kristin A. Cooney, Senior Technical Advisor/Reproductive Health and
Child Survival**
USAID/WARP Ghana (SO5)

April 21, 2004~July 20, 2004

CTO, AWARE-RH:

- Conducted regular management meetings with project staff.
- Conducted regular technical meetings with selected technical staff (on topics such as contraceptive security, malaria, national health accounts, health care mutual health organizations/community insurance schemes, health care vouchers).
- Policy and Advocacy workshop: Participated in meeting of executive board in May in Accra.
- Institutional Capacity Development workshop: Participated in meeting of executive board in May in Accra. Reviewed documents and provided input. Identified funding for specific activities carried out with WAHO (Young Professionals Internship Program, or YPIP).
- Participated in Task Forces to review ongoing activities and coordination between AWARE-RH and AWARE-HIV/AIDS as well as other partners: Capacity Building, Health Sector Reform, PMTCT, and Behavior Change Communication.
- Conducted coordination meetings between AWARE-RH and field support partners.
- Reviewed and approved travel requests.

RH, CS, and ID Team Leader:

- Reviewed and approved travel requests for field support activities, including ensuring linkages with Embassy personnel in non-USAID presence countries and WARP implementing partners.
- Commodity Security: Traveled to Burkina Faso to follow up on provision of bridging supply of contraceptives. Assessed current situation and determined need for additional technical assistance. Reviewed contraceptive accounts with USAID/Washington and partners. Reviewed standard operating procedures with major field support partner and met with country backstop when she traveled to Ghana to review procedures and workplan for FY 04. Continued to coordinate ongoing work with Cameroon and Togo. Debriefed with Ghana team conducting the Reproductive Health Commodity Security Study. Coordinated response to stock-out situation in Cameroon.
- Met with field support partners such as RPM+, DELIVER, and MNH to review planned activities for coming year and coordinate those activities with AWARE partners.
- Repositioning Family Planning: Began discussions with project partners for activities related to repositioning family planning in the region. Ensured provision of field support to additional partner to pursue activities in this area. Held planning meetings and conference calls for a regional workshop to take place in Ghana in November 2004.

- Program Office activities: Provided input to program office on SO5 Activity Information Sheets (AIS), other activities.
- Supervisory responsibilities: Reviewed and provided guidance to work of all SO5 employees in absence of Team Leader. Wrote scopes of work for and supervised work of summer intern and temporary technical assistant from USAID/W. Reviewed and approved timesheets, travel and transportation requests, in absence of Team Leader.
- Interface with Country Team, USAID/Washington: Provided updates to country team on program activities and needs. Responded to ad hoc requests for information. Held conference calls to update on activities. Coordinated Washington visits to assist with workload.

HIV/AIDS:

- Traveled to Benin to participate in HIV/AIDS Monitoring and Evaluation Training Workshop with AWARE-HIV/AIDS partners.
- Provided orientation and guidance to incoming Pfizer Fellow, a six-month temporary employee of FHI who was assigned to the project to work on communication products. Reviewed communication strategy developed by Fellow and linked with AWARE-RH to plan joint activities.
- Conducted coordination meetings between AWARE-HIV/AIDS and field support partners.
- Reviewed and approved travel requests when acting Health Team Leader.

SO5 General Activities:

- Performance Management Plan (PMP) Meeting and Activities: Finalized PMP Performance Reference Sheets and reviewed with all partners.
- Annual Program Statement (APS): Significantly revised APS for posting on web (APS is the mechanism by which we can accept unsolicited proposals). Responded to formal questions on APS that were posted on web as addendum.
- WARP Newsletter and Website: Edited website material and newsletter input.
- Progress reports: Reviewed progress reports from AWARE partners, provided feedback, obtained final reports and disseminated.
- Worked with all partners to ensure provision of trip reports and workshop reports to WARP.
- Prepared and participated in Semi-annual portfolio review for all partners.
- Recruitment of Personnel: Revised and re-advertised for Senior Capacity Building Advisor (USPSC). Developed interview guides and participated in selection committee for the position. Wrote selection memos.
- Participated or led partners' meetings for information sharing, coordination of activities.
- Reviewed vouchers of all partners.
- Budgeting and annual planning: Participated in decisions on field support activities, annual budget, and coordination of activities with implementing partners.
 - WARP SO5 Sanctions Memo: Wrote and received clearance from Regional Legal Advisor on adherence to legislative restrictions in WARP countries.

- WARP SO5 Action Memo: Wrote and received clearance from Regional Legal Advisor and Mission Director on Action Memo for SO5 procurements for FY 04.
- MAARDS: Prepared and processed MAARDS for annual procurements, incremental funding, personnel positions.
- Served as Health Team Leader during absence of supervisor.
- Worked with all partners to ensure provision of trip reports and workshop reports to WARP.
- Prepared and participated in Semi-annual portfolio review for all partners during absence of supervisor.

CEDPA QUARTERLY REPORT April 20- July 19, 2004
Cornelia E. Davis MD
Senior Technical Advisor, TB & HIV/AIDS, Kenya

A. Major Activities Planned

1. All the activities planned for this quarter were accomplished. Dr Davis assisted the Pretoria mission to select the TASC2 contractor for TB/HIV activities. A series of activities with the Sudan Field Office were carried out. Dr Davis presented and participated in the Africa Bureau State of the Art (SOTA) conference. The Human Rights and HIV/AIDS course in Cape Town was postponed.

B. Major Accomplishments

1. Dr Davis went on TDY to USAID/Pretoria to assist the mission to select the contractor for their TB/HIV activities under the new TASC2 mechanism. There were two proposals, both of which had merit and were close in points. Additional questions were sent for the contractors to respond. Their replies were available before my departure on home leave and both proposals were evaluated and final comments given before my departure.
2. Sudan health activities are starting to evolve. Dr Davis participated in a two day PMP workshop for the Sudan Health Transformation program. Indicators were developed with the SFO, SPLM members, and selected invitees from the NGO community.
3. As part of the launch activities of the Sudan Health Transformation Program, Dr Davis traveled with Anne Peterson AA, B/GH to Rumbek to participate in the opening ceremony. Dr Peterson was briefed by the OLS Security office in Loki on current areas of insecurity in southern Sudan. Food insecurity is still a problem in southern Sudan although if there was infrastructure one could supply an area of low potential by another of high potential. The World Food Program identified levels of malnutrition in the different Regions. While in Loki the delegation met with WHO Office who briefed us on EWARN (Early Warning and Response Network) and TB program activities.
4. On May 13, the official launch of the SHTP occurred. The SPLM was well represented by the Vice Chairman Reik Machar and the Director General Health Secretariat. Dr Bellario took the opportunity to talk about the detailed work with WHO in planning for the reconstruction of southern Sudan. Dr Peterson and Allan Reed talked on US contribution to rebuilding Sudan, the components of the SHTP, and the need to build Sudanese capacity to run the health infrastructure.
5. The JSI team, USAID Field Office health people, and the Health Secretariat held the first Technical Review team meeting. The purpose of the meeting was to finalize the roles and responsibilities of the committee members, to determine the team membership, and to start building a rapport and the modalities for working as a team.

6. Technical Review Committee. After long discussions 7 members were proposed: SPLM (3) Samson Baba Prevention/Surveillance, Pius Subek Pharmaceuticals, and Monywa Arop, Human Resources, USAID (2) (Paul McDermott and Ben Kaufield OFDA), JSI (2) Dan Wendo and Grants or Training Advisor. These were permanent members with the intention of no substitutes. This committee would then report their findings and recommendations to a larger body that would involve bilateral, multilateral representatives, NGO representatives etc. to encourage transparency and buy in. After long discussions the members also came to agreement on the criteria for selection of the counties.
7. One of the outcomes of the Technical review committee was the recommendation to hold a team building retreat for the Sudan Field Office, JSI and the SPLM. Dr Davis participated in this two day retreat. It was an opportunity for all parties to express concerns, identify common goals, and build trust.
8. SOTA Conference, Johannesburg South Africa. Dr Davis worked with the Bureau for Global Health to develop the presentations for the TB sessions. She presented on what was new in Tuberculosis and Julie Wallace in B/GH talked on TB/HIV concerns. Both sessions were well attended. The SOTA was an opportunity to get updated on PEPFAR initiative on HIV/AIDS, the latest information on artemisinin combination therapy for malaria, and polio eradication efforts.
9. Dr Davis took Home leave from June 27 to July 25, 2004.

C. Major Activities Planned Next Quarter

Dr Davis will return to Burundi to complete work on the three year Health Design (Aug 9-13). WHO is holding a TB/HIV/AIDS Technical Working Group meeting in Addis Ababa (Sept. 20-21). I hope to stay on to work with the Ethiopia mission on TB/HIV/AIDS activities. (Sept 23-28). I don't have definitive dates as yet but I need to return to Djibouti early September. REDSO/PHN Partners meeting is scheduled 18-22 October and due to travel advisory in Nairobi, it will be held somewhere in the region.

Quarterly Report
Nancy E. Fitch, MD
USAID-Rwanda HIV/AIDS TAACS

May 1, 2004: Intensive French language training, Vichy France for 4 weeks.

June 2, 2004: Posted to Kigali, Rwanda

June 8-12, 2004: PEPFAR meeting in Johannesburg and SOTA meeting in Johannesburg.

This quarter is characterized by intensive start-up activity. PEPFAR activity in Rwanda had been interrupted for four months due to staffing gaps. Since arrival in Kigali, there has been considerable activity with PEPFAR, working closely with other USG agencies, with rapid intensive work to keep up with impending PEPFAR requirements. Filling other staff vacancies, reorganizing HIV/AIDS office, establishing relationships with GOR counterparts and other donors, USG agencies and learning the ground situation have been the major activities.

I anticipate possible travel to Washington DC the third week of August for the PEPFAR Strengthening Health Networks Conference.

Basically, I am off to an intensive start and things look good.

Nancy Fitch

July 20, 2004

Elizabeth Fox

Quarterly Report- April 20, 2004 – July 20, 2004

1. I continue to manage the CHANGE cooperative agreement. This quarter, I worked with CHANGE on their close-out plans and pipeline and negotiated with the El Salvador and Mozambique Missions concerning the activities until the end of the project.
2. I continue to manage the BASICS II contract. This quarter I continue to monitor the pipeline and consult with USAID Missions on closing and transition strategies and formed part of the performance evaluation board for the final award fee of the contract. I worked with the author of "Saving Children's Lives" on the manuscript.
3. I continue to manage the TASC 2 IQC. This quarter I supported USAID Missions in Moldova, Georgia, Uganda, Armenia, and Peru and with the USAID/Washington TB team in the development of SOWs for new task orders. I gave a presentation to the Africa SOTA on the new IQC mechanisms.
4. I continue to manage the Inter-Agency Agreement with VOA, specifically on polio reporting in Nigeria and in the design of the new IAA.
5. I continued to work as the mentor for Adam Slote and Matthew Sattah.
6. As county coordinator for Peru, I have worked with the Mission to set up my travel in August to work on the new design.
7. I continue to lead the team for the new child health procurement, BASICS III and serve on various procurement panels.
8. I continue to serve on the GH management team for HCP.
9. TDY, May 31-June 10, WHO Geneva. Support to Stop TB Secretariat in the communication strategy
10. TDY, June 10-13, Africa SOTA, Johannesburg.
11. TDY June 28-July 1, London, Agenda setting meeting for the High Level Forum.

QUARTERLY TAACS REPORT
(May 2004 to JULY 2004)
Matthew Friedman
USAID/RDMA/HHO

A. INTRODUCTION:

My major responsibilities in USAID/Regional Development Mission/Asia (RDMA), Bangkok, Thailand consist of co-managing the HIV/AIDS and Infectious Disease portfolio for fifteen focus countries. I also provided technical support to the Human Trafficking and Thai/Burma border programs.

B. ACTIVITIES COMPLETED:

Below are some of the more significant activities carried out to date:

- Helped develop a monitoring and evaluation plan to review the progress of our program the human trafficking and Thailand/Burma border programs.
- Participated in the workplan review process to identify funding priorities for the HIV/AIDS, ID and Thai/Burma border programs.
- Visited Burma (2x), Laos, Cambodia, and Japan to perform work related activities.
- Worked to put in place a coordination mechanism for the HIV/AIDS sector in Burma to help harmonize the various donor inputs.
- Developed a planning process for the Thai/Burma Border programs.
- Put in place a mechanism for improving USAID and JICA collaboration.
- Carried out a series of fundraising discussions to help get more resources for our program.
- Worked with CDC to develop a collaborative relationship.
- Participated in the human trafficking mapping/assessment exercise.

C. ACTIVITIES FOR NEXT QUARTER

The major activities for the next quarter are as follows:

- Continue developing the overall Mekong Regional HIV/AIDS, ID, Human Trafficking and Thai/Burma Border programs for the HHO.
- Continue revising the operational plan for a new Burma/Thailand partnership program.
- Present the results of the anti-trafficking assessment within the Mekong Region.

Dale Gibb, Senior Technical Advisor/Policy

TAACS Quarterly Report, April 21, 2004–July 20, 2004

TAACS and other NDH programs

During this quarter, we spent a substantial amount of time working with senior management and Human Resources in determining how the TAACS program fits into overall USAID staffing in the health and education sectors. USAID has been able to negotiate with Congress the appointment of 85 new Foreign Service Limited officers in FY 04, 05, and 06, a long awaited breakthrough in the Agency's ability to recruit direct hire employees. An undetermined number of these appointments are for the health sector. Given the press to reach the target 85 in this fiscal year, there was some pressure to use these appointments rather than TAACS and to move people off of TAACS into these appointments. We were successful in explaining the continuing need for TAACS, even with the new authority. No TAACS are to be removed from the roles, although we do expect some voluntary changes to these positions. Guidelines for the use of TAACS have been developed and are to be sent to the field shortly. In brief, TAACS are to be used for highly specialized technical needs, for hard to fill positions, and for positions absolutely requiring direct hire authority. These are as yet unofficial.

UNICEF

We prepared position papers for the U.S. delegation to the June Annual Meeting of UNICEF, involving dialogue with the field on UNICEF proposed field programs, and briefed the Office Director for his discussions with UNICEF Regional Directors on programs in their areas. We also arranged a briefing for the person who will be substituting for the UNICEF Liaison to the U.S. during her maternity leave. Most of the senior staff attended, and discussed issues that might be part of the planned UNICEF-USAID technical consultation, scheduled for October 26, 2004.

World Health Organization

I participated, as USAID's technical representative, in the World Health Assembly and the short Executive Board following the Assembly. Notes on these sessions have already been provided and are attached.

We also arranged a briefing with the senior Bureau staff with Derrick Deane, WHO U.S. liaison in July, where we discussed staffing and budgetary changes, the 3x5 program, the current umbrella grant to WHO, and plans for the annual USAID-WHO technical consultation.

Haiti

This was a busy time for Haiti as efforts were made to continue work on PEPFAR and other programs despite the security situation. We were able to justify an additional \$2 million in child survival funding for Haiti and are now helping them program that. We have helped on staffing questions as well. We have restarted the weekly phone call and are dealing with a series of questions, including TB, personnel, water, and how to stimulate improved performance at the Ministry, involving a more proactive relationship

between USAID and the Pan American Health Organization. A Donors Conference on Haiti at the World Bank has resulted in confirmation of \$122 million in assistance in the health, education and food sectors, possibly including water and sanitation as well. Clarifying that as well as how the funding is actually to be managed and budgeted is the challenge for this next quarter. We will have a Haiti team meeting toward the end of August, to catch up all members on what has been happening and plan what we can do to assist as a team.

Vietnam

The big news is that Vietnam was named the 15th country to participate in the President's Emergency Plan for AIDS Relief. We have now been briefed on the initial visits to Vietnam to advise the Vietnamese of the program, and will be helping on staffing questions. I provided some technical advice to the team, especially on the extent to which NGOs, especially faith-based ones can be used in this effort. They can and want to be but the effort should not be high profile. We will stay involved as these efforts are developed.

Staffing

I continue to work with the PDMS office on the new AAD for human resource support for the Bureau for Global Health. I am also trying to help systematize budget planning under another mechanism, CASU. The PASA with HHS, for support in health across the Agency as well as TAACS, has been completely signed and meetings help with the two counterpart offices in HHS Global Health. We are trying to improve financial monitoring under this mechanism. Finally, we are interviewing candidates for a new Program Assistant for the Front Office who will also assist the Communications Specialist.

Memorandum of Meetings; Derrick Deane,WHO, July 9, 2004

Derrick Deane, WHO Liaison to Bilateral Programs, met with several of us on the morning of July 9, 2004 to review on-going organizational changes and planning at WHO and discuss various questions on the umbrella grant. Major points are noted below.

1. WHO Shift to the Field--Efforts are on going to assure that 70% of WHO's resources, financial and human, are transferred to the field, to regional and country offices. This figure is to increase in 2005 to 75%. To that end most headquarters short term posts are not being refilled. (Actually WHO is behind in achieving this goal because funding needed to support personnel transfers has been short.)
2. Administration--Andrus Nordstrum, in charge of administration, is trying to make the program budget more meaningful, and negotiating to have the maximum amount of extrabudgetary resources untied. Sweden, the UK, Norway and Denmark have agreed to provide their extrabudgetary resources to WHO without "earmarking," allowing WHO to decide how they will be used. .
3. 3X5 - The program is definitely moving, under Dr. Jim Kim's leadership. Some questions have been raised about the balance between treatment and prevention, with \$1.6 million of the last round of the Global Fun going for ARVs. There are also questions regarding the future after 2007. Meanwhile, the ADGs have formed themselves into a management team for the 3x5, strengthening coordination across the organization.
4. Evidence for Health under Tim Evan's leadership is focused much more at country level.
5. Family and Community Health--Joy Phumaphi's leadership and division are strong, and strengthened by the addition of the Vaccines and Biologicals (V&B), with Okwo at the head of that section. A short list has been developed for the new head of Child and Adolescent Health. In Health Technologies and Pharmaceuticals, Essential Drugs is still without a head. Additional changes in staffing are expected after the September regional meetings.
6. Bilateral Consultation--Dates for a "bilateral" Technical Consultation were discussed, with November appearing the most feasible. Derrick Deane will check possibilities and advise. Factors to be considered in setting the date include availability of funding, the forthcoming election, budget cycles of both organizations, and possible dates of the MIPS, if held this year.
7. Strengthening WHO-USAID Field Interaction—Given staffing rotations and change sin programming procedures in both agencies, there is a need periodically to renew ties at field level between staffs of WHO and USAID. We discussed ways of encouraging greater interaction of staff members at field level. The need for a joint statement coming out of both organizations following the bilateral was stressed. Such

a statement is useful in stimulating more interaction in the field, assuring coordination on the WHO Country Strategy Statement (CSS) and USAID programming. Given WHO's desire to have donors invest at country level, donors need better information on the CSS, and their development at an early stage.

8. Staffing Issues--Jeff Spieler discussed the need for WHO to recruit expert staff to maintain its global leadership role and justification for resources. The recruitment delays to some degree are reflected a position freeze in the wake of fall in the dollar.
9. Child and Adolescent Health--CAH has experienced a plateauing of resources; the Netherlands cut support by 50% and put the funding into HIV/TB and malaria; Netherlands is not renewing a grant to HRP but is rather putting funding into specific science projects.
10. The need for resources for CAH other than for immunization was discussed, important since achievement of the immunization goals will not get us to the MDGs.
11. Other meetings—Individual meetings were held on specific grant issues. Following those, Derrick Deane, Xavier Leus, WHO officer soon to reopen the liaison office with the World Bank and IDP, and Ambassador Tom Loftus, WHO Washington Liaison, met with Bob Emrey and Dale Gibb over lunch to discuss a variety of issues, including Haiti, the proposed technical consultation, health systems, and the new immunization fund. WHO headquarters guests also discussed the complicated issues they now face in accepting grants from US private foundations, owing to new security requirements from Treasury and State related to tracing of grant funds to their ultimate offshore recipients.

Jim Griffin
Quarterly Report
April 21, 2004 to July 20, 2004
Office of Population & Reproductive Health
Service Delivery Improvement (SDI) Division
USAID

July 21, 2004

Summary of activities:

CTO for PRIME II

- Final close out of the TRH project
- Close-out of the PRIME Cooperative Agreement

General Office

- Completing the design of the HCD project
- Serving on a Technical Evaluation Committee

Specific Activities:

Final close out of the TRH project:

The main tasks related to the close-out of the TRH cooperative agreement was to review the final report and reviewing the final financial statement.

Close-out of the PRIME Cooperative Agreement:

Closing down the PRIME II Cooperative agreement has been a challenge. This project has worked in 27 different countries with a country office—of varying size—in many. Main activities have been assisting the project document results and lesson learned; tracking final project expenditures and transition PRIME activities into other mechanism for those mission programs that want to continue beyond the scope of PRIME.

**QUARTERLY ACTIVITY REPORT FOR THE PERIOD April 21, 2004 THROUGH ,
July 20, 2004 FOR SARAH HARBISON**

As acting Team Leader of the Operations Research team:

- **Responsibility for management of the Frontiers Cooperative agreement.**
 - Organized finalized budget negotiations with Frontiers for the next fiscal year; assisted in finalization and dissemination of assessment of WHO/Frontiers MOU, facilitated dissemination of the research results, and assisted Frontiers staff in incorporating the recommendations of the capacity building assessment into the workplan; reviewed dissemination materials (OR summaries and program briefs); and reviewed proposals for new OR projects.
 - Supervised the operations research technical assistant.
 - Continued leadership as the point person for the youth initiative in OR
 - Continued to monitor implementation of research activities.
- **As acting Deputy Chief of the Research Division, assisted the Chief of the Division in management, budgeting, staffing, and general leadership responsibilities. Took responsibility for recruitment of two new staff members, a utilization advisor and a direct-hire social scientist, including organization of the interview process, preparation of selection memos, and relations with OP.**
- **Supervisory responsibility for two PLP**
- **Provided technical and management backstopping to the FGC Advisor.**
- **Provided backstopping to the CTO for the Population**
 - **Council Programmatic Grant with particular responsibility for social science research and Navrongo activities.**
- **Participated in the Bureau-wide adolescent working group, and in the Repositioning of Family Planning Initiative.**
- **Participated extensively in the PAC working group, focusing on the research compendium and identification of research needs, and in the Repositioning Family Planning in Africa Working Group.**
- **Represented USAID on the technical advisory group of the Social Science task force of the HRP program, WHO/RHR**

- Prepared briefings for international donors, cooperating agencies, and other organizations on operations research, and identified opportunities for collaboration and utilization of research results.
- Provided technical review of a wide range of documents, reports, proposals and technical papers for USAID, WHO, the Population Council, SDI and the RTU; served as a peer reviewer for articles which had been submitted to several international population journals.
- Participated on the Bangladesh and Egypt country teams.
- Provided ad hoc technical assistance to members of the Office of Population on a range of research issues including design, sampling, and analysis.
- Organized several meetings of the Journal Club.
- Served as the technical advisor for research to the Youthnet project; participated in project planning meetings, contributed to the development of the research agenda, and reviewed research protocols.
- Completed CTO training - Acquisition

David Hausner, TAACS Cambodia
Quarterly Report
April 20, 2004 – July 20, 2004

Major Accomplishments of the period:

1. Participation in NAA Coordination Committee

The National AIDS Authority is the coordinating body that oversees the AIDS activities across ministries in the Cambodian government. I continued to participate in this group.

2. Participation in the PMTCT Technical Working Group

I continued to participate in this group. During this quarter, I assisted in the finalization of PMTCT indicators.

3. Unsolicited Proposals

The MAARD was processed, negotiations have begun. The final agreement should be signed shortly, pending action from the procurement officer. Once signed, this new program will greatly enhance our AIDS care, treatment, support, and prevention program in Phnom Penh.

A second unsolicited proposal was reviewed this quarter. I was on the technical review committee.

4. Global Fund

I attended the regional global fund meeting in Siem Reap. At this meeting, it was mentioned that Cambodia is a model country for the Global Fund.

5. Site Visit

I made a site visits to Battambang, Moug Russei, Koh Kong, and Sre Ambel. I participated in the opening ceremony of the second established "Friends Helping Friends" AIDS support group connected with continuum of care for PLWHA at the referral hospital level. I also observed the progress FHI is making with the public Referral Hospital to provide a continuum of care for PLWHA. We now have two sites in Cambodia providing CoC to PLWHA. USAID supported hospitals also started giving ARVs to PLWHA this quarter. The meds are supported by UNICEF and the Global Fund through NCHADS, but the technical support is given by FHI with USAID funding. In Koh Kong and Sre Ambel with PFD, I observed a school health education program, CBD training for reproductive health and HIV education, and a training for commune council members on HIV.

6. Drug Management for Childhood Illnesses

I worked with the MSH representative to develop the data collection instruments for the assessment of drug management and use for childhood illnesses. Local partners are in the process of being selected, and geographic area has also been determined.

7. Basic Education

I continued to be the resource person for health related activities within this objective.

8. International Conference for HIV/AIDS in Bangkok

I am writing this ahead of time, but since it is within this quarter, I will attend the International HIV/AIDS conference in Bangkok.

9. Semi-Annual Progress Reports

I received and reviewed semi-annual progress reports for FHI and PFD. I met with each organization to discuss their progress.

10. Annual Work Plans

I received and discussed annual work plans from WHO, FHI, and PFD. I am in the process of reviewing these work plans.

11. MAARDS and Field Support

MAARDS for all of our bilateral partners were prepared this quarter for the coming year. As I supervise the staff who prepares the MAARDS, I supported her efforts to do this. Included in this was an increase in funding for PFD to add a biological control program for dengue fever, and to continue a child survival project for which the centrally funded grant is coming to an end. Field support decisions have also been made, and FHI has received an increase in funding as well. Program decisions for WHO are still in progress.

12. HIV/AIDS and Drug Use Technical Working Group

A new technical working group has been formed combining the National AIDS Authority and the National Authority for Drug Control to determine action on HIV risk related to drug use. I have joined this group and we had our first couple of meetings during this quarter.

13. USAID—JICA MOU

USAID and JICA signed an MOU to work together in Cambodia on TB, TB/HIV, and MCH programs. I participated in initial discussions, helped to edit the MOU, and participated in the signing ceremony.

14. ILO/USDOL Project

I serve as an observer on the Project Advisory Board for an ILO/USDOL funded project on HIV/AIDS in the workplace. We met this quarter to develop an evaluation plan and tools.

Quarterly Report for April 21 to July 20, 2004

My work this quarter continued to focus on activities related to the new HIV/AIDS regional strategy. In April I joined the team developing the HIV/AIDS Performance Monitoring Plan. Later activities included discussions with current and prospective partners to refine the details of planned projects under the new HIV/AIDS strategy. This followed approval of the Regional HIV/AIDS Design Document in May 2004. Meetings were held with REDSO Strategic Objective teams (SO5 and Food For Peace), CORE, FHI, HACI, CRHCS, and the Transit and Transport Corridor Authority (TTCA) to start defining next steps in programming multisectoral and cross-border activities. The TTCA meeting was particularly rewarding as it was attended by representatives of both SO5 and Food for Peace, as well as FHI and the TTCA staff.

Travel included attending the USAID State of the Art (SOTA) meeting in South Africa; representing REDSO at a meeting to discuss options for Economic Sustainability for Orphans and Vulnerable Children (OVC-ES); and attendance at the International AIDS Conference in Bangkok, at which I was a co-author on a paper developed by CRHCS on the regional review of policies and programs on Voluntary Counseling and Testing. I also worked on a first draft of an HIV/AIDS strategy for Burundi, including a trip to discuss strategy recommendations with in-country collaborating partners.

I served as Acting Division Chief on several occasions when Jeff Ashley was out of the office.

TDY/Travel

May 9-12: TDY to Burundi to develop first draft of HIV/AIDS strategy
May 13-28: R and R leave
June 8-11: Attended the USAID PHN State of the Art meeting in Pretoria
June 13-15: Represented HIV/AIDS Office at a regional meeting on OVC-ES in Dar es Salaam
June 15-17: Attended POLICY/CRHCS workshop on the GOALS model, in Bagamoyo, Tanzania
July 6-7: To meet with Transit and Transport Corridor Authority in Mombasa
July 9-16: Attended International HIV/AIDS Conference in Bangkok, Thailand

Additional Activities

April 23: Discussions with CORE Project and with WCRP on future programming
April 26-29: PMP design for SO8
April 30: Meeting on HIV/AIDS indicators for Burundi PMP
May 3: Discussions with FHI on program activities
May 4: Meeting with HACI on programming for OVC activities
May 6: Met with SO5 and FHI to identify next steps on cross-border and workplace activities
May 13: Meeting with Andy Fisher of Population Council
June 4: Discussions with Peter Babcock Watson of MTT/HEARD on programming
June 23: Represented HIV/AIDS Office at PEPFAR Interagency team meeting
June 23: Met with Anne Owiti of KICOSHEP
June 24: Met Mike St. Louis from SGAC to discuss regional Human Resource Capacity issues
June 25: Meeting with Patricia Riley and Kenya Nursing Council
June 29: Briefing from Dennis Weeks of Chemonics on their capabilities

**Mildred Howard, TAACS
Quarterly Report
April - June 2004**

Overview: The 24-month saga of USAID/Egypt's systematic dismantling of its support to health sector reform continues. However, some key decisions have been made and tentative dialogue has begun with Ministry of Health and Population officials such that the Mission's intentions can at least now be committed to paper in internal strategic and budget planning documents. This phase of things, with greater definition about the scope and timeline for phase-out of support according to the Mission's preferences, has also allowed the work of the TAACS Advisor to be more focused and productive.

As plans now stand, the Mission has already taken steps or intends to:

- Cancel plans for an Information Systems Support contract;
- Cancel commitment to a local currency policy support activity (Objective #3 of my current Work Objectives for 2004);
- End Partners for Health Reform Plus technical assistance by September 2005;
- End the Family Health Unit remodeling effort in Suez by September 2005;
- End support to the MOHP technical support staff by December 2005.

These actions have not yet been presented formally to Government, and the MOHP has not yet agreed to or signed amendments to the bi-lateral agreement.

Progress on Work Objectives: In spite of some continuing uncertainty, the TAACS Advisor has made good progress on implementing 2004 Work Objectives.

Monitoring and Evaluation Tools

- The MOHP's 1st Implementation Review meeting was held on June 30th, with 22 headquarters technical team leaders and staff in attendance. The TAACS has introduced Quarterly Implementation Reviews as a requirement of the funding authorization. Several important administrative and technical issues were aired for the first time, and participants generally felt that the session was productive. The European Commission partner plans to introduce some similar monitoring procedure based on the USAID model. The next Implementation Review is scheduled for August 2004.

- PHR+ completed and published the Suez Market Analysis, and held a technical dissemination seminar. The TAACS Advisor has been involved in conceptualization of the study as well as providing advice and guidance on the protocols, implementation, and communication of study findings to policy audiences. The Market Analysis was introduced to provide a rapid assessment method of getting baseline data for planning purposes that may eventually replace the 12-month "master plan" method (mainly an investment planning tool).

Suez Facility Rehab Excellent progress has been made on developing the structure and administrative arrangements for this complex activity. Funds will be issued and disbursed from the headquarters level, but guided by local decision-makers. PHR+ has hired a consultant Architect/Engineer who will provide oversight for USAID financing and disbursements, and the MOHP headquarters engineers are now working quite collaboratively with officials in Suez Governorate (who are now the key decision-makers in setting priorities for site selection, etc.). The TAACS Advisor has been instrumental in getting all of the decision-makers to use tools such as population-based GIS for rational facilities planning, and is constantly reminding everyone that this is not just another building program, but rather, building of a new primary care service delivery model; facilities planning must be placed within this context. Successful completion of the Suez Rehab activity will serve to reinforce principles of decentralization by demonstrating that the center and the periphery can work together by sharing authority and responsibility for management of resources. Progress to date is encouraging.

Governorate/District Management and Financing Structures The TAACS Advisor is spending increasing time with the PHR+ contractor team, the EC management counterpart, the EC technical team leader, and leadership in the MOHP, to steer strategic and technical developments in implementation of the family health model. For example, considerable attention has been given during the past three months to developing a unified approach to reorganizing District Management Teams (the key decentralized management unit of the future). Defining the role of the decentralized Technical Support Teams (versus EC's and USAID's contractor teams) acted technical teams is another issue that is receiving attention at the donor level.

Local Currency Fund Mission management has decided to cancel this activity. As explained by the Mission Director, he does not think it is appropriate to use leveraged financing for policy/institutional reforms. He does not want USAID to function as an intermediary in what should be an intra-government dialogue on the allocation of resources.

Other Events

- A National Conference on the "Future of the Health Sector" – essentially the Government's vision for health sector reform in the coming decade – was well-organized by the MOHP's Health Sector Reform Program (HSRP) and held on May 12, 2004. The Conference was convened under the authority of the Office of the Prime Minister, and chaired by the Minister of Health and Population who also delivered the key note address. This was a watershed event that reinforces the notion that the HSRP is maturing and "beginning to stand on its own two feet." All of the reform donors can take credit for contributing to the growth and development of the health sector reform program in Egypt.
- Shortly following the above described conference, the HSRP was officially elevated to the status of a "sector" in the MOHP organogram. This means organizational and budgetary permanence within the GOE's structure.
- Reform donor coordinating meetings were revived, with plans to meet monthly. Regular discussions are critical for implementation in Governorates such as Suez where the World Bank, the African Development Bank, the European Commission AND USAID are all financing activities and have both MOHP and contractor teams on-the-ground.

MHoward: CEDPA Quarterly Report July 2004.doc

Quarterly Report for period April 21, 2004 – July 20, 2004
Jerry Jennings, TAACS – Biomedical Research Specialist, USAID - Washington

ACCOMPLISHMENTS:

Additional duties assigned (approximately 90% of my time):

Served as detailee in the Office of the Global AIDS Coordinator (GAC), State Department.

Coordinated publishing on the web for public comment the draft SOW for the Supply Chain Management RFP, and worked to revise it based on received comments.

Represented the Office of the GAC at the CDC GAP annual meeting to discuss Supply Chain Management.

Provided technical advice to the Office of GAC and USAID on procurement questions/issues. Answered telephone inquiries from Congressional staffers and from industry on supply chain management.

Represented the Office of the GAC at the WHO meeting of the AIDS Medicine and Diagnostic Services stakeholders.

Served as GAC core team representative. Coordinated responses to issues raised in review of Country Operation Plans for Nigeria and Guyana. Planned requirements for submission of Country Operation Plan from Vietnam, recently named 15th focus country, and coordinated review.

Served as USAID point person for GAO study on pharmaceutical prices USG will pay under the President's Plan for AIDS Relief.

Represented the Office of the GAC on a DHHS trip to South Africa and India to engage pharmaceutical manufacturers in the newly announced tentative approval process for ARV drugs.

Biomedical Research (10% of my time):

Coordinated International AIDS Vaccine Initiative (IAVI) activities with USAID to ensure required reports were filed promptly.

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Quarterly Report
April 20-June 20, 2004

MONICA KERRIGAN
Senior Technical Advisor
FP/RH/Decentralization Team Leader
USAID/Indonesia

I. Technical Advisor Role

1. STARH Program

- A. Worked with STARH and the BKKBN on a District Level Contraceptive Security Tool Kit that was pre-tested in Malang district
- B. Conducted a presentation on Contraceptive Security for the Chairperson of the BKKBN and Executive Managers
- C. Provided technical guidance and feedback on a birthspacing issues and on a technical document regarding family planning service use by the poor.
- D. Reviewed and approved the annual workplan with BKKBN and STARH staff

2. Maternal and Neonatal Health Program

- A. Worked with MNH and USAID staff to develop a close-out plan for this five-year cooperative agreement.
- B. Conducted follow up meetings with MOH and MNH on the National Dissemination and the identification of high priority provinces for follow up.

3. MSH/Management and Leadership Program

- A. Worked with a Global Bureau Assessment Team to identify the strengths and limitations of the M@L Program in country and identify recommendations to improve program. Provided input to the Team to help redesign the Global program.
- B. Worked with MSH staff in Boston and Jakarta to use the findings of the Team to revise and update the workplan in order to ensure quality activities.
- C. Wrote the scope of work for a key consultant (Peter Connell) to follow up on the M@L Assessment Report and to strengthen synergies with USAID partners in both health and DDG.

4. Coalition for a Healthy Indonesia (KuIS)

- A. Continue to work with KuIS and CARE on issues related to SWS and the pilot program being carried out in a pilot program in Tangerang-especially in the area of market research and consumer preferences.
- B. Continue to work with STARH And KuIS to strengthen the joint strategy on advocacy for family planning and reproductive health.
- C. Met with senior executives to JHU/CCP to provide feedback on the current strengths and limitations of the program and identify areas for improvement, especially in the area of the development of a high quality hygiene improvement campaign.

II. Donor Collaboration

Participated in meetings with WHO to discuss how to strengthen midwifery training systems in both pre-service and in-service areas.

III. Basic Human Services Strategy

Provided technical input on the design of the new basic human services health RFA and held consultative meetings with the MOH in the area of maternal, newborn and child health issues.

Conducted a presentation on the initial draft of the RFA and requested feedback and input from MOH stakeholders.

Participated in SOAG discussions with key stakeholders from different ministries to answer any questions or concerns regarding the technical activities currently in progress or issues related to the future program.

Provided technical input to the design of the Safe Water System RFA and Environmental Services RFA.

IV. Personnel Issues

Carried out and finalized the Performance Appraisal for Mr. E. Narsobowo, Program Assistant for the RH Team.

Conducted the CAJE with the Human Resources Dept. to begin the process of recruitment for the senior secretary for the Health Team.

Deborah Lans – CEDPA Quaterly Report (Jan – March 2004)

Major activities for this Quarter (Jan-March 2004) included (but were not limited to) the following:

This Quarter is the period when FY04 strategy and budget discussions are held in the Bureau for Global Health. Thus, much of my time in January was focused on priority-setting and funding appropriation discussions related to the three projects for which I am a CTO, HealthTech IV, the IUATLD Cooperative Agreement and Fogarty.

A HealthTech IV portofolio review was held with PATH in Seattle, Washington (February). This included intensive discussions across projects in all SOs and a mid-term review exercise of the HealthTech Cooperative Agreement and strategic planning session.

To faciliate donor coordination, I held meetings in Seattle with Gates Foundation staff to discuss activities of mutual interest in two areas: TB and new technologies'diagnostics. (Seattle, WA)

I served as a proposal reviewer for the Child Survival and Health Grants Program (February).

I served as an organizer for and concept paper reviewer for GORGAS TB Initiative (HaRP) and participated in a meeting between GORGAS partners (Johns Hopkins University and Univ. of Alabama, Birmingham) and USAID staff.

In February, I attended a Workshop on "Bioinformatics and Assay Development" in Washington, DC.

I led a partners strategy meeting (PATH, MOST, USAID, Univ. of Washington) related to the RBP-immunoassay (January). During this Quarter, important steps were taken in finalizing the study design of a critical evaluation of the assay. The study is expected to be initiated in Summer 2004.

This Quarter was an intensive period for coordination of partner (PATH, BI, PSI, USAID, others) activities related to HealthTech's Nevirapine Single Dose Packaging Activity. During this period, USAID Missions in Tanzania and Zambia have become more involved in this activity and will be the sites of an "Acceptibility" study that will be carried out in the summer, 2004.

Efforts continued to explore the feasibility and design a TB/HIV ARV activity, being carried out by the IUATLD under the IUATLD Cooperative Agreement. I worked throughout the Quarter with IUATLD staff and the USAID/Malawi Mission and Malawi Minister of Health and National TB Program to discuss options and feasibility.

I participated in a two day meeting organized by the State Department Office of the Global AIDS Coordinator (S/GAC), "Targeted Evaluation and Operational Research as Tools for Reaching Emergency Plan Goals: Setting the Agenda and Optimizing USG Resources" March 29-30, 2004 held in Washington, D.C.

As Mexico Country Coordinator, I continued to organize one or two telecons with the USAID Mexico Mission Mission to discuss progress related to the Mission's large TB control program. In addition, I reviewed the Mexico Annual Review and participated in the Agency's discussions related to this.

Nancy Lowenthal
USAID/Office of HIV/AIDS
TAACS Quarterly Report
April 21, 2004 – July 20, 2004

The period of April 21-July 20, 2004 mostly filled with routine work at USAID Washington. This brief quarterly report will touch on the highlights of activities during this quarter. In addition to my regular activities, I officially became the Johns Hopkins University/Health Communication Partnership technical manager for the HIV/AIDS activities. HCP is a Global Health project which works across all of Global Health Office (GH) strategic objectives. HCP management is done through a team of one CTO and three technical managers. The former OHA HCP technical manager, Gloria Coe, is now the project CTO. Other changes included periodically acting as the OHA/Implementation Support Division acting director for Vic Barbiero, ISD Chief. Vic's responsibilities are increasingly taking him to the field.

WHO BCC Workshop:

The World Health Organization held a working group meeting on integrated AIDS communication in Geneva from April 29-30, 2004. The meeting was attend by behavior change communication staff from donors and implementing organization from the US, Europe, Asia, and Africa. Senior staff from both the AIDSMark and HCP project participated in this meeting.

TDY Objectives were to:

- Represent USAID at this meeting
- Serve on meeting panel on communication in VCT programs
- To liaise with other international organizations

Integrated AIDS Communication Initiative Meeting Objectives Achieved:

- Discussed and refined the rational for a strategic approach to HIV/AIDS communication work, linking prevention and treatment in high-burden countries;
- Provided the technical basis for the development of a guidance note on comprehensive HIV/AIDS communication for use in countries;
- Reached agreement on the purposes and structure of a partnership forum to ensure knowledge sharing and exchange on HIV/AIDS communication.

Outputs Included:

1. Summary of key principles for a balanced, comprehensive approach to HIV/AIDS communication in high burden countries;
2. Guidance note for communicators working in HIV/AIDS in high burden, low resource countries on key issues to address while developing communication strategies;
3. Agreement on the role, responsibility and structure of the IACI and the preferred mechanism for exchange.

BCC working group:

The Behavior Change Communication Working Group produced a draft document for the BCC intervention for the President's Emergency Plan (PEPFAR) countries. The lead writer was Jane Bertrand, JHU. I was a member of the core team that assisted drafting this working document. The group met once per month. Gloria Coe, GH, and I are working on vetting this document with USAID field Health Officers to finalize the document.

ABC Study:

The Abstinence, Be Faithful, Condom Study began in mid-2003. The study goal is to explore in greater depth the interventions in Uganda and other countries to understand the contributions that ABC bring to the reduction of HIV transmission. I am the study CTO and Daniel Halperin, OHA, is the study's technical advisor. In this quarter, we were able to have the study director, Doug Kirby, present his recent findings to the ABC Study Expert Panel. These findings were then used as the basis of his presentation at the International HIV/AIDS meeting in Bangkok. Additional activities on this study included reviewing Doug Kirby's work to provide technical feedback and managing the contract that funds this activity.

I am also the technical manager for another element of this study. Through AIDSMark sub-agreement mechanism, USAID contracted Edward T. Green to provide an in-depth case study on successful efforts in Zambia and Uganda that combine elements of ABC. I co-manage this work with Harris Solomon, GH. We provided technical feedback to Ted Green of his work on the case studies and his presentation for the Bangkok conference.

PSP Task Order

The Global Health Bureau award a new five year IQC for private sector program activities. OHA is likely to use this mechanism to provide future private sector and social marketing activities. I am responsible for organizing an OHA task order. We expect to compete this limited competition task order early next fiscal year.

AIDSMark:

This was the period of determining what field support obligations the AIDSMark project could accept. Finalizing these obligations will continue until September 2004. The highest priority countries are the 15 PEPFAR focus countries. These countries receive the highest priority for obligating their funds. AIDSMark is now within \$2 million of hitting their ceiling. The remaining funds will be used for future year core activities. The project is likely to continue through 2006. This year the project will receive approximately \$52 million in funds.

Other activities with AIDSMark included routine management of the project. The USAID agreement officer, Eduardo Elia, recently increased my authority on this project to be the sole reviewer/approver of all sub-award certifications.

HCP activities:

I worked closely with the HCP CTO to review the project's annual workplan. Additionally, I am in routine contact with the HCP/HIV Advisor, John Howson. We regularly discuss the field technical activities. I also assisted Gloria with review of field support request and I participate in a weekly management team conference call between USAID and HCP.

MARGARET (PEG) MARSHALL
QUARTERLY REPORT
April 1- June 30, 2004

Hired as Senior Technical Advisor for MCH and ID in the Latin America Bureau
Start date: April 4, 2003

Trainings/Meetings Attended:

TB Team (member)

Attended fortnightly staff meetings when in town.

Malaria Team (member)

Met on an ad hoc basis.

Worked with Peru staff to continue devolution of sub-regional malaria work to Peru.
Continue to represent USAID at PAHO malaria meetings.

Newborn Health Expanded Team (member)

Held preliminary meetings with new GH newborn advisor. Started dialogue on how to harmonize new regional newborn initiative with GH efforts.

Maternal Health Expanded Team (member)

Contributed to revision of the high level and intermediate level indicators for MH.

SUPPORT TO THE FIELD

Global Health

- Participated in GH retreat with CDC malaria team to review inter-agency relations and future work together.

TASK FORCES/WORKING GROUPS

- Worked on development of new GH Surveillance Strategy. Provided verbal and written input to latest draft.
- Have played a prime role in the interagency negotiations of the new PAHO grant.
- Have held multiple meetings regarding development of new activities for the new three year SO in the areas of antimicrobial resistance, newborn resuscitation, post-partum hemorrhage, and education of skilled birth attendants. Negotiations are in various stages with CAs, a university, and a PIO.

TDYs

- April 21-25, to Port of Spain, Trinidad. Attended the Regional Meeting of the Americas of the International Confederation of Midwives, facilitated the USAID sponsored workshops on neonatal resuscitation and post-partum hemorrhage (part of the LAC new SO), and worked with participants and contractors to develop an initial plan for maternal and newborn activities under the new SO.
- April 29-30, New Haven, Connecticut. Attended Yale's national symposium on the contribution of research to midwifery practice. Gave an address on midwifery led operations research and its contribution to maternal mortality reduction internationally.
- May 2-8, 2004, Tegucigalpa, Honduras. Attended the annual region of the Americas STOP TB meeting, attended the new non-physician provider TB network meeting, worked with the network leadership on extending the TB residency program to non-physicians, attended the use of incentives in TB programming workshop, met with the UNICEF regional working group on maternal mortality reduction, and met with mission USAID staff.
- May 23-29, Brasilia, Brazil. Attended the Brazilian launch of their National Maternal Mortality Reduction Initiative, gave a speech on "Skilled Attendants at Birth in the LAC Region" and attended the rest of the conference sponsored by the MOH, Brazil, met with PAHO Brazil and USAID Brazil staff on our regional TB program.

OTHER MEETINGS AND/OR WORK

- PHN Sector Council Meeting
- Regular LAC PHN staff meetings
- LAC RSD Bureau staff meetings
- LAC PHN team meetings continued developing the new regional SO. Work with team on the new PMP for the new regional SO. .
- Did quarterly accruals and performed other routine CTO responsibilities.
- Participated in planning meetings for SOTA conference to be held in 2005.
- Provided information and support to country missions upon request.
- Held several meetings with CDC surveillance staff to try to sort out SIEVCADH financial and content history and plan for project closeout.
- Organized a series of USAID brown bag meetings to highlight various pieces of the PAHO LAC work over the past several years.
- Participated in bureau annual and intensive country reviews.
- Worked with PAHO colleagues to organize a "pearls conference" to showcase major achievements from this partnership over the past five years. The conference will take place in September.

Office of Health, Infectious Disease and Nutrition (HIDN)
Division of Maternal and Child Health
USAID

Summary of activities

- **GAVI**
 - Participated in the Financing Task Force meeting to revise terms of reference and review overall developments in Financial Sustainability Plan work at country and regional level;
 - Participated in meeting to devise potential bridging plan for hib component due to slow uptake and expensive price of vaccine;
 - Continued participation on global team working with the Indonesian Ministry of Health regarding their individualized financial sustainability planning process;
 - Participated in GAVI Working Group meeting for the development of papers for the GAVI Exec Cmte retreat and review of the status of work plan activities;
 - Continued weekly participation in the GAVI Working Group;
 - Coordinated effort to develop an issue paper on measles mortality reduction and the need for strengthening measles immunization through routine systems;
 - Continued dialogue and arranged opportunities for exchange with the GAVI funded groups charged with further developing the case for support (or not) of pneumococcal conjugate and rotavirus vaccines;
 - Finalized memo and process for 2004 funding to the Vaccine Fund;
 - Further development of application guidelines for upcoming GAVI investment strategy to support routine immunization system strengthening;
 - Attended meeting of WHO's Accelerated Vaccine Introduction Priority Project in support of USAID immunization investments in the areas of hib and hep B introduction;
 - Coordinated USAID feedback loop for the GAVI NGO forum;
 - Partnering with Norad to pull together a meeting of technical people in multiple international development agencies working with GAVI to include CIDA, SIDA, Norad, USAID, France, The Netherlands, Denmark and possibly others;
 - Assisted PHN officers in Rwanda, Madagascar and India with GAVI related issues;

- Immunization More Generally and Research
 - Continued working with USAID's office of HIV/AIDS and other partners on moving forward exploring the use of Nevirapine in Uniject;
 - Coordinating USAID response to the proposed WHO / UNICEF joint vision and strategy for immunization through 2015. This process will go into 2005.
 - Concluded work on selection committee for the new RFA for immunization for USAID;
 - Participating in formulation of US Mission India's new plan to include immunization in their support to country;
 - Received certification for having attended the Assistance Management class at USAID;
 - Coordinated work with CDC on disease burden and vaccine probe work USAID supports
 - Developed and coordinated scope of work for specific collaborative work with WHO to support USAID's Healthtech project;
 - Provide information for the development of the SO2 Big Picture Review

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Margaret Meites
Quarterly Report
April to July 2004

Office of Health
Regional and Country Support Division
USAID

Summary of activities:

During this quarter I completed the following assignments:

Provided Technical Assistance to Missions:

- TDY to Yemen mission to develop a performance monitoring plan (PMP). Trained and mentored junior staff on PMP development.
- Developed an approach to help staff understand how to develop indicators as opposed to choosing indicators off a list. Used this approach to mentored RCS program assistant and Yemen mission staff. And to work with the CAs to analyzing their activities, develop results statements and construct indicator statement for the PMP. Developed a broader, multi-year results framework that allowed the CAs that are in different implementation stages to locate the level of results they will be accountable for.
- Reviewed and provided input into the redevelopment of Timor strategy.

Provided Support to Washington Bureaus:

- Participated on OHA procurement panel and assisted with the development of the Action Memo. Provided assistance to the OHA with the review of HIV/AIDS strategy in the ANE region; Developed issues and final resolution papers and chaired the review.
- Reviewed and contributed to the issues papers a series of country and regional strategies in health and HIV/AIDS.
- Worked with the LAC Bureau on the development of a PMP for the regional strategy.
- Wrote a signature piece for the Global Health office director on the actions that GH will take as a result of the information from the field in Administrators survey. Piece was broadcasted to the field via field web page and news flash.

**Quarterly Report for John Novak
(April/20/04 – July/20/04)**

My accomplishments over the past three months, as M&E advisor to the HIV-AIDS Division of USAID include the following:

- (1) Serving as team leader for the Monitoring, Evaluation & Reporting group (4 staff) within the Office of HIV/AIDS.

- (2) Serving as the USAID representative to the Strategic Information (SI) Coordination Committee under the President's Emergency Plan for AIDS Relief, the \$15 billion, five year initiative to treat 2 million persons, prevent 7 million new HIV infections and provide care and support to 10 million HIV infected children and adults. The committee, chaired by the SI director in the Office of the Global AIDS Coordinator in the Department of State, oversees the development of SI guidelines and coordinates the implementation of these guidelines at the Agency level. In addition, I represent USAID on the following working groups:
 - Country Operation Plan and Reporting (COPR) database design
 - Modeling annual "infections averted" estimates

- (3) Serving as the USAID representative on the UNAIDS Monitoring & Evaluation Reference Group (MERG)

- (4) Serving as an alternate on the Technical Evaluation Reference Group (TERG) for the Global Fund to Fight AIDS, Tuberculosis and Malaria.

- (5) Serving as CTO for the MEASURE/Evaluation Project

Travel:

- Chapel Hill, NC, May 12-13: Attend the technical review meeting on SAVVY (sample vital registration system)
- Atlanta, GA, May 14th: Attend PEPFAR strategic information training planning meeting
- Chapel Hill, NC, June 29th: MEASURE/Evaluation quarterly review meeting.

Shelagh O'Rourke, TAACS Nigeria
Quarterly Report
February 1 – April 31, 2004

Major Accomplishments of the quarter:

1. General Support of SO13 & SO14
 - Performed GDO duties while other GDO staff sat on review panels for the HIV/AIDS & TB, Social Sector Services and Enabling Environment RFAs
 - Participated in week long Mission team building exercise.

2. Support for HIV/AIDS IRs
 - *Country Operating Plan/President's Emergency Relief Plan*: Took lead on drafting the COP for USAID and CDC and responding to the myriad of questions from SICAG.
 - *PMTCT Report*: Drafted first joint Implementation Report including success stories.
 - *PSRHH Steering Committee*: Attended quarterly meeting and assisted in the finalization of new log frame suitable for DfID and USAID reporting requirements.
 - *Global Development Alliance*: Continued to work with the Embassy, AIDW and Mission to further the objective of creating an alliance with US companies, oil companies in particular, to leverage USAID work.
 - *Support to NACA*: Provided assistance to the hiring of two new executive level staff to serve as M&E Director and the Public/Private Sector Liaison to work with the Nigerian Business Coalition Against AIDS (NIBUCAAA) .
 - *National AIDS Research Network (NARN)*: Worked with this reconstituted organization to help organize and raise funding for May all-Nigeria HIV/AIDS research conference.
 - *VIP Visits*: Prepared documentation and power point presentations for the visit of the SIGAC representative and other members of the PEPFAR Nigeria core team
 - *New PSC*: Continued orientation and support to new TCPSC without previous USAID experience. Lobbied to select from candidate pool for vacant TAACS position.
 - *Portfolio Reviews*: Performed extensive editing on implementing partners's (IPs) drafts and organized all Mission review sessions for 10 IPs.
 - *Draft FBO and MARP APS*: Collaborated with consultant to prepare preliminary drafts of these critical documents.

Major Activities Planned for Next Quarter:

1. General SO and Mission Support

- *New Staff:* Will prepare orientation for new Direct Hire Team Leader and continue orientation of new PSC. Will continue to lobby for selection of new TAACS.
- *Closeouts:* Work with other GDO staff to closeout jointly funded projects.
- *Portfolio Reviews:* Continue with outstanding portfolio reviews and questions arising from completed reviews.

2. HIV/AIDS IR Support

- *Private Sector Initiative:*
 - Continue to work with business initiative project consultant on orientation and mentoring of new NACA staff member who will be the point of contact with NIBUCAA.
 - Provide NIBUCAA with six month of intensive TA through a on-site consultant
- *TDY & SOTA:* On TDY and sick leave month of May and SOTA in June. Meet with DC-based IPs.
- *OVCs:* Collaborate with GON, IPs and other donors to conduct OVC Rapid Assessment and Action Plan (RAAP).
- *Portfolio Reviews:* Finalize Review drafts after Mission meeting and finish with remaining reviews.

Shelagh O'Rourke, TAACS Nigeria
Quarterly Report
May 1 – July 31, 2004

Major Accomplishments of the quarter:

1. General Support of SO13 & SO14
 - Closeouts: Continued work with GDO IPs on jointly and HV/AIDS funded projects and the disposition of equipment and materials.
 - CTO Training: Completed week long supervisory CTO training
 - SOTA Training: Participated in SOTA in Johannesburg

2. Support for HIV/AIDS IRs
 - *Country Operating Plan/President's Emergency Relief Plan:* Continued to take lead on preparing answers for S/CAG questions on the COP.
 - *Global Development Alliance/Business Initiative:*
 - Finalized draft of Nigerian Business Coalition Against AIDS (NIBUCAA) case study document to be circulated at International meeting in Bangkok
 - Provided technical and managerial support to NIBUCAA interim executive secretary and NACA liaison staff
 - *Support to NACA & FMOH:* Provided assistance to the organizational development team restructuring NACA and to the team organizing the FMOH's new HIV/AIDS response.
 - *New PSC:* Continued orientation and support to new TCPSC without previous USAID experience.
 - *Draft FBO and MARP APS:* Continued work on the preparation of these critical procurement documents for release to bidders.
 - *USG Collaboration:* Provided strategic planning assistance to SmartWork Advisory Board and input to SmartWork's midterm evaluation.
 - *OVC RAAP Report:* Provided technical assistance and recruited consultants to spearhead this report.
 - *TDY:* Meet with headquarters' representatives of several IPs with funding and staffing problems.
 - *Country Coordinating Mechanism:* Participate in the restructuring of this Global Fund mechanism.
 - *Orientation for new procurement:* Participate in the orientation of the new policy/advocacy procurement and assist in the transfer of responsibilities and activities from old mechanism to the new one.

Major Activities Planned for Next Quarter:

1. General SO and Mission Support

- *New Staff:* Support orientation for new Direct Hire Team Leader and continue to lobby for selection of new TAACS.
- *Closeouts:* Continue work with other GDO staff to closeout jointly funded projects.

2. HIV/AIDS IR Support

- *Five Year PEPFAR Strategy:* Prepare SOW for two consultants and work with them to develop agenda, invite participants, oversee planning process, etc. Participate in drafting of and finalization of Strategy.
- *2005 Country Operational Plan:* Prepare SOW for consultants and oversee planning and implementation of stakeholder workshops. Oversee preparation of draft and final COP>
- *Joint CDC/USAID Meeting:* Assist with preparations for meeting with CDC/Atlanta, FHI and UMD to conclude division of responsibilities and roles.
- *Private Sector Initiative:*
 - Work with interim Executive Secretary to recruit permanent staff
 - Work with business initiative consultant to integrate private sector response into NACA operations
- *OVCs:* Collaborate with GON, IPs and other donors to conduct OVC Rapid Assessment and Action Plan (RAAP).
- *People Living with AIDS:* Work with NACA and other donors to resolve problems in the national network.

Ellyn W. Ogden

Quarterly Report

April - June 2004

- Ongoing project management CORE, WHO, UNICEF
- Continue to work with JHU Fellow on polio and Immunization activities. Worked with USAID and VOA on implementing 2004 workplan
- Continue to work on Polio/EPI communications strengthening through UNICEF and Communications Initiative
- Continue to monitor review of USAID Polio Communications activities
- Briefed USAID Mission field staff visiting Washington (Nigeria)
- Joined InterAgency Task Force on Polio with State Dept, CDC, HHS, NSC: contributed to senior level advocacy, letters, phone calls, talking points, media events, cables etc. Followed-up with numerous USAID Missions on their responses and info requests.
- Continue to coordinate with other donors e.g. DFID and JICA on polio
- Received proposals for FY 04 polio funding allocations
- Continued discussions with PHNI and MEASURE on monitoring indicators in USAID PEI results framework.
- Attended EMRO Regional Committee on Certification Meeting, Cairo
- Prepared briefing documents, talking points, briefers for the G8 meetings and World Health Assembly
- Prepared talking points and attended Rotary event on Capitol Hill with Administrator Natsios.
- Arranged briefing for WHO staff with GH: Aylward, Heymann
- Met with Voxiva to discuss technologies for disease surveillance
- Prepared materials for GDA database
- Met with CORE field staff and arranged USAID briefing/presentation.
- Visited Nigeria and held high level advocacy and communications discussions (USAID, US Ambassador, JICA, DFID, CIDA, BASICS, NPI, WHO, UNICEF) developed workplans with partners
- Conducted donor meetings in London, Bonn, Paris and Tokyo to raise awareness about the needs of the Polio program.
- Participated in the annual meeting on Polio Communications in Delhi
- Participated in the India Expert Advisory Group meeting in Delhi
- Met with U/S Larson on follow-up to the G8 on polio.
- Coordinated with partners on Nigeria and boycott of immunization by Kano State.
- Screened video on polio eradication for USAID staff.
- Met with USAID staff/contractors from missions, e.g. DRC, Nigeria

Quarterly Report for Anne M. Peniston, USAID/Nepal TAACS
April 21 to July 20, 2004

Supervisory Activities:

Personnel: As Deputy Team Leader and HIV/AIDS Program Manager since June 1, 2004, I directly supervise one international-hire professional, three Nepali professionals and one Nepali administrative support person. This past quarter, I assisted our Team Leader in a performance review for poor performance of the international-hire technical advisor I now supervise. With organizational management support from his headquarters, an in-depth review of his performance was conducted, specific findings were presented to him and a specific list of behaviors needing improvement was compiled. The list is used as a monitoring tool for his performance. His technical workplan was revised with input from the Team Leader and me.

Program: Since June 1, I am Program Manager for our HIV/AIDS program. Three global programs implement activities in Nepal valued at \$8.7 million annually in field support aimed at addressing a concentrated epidemic among Nepal's most-at-risk groups. Activities include prevention, BCC, VCT, STI prevention and treatment, policy development, reducing stigma and discrimination, social marketing of condoms and support to developing national standards and guidelines related to aspects of care and support including ART. The USAID/Nepal technical team meets at least monthly with each implementing partner and participates in coordination meetings between themselves.

Program Management and Technical Activities:

- Participated in technical training course on HIV/AIDS program management through the Synergy Project in Cape Town, South Africa in May 2004.
- Participated in mid-term evaluation of Nepal's HIV/AIDS strategy with AID/W technical advisors and Nepal Coordinator.
- Worked with 2-3 FSNs to develop updated position descriptions for the new USAID CAJE system for FSN position classifications and completed 2 FSN annual performance evaluations.
- Began discussions for "umbrella" workplanning process with 3 HIV/AIDS implementing partners as recommended by mid-term evaluation.
- Assisted documentation in technical office for completion of NFHP \$5 million modification.
- Completed program description for RFA for follow-on social marketing activity.
- Prepared U.S. Mission Parallel Review for the Fourth Round of the GFATM in consultation with Nepal CCM members and the Team Leader for the U.S. Delegation's participation in the Global Fund Board Review in Geneva at the end of June.

Planned Travel for July - October 2004:

June 29 – August 11: TDY, AL (R & R) and LWOP to U.S. Travel request approved.
October 4-6: Possibly to USAID ANE SOTA in New Delhi. Travel request not yet submitted.

**QUARTERLY REPORT
FOR THE PERIOD APRIL 21 – JULY 20, 2004
FOR ESTELLE QUAIN**

During this period I have been detailed to the Human Capacity Development (HCD) Unit of the Office of the U.S. Global AIDS Coordinator (S/GAC). I have co-lead this unit with a colleague from the CDC and interfaced with both the Strategic Information and Program Services Units of the Office. My major activities have been:

- Organizing and chairing HCD Work Stream meetings and working with USAID contractors to provide technical assistance in HCD in Mozambique, Uganda, Ethiopia, Tanzania, Namibia, and Haiti
- Organizing a Training Subgroup of the HCD Work Stream and chairing its first meeting to develop a training strategy for PEPFAR. Working closely with CDC colleagues to draft the strategy template and follow-up action steps for training guidance to countries under PEPFAR
- Representing S/GAC at a UNAIDS meeting on HCD in April
- Co-organizing and chairing meeting with WHO on HCD data collection tools
- Designing and moderating a panel on Capacity Building and Sustainability at the PEPFAR Field Staff meeting in Johannesburg in June.
- Moderating a plenary session on HCD at the USAID Africa SOTA meeting in Johannesburg in June. Working closely with the Africa Bureau to plan this session and on follow-up HCD activities in Kenya, Namibia and Mozambique
- Collaborating and co-facilitating with HRSA a Consultation on Capacity Building for Sustainable HIV/AIDS Services in preparation for the development of contractual language on sustainability for PEPFAR awards.
- Providing input on HCD to the PEPFAR templates for the Country Operational Plans and Five-Year Strategy
- Participating on S/GAC committee drafting guidance for the application and development of the Network Systems Model
- Participating in meetings with USAID, CDC, HRSA, DOD and Peace Corps principles on PEPFAR operating and technical issues
- Reviewing unsolicited proposals on training and capacity development received by S/GAC and USAID
- Participating in the drafting and review of the RFA for the HCD Project in the Office of Population and Reproductive Health
- Briefing USAID's Office of Volunteers for Prosperity on the use of volunteers in the Emergency Plan
- Overseeing S/GAC's contract with the Institute of Medicine to study the use of volunteers in the Emergency Plan

- Working with USAID's technical advisor on the HCD component of Public Private Partnerships, especially with Boston University and UCLA School of Management

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Barbara Seligman
Reflections on the Year
Major Achievements, April 1, 2004 – June 30, 2004

Over the course of the last year my major achievements have included:

Legislative and Policy.

- Serving as principal Agency resource person on guidelines for using and restrictions affecting use of population and reproductive health funds.
- Supporting USAID/Peru in responding to allegations it provided support to a conference in which violations of Helms, Siljander and the Mexico City Policy were alleged to have occurred.
- Preparing briefing memorandum for Agency Administrator Natsios on ways in which USAID can realize monetary benefits on its investments in research and development.
- Assisting Missions in the Philippines and Bangladesh address concerns about Tiahrt vulnerabilities.
- Preparing scope of work for system to monitor Tiahrt compliance in the Philippines.
- Monitoring legislative developments relevant to the PRH funding.
- Advising CAs, USAID field staff and Washington-based staff and others in the international health community on matters related to sensitivities concerning use of language and questions related to USAID policy and statutory requirements.
- Drafting biannual report[s] on compliance with Tiahrt Amendment requirements.
- Analyzing population and HIV/AIDS-related legislation, including, for example, legislative history of restrictions on lobbying and active promotion of abortion..
- Serving as principal liaison with advocacy groups on policy and legislative matters.
- Drafting of Q&A's in response to Hill queries and assisting State/PRM in drafting briefing papers on population issues, especially related to policy matters.

State Liaison.

- Serving as principal liaison to colleagues at State/PRM.
- Providing technical support to State/PRM, including briefing new director of the Office of Population.

Research/Dissemination.

- Reviewing NAS publication, partially funded by OPRH, Cities Transformed , Environmental Change and Security journal.
- Participating in technical meetings with private and multilateral donors related to resource flows for international health, including for family planning and reproductive health.
- Preparing various summary documents related to defining priorities for the unfinished agenda for reproductive health, including family planning.
- Providing technical review and recommendations to the Millennium Project task force on child health and maternal health.
- Sharing emerging results and other research results with the Sexual and Reproductive Health Advisor serving on the Millennium Project Secretariat.

Programmatic.

- Serving on technical review panel for OHA APS.
- Serving as country coordinator for the Bangladesh PHN program.
- Serving as NAS/CPOP Cognizant Technical Officer [CTO].
- Member, Repositioning Family Planning, Post Abortion Care working groups, and of SO2 expanded team.

Agency representation.

- Serving on U.S. delegation to UNFPA executive board annual meeting and drafting and reviewing technical and policy documents for that meeting.
- Drafting principal statements for the United States for meetings reviewing implementation of Cairo, including ECLAC/Santiago, ECLAC/San Juan.

Other

- Supervising PRB intern.
- "Mentoring" junior staff.

Karen Shelley, TAACS Mozambique
CEDPA Quarterly Report
July 2004

During the past quarter I have learned more about USAID/Mozambique, its programs, its implementing partners and the HIV&AIDS challenging in the country.

Team Leadership and Program Management

I served as Acting Team Leader during the early part of April while our Team Leader took a well-deserved period of leave. I worked with the Mission Director, Centers for Disease Control and Prevention, Peace Corps and State on the completion of justifications for a detailed PEPFAR Country Operations Plan. The HIV/AIDS program at USAID Mozambique is rapidly expanding. I participated in conference calls and drafted responses to questions submitted by the Global AIDS Coordinator's Office and the technical review panel.

President's Emergency Plan for AIDS Relief

All of my work technical work during this quarter focused on the planning and implementation of the Emergency Plan for AIDS Relief. Working with other HIV team members, I participated in the joint United States Government Mission-wide HIV/AIDS Coordination Group chaired by the American Ambassador. I developed close working relationships with colleagues at State, CDC and USAID. I provided technical advice on aspects of the Country Operation Plan for implementing the Emergency Plan in Mozambique. USAID and CDC liaise closely with a CORE team of HIV/AIDS technical advisors in Washington and Atlanta on the Emergency Plan.

Activity Manager and CTO Responsibilities

I served as the Activity Manager and CTO for a number of USAID/Mozambique's partners. Family Health International has recently opened an office in Maputo and the northern province of Zambezia. FHI is working with the MOH and the provincial health team to expand PMTCT services. Working with Health Alliance International, I carried out technical oversight and coordination responsibilities. I worked with John Snow, Inc. and the Ministry of Health (MOH) on the formulation and strategy development of an injection safety program in Mozambique. USAID is collaborating with CDC and the Ministry of Health to address challenges in health work place safe and the appropriate use of auto-district syringes. Findings from a recent assessment carried out by UNICEF showed the urgent need for new safety procedures and appropriate waste disposal procedures in health facility settings.

I continued to work on PMTCT issues with a wide range of implementing partners. I participated in the national Task Force meeting and liaised with Centers for Disease Control and Prevention and UNICEF. I will be the Activity Manager for Elizabeth Glaser Pediatric AIDS Foundation and its implementing partner, Save the Children.

I organized a meeting with UNICEF, CDC and a lead staff person in the ministry to discuss the new recommendations from WHO on drug policies for pregnant mothers in

Mozambique. We shared technical updates from our home offices and a variety of sources on the feasibility of the new recommendations in Mozambique. We agreed to continue to monitor the progress in the opening of new service delivery sites and to evaluate which centers in the future might be able to use the new suggested PMTCT regime that includes Zidovidine (ZVD) from 28 weeks in pregnancy.

Visit by Ambassador Tobias

Ambassador Tobias visited USAID/Mozambique. I played a leading role with other team members to coordinate field site visits to Gaza Province. The Ambassador was hosted by the American Embassy and had opportunities to meet with the USAID Mission Director, with other collaborating partners and the Minister of Health. The event received a large amount of press coverage. Ambassador Tobias asked to have a VCT test at one of the VCT facilities that we work with in Gaza. He advocated for expanded support to orphans and vulnerable children.

Technical Support to the National AIDS Council

I have provided technical support to the CSNC and have been an active participant in the national HIV/AIDS Partners' Forum.

Emergency Plan Meeting and SOTA

During June 6-9, I participated in the Emergency Plan meeting in Johannesburg for all 14 focus countries. The Mozambique team presented a presentation on the HIV/AIDS epidemic and the USG response. The presentation given by the Ambassador to Mozambique was well-received. The PEPFAR meeting was very intense and engaging. We received more guidance and clarification to questions. We called for a stronger communication well-coordinated communication system. A draft version of the format for the new Five Year Strategy under the Emergency Plan was distributed. We also received guidance on the submission of the next country operation plan on October 29th. The Mozambique team was recognized and phrased during the awards ceremony.

The Johannesburg SOTA meetings during the same week provided many excellent opportunities for technical updates and exchanges with TAACS advisors from other countries.

I attended the 15th International HIV/AIDS Conference in Bangkok Thailand in July.

CHRISTINE SOW, TAACS USAID/MALI QUARTERLY REPORT

Reporting period: Apr 21 – Jul 20, 2004

Major activities for the period:

During this period Christine Sow was particularly active in three areas: the regular oversight of projects for which she is CTO, the continued provision of technical assistance to the development of the Mali MAP Project and the development of the upcoming Family Planning Promotion Campaign.

CTO responsibilities:

Christine Sow continues her CTO responsibilities for the PSI Pathways to Health Project. She meets on a regular basis with the PSI Resident Advisor as well as with the PSI technical team. During this period Christine worked on the development of an amendment of the PTH cooperative agreement that will allow increased advocacy activities in the areas of family planning, diarrheal disease management and HIV/AIDS. Christine also attended a number of activities sponsored by the POLICY Project, including a workshop to finalize the applied texts (*textes d'application*) of Mali's 2002 Reproductive Health Law.

FP/SR activities

Christine has been working with all the SO6 family planning partners as well as the Reproductive Health Division (DSR) of the MOH to design a multi-media family planning promotional campaign to be executed in the last quarter of 2004. Throughout the 90s family planning in Mali received adequate attention but at the end of the decade support to the national FP program dropped off considerably. As part of the SO6 High Impact Services portfolio of activities, the relaunching of FP is a key activity during FY04-FY05. The SO6 FP campaign planning process enjoys excellent support from the MOH and the former director of the DSR has just been made Minister of Health – greatly facilitating the job of bringing visibility back to FP. The various partners are engaged in a collaborative planning process that will result in an integrated campaign using standardized messages and approaches implemented at the national, regional, district and local levels. Christine is responsible for oversight of the campaign planning and ensuring that partners collaborate appropriately amongst themselves as well as with the MOH.

HIV/AIDS activities:

Christine Sow continues to oversee the new technical advisor and has been working steadily with him to transfer management responsibilities to him.

During this period Christine participated actively as the USAID representative in the development of the World Bank MAP Project. At the same time as the MAP development, the government has been actively developing the National High Council for HIV/AIDS and Christine has provided technical assistance to the HCNLS and the consultants brought in to evaluate its role and the role of the former National AIDS Program under the MOH.

SO6 Personnel supervision:

During this period Christine was responsible for revising, finalizing and “CAJE”ing the position descriptions of the four staff members she supervises. (CAJE is the new State Department staff position grading system). She also took part in two recruitment committees – for a new Office of Financial Management Financial Analyst as well as for a new SO6 Team Secretary.

Field visits:

Christine made a field visit to the Mopti region of Mali from April 19-23, visiting in particular the Bandiagara District to monitor district-level project progress and to meet with agents from the PSI/Groupe Pivot HIV/AIDS peer education project.

In June Christine attended the PHN SOTA held in Johannesburg, South Africa. Her attendance at this meeting was particularly helpful both for the technical updates provided through the course as well as the opportunity to meet her PHN colleagues from throughout Africa and to compare approaches and experiences in project design, implementation and management.

Christine was absent on annual leave from June 20 – July 7, 2004.

Upcoming activities July 21 – Oct 20, 2004

July 8 – August 15: Acting Team Leader SO6

September:

- SO6 Team Retreat
- SO6 partner annual workshop

MARY ELLEN STANTON
QUARTERLY REPORT
April 1 – June 30, 2004

MATERNAL HEALTH TEAM (Team Leader for Strategic Objective #2)

- Provided technical review of the SO2 Performance Management Plan
- Negotiated numerous small changes in the SO2 FY 04 budget
- Provided technical assistance to Africa Bureau on programming for maternal health
- Provided technical advice to E & E Bureau on analysis of reproductive health trends
- Provided individual orientations for MCH intern, IDI, and NEP on maternal health issues
- Drafted MH portion of FY 06 BPBS
- Participated in meetings of the White Ribbon Alliance
- Organized Maternal Health Technical Series presentations:
 - "Emergency Obstetric Care"
 - "Iron Supplementation in Pregnancy"
- Participated in review of maternal and newborn sections of the DHS survey
- Participated in UN Agency meeting in New York City to review the methodology of the global and regional maternal mortality estimates
- Met with FRONTIERS, POLICY and PHR*plus* projects to provide guidance on MH programming
- Met with PHN Officers from Egypt, Pakistan, and Angola to discuss future MNH programming
- Reviewed and provided technical advice for update of the maternal and newborn sections of the USAID website
- Met with ACOG to explore areas of collaboration
- Met with Child Survival Partnership secretariat to discuss joint activity with the Partnership for Safe Motherhood and Newborn Health (PSMNH)
- Met with NICH researchers to discuss ongoing and potential future misoprostol research
- Traveled to London to participate in joint Advocacy Working Group of the PSMNH and the Healthy Newborn Partnership to plan for the World Health Day 2005 and related events
- Participated in Agency working group on the new health framework
(see working groups below)

FISTULA

- Wrote article on obstetric fistula for the CEDPA newsletter
- Worked with Frontlines on fistula article
- Reviewed proposal for DCHA on health that included fistula for DR Congo
- Provided technical comments for a proposal for fistula work in Bangladesh
- Responded to congressional inquiry on programming for fistula
- Developed a plan for use of additional funds for fistula
- Wrote an update on fistula programming for LPA

MNH PROGRAM (Cognizant Technical Officer as of June 25)

- Received oral briefing, accepted documents and held management meeting

WORLD HEALTH ORGANIZATION GRANT (Cognizant Technical Officer)

- Reviewed progress on the grant via telephone and negotiated activities for FY 04

UNICEF GRANT (Cognizant Technical Officer)

- Reviewed progress on grant and provided information on extension
- Met with UNICEF and State department reps on GH grant to UNICEF

IMPACT (Cognizant Technical Officer)

- Discussed with DfID and Gates representatives preparation for decision meeting in the fall that will chart the future of the program

ACCESS (Cognizant Technical Officer after award)

- Reviewed draft CA and started planning for post-award meeting

POPPHI (Cognizant Technical Officer after award)

- Started initial planning for post-award phase

SUPPORT TO THE FIELD**Afghanistan** (Country Coordinator)

- Participated in weekly conference calls with mission and ANE Bureau
- Provided periodic updates for the GH AA
- Oriented TDYer to health program

Pakistan (Team Member)

- Provided technical review of the Pakistan RFA for a maternal and neonatal program

TASK FORCES/WORKING GROUPS**Neonatal Working Group** (Member)

- Participated in working group meetings to develop strategy and decide on activities

PMTCT Working group (Member)

- Met with PLP fellows posted in southern and eastern Africa to discuss GH expectations for putting MCH into PMTCT programs
- Met with Elizabeth Glazer Foundations reps to discuss MCH programming in PMTCT program in Tanzania

PPH Working group (Member)

- Provided oversight to implementation of the PPH Special Initiative in 4 African countries
- Developed summary of progress achieved

PRESENTATIONS

- "Progress in Reducing Maternal Mortality?" NEP Orientation, USAID, April 22
- "Contributions of Midwifery to International Health," Yale University School of Nursing Symposium, New Haven, CT, April 30
- "Saving Mothers' and Newborn Lives," (panelist) SOTA, Johannesburg, June 10
- "Saving Mothers' Lives—Preventing Postpartum Hemorrhage," SOTA, Johannesburg
- "Comprehensive Antenatal Care: Strengthening Services," SOTA, Johannesburg
- "Improving Maternal and Newborn Survival: Reflections on The Way Forward," (panelist) MNH Final Meeting, Washington, DC, June 17
- "Postpartum Hemorrhage Prevention," HIDN Staff Meeting, USAID, June 24

OTHER

- Participated in division staff, office staff, senior staff and Sector Council meetings
- Participated on a panel for a major competitive procurement
- Participated on planning group for the Africa Bureau SOTA course
- Worked with supervisor on mentoring PLP fellow

LINDSAY STEWART
QUARTERLY REPORT
April 21 2003 - July 20 2004

The following report includes a selected number of activities that I have been involved in during this reporting period.

HIV/AIDS.

One of the two thematic areas I cover is HIV/AIDS. During this reporting period, among the many activities I have carried out are the following.

- **LACRI/Synergy.**

The LAC Regional HIV/AIDS Initiative (LACRI), run by the Synergy Project, continues to be on track programmatically, although the project has overspent its LAC funds and will have to cover the overexpenditure. During this period we extended the Synergy time period beyond the originally-scheduled end date of June 30 2004 in order to accommodate some new funding available (see below). During this reporting period, via multiple meetings, emails and telephone conversations, I worked with the Synergy staff to do the following.

- In collaboration with USAID's Office of HIV/AIDS, I: (a) reviewed Synergy's translations of selected LAC country profiles and issues papers into Spanish for inclusion on both the LACRI and the USAID websites and for distribution of hard copies, including at the HIV/AIDS Conference in Bangkok; (b) turned over the LACRI website content to OHA for inclusion in the USAID website.
- USAID/Guyana offered LAC about \$62,000 in unspent HIV/AIDS money it had put into the Synergy Project. I worked with Synergy to program that money effectively by undertaking two major activities. 1) South-South support for 23 participants from Haiti and 20 from the Eastern Caribbean to the Caribbean HIV/AIDS Regional Training on the Clinical Management of HIV/AIDS: A Multidisciplinary Team Approach, held June 16 – 19 in Montego Bay, Jamaica. This multi-disciplinary approach involves training teams composed of physicians, nurses, lab technicians, pharmacists, psychologists, social workers and people living with HIV/AIDS, to better manage and provide appropriate HIV/AIDS counseling and testing, prevention of mother-to-child transmission of HIV/AIDS, and management of anti-retroviral drugs. The training is important because it provides health personnel with the skills needed to implement these increased program efforts made possible by the Global Fund, World Bank and other support for HIV/AIDS prevention, treatment and support. 2) I ensured an appropriate translation into Spanish, publishing and distribution of 500 copies of the USAID document *FP/HIV Integration: Technical Guidance for USAID-Supported Field Programs*. This translation will also be put on the USAID and the LAC websites, thus providing critical information on HIV/AIDS and Family Planning to USAID's Spanish-speaking audience. 3) If money is left over after these two activities are completed, we will consider other activities, including follow-up to the PLWA networking training offered during the last quarter and/or developing a publication in Spanish for PLWAs.
- **Other HIV/AIDS Activities.**
 - I coordinated the review of the **Caribbean Regional Program's HIV/AIDS strategy**, with GH/PHN staff. Among major issues identified were: more emphasis needs to be placed on prevention strategies; and the CRP could play a greater role in ensuring that the World Bank and the Global Fund monies for the Caribbean are allocated for appropriate HIV/AIDS efforts. All issues identified are being shared with the CRP missions for response. Once their response is received and reviewed again by USAID/W staff, we expect that the CRP strategy will be formally approved by the

Office of HIV/AIDS. I also participated in the review of the Jamaica Mission's new HIV/AIDS strategy, contributing to the issues paper for consideration by the Mission.

- I attended the **XV Global Conference on HIV/AIDS in Bangkok, Thailand**, representing the LAC Bureau, July 10-16. The theme was "Access for All" and focused on many aspects of HIV/AIDS including changing behavioral practices, public-private partnerships, and donor interests and priorities. While it was disappointing that no new scientific findings were reported, talks focused on prevention; elimination of stigma and discrimination and ensuring increased access to treatment, care and support. The U.S. delegation, headed by S/GAC's Amb. Randall Tobias, emphasized: the importance of the Global Fund on AIDS, Tuberculosis and Malaria and the President's Emergency Plan to Fight AIDS (PEPFAR) effort. He also stressed the need to involve civil society, local organizations and people living with AIDS into Country Coordinating mechanisms and empowering women to fight HIV/AIDS. Anne Peterson, USAID's AA/GH, presented and included the ABC approach and ensuring the safety and efficacy of anti-retroviral drugs. Eleven representatives from six LAC missions also attended the conference.
- I hosted eight State Department-sponsored visitors working on HIV/AIDS with the Ministry of Health or the Red Cross in five small Caribbean island nations (Antigua and Barbuda, Grenada, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines) in order to explain USAID's HIV/AIDS program worldwide, the PEPFAR program and specifically USAID activities in the Caribbean. Following consultation with Caribbean Regional Program staff, I prepared a Power Point presentation for this group, and followed up on their visit on such issues as obtaining condom vending machines.
- I also participated on the HIV/AIDS Task Group to develop HIV/AIDS Program Objective and Indicators for the new Global Health Strategic Plan. We proposed the following program objective: "HIV transmission and the impact of the HIV/AIDS epidemic (or pandemic) reduced" and the following indicators: 1) Total number of clients reached with ART; 2) Total number of new infections prevented; and 3) Total number of clients reached with care and support.

- **HIV/AIDS Budget Issues.**

My work with USAID offices, including PPC, OHA and LAC/SPO to push the reclaims on the straight lining of the FY04 budget at the FY03 levels from two regional offices (Caribbean and G-CAP) and four country missions (Guatemala, Honduras, Jamaica and Mexico) has partially paid off. Three of the six LAC reclaims on HIV/AIDS have resulted in additional FY04 funding: \$1 million dollars each will go to the Caribbean and G-CAP regional HIV/AIDS programs and to the Honduras mission. This is less than we requested, but at least it will allow these three Missions to expand their HIV/AIDS programs somewhat. It does not look like the other three reclaims (from Guatemala, Jamaica and Mexico) will be satisfied this year. I represented LAC at USAID's HIV/AIDS Policy Council where the final decision on the reclaims announced.

- **OHA Meetings.**

As the LAC Bureau staff member working on HIV/AIDS, I attend regular meetings with various members of the OHA staff and the OHA staff meetings.

- **PEPFAR (President's Emergency Plan for AIDS Relief).**

- As two LAC countries, Guyana and Haiti, are part of the Presidential Initiative, I continue to ensure that I'm up-to-date on policies, requirements and programs, and that Missions comply with the PEPFAR requirements. During this reporting period, I regularly attended meetings, participated in phonecalls, and in email correspondence related to the PEPFAR.

- o I represent LAC at the U.S. Global AIDS Coordinator's Monthly Interagency Outreach Meeting. At the July meeting, discussions included a) personnel changes – of note was the departure of Amb. John Lange from S/GAC to become the Acting Inspector General of the State Department; b) forthcoming guidance for the non-focus countries on the ABC approach and on public-private partnerships; d) bi-lateral agreements with various countries, including Brazil which will provide assistance to Lusophone African countries; e) the Global Fund on AIDS, Tuberculosis and Malaria's – of note was the funding of 4th round grants and the possibility that there will be insufficient funds for a 5th round; f) selection of Vietnam as the 15th focus country; and g) the XV HIV/AIDS Conference. In June, topics discussed were: the recent meeting of the PEPFAR countries in South Africa (including representatives from Haiti and Guyana); the G-8 Summit meeting where a new global HIV/AIDS vaccine development initiative was announced; and plans for the U.S. delegation to the Bangkok XV Conference on HIV/AIDS. In addition, the 4th round proposals for the Global Fund to Fight AIDS, Tuberculosis and Malaria will be considered at the meeting taking place this week in Geneva. Parallel reviews of these proposals are being carried out by USG agencies in the field to ensure the proposals meet with USG approval.

Family Planning/Reproductive Health (FP/RH)

The second major thematic area I work on is FP/RH. Activities during this reporting period include the following.

- **Contraceptive Security.**

As USAID gradually pulls out of providing contraceptives in LAC, it becomes increasingly important to ensure that the mechanisms are in place to ensure contraceptive supplies in the future. To that end, I am working with LAC contractors The POLICY II and DELIVER Projects to improve contraceptive security throughout the region. In July 2003 they held a workshop with government-NGO teams from nine countries, to identify country-specific issues. Those teams have continued working together upon their return home, applying the lessons learned in the workshop. In the year since that workshop, POLICY and DELIVER have conducted contraceptive security assessments in five countries: Bolivia, Honduras, Paraguay, Peru and Nicaragua. The results of these assessments not only help these countries improve their overall contraceptive security, but also identify common issues that need a regional approach, something that LAC-PHN plans to continue supporting over the next few years.

- o In June, I participated in a full-day debriefing on the findings and recommendations of the LAC-supported Contraceptive Security Country Assessments. It was well attended by representatives from USAID, cooperating agencies, PAHO, the World Bank, UNFPA and other international organizations. The findings and preliminary recommendations of the five countries assessed included: public programs tend to provide free contraceptives to a large number of people who could afford to pay for private services, leading to a recommendation that the public programs segment their markets and provide free services only to the poorest economic quintiles; the health sector reform movement in a number of countries has included buying supplies at the municipal or regional level, something that makes it very difficult to get good prices; this led to a recommendation that other options, such as pooled purchases, be explored. Action plans based on the findings and recommendations of these assessments will now be developed to ensure that contraceptives remain available and sustainable programs are in place when USAID and other donors reduce family planning funding in the LAC region. A follow up country action planning meeting, bringing together government personnel, NGOs, USAID and other donor representatives, will be held later this year. That meeting will also help us develop the work plan for the next three years of activities related to contraceptive security.

- o I have also helped broker the use of DELIVER funds to conduct a sixth contraceptive security assessment in Ecuador. This will take place later this year. This is especially important because, since USAID closed its health program in Ecuador in 1999, the government program has declined. This assessment will assist the government and NGO sector to better focus their contraceptive efforts.
- o I also worked with my LAC colleagues to ensure that contraceptive security was included on the agenda of the LAC Health Reform Forum entitled "A New Agenda for Health Sector Reform: Strengthening Essential Public Health Functions and Scaling Up Health Systems", held July 19-22 in Antigua, Guatemala.
- o In addition, I helped broker collaboration between the Centers for Disease Control and Prevention (CDC) and our two partner CAs, DELIVERY and POLICY II, to further analyze the results of the Ecuador and El Salvador reproductive health surveys. CDC has been developing tools to analyze survey data for improving contraceptive logistics, with the goal of increasing and facilitating the use of survey data to inform and improve programs and policies. One such tool is a contraceptive security analysis and projections which uses survey data to take a detailed look at the characteristics of both current and potential clients. It also helps examine the factors that affect a client's ability to make an informed choice of a preferred method (such as awareness of all available methods and how effective women believe the methods to be), their ability to obtain the method of choice (such as whether they know where to obtain them, and whether cost is a prohibitive factor), and their ability to use the method effectively (including level of satisfaction with the various methods, and rates and reasons for discontinuation of use). It also helps analyze methods whose use could increase, and sub-groups among whom contraceptive prevalence could increase.

- **Working Group on Graduation and Strategic Allocation of FP/RH Resources.**

Given limited and declining resources in population/reproductive health funding for LAC, a team with GH/PRH and LAC/RSD-PHN has been formed to study how to make the best use of declining resources. I am now the co-chair of this working group. During this reporting period we have: 1) developed a scope of work to research lessons learned to date from countries that have already graduated (e.g., Brazil, Mexico, Morocco, Turkey, Colombia, Ecuador) and to come up with findings and recommendations for consideration; 2) hired a consultant to oversee this exercise, with participation from other team members and a NEP; 3) met with the consultant and USAID staff to design the outline and timeline for preparing a document on "Experiences and Lessons Learned from Countries that No Longer Receive USAID Family Planning Assistance." That report, to be completed in August, will be used to help design phase-out from family planning programs in selected LAC countries; 4) sent a memo to LAC PHN officers asking about their experiences and recommendations in relation to graduation. The responses to that memo are being incorporated into the report noted above.

- **Emergency Contraception.**

In October 2002, USAID/LAC supported the Population Council's Frontiers in Reproductive Health Program to support the attendance of 35 participants from 11 countries to the Latin American Conference on Emergency Contraception in Quito, Ecuador. This conference helped raise the awareness and acceptability of emergency contraception among different audiences attending the conference, such as parliamentarians, policymakers, service providers and adolescents. During the period of this project (2002-2004), Mexico and Peru have included emergency contraceptive pills as part of their national family planning programs. The complete report has just come on this work, which included country-specific efforts.

- **New services options.**

I began attending meetings of the team designing this project, but after consulting with CEDPA, as per rules, I withdrew from this working group, so as to avoid any possibility of conflict of interest if CEDPA decides to bid on this project, once it is opened up.

- **Budget.**

I worked out the budget allocations and notified the CAs (POLICY, DELIVER, FRONTIERS) and their CTOS about new LAC funding to be provided to them over the next three years

Support to USAID Missions

Among the activities I engaged in during this reporting period to assist USAID Missions were the following.

- **Budget.** I worked to finalize field support transfers to the Bureau for Global Health for FY04 obligations.
- **Country-Specific Support.**
 - I provided input into the intensive review of **Paraguay** and **Peru's** health sector activities and participated in the discussions with GH, LAC and Mission staff to resolve pending issues. I also in the **El Salvador** and **G-CAP** health sector reviews, identifying health issues and resolving them satisfactorily with those Missions.
 - I worked with two staff members from the **Peru** mission to develop a strategy for selling a major change in their HIV/AIDS plans to the OHA. This was successfully done, and verbal approval was given to this new strategy. We agreed that the major work on drafting the Mission's new HIV/AIDS strategy will be done in Peru, but I will be available to provide assistance or feedback as the Mission wants.
 - **Jamaica.** I participated in the review of the Jamaica Mission's HIV/AIDS strategy, providing feedback to OHA on the draft strategy, participating in discussions on it leading to the development of an issues paper. I also continued to help the Jamaica Mission collect information on dealing with stigma and discrimination and indicators of stigma and discrimination. Jamaica.
 - **Nicaragua:** The Mission had requested guidance on condom logos. I drafted a response to the Mission request, obtained appropriate clearances from LAC/RSD, GC, and GH. However, in the long run, OHA decided not to use the draft response and to go with something much more general. I ensured that that response got out to the Mission.
 - With my counterpart in OHA, I briefed the new Country Coordinator for the **Caribbean Regional Program** on the program, issues, and pending matters related to the CRP.
 - I assisted the **Paraguay** Mission to obtain appropriate technical assistance to design a survey on HIV/AIDS in Paraguay's second-largest city, Ciudad del Este, where it is believed that HIV/AIDS is a major problem. This survey, funded by the LAC Bureau, will be used to ascertain the reality of the HIV/AIDS situation in that city bordering on Brazil and to design any action needed to combat the epidemic there.
 - **Meetings with Mission Staff.** During this reporting period, I have met with various mission staff as they have passed through Washington, discussing issues and needs with them, and following up, as appropriate. Among those I have met with during this period are: Alonzo Wind (Nicaragua), Molly Lindner and Ed Kadunc (Mexico), Ken Yamashita, Susan Thollaug and Jaime Chang (Peru), the Central American Mission Directors who were in town to discuss the CAM strategy, Connie Johnson, Margarita Lobo and Maricarmen Estrada (El Salvador), Wayne Nilsestuen and Enrique Villalba (Paraguay), and Charles Llewellyn (Bangladesh, but planning to move to LAC).

Other Activities.

- **Planning LAC State of the Art (SOTA) Training Workshop.** I continue to meet regularly with the rest of the LAC/RSD-PHN team to plan the next PHN officers training session/State of the Art (SOTA) meeting, planned for Miami in early March, 2005.
- **Program Monitoring Plan (PMP).** I have begun to develop the HIV/AIDS and family planning parts of the Program Monitoring Plan and the FY05 budget for my two technical areas, attending various meetings on the PMP that will support the newly-developed LAC/RSD-PHN AAD.
- **Inter-Agency Collaboration**
 - I worked with the G-CAP staff in Guatemala, LAC/DAA Mosina Jordan and Michel Sidibe, Country and Regional Support Department Director of UNAIDS, to ensure a successful signing ceremony for a Memorandum of Understanding outlining areas of cooperation between UNAIDS and USAID in Central America. The MOU provides a framework for joint efforts in policy dialogue, information dissemination and resource mobilization and support for the Global Fund Against HIV/AIDS, Tuberculosis and Malaria (GFATM) efforts.
 - I participated in a meeting at the Department of State/WHA on "Human Rights and Fundamental Freedoms", including trafficking in persons (TIP) in which I suggested changes to a draft document to reflect the recent LAC-approved support of TIP programs in Brazil, the Dominican Republic, Ecuador, Guyana, G-CAP, Haiti, Jamaica and Peru.

- **Review Documents.**

I reviewed and commented on: 1) the new CSH and HIV/AIDS guidance; 2) at the request of the Synergy Project, a draft of their document: "CEDPA India's Better Life Options Program: Tracing its Evolution, 1987-2004, A Process Documentation"; and 3) an unsolicited proposal on identifying, planting and marketing neutraceuticals in the Caribbean.

Responding to LAC Front Office and LAC/RSD-PHN

- **Public-Private Partnerships.**

Public-private partnerships are a major interest of the LAC Front Office. Therefore, I have been keeping track of the public-private partnerships related to HIV/AIDS that are being developed in LAC, including in Brazil, Honduras, Jamaica and Mexico, and reporting on them to the FO. In addition:

- I arranged a meeting with the POLICY II Project, its sub-contractor, the AIDS Responsibility Project, and representatives of USAID/Mexico, LAC and GH to learn about ARP's planned work to promote these partnerships in Mexico. With support from the U.S. Ambassador, USAID Mission Director, the American Chamber of Commerce, and the Mexican Government's national AIDS program, CENSIDA, ARP is conducting a survey of U.S. corporations working in Mexico about their corporate policies and practices related to HIV/AIDS. The results of this survey will be used to advocate for more favorable HIV/AIDS workplace policies and practices within those and other corporations in Mexico.
- In addition, at the request of the LAC FO, I prepared talking points on HIV/AIDS private public partnerships for AA for Global Health, Anne Peterson, to use in her speeches and other interventions at the XV Global Conference on HIV/AIDS in Bangkok, Thailand, July 11-16.

- **Trafficking in Person (TIP).**

With others from LAC and WID, I participated in the LAC TIP Committee to: 1) establish requirements and criteria for selection and share them with all Missions, inviting proposals that fulfill those requirements; 2) review 11 proposals from eight missions (Brazil, G-CAP, Haiti, Peru,

Ecuador, Guyana, Dominican Republic and Jamaica), providing feedback to the Missions on them and requesting revisions on the strongest proposals; 3) review the revised proposals, discuss priorities and budgets; 4) recommend that the LAC/AA both approve that funding for the selected proposals and to increase requests for the region's TIP fund; 5) the Committee also recommended that missions, such as Brazil, Haiti and G-CAP whose original proposals significantly exceeded the annual TIP funds available to the region, incorporate their TIP funding requests within their country budgets by FY 2007.

!

ISABEL STOUT – TAACS GUATEMALA
Quarterly Report: April-June 2004

- Completed design of AROFAM new cooperative agreement
- Supported technical evaluation of new Alliances award
- Organized three events on corporate social responsibility
- Participated in office-wide assessment of IMCI-MCH programs funded by OHE portfolio.
- Completed new centralized job description for office support staff.

ONGOING PROGRAMS

1. **APROFAM**
 - Negotiated the basis of the new cooperative agreement with the APROFAM Board of Directors.
 - Coordinated with IPPF/WHR technical assistance on governance and volunteerism.

2. **ProRedes Salud**
 - Assisted JSI in identifying technical assistance in sustainability of its networks.
 - Supported income generation projects for each of the participating networks.
 - Provided guidance which resulted in creation of the first national association of NGO networks in Guatemala, including 150 NGOs working in health.
 - Held formal review and discussion of close out activities including final disposition of equipment.

3. **MSH: Management and Leadership Project – TA for APROFAM**
 - Provided oversight for close-out of MSH assistance to APROFAM.

4. **Population Council: Frontiers Project**
 - Provided technical assistance on OR on vasectomy and extension of IUD insertion training.

5. **Child Survival Grants**
 - Reviewed mid-term evaluation findings for HOPE grant and contacted DCHA/PVC for follow up.

NEW ACTIVITIES

1. **Alliances for Social Investment**
 - Served as support resource for TEC panel (recused from participating because of conflict of interest).
 - Prepared rating forms, kept notes and drafted TEC memo.

2. **APROFAM**

- Led design of new Cooperative Agreement and wrote full program description.
- Designed a sustainability fund to ensure APROFAM's ability to fund its social mission beyond USAID support.
- Prepared projections and budgets to support next five year strategy to support APROFAM

PLANS FOR NEXT QUARTER

Complete Alliances Award

Start up new Alliances program

Organize private sector advisory group

Review Semi-Annual Reports and Final Reports for 2004

Close out existing strategy activities

Arrange TA for APROFAM Board of Directors

Travel to visit project activities in the country

Stanley S. Terrell

Quarterly Report
Second, 2004
04/21/04 to 07/20/04

July 28, 2004

USAID/G-CAP
Regional HIV/AIDS Program

Summary of activities:

Regional HIV/AIDS Team Leader, CAM SO 3, IR 4: HIV/AIDS and Other Infectious Diseases Contained and Impact Mitigated

- Finalized the Synergy report for the Acción SIDA evaluation.
- Coordinated the signing of the MOU between USAID and UNAIDS in Washington on April 26.
- Continued monitoring partner implementation of program activities including the transition of a new chief of party for the PASMO activity.
- Participated in the CAM SO 3 indicators and procurement meeting in Managua, March 15. Prepared sections of indicators report pertaining to HIV.
- Finalized "Interim Modifications..." document to our strategy based on recent budget cuts and impending guidance from S/GAC that was approved as an annex to the G-CAP Regional Program Plan.
- Acted as secretary for an integrated interagency HIV/AIDS USG core working group headed up by the Ambassador. Coordinated meetings as well as the process to develop a plan for an integrated USG information dissemination program.
- Participated in the CDC/Tulane/PAHO/USAID meeting on preparing training materials for surveillance in New Orleans, LA Mar 16-19.
- Visited Belize with CDC/GAP to monitor program activities and meet on coordination issues with the US Embassy, other agencies and national authorities.
- Continued coordinated with CDC, PAHO, the World Bank and UNAIDS on drafting a regional strategic plan for HIV/AIDS surveillance.

- Hosted a regional meeting with partners and mission reps to evaluate Global Fund progress in the region and plan for an integrated USG response to support the fund. An extensive reporting cable is in preparation.
- Developed and submitted a proposal to LAC and EGAT/WID for anti-trafficking activities that was accepted for funding and will be integrated into the program.

General Office

- Continued work on new work objectives for FSN staff under my supervision in preparation for revision/reclassification under the new CAJE personnel system. Position descriptions and CAJE forms were submitted to the personnel office.
- Absent from post for 30 days on home leave.
- Prepared info for and participated in meetings with Mission Management from San Salvador and G-CAP as part of a transition process of the regional platform to El Salvador.

Quarterly Report
April 21, 2004 – July 29, 2004
Catherine Thompson

Position - Asia Regional Specialist, RCS/GH, Washington DC - Detailed to the ANE Bureau to assist the Iraq office through June 30, 2004.

Quarterly issues:

The main issue of this quarter was the orientation of two new staff to work on the Iraq health portfolio. I have also rendered my resignation to take up a position with USAID in Namibia.

April – Moved back to the GH office to allow space for the new ANE staff to work in the Office of Iraq Reconstruction on the 5th floor of the RRB.

May – Orientation of the new ANE staff to the Iraq portfolio.

June – No major issues in June.

July – Lat day of work is July 29th.

Thank you all for your great support over the last 5 years of the TAACS program from Nepal to DC. I appreciate all the work done by the TAACS team and wish you all success in the future. I can be reached c/o USAID Namibia and at the same email.

Best wishes!!

Quarterly Report
April 21, 2004 – July 20, 2004
Murray Trostle, Dr. P.H., M.P.H.

July 15, 2004

Office of Health and Nutrition
Child Survival Division
USAID

Summary of activities:

My primary responsibilities are Senior Immunization Advisor and Head of the Immunization Pod (I-Pod Commander) in SO3 for the Office of Health, Infectious Diseases and Nutrition; Head of the Infectious Disease Surveillance Working Group at USAID/Washington, CTO for the new Immunization Project (not yet named) and I am a member of the Partners in Health Reform Plus (PHRplus) Project CTO team.

PHRplus CTO team

- I am responsible for the ID surveillance group at PHRplus and provide technical and management guidance to them on the development and implementation of their ID surveillance program
- I reviewed and discussed operations research activities in the area of infectious disease surveillance
- I participated in quarterly reviews of surveillance activities
- I participated in a number of PHRplus CTO team meetings
- I reviewed and approved all ID surveillance plans and budgets for the remainder of the project

Team leader for the Infectious Disease Initiative Surveillance working group

- I met with Dr. Stella Chungong and Dr Stephano Lazzaro of WHO/Geneva to discuss a future relationship between USAID/BGH and WHO as well as the WHO relationship with TEPHNIET
- I finalized the WHO surveillance grants as well as agreements with CDC through NCID and EPO for surveillance activities in 2004-5
- I complete the second stage of the development of the USAID ID surveillance strategy for the next five years and began work on the final strategy document.
- I reviewed the latest draft of the International Health Regulations and represented USAID in a review of the IHR by all US Government agencies.

- I attended the TEPHINET program managers meeting in Lyon, France and made a presentation on the development of partnership arrangements in international health
- I met with FETP program managers from Kenya, Zimbabwe and Ghana to map out a strategic agenda for support of African programs

Senior immunization coordinator and CTO for the new immunization project

- I continue to manage the distribution of Immunization Essentials.
- I continued to manage the BOOST initiative for the promotion of immunization programs with USAID missions and have included a performance tracking mechanism.
- I continued to mentor a child survival fellow working on immunization
- I finalized the award of a new immunization cooperative agreement and oversaw the process with the contracts office.
- I finalized the Immunization Pod strategic plan and developed a budgeting approach which is now being used as the model for the entire child health strategic objective.
- I delivered the Immunization Pod “Big Picture” review to USAID senior staff.
- I represented USAID on the GAVI Steering Committee for the ISS evaluation
- I was appointed CTO for the new cooperative agreement on immunization
- I attended the 13th GAVI Board Meeting as an official USAID observer.

Murray Trostle, Dr. P.H., M.P.H.
 Senior Immunization Coordinator and Head of the Infectious Disease Surveillance
 Working Group
 Office of Health, Infectious Diseases and Nutrition
 USAID

Quarterly Report

Susan Wright, TAACS SDI Division

April 21, 2004 – July 20, 2004

Planned for the Quarter:

- 1. Private sector team:** All team members actively engaged in start-up of new activities, including field visits as appropriate.
- 2. CTO responsibilities: M&L:** The POPTECH assessment results allow USAID to identify lessons learned and key elements of management and leadership support to be carried on beyond the end of M&L in September '05. **CMS:** Funded extension awarded through September; pipelines drawn down; transition plans made on a country-by country basis.
- 3. PSP:** IQC awarded. TO 1 and TO 2 advertised and proposals reviewed for award of each TO.
- 4. Flexible Fund:** RFA issued for new procurement, proposals reviewed and CA selected. New CSHGP awardees announced. New procurement issued via Mobus for technical assistance to grantees.
- 5. Mission support:** Continue to work with USAID/Nigeria to issue solicitation for private sector activities, and provide other assistance as needed including possible summer trip to Mali if it is needed by the Mission.
- 6. Other:** Assist in development of PRH technical guidance to Missions to plan for and achieve successful transitions of selected population and/or PHN programs USAID.

Key accomplishments of the quarter:

- 1. Private Sector Team:** Over the past quarter, many members of the team made field visits to assist or check on different aspects of the private sector portfolio. This included field work by Barbara, Victoria and Anne and me in Indonesia, Nigeria, Madagascar, Mozambique, Nicaragua, Tanzania and Uganda. In addition, to scale up Flexible Fund activities, Virginia helped plan and facilitate workshops, survey instruments, grant reviews, and other activities to strengthen performance of NGOs in family planning and reproductive health. Since implementation of PSP is just beginning, field trips for start up of commercial sector work were limited to design work on behalf of missions in Tanzania and Nigeria.
- 2. a) Management and Leadership Project (M&L):** A ceiling increase of \$18.75 million for this activity was (finally!) executed in July to allow this highly popular program to implement up to its planned end date of September 2005. The main activity of this quarter, beyond review and approval of the final full year workplan, was the external assessment of the M&L program worldwide that began in May. This review allowed PRH to assess past and current performance of the program and also will be useful in examining the ways that management and leadership support can be provided after the end of this program. I accompanied a member of the

assessment team to Nicaragua in May to observe the performance of M&L there; Barbara traveled to Indonesia for the same reason. Barbara and I received the draft report in mid-June; we reviewed and returned it to the lead author by end June. I received the final version for clearance in early July and authorized the final production of the report. This swift process will allow us to begin discussions about the future of this activity well within schedule.

b) CMS: The project was awarded a cost extension through September 2004, to allow several large country programs to continue un-interrupted once PSP has task orders in place. The workplan for use of these funds has been approved after thorough review by the technical advisors for this project, Shyami and Maggie. They are paying close attention to pipeline and completion of all activities including transition of programs before the end date.

3. Private Sector Program (PSP): This IQC was awarded to six firms, and an additional large number of firms are sub-contractors. The Request for Task Order 1 was issued on May 13, 2004, to all six IQC holders. The purpose of this task order is to provide global leadership, innovation and technical direction concerning voluntary family planning and related health behaviors, products and services in the private sector. An anticipated \$25 million in core funds is anticipated over the life of the task order, and it will also accept field support, so this is the equivalent of a full central program within the IQC. This is a new model and will require close attention to make sure it fulfills its mandate. The technical review for TO 1 has been completed and the action is with the Office of Procurement. The Request for Task Order 2 was issued in June and will close July 20, 2004. The purpose of this task order is to provide technical assistance to private sector health care providers to obtain credit. Together these two task orders will cover the anticipated core requirements of PRH, but other central task orders may be issued by other offices.

4. Flexible Fund: The RFA to provide grants solicitation and management (GSM) services on behalf of the Flexible Fund has closed and is currently under technical review. The procurement period had to be extended since we got an insufficient response from potential bidders in the first round. Once awarded, GSM will allow missions as well as PRH to support a range of PVO/NGO family planning activities. The follow-on Mobus contract request was issued and award of a new contract is pending. New CSHGP grants including population funding were issued for the Democratic Republic of the Congo, Mali, and Nepal. In all three of these countries the missions are providing a proportion of the total funding (in the case of DRC, a very high percentage of the total amount), which is a very positive development for both the Flexible Fund and the CSHGP program in general. Virginia is providing significant technical assistance to earlier grantees to help them track their performance in FP/RH, and all of us (Victoria, Virginia and me) participated in the CSHGP mini-university in Baltimore in June.

5. Mission Support:

Nigeria: It is difficult to keep in close touch with the mission since the PHN staff are chronically overwhelmed by PEPFAR requirements. Other than intermittent requests for information from the Mission, this quarter I have mainly served as a resource person for NEPs and others interested in Nigeria as an eventual assignment or rotation.

Morocco: I worked with the M&L team to design their assistance to Morocco as a graduated country, and with NIH to plan the visit of the Moroccan head of the public health institute to NIH headquarters this fall. Preliminary DHS results show that in the early 21st century, while I was the PHN program manager in Morocco, contraceptive prevalence increased 5% even while

USAID was phasing out programs. This is an important validation of the transition strategy developed by Joyce Holfeld and others in the mid 90's and of the efforts of many of us in subsequent years to carry it forward.

6. Other: Last quarter the PRH office formed a working group to identify best practices in preparing for and achieving phase-out of USAID population programs, and sustaining program performance after phase-out of USAID assistance. As a member of this working group I helped draft the terms of reference for a POPTECH consultancy and provided input to a NEP who was gathering information on the graduation process in Morocco. I will be reviewing draft reports and providing input as appropriate.

Planned for the Next Quarter (July 21, 2004 to October 20, 2004)

1. Private sector team: All team members under my supervision have annual performance evaluations and objectives set for the coming year.

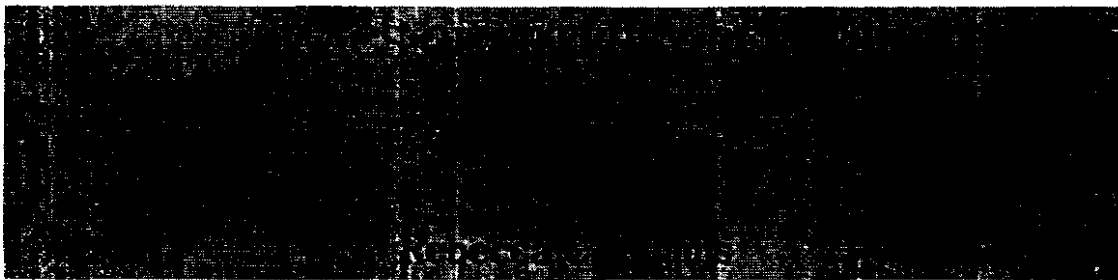
2. CTO responsibilities: M&L: Analysis of assessment results and consultations with Mission and other stakeholders lead to decisions on potential next phases of the program. **CMS:** All CMS activities still underway are completed by September 30 and/or transitioned over to PSP, either to TO 1 or to a mission funded task order. Close-out reports and other close-out processes on schedule.

3. PSP: TO 1 launched successfully, with workshops and other joint working sessions as appropriate. First year workplan and PMP for TO 1 submitted and approved, with field support funding programmed under the workplan. To 2 awarded and start-up underway.

4. Flexible Fund: GSM awarded and first round of solicitations under GSM underway. New Mobus contract provides continued technical support to the program. Annual reports received from the first round of grantees of the Flexible Fund.

5. Mission support: Assistance provided as needed, including possible TDYs to DRC and Kenya.

6. Other: PRH report provides graduation guidelines for countries facing phase-out of population assistance.



During this quarter I have been working on a number of tasks that are described as follows:

- Budget Support - I have almost finalized the master budget system for the Office of Education during this quarter. This new system is allowing for greater transparency and accountability of funds, both the earmarked basic education resources and other development assistance funds programmed by the Office of Education. It further links resources with the respective Strategic Objectives (now Intermediate Results). Because no budget system had ever been developed, this is a significant contribution to the overall operation. The budget system is already beginning to serve as a major tool for management, procurement planning, obligations, and more.
- Obligations and Planning - During this quarter I have been part of the three person team interfacing with OP to negotiate and clarify the final procurement actions and obligations through the end of the fiscal year. We have obligated 80% of our FY 04 OYB (17M+). Obligations are intricately tied to the budget system that I am developing.
- Strategic Operations and Coordination (SOC) team - This team is one of three functional/operational teams that have recently been created in the Office of Education. The SOC team, while still undefined with respect to its role, continues to be tasked with numerous actions that range in type from "program office" to office management. Actions assigned to me have included aligning the FY 04 education resources with the White Paper taxonomy for a presentation that the EGAT AA made to Administrator Natsios in addition to the roll up exercise undertaken by PPC for OMB. I also created a shadow budget that realigned the education resources with the three EGAT mandates - field services, technical leadership, international cooperation and interagency coordination.

- Developing roles and responsibilities/ identifying operational requirements of the office/ ascribed burden to all activities - I am one of three currently serving on the team that has undertaken a major task that includes identifying all operational requirements of the Office of Education, clarifying which staff is responsible for each requirement, and sorting out management burdens for all activities including various levels of CTO responsibility. I created the formula for CTO burden rates that have now been applied to all CTOs in the Office of Education. This task began several months ago and remains a focus of the upcoming August office retreats and remains a priority to the office director. The results of the effort are being converted to special software for use by the office director and the three team leaders. I will also have the software to allow for continued support to the management team.
- Procurement - During the first part of the quarter I continued working on the basic education procurement. In May 2005 I was asked to cease working on all activities associated with the future basic education procurement due to an OCI based upon my employment with CEDPA as a TAACS. I've provided input to the follow on procurement for evaluation of training and education, GEM II.
- Field Support Team - I am also serving on a second functional/operational team in the Office of Education - Field Services. I am a second backstop to Latin America and the Caribbean and assist where and when I can. EGAT/ED has been planning three regional education workshops during this quarter and I have worked with the LAC Bureau to develop the agenda and identify the speakers. I continue to provide some limited guidance to the education team in the LAC Bureau, particularly now that the Team Leader is retiring in September. The day prior to the end of this reporting period I departed for Haiti to provide support for the emergency relief package of which education received 14.5 million for immediate support to the host government for the education sector. I was requested by the mission and the LAC Bureau DAA.
- Portfolio Review - The EGAT Bureau has scheduled portfolio review per the business model and specific areas that Administrator Natsios has requested be reviewed. In preparation for this review I coordinated an office portfolio review of all activities across all three

teams. I created the CTO forms, the format for the review and wrote the summary for higher education. The Bureau's program office (PAICO) adopted the CTO forms that I created for use with the entire bureau.

Pamela J. Allen

July 20, 2004

Quarterly Report

4/20/04 to 7/20/04

Education Human Resource Division – Strategic Objective 2 (SO2)

USAID/GHANA

Summary of activities:

CTO for World Education (WE)

- Draft Program Description for WE Follow On reviewed by Mission
- Proposal request for Follow-On sent to WE
- WE's proposal for Follow-On reviewed by Mission and MOEYS
- Proposal approved and request for funding sent to Contracts
- Visited Teacher Training Colleges to observe implementation of Window of Hope Curriculum
- Attended YouthNet FGD training of National Service Personnel to observe techniques and participation.
- Attended planning meeting for Sub-Regional HIV/AIDS Workshop for late July, to be delivered by the HIV/AIDS Secretariat and World Bank
- Attended WE Advisory Meeting
- Participated in MOEYS/HIV/AIDS in-service teacher curriculum Steering Committee and sub-committee to define the Steering Committee
- Attended WE 10 country working group launch
- Participated in meeting organized by the Mission's Health Division to have MTT and Ghana's relevant health organizations to identify national HIV/AIDS indicators

CTO for Catholic Relief Services

- Have been working extensively with CRS on budget and close out activities
- Attended CRS/QUIPS Close Out forum in Tamale
- Reviewed unsolicited proposal from CRS

Child Labor Project

Met with visiting consultant to discuss the progress to date of the Youth Education and Skills (YES) project

Disabilities

Sent three persons, including Acting Director mentioned above, to attend 8th International Congress on Including Youth and Children with Disabilities in Norway on behalf of SO and USAID/Ghana

Technical Activities

- Provided overview guidance to consultants from DevTech and World Education for Safe Schools Program (SSP) start-up
- Participated in team interviews for USAID HIV/AIDS and Special Education Advisor (my replacement)

- Participated in Ghana Basic Education Curriculum Assessment System (GhanaBECAS) discussion including next steps to be implemented.
Consultant to return in August

SO Related Activities

- Attended introductory meeting with SSP and MOEYS
- Attended MOEYS launch for new projects to begin fall '04
- Worked with HIV/AIDS Partners on strategy of training in-service teachers, including issues about funding from DfID and WB
- Attended 7th Africa Regional Conference World Association of Girl Guides and Girl Scouts on behalf of the Ambassador
- Contributed to a proposal submitted to USAID/Washington for Girls Scholarships

QUARTERLY REPORT

April-June 2004

John Hatch

Office Responsibilities

Field support continued to be my major activity this quarter. That has included significant time supporting Indonesia's development of an Education Strategy, other Strategy Reviews, and serving as an extended Strategic Objective Team (SOT) member for Cambodia and Tanzania. I continued to provide, as CTO for EQUIP 1, support to Missions and Bureaus expressing interest in using the EQUIP mechanism or actually "buying-in." The coordination/support role for the Education TAACS Advisors in support of GH and CEDPA also filled a fair amount of time.

Contract Activities

-
- *Ed-Data/DHS+*: Reviewed drafts of two Profiles and answered questions regarding formatting.
- *Ed Data II*: Continued involvement with the development and awarding of this contract, for which I will be CTO .
- *EQUIP*: In support of LWA 1, attended management meetings, reviewed Associate Award Program Descriptions; supported Awardee AIR on technical issues; and continued daily phone conversations on issues big and small with the EQUIP 1 Project Director, or her designate when she was out. Read proposed Associate Award Program Descriptions and assisted Missions with conceptualizing and designing appropriate Program Descriptions for all three EQUIPs when asked. In general support of EQUIP, attended EQUIP CTO weekly meetings and monthly meetings with the Project Directors; assisted temporary CTO for EQUIP 3.
- *GED*: No activity this quarter.
- *TAACS Recruitment*: Followed up with Missions on potential interests they might have for TAACS, including occasional comments on candidates forward to them; responded to a variety of questions from Helen Farinella regarding Education TAACS recruitment issues.
- *NMS/Phoenix*: Drafted initial quarterly accruals for SO 1 Team before going to the field; and made revisions to NMS entries as required, including entries for incremental funding of most Team actions.
- General Office: In addition to e-mails, phone calls and other normal events, work this quarter tended to fall into the following categories:
- *Meetings*: A variety of informational meetings took place with individuals, representatives of contractor organizations, and with USAID staff on various issues.

- *Support*: General support continues to be requested for coverage when someone is absent, including assisting the CTO of EQUIP 3, and providing support to the Education programming in Haiti
- *Reorganization*: While I am now a member of the Field Support (FS)Unit, I am still a member of the Basic Education Team; I now report to Diane Leach, Team Leader for the Field Support Team.
- *Field Support*: As a member of the ANE sub-team, I was especially busy with establishing relations with ANE colleagues there, which have included a TDY to Indonesia and serving as an alternate for Education at the Afghanistan Working Group's weekly meetings.
- *Annual Review*: Completed and submitted the my annual Review.
- Meetings: I attended the usual FS Unit, EGAT/ED staff and Education Sector Council meetings;
- *Country Reviews*: Responded to request for comments on draft Sector Strategies, and/or Education Strategies/Concept Papers for Indonesia, East Timor, The Philippines; and continued to support Tanzania and especially the proposed activity in Zanzibar.
- *International Literacy Network*: Was unable to attend the one meeting called for this quarter.
- *International Network on Education in Emergencies*: Attended a variety of INEE presentations and meetings at USAID and more publicly in late February and early March when the Executive Committee was in town; including those around the release of the Women's Commission's *Global Survey on Education in Emergencies*.
- *Short Presentations Attended*:
 - * A series of discussions by American Youth Policy Forum on youth policy issues topics.
 - * USAID Brown Bag on *Unpacking Globalization*
 - * Various seminars on Youth, including attending the establishment session for the Youth Community of Practice (Jan 28th), and the inaugural *EQUIP Seminar Series* on March 9
 - * Agency All Hand Meeting, February 3
 - * *Global Perspectives in Literacy Education*, Feb 18, 2-5:30
 - * USAID/ANE's half day *Education in Post-Conflict Environments*, focusing on Afghanistan, March 11
 - * *EQUIP1 Exchanges*: March 22: *Food Assisted Education: Defining Good Practices*
 - * EQUIP1 half day videoconference on Food Assisted Education
 - *

Travel

- Malawi: TDY June-27-July 4 to assist with on a TEC.

Conferences

- Attended the Advisory Committee on Voluntary Foreign Aid public meeting, Feb 25, Washington, DC.
- Attended the USAID Humanitarian Debate Series on *Youth in Emergencies*, Feb 12-13, in Washington, DC
- Participated in the World Bank's *Governance and Accountability in Social Sector Decentralization* Feb 18-19, Washington, DC
- Attended the World Bank's Sustainable Development Week, Mar 1-3, Washington, DC+

Training

- *TRG Workshop*: Participated in full-day EGAT/ED team building retreat March 4.
- My attendance at an Accruals Training had to be cancelled due to unexpected ANE country Strategy Meeting.

Anticipated Special Activities Next Quarter

- EQUIP will continue to be the major activity of the quarter in support.
- A possible TDY to Pakistan is being considered for May, to support activities there for its on-going education initiative.
- Completion of the next steps for the *EdData II* RFQ—technical review, and Best and Final if needed, will take place next quarter; the following quarter will see the award and start up process get underway.
- Assuring that Missions and Bureaus with Education TAACS have put adequate funds for FY 04 into the proper contract will be the focus of that responsibility.
- Major planning for the ANE regional Education workshop should be accomplished during this next quarter. Some assistance may be provided as well to the planning for the Africa regional Education workshop, which is set for the week of September 12. There may possibly be preparation needed for assistance to the TAACS workshop at the end of July.

Mitch Kirby
USAID/REDSO Senior Regional Education Advisor
Quarterly Progress Report
April 21, 2004 – July 20, 2004

Major Activities for the Period:

During this reporting period, I transferred from AID/W to begin my assignment with USAID/REDSO in Nairobi, Kenya. I arrived at post on June 18, 2004. In addition to preparing for the transition to the field, major activities for this period included on going field support for USAID Education programs in Sudan, Kenya, Djibouti, and Somalia, described in more detail below.

For the *Sudan Field Office*, I drafted a scope of work for a comprehensive training and institutional capacity needs assessment. In Nairobi, I vetted and revised the SOW to reflect new developments in the Sudan program resulting from the on-going peace talks. During the absence of the Education Program Manager, I assisted the SFO with preparing end of year obligations and planning with other donors for the Sudan Joint Assessment Mission (JAM).

For *Djibouti*, I assisted REDSO and USAID/Djibouti with strategies to move ahead on procurement for books and learning materials that had been delayed due to new contracting requirements for International Public Organizations.

For *Somalia*, I assisted the REDSO Office of Limited Presence Countries with strategies to move ahead with implementation for a new education program in Somaliland in the face of on-going security and travel restrictions. With the REDSO Somalia Program Manager, I met with key implementing partners in Nairobi and advised and assisted with the modification to the SOW for the Somalia education program under the USAID Basic Education Policy Support (BEPS) project.

For *USAID/Kenya*, in Washington I participated in technical and management meetings in the AFR Bureau to advocate for increasing funding levels for the new USAID/Kenya Basic Education Program. As part of a USAID delegation, I met with the Kenyan Minister of Education during his visit to Washington, D.C.

With AFR/SD, I participated in the annual performance review meetings for USAID education programs in East and Southern Africa.

Training. Prior to departure to post, I completed the mandatory four day SAFE, personal security training at the Foreign Service Institute.

Planned Activities for the next reporting period:

I'll continue to provide technical support for education programs in the region, especially Sudan, Somalia and Djibouti. If the peace talks continue to progress, it's likely that

support for the Sudan Basic Education Program will account for at least 25% of my work responsibilities. In consultation with REDSO staff and education colleagues in EGAT and AFR/SD, I'll begin to assess the feasibility for a regional education program. Planned trips for the next reporting period may include: southern Sudan, Djibouti, Ethiopia, and Madagascar (for the AFR/SD Education Biennial).

Sonjai Reynolds-Cooper
TAACS/Education Advisor, USAID/Jamaica
Caribbean Center for Excellence in Teacher Training (CETT)
April - July 30, 2004

This quarter three report presents highlights of activities, accomplishments and challenges for the period April 1-July 30, 2004

Activities:

This quarter included extensive travel within the Caribbean region as well as other international travel for a variety of site visits, workshops and training activities associated with the effective management and implementation of CETT.

The second meeting of the Directors of the three Centers for Excellence in Teacher Training (CETT) was convened in Lima, Peru April 20-23rd. The workshop was organized by Creative Associates and was hosted by the Andean CETT. The workshop brought together not only the Directors but the AID staff, field office advisors and officers and other representatives from the key American partner organizations (INMED and Aguirre). The focus of the workshop was twofold:

- *Share best practices and lessons learned from around the hemisphere.*
- *Promote and facilitate communication among the three sub-regions of the CETT program.*

The workshop presented me with an ideal opportunity to meet with my counterparts (for the first time) from the Andean and Central American CETTs and to discuss similar challenges and strategies faced in managing our respective regional program. During the workshop, it was announced that the CETTs would each receive additional funding for FY-04. The Caribbean will receive USD\$2M.

Following participation in the CETT Regional Director's conference, I traveled to Belize to participate in a pilot study aimed at examining the progress made in CETT schools. An observation and interview guide were developed and piloted in three CETT schools and two non-CETT schools over a four day period. An Aguirre International consultant led the team which included the CETT Reading Specialist, Teacher Trainer, Testing &

Measurement Specialist and me. In pairs, we all conducted interviews of one teacher and documented 30-45 minutes of classroom observation. The pilot study also provided me an opportunity to visit the remaining CETT schools located outside of Belize City that I had not been able to visit during a previous site visit to Belize.

On May 5th, I participated in half-day ethics training for the Mission facilitated by the Regional Legal Advisor.

Also during the month of May, I participated in the two-day Mission retreat (May 6-7th) facilitated by Training Resource Group (TRG, Inc. - DC-based). The retreat focused on team-building in a general sense and on strengthening inter-office collaboration as it relates to our respective programmatic areas in particular. This was the first retreat held since Karen Turner became Mission Director for Jamaica and the Caribbean Regional Program (offices in Barbados). The workshop was very successful and has contributed to broadening my understanding of the Mission Programs enabling me to better explore feasible synergies between several of our programs (e.g. Health and the Caribbean Regional Office Programs).

During the month of June, I worked closely with the Reading Specialist in St. Vincent to organize a first time CETT primary school visit for Karen Turner, Mission Director. Though the visit was brief (approx. one hour), it gave the Director a broader understanding of the challenges faced by classroom teachers and how the CETT approach has assisted them in teaching children to read in St. Vincent. Following the visit, I stayed on to work with the Principal of the College in resolving several program related technical and communication issues.

During the month of July (14-16th) a major training workshop was held in Trinidad. The workshop convened college lecturers and Reading Specialists from six English speaking Caribbean Islands on the topics of reading assessment and the evaluation of reading instruction. The workshop was facilitated by Aguirre International and the CETT Testing & Measurement Specialist. Aguirre also presented the findings from the pilot study and discussed next steps in extending the study beyond Jamaica and Belize to the other 3 participating islands (Guyana, St. Vincent and St. Lucia) as well as to the other two CETTs. Trinidad was selected as the venue because this

year signals the beginning of Trinidad's participation in CETT (along with Grenada). This brings the total number of Caribbean islands participating in CETT to seven.

The month culminated with an important senior administrator's visit to the region. Assistant Administrator for LAC, Mr. Adolfo Franco and his Chief of Staff, Mr. Kevin McLaughlin visited the CETT in St. Lucia on July 27th. Because the schools are on summer break, the Sir Arthur Lewis Community College was host for a roundtable discussion with parents, several school principals and CETT staff. A luncheon and 10 minute viewing of a recently developed CETT documentary produced by the Gov. of St. Lucia was also part of this successful visit.

Accomplishments:

Reviewed revised CETT Project Description in anticipation of additional funding provided by Washington, DC.

Prepared a justification for the extension of the University of West Indies, Joint Board of Teacher Training (JBTE) Cooperative Agreement. This justification is pre-requisite to an amendment to extend the life of the cooperative agreement to Sept. 30, 2006 (from Sept. 26, 2004) and allow for the additional funding

Worked closely with Reading Specialist in St. Lucia to plan and coordinate a two hour site visit by the Assistant Administrator for LAC.

Drafted talking points for the Deputy Chief of Mission to Trinidad & Tobago who presented remarks at the third annual technical training for Reading Specialist from across the region.

Prepared and presented remarks on behalf of the USAID at the opening of the Trinidad workshop. Approximately 65 participants from the English speaking Caribbean were in attendance.

Successfully completed the 5-day Planning, Achieving and Learning (PAL) course held in Washington. This course is the pre-requisite to most technical courses offered by AID. PAL aims to provide participants with a basic understanding of the business processes and procedures as outlined in

the Automated Directives System (ADS) in a manner that shows how the Agency programming policies are relevant to the operations both in the field and in Washington.

Successfully completed the 5-day Financial Management Training Course held at the Mission. This course objective was to provide participants with the fundamentals of USAID financial Management. It was conducted by USDA and was particularly informative as there were many opportunities to apply what I learned in class through the use of realistic scenarios and other group activities.

Challenges

No significant challenges to share.

Overall observations

The Mission and I are increasingly more comfortable with the procedures to process payments for the expenses incurred at post. This was a challenge identified in my last quarterly report. I am content with the strides that have been made to overcome this challenge.

I am very comfortable working with the Education team both in the management of CETT and exploring synergies with the Jamaica Education Project (New Horizons). I have made a conscious effort to ensure that technical staff from NHP attends CETT workshops and key activities and I have been invited to participate in several NHP events.

As CTO responsibility, pay station and administration of CETT are now fully located in Jamaica, I have begun working closer with the Office of Financial Management (OFM) and the UWI Finance Officer. My responsibilities now include quarterly review of vouchers and financial obligations. For this reason, I was anxious to participate in the Financial Mgt. course and have been more assertive in obtaining CTO certification. With the support of my General Development Office supervisor, I will participate in the Acquisitions Management component of CTO training in early August.

I continue to receive strong CEDPA office support and guidance from my TAACS Program Associate (as well as the Finance office) on matters related to processing of TERS and other requests for advances. This is particularly important given the extensive travel and the large amount of expenses that I incur routinely.

QUARTERLY REPORT
Norman Rifkin
April 21, 2004 – July 20, 2004

Major Activities Planned for the Period:

The major activities planned for the period must be taken within the context of revised overall annual workplan requirements. Over the course of the remainder of the year, and extending into the second year of service, the Policy Advisor was charged with three responsibilities:

- To take charge of and revise the content of discussions at the Education Sector Council meetings in such a way that it will serve the needs of the Regional Bureaus and USAID Missions.
 - To develop a protocol for broad discussion and resolution of key issues in the Education sector. This protocol will engage Missions and Bureaus through the use of the Global Learning Portal. These issues will result in a position paper on the issues discussed.
 - To develop and gain consensus agreement upon an operational plan or strategy that will build upon and reinforce the Business Model, the Education Strategy and the Agency White Paper.
1. Meet with as many education related personnel as possible, in order to assess EGAT and Regional Bureau views with relation to the Education Sector Council.
 2. Familiarize oneself with the Global Learning Portal, and various other leadership agendas.
 3. Organize the first revised Sector Council meeting and introduce two critical issues derived from Regional Bureau interest.
 4. Begin the process of developing a fictional case study and role modeling exercise that will integrate and transform the EGAT Education Officer training modules into a real life experience.
 5. Conceptualize and begin implementation of a process to air key issues and for the preparation of the Operational Plan/Strategy.
 6. Continue to provide Technical Support in the education sector in Iraq.

Major Accomplishments of the Period.

1. The Policy Advisor was able to meet with key representatives of all Regional Bureaus and EGAT. He was also able to contact and receive input from Field Missions relative to preliminary key issues.
2. The Policy advisor is now fully briefed on the Global Learning Portal and various other centrally funded programs that offer support to the field.
3. The agenda for the first sector council meeting has been issued with the meeting scheduled for July 28. Considerable planning has gone into the preparation for this meeting, with much of the input derived from meetings with EGAT and Regional Bureau staff. It is the intent that these meetings serve to unify education

staff and provide a forum for them to exchange experiences. It is also envisioned that these meetings will engage field staff through the use of the Global Learning Portal.

4. A fictional case study is currently being prepared with various roles and country characteristics included. This role playing exercise will integrate each of the training modules being prepared by a separate group into a single exercise that will test the judgment of our education field staff.
5. Two key issues have been identified, with committees with reps from Regional Bureaus set up, to follow up on Sector Council discussion of these issues. One issue is staffing and the other is the use of school fees, particularly in Community Schools. These committees will prepare an issues paper and/or recommendations that will be aired with overseas personnel who will provide feedback and field perspective.
6. The Policy Advisor has provided input and technical support to the Office of Iraq Reconstruction and to our Mission in Baghdad. Most of the input was related to the upcoming Education II contract which is just getting underway. Support was also given relative to the higher education portfolio and to the organization of a meeting and public consultation involving the five participating university consortia.

Major activities planned for the next quarter:

1. Implementation of client centered Sector Council meetings.
2. Elaboration of four additional key education issues with resolution of the first two issues.
3. Administration of Role Playing exercise at EGAT and Regional Bureau workshops.
4. Conceptualization of Operational Plan/Strategy, with Mission and Regional Bureau involvement
5. Field support to Iraq and possibly India.
6. Communication of all Sector Council activities to the field, including issues and recommendations arising from discussion of key issues.
7. Participate in cross cutting activities of EGAT and attendance at Health Sector Council meetings.

July 20, 2004

John R. Swallow

Quarterly Report for period April 16—July 20, 2004

Mission Support and Sector Leadership:

1. **Education review for El Salvador.** Led the USAID/Washington review for the five-year education strategy and program for El Salvador. Prior to and after review, consulted widely with USAID/El Salvador staff, personnel in various USAID bureaus, and with officials at the Inter-American Development Bank and the World Bank. Review was well-attended, positively inter-active and participatory in its discussions, and led to recommendations and resolutions on all issues.
2. **Child labor in El Salvador.** Organized and hosted a meeting on dangerous child labor in El Salvador related to the sugar cane industry, and the causes and consequences of that child labor. Resource persons were two professionals from Human Rights Watch, one of whom had led the HRW team in research work in El Salvador and writing the report, which was distributed widely on Capitol Hill and covered in various leading U.S. newspapers. The causes and consequences of this child labor affect education and several other sectors in the Mission's portfolio. The report and discussion were shared with USAID/El Salvador.
3. **GFEI program in the Dominican Republic.** Participated in a meeting/seminar at the U.S. Dept. of Agriculture on the Global Food for Education Initiative (GFEI) program in the Dominican Republic, the only such program in the world by which the GFEI effort is implemented through a government-to-government agreement, and in which USAID and the USDA collaborate closely and fully to implement it. Results were disseminated within the LAC and EGAT Bureaus and to the Mission. Program is being extended another year to consolidate gains made and to enhance chances of continuity.
4. **Haiti.** USG excess property proposal to assist the education sector in the emergency and reconstruction phases in Haiti was advanced by two U.S. Southern Command visits to Haiti. Program will hopefully receive some equipment and materials for the opening of the Haitian school year in September, however one disappointment was that all property and equipment from the closing of the Roosevelt Roads Naval Station (the world's largest) in Puerto Rico will remain in Puerto Rico as gifts to the P.R. government and people.

5. **TDY to Peru.** Along with my supervisor and another Education Team colleague, I participated in a one-week TDY to Peru. This work trip consisted of three related aspects: (1) field trip to San Martin department to learn about the newest and largest USAID/Peru education program; (2) a review of the Mission's education strategy; and (3) participation in the (first) Centers for Excellence in Teacher Training (CETT) Directors workshop. All activities were helpful in understanding the backgrounds, successes, barriers and opportunities for education in Peru and, with the CETT initiative, of advancing reading and writing for/with disadvantaged students and teachers in the hemisphere.
6. **LAC education workshop.** Submitted a memo suggesting five emphases or topics for the biennial LAC education workshop to be held in late September in the Dominican Republic. Several of the topics are included in the preliminary agenda.

Analysis, Policy Formulation and Program Development:

7. **Regional Project on Education Indicators (or PRIE).** Work with PRIE consisted of both collaboration on this Summit of the Americas initiative and taking the lead in preparing for USAID funding of it. Included in my work on PRIE during this quarter were: (a) two meetings in Washington with top officials of the Mexican Ministry of Education (SEP), the entity charged with the hemispheric leadership and coordination; (b) two meetings with the U.S. Dept. of Education; (c) telephonic and memo coordination with the Government of Quebec and CIDA, the Canadian bilateral aid agency; (c) my participation in a hemispheric conference in Mexico to launch phase II of PRIE, and for which I gave a well-received presentation; and (d) considerable work with USAID/Mexico, the Trust of the Americas, OAS and others to prepare for USAID funding for this regional project.
8. **Education Sector Council.** Representing the LAC Bureau, participated in several USAID Education Sector Council meetings, commenting principally on bilateral and regional programs, various education for democracy projects, and the development of education indicators.
9. **Alfalit.** Communicated and coordinated among USAID Missions in Bolivia and the Dominican Republic, EGAT/ED, several LAC Bureau colleagues and the Africa Bureau as this non-formal education and literacy training program—which is a Congressional earmark—moved forward. An obligation of funds will follow shortly.

Program Management:

10. **Partnership for Educational Revitalization in the Americas (PREAL).** Participated in three useful, productive meetings with this USAID regional grantee. Specific activities included ascertaining its financial pipeline, reviewing

its workload and requests for additional tasks and funds, and utilizing PREAL-generated information for various related initiatives, such as the Summit education accountability and the CERCA endeavors.

11. **CETT workshop.** Gathering valuable input from my two Team colleagues who participated in this workshop held in Peru, wrote the executive summary of the workshop. I also reviewed the narrative descriptions of the workshop proceedings.
12. **ALO evaluation.** Responding to a request from EGAT/ED, I met with the head of the team evaluating—for the first time ever—the USAID-financed program with the Association Liaison Office for University Cooperation in Development (ALO) by which university partnerships are created to abet progress in all development sectors while hopefully strengthening the participating post-secondary institutions themselves. Meeting appeared to be productive. I also suggested several other individuals—in and outside USAID—who should be interviewed as they are good sources. All of these persons were interviewed.
13. **Team budget meetings.** Participated with my three Team colleagues in discussing and helping decide on the FY 04 LAC regional education budget, with clear implications for FYs 05 and 06.

Coordination, Representation and Communication:

14. **IDB/IAD seminar on financial allocations and social cohesion.** Participated in a seminar held at the IDB and sponsored by the IDB and Inter-American Dialogue on social cohesion in the LAC area and crises in funding for the social sectors. Communicated the highlights to colleagues in the LAC Bureau, EGAT, PPC and to several USAID Missions in LAC.
15. **Name change for upcoming education project.** Responding to a memo of mine, EGAT/ED and OP personnel decided to change the name of the new—and as yet un-renamed—USAID project to support education activities worldwide. The previous name carried a negative connotation, as it was linked with overuse of drugs and alcohol.
16. **Various activities.** I organized and/or participated in a variety of work-related meetings, such as meetings with several USAID education contractors, an INMED forum on public-private partnerships, YouthBuild, CERCA, and on Summit of the Americas initiatives.

Michelle Ward-Brent, USAID/Egypt Girls' Education TAACS

Quarterly Activity Report – May-July 2004

WEEK OF MAY 3, 2004

1. Drafted comments for Hala on EQUIP 1.
2. Reviewed PMP and made extensive corrections.
3. Continued work on budget and met with Salwa.
4. Met with Mark Koenig on TDY to DG portfolio to review status of Sesame and media environment.
5. Begun preparation of various paperwork required for travel.
6. Attended team meeting.
7. Finalized PIL for Nadia.
8. Revised success story on Sesame for PIR.
9. Attended PIR meeting.
10. Attended meeting with Dr. Cumberland, new staff for E1.
11. Attended team meeting.
12. Attended PMP meeting.

WEEK OF MAY 9, 2004

1. Met with Melinda and SCS to review data quality assessment planning.
2. Met with Andrea and Christine on PMP.
3. Reviewed and disseminated EDdata info and docs to Allen.
4. Reviewed and disseminated AAD info and docs to Julie.
5. Began review of historical docs for proper archiving, etc.
6. Attended SO team partner meeting.
7. Liaised with Karma on follow-up to RIG audit and document submission.

8. Met with Karma and reviewed regional language issues arising from research, new grant actions.
9. Met with Mark Norman of RIG a few times.
10. Attended staff meeting.
11. Attended PIR meeting.
12. Provided edits on AIR letter on technical proposal.

WEEK OF MAY 16, 2004

1. Attended PMP meeting.
2. Met with Mark Norman in RIG on debrief of Karma visit.
3. Met with Melinda on PMP.
4. Liaised with Karma and SW on funding flows, work plan, etc.
5. Attended AAD meeting.
6. Began review of years of electronic documents for archiving, distribution to team or deletion.
7. Drafted strategy paper on Newspapers in Education for ERP.
8. Reviewed team retreat SOW.
9. Retreat AIR technical response.
10. Began preparation of "how to" binder for replacement.
11. Met with team retreat facilitator.
12. Held conference call with SW and Karma on annual work plan, research director, NGO grant timing, etc.

WEEK OF MAY 25, 2004

1. Attended team PMP meeting.
2. Prepared indicator summary for E2.
3. Briefed team on NIE supplements.
4. Liaised with SW and Karma on curriculum seminar and annual workplan.
5. Responded to Embassy Bahrain request for Simsim speaker.

WEEK OF MAY 31, 2004

1. Met with Amr Koura on upcoming NY trip, annual work plan, etc.
2. Prepared Weekly submission on Sesame research.
3. Reviewed Simsim impact assessment.
4. Reviewed STW concept paper.
5. Prepared Action Memo for Amendment to Sesame for incremental funding of grant.
6. Met with Salwa to review funding, MAARD and memo needs.
7. Began drafting response to Indonesia mission.
8. Held conference call with New York Sesame on upcoming plan for September curriculum conference.
9. Attended staff meeting.
10. Liaised with Afghan desk and SW regarding press release and replication.
11. Reviewed draft Local Partnership Initiative briefing paper and provided comment.

WEEK OF JUNE 6, 2004

12. Began drafting cable of Sesame research findings.
13. Continued drafting of Indonesia mission response.
14. Continued review of impact assessment.
15. Attended EQUIP2 partner presentation.
16. Completed M&E summary for EQUIP 2 partners.
17. Liaised with E2 on social marketing.
18. Held conference call with SW on book publishing.
19. Liaised with CEDPA on transition training with Peggy.
20. Reviewed Adele's PEM/MOFA responses and provided edits.

WEEK OF JUNE 13, 2004

1. Edited M&E strategy for team.
2. Reviewed M&E history and drafted outline for E2.

3. Went to Embassy several times on checkout processes.
4. Attended Mission computer security training.
5. Attended meeting with MOFA PEMA staff.
6. Met with John Cumberford of E2 on NIE ideas.
7. Reviewed Kunder bullets and provided comment.
8. Liaised with UNDP and Karma/Sesame on water issues for curriculum.
9. Liaised with SW and Mission on documentary on Sesame worldwide.
10. Liaised with ANE desk on Sesame viewership for annual performance report.
11. Met with Monica to review Sesame MOU and for exchange with GC/Washington.

WEEK OF JUNE 20, 2004

1. Attended briefing to E2 on education reform.
2. Reviewed and organized office documents, check-out, etc.
3. Attended staff meeting.
4. Liaised with SCS and grantee on work in Coptic communities under Simsim.
5. Met with UNDP to brief them on curriculum options and project linkages for water preservation efforts within Simsim.
6. Liaised with legal and drafted response to AID/W GC and OP on MOU.

WEEK OF JUNE 27, 2004

1. Prepared for departure from post and transition of work duties, documentation, etc.

WEEK OF JULY 4, 2004

1. Departed Mission for repatriation to US on July 6.
2. Took annual leave.