

POLICY I PROJECT

September 1, 1995 to
December 31, 2000

FINAL REPORT ANNEX

**CUMULATIVE
PROJECT RESULTS
BY COUNTRY**

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POLICY I Project
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FINAL REPORT ANNEX
CUMULATIVE PROJECT RESULTS BY COUNTRY

This document contains a listing of results at the SO and IR levels achieved over the life of the POLICY I Project. Table 1A shows a tally of results by country and region. Each individual check denotes achievement of a result in that country. The column totals in the table represent the number of countries in which a result at that level occurred. Overall, POLICY achieved 88 SO level results in 33 countries and 149 IR level results in 36 countries. The detailed text of results by country follows Table 1A.

Francophone and Lusophone Country Results

Country	SOa: Political and popular support strengthened	SOb: National and subnational policies, guidelines, and plans developed in support of FP/RH	SOc: Financial and other resources mobilized for FP/RH needs	IR1: Effective advocacy for FP/RH	IR2: Strengthened collaboration among govt. and non-governmental sectors	IR3: More effective planning for FP/RH	IR4: Improved financial management for FP/RH
Benin	✓			✓			
Haiti	✓	✓			✓		
Madagascar		✓		✓			
Mali							
Morocco					✓		
Mozambique					✓		
REDSO/WCA		✓			✓		
Sahel/Cerpod		✓			✓		
Senegal		✓		✓	✓	✓	
TOTAL FAFR # Countries	2	5	0	3	6	1	

Anglophone Africa Project Results

Country	SOa: Political and popular support strengthened	SOB: National and subnational policies, guidelines, and plans developed in support of FP/RH	SOc: Financial and other resources mobilized for FP/RH needs	IR1: Effective advocacy for FP/RH	IR2: Strengthened collaboration among govt. and non-governmental sectors	IR3: More effective planning for FP/RH	IR4: Improved financing for FP/RH
Ethiopia*		✓✓	✓		✓✓		
Ghana		✓	✓	✓✓✓	✓✓		
Kenya*	✓	✓		✓✓	✓		
Malawi*		✓			✓		
Nigeria		✓					
REDSO/ESA							
South Africa		✓✓✓		✓✓	✓✓		
Tanzania		✓✓			✓✓		
Zambia			✓			✓	
Zimbabwe			✓				
TOTAL AAFR # Countries	1	7	4	3	6	1	

*These three countries also show increased scores on the HIV/AIDS Policy Environment Score, an indicator at the overall SO level.

E&E Project Results

Country	SOa: Political and popular support strengthened	SOb: National and subnational policies, guidelines, and plans developed in support of FP/RH	SOc: Financial and other resources mobilized for FP/RH needs	IR1: Effective advocacy for FP/RH	IR2: Strengthened collaboration among govt. and non-governmental sectors	IR3: More effective planning for FP/RH	IR4: Improved financial for F
Kazakhstan	✓	✓✓✓			✓		
Romania			✓	✓	✓✓		✓✓
Russia		✓✓		✓			
Turkey	✓		✓✓		✓✓		
Turkmenistan							
Ukraine	✓	✓✓			✓		
TOTAL E&E # Countries	3	3	2	2	4	0	

ANE Project Results

Country	SOa: Political and popular support strengthened	SOb: National and subnational policies, guidelines, and plans developed in support of FP/RH	SOc: Financial and other resources mobilized for FP/RH needs	IR1: Effective advocacy for FP/RH	IR2: Strengthened collaboration among govt. and non-governmental sectors	IR3: More effective planning for FP/RH	IR4: Improved financial for FP/RH
Bangladesh		✓			✓		
Egypt		✓✓	✓	✓	✓		
India		✓✓✓✓	✓✓✓✓	✓	✓✓		
Indonesia		✓				✓	
Jordan	✓			✓			
Nepal	✓						
Philippines	✓✓✓✓✓✓	✓✓✓✓✓✓	✓✓✓✓	✓✓✓✓	✓✓✓		
TOTAL ANE # Countries	3	5	3	4	4	1	

LAC Project Results

Country	SOa: Political and popular support strengthened	SOb: National and subnational policies, guidelines, and plans developed in support of FP/RH	SOc: Financial and other resources mobilized for FP/RH needs	IR1: Effective advocacy for FP/RH	IR2: Strengthened collaboration among govt. and non-governmental sectors	IR3: More effective planning for FP/RH	IR4: Improved financial for FP/RH
Bolivia	✓		✓✓	✓✓✓✓✓	✓✓✓		
Ecuador							
Guatemala	✓✓	✓		✓✓✓	✓✓		
Jamaica		✓					
Mexico	✓✓	✓✓	✓✓✓	✓	✓✓		
Paraguay		✓					
Peru	✓	✓✓		✓✓✓✓	✓✓✓		
TOTAL LAC # Countries	4	5	2	4	4	0	
TOTAL Countries	13	25	11	16	24	3	

USAID COMMUNITY

- UNAIDS has accepted POLICY projections (AIDSProj) that factor in the impact of HIV/AIDS on future population size in eight countries (Ethiopia, Ghana, Guatemala, Honduras, Kenya, Malawi, Mozambique, and Zambia). (SAR8)
- USAID document prepared for dissemination at Cairo+5 meetings, “From Commitment to Action: Meeting the Challenge of ICPD,” cites POLICY-funded commissioned research findings on abortion and contraception in the Central Asian Republics. (1/99) (SAR7)
- USAID/Deli used SO2 survey results carried out by POLICY in 1997 and 1999 as indicators for their performance based disbursement system.
- USAID/Dar es Salaam includes postabortion FP acceptance as a results package indicator (September 1998). (SAR6)
- USAID/Dakar incorporated POLICY-funded study results into technical annex of their strategic plan. (SAR5)

BANGLADESH

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval or adopted/approved

- The Bangladesh government made a policy change to allow commercials regarding condom use to prevent STD/AIDS transmission to be aired on local television programs as a result of lobby efforts by POLICY's long-term advisor (5/99).

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- In Bangladesh, the TWG (comprising representatives from USAID, CAs, Dhaka University, and the MOHFW) continues to meet on an ongoing basis to discuss the Essential Services Package model. (SAR5,6,7)

BENIN

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- Political and popular support for FP/RH/AIDS increased in Benin as evidenced by statements made by top political leaders during a regional HIV/AIDS workshop in November 1999: the President offered to participate in public information campaigns for HIV/AIDS prevention; the Minister of Justice described the impact of HIV/AIDS on family through the loss of five of his nephews; the chair of the legislative committee proposed measures for the battle against AIDS; the Minister of Public Health stressed the importance of political commitment in the battle; and the Minister of State (responsible for Government Action, Planning, and Work Force Development) authored the preface of the RAPID brochure in March 2000, emphasizing Benin's commitment to the Cairo Plan of Action.

IR1: Effective advocacy for FP/RH

of countries in which government officials, NGOs, or networks conduct FP/RH advocacy events on their own as a result of POLICY assistance

- In Benin, ROBS executed an advocacy campaign oriented to parliamentarians, decision makers, religious leaders, and community leaders, to raise awareness of the need to implement RH services for adolescents. (SAR 10)

BOLIVIA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval or adopted/approved

- Municipal Councils of Riberalta (Bolivia), Trinidad (December 1999), Exaltacion (January 2000), and Cobija (April (2000) approved Municipal Development Plans that included RH projects (IEC for FP, programs to address violence against women) over and above the obligatory National Maternal and Child Health (MCH) Insurance. (SAR7-9)

SO(c): Financial and other resources mobilized for FP/RH needs
of countries with increased budgetary allocations for FP/RH

- The municipal development plans of Cobija, Comarapa, Exaltacion, Riberalta, Santa Ana, and Trinidad in Bolivia funded budget line items for SRH activities outside of the Maternal/Child Health Insurance (9/99). (SAR8-10)
- The Department of Chuquisaca, Bolivia, allocated resources for six additional staff to implement a pilot sex/RH education program in six local high schools. (SAR6)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Two NGOs in Tarija, Bolivia (ECAM and CCIMCAT) carry out advocacy activities on their own. ECAM activities designed to convince municipal officials to include activities and resources that promote women's sexual and reproductive health in the Annual Operational Plan. CCIMCAT's campaign was designed to call attention of municipal officials to the need to address the disease known as Chagas, because of its negative repercussions on reproductive functions. (SAR10)
- Participants from departmental advocacy workshops in Bolivia collaborated with local youth groups to organize and conduct a series of advocacy events to convince candidates to incorporate SRH issues, particularly the SRH needs of youth, into their 1999 election platform (Oct.-Nov. 1999).
- Members of the Casa de la Mujer/Santa Cruz in Bolivia who received advocacy training from POLICY organized and conducted a campaign to advocate for the creation of a Gender Office in the municipality of El Torno, which was officially inaugurated in July 1999. (SAR8)
- CNM, a local women's NGO advocacy network, conducted numerous advocacy activities on their own which were designed to bring SRH issues to the forefront of local political agendas. (SAR5-8)
- PROCOSI carried out a national advocacy campaign prior to 1997 presidential elections to get major political parties to address sexual/reproductive health needs in their parties' platform. (SAR4)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or continue to meet on an ongoing basis

- After a POLICY-sponsored participatory planning workshop in 1998, the mayor of the municipality of Trinidad, Bolivia formed a Participatory Planning Committee composed of representatives from local government, NGOs, and community organizations. (SAR6)
- NGOs and a government ministry in Bolivia collaborate for the first time in November 1997 to conduct an advocacy workshop for First Lady's Office and wives of high-level government officials. (SAR5)

- CNM advocacy network in Bolivia has members from the public, NGO, and private sectors and meets regularly to plan and carry out advocacy activities. (SAR5,6)

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- The municipal development plans of Santa Ana and Comarapa in Bolivia used demographic and population information from databases developed by the Unit of Population Policy (UPP). (SAR8)
- The results of a POLICY-supported research study on RH were used in the first stage of a participatory planning process in Oruro, Bolivia. In Chusquisaca, the Education Board used a POLICY/FHI-supported study on local adolescent RH to develop a sex/RH education program. (SAR6)
- Local governments in Bolivia use detailed projections for 311 municipalities in their decentralized budgeting and planning processes for social services. (SAR2)

of national/subnational policies/plans that use information produced with support from POLICY

- Six municipal development plans in **Bolivia** use demographic and population information from databases developed by the Unit for Population Policy within the Ministry of Sustainable Development. (SAR9)
- Participants from departmental advocacy workshops in **Bolivia** collaborated with local youth groups to organize and conduct a series of advocacy events to convince candidates to incorporate SRH issues, particularly the SRH needs of youth, into their 1999 election platform (Oct.-Nov. 1999). Two NGOs in Tarija (ECAM and CCIMCAT) that participated in POLICY's departmental advocacy training workshops carried out advocacy activities on their own. ECAM activities designed to convince municipal officials to include activities and resources that promote women's sexual and reproductive health in the Annual Operational Plan. CCIMCAT's campaign was designed to call attention of municipal officials to the need to address the disease known as Chagas, because of its negative repercussions on reproductive functions.

ECUADOR

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- CEMOPLAF in Ecuador used willingness-to-pay results from the Price Elasticity of Demand Study to set prices for services and implement a cost-recovery scheme. (SAR4)

EGYPT

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

of countries with national/subnational policies, plans, guidelines in support of FP/RH adopted/approved

- The Ministry of Youth in Egypt adopts National Strategy for IEC in Reproductive Health on June 17, 2000, including the activity plan for conducting population awareness activities for youth in the universities.
- Between September 1995 and September 1998, the National Population Council prepared governorate-level strategic plans for the population sector in 23 of Egypt's 26 governorates. As of December 1998, governors of all 23 governorates had formally adopted the strategic plans. (SAR6,7)

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public or private) for FP/RH

- In response to advocacy efforts of "Natural Leaders" in Egypt, family planning advocacy efforts were successful in getting local government to establish nine FP centers in four governorates, increasing mobile clinics to twice per month in the villages of five governorates, and opening health units and providing equipment in six governorates. (SAR7)

IR1: Effective advocacy for FP/RH

of countries in which government officials, NGOs, or networks conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Pursuant to POLICY/National Population Council advocacy training, "Natural Leaders" in three villages carried out successful advocacy campaigns and obtained resources for FP/MCH clinics and supplies in their respective villages. (SAR7)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time

- Representatives from the NGO sector are included by design on all governorate strategic planning teams to ensure that NGO interests are represented in the strategic plans and to foster intersectoral collaboration. (SAR5,6)

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- President Mubarak of Egypt cited POLICY's population projections in a nationally televised election-night interview on the dangers of rapid population growth. USAID/Cairo also used the projections to update its strategy and estimates of the future demand on maternal health and family planning services. (SAR8)

ETHIOPIA

SO: Improved policy environment for FP/RH programs, including HIV/AIDS

- The HIV/AIDS Policy Environment Score improved from 44.8 in 1998 to 50.3 in 2000.

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH **# of countries with national/subnational policies, plans, guidelines in support of FP/RH adopted/ approved**

- National AIDS Council in Ethiopia officially established on April 22, 2000 with the responsibility for coordinating and integrating HIV/AIDS initiatives. POLICY assisted in developing the regulations establishing the council. In addition, the Addis Ababa Regional AIDS Council formed in February 2000; Tigray Regional HIV/AIDS Board established (1998); Amhara Regional HIV/AIDS Task Force formed in 1999 (POLICY provided TA in setting up regional councils and provided equipment and training to their secretariats).
- USAID/Addis Ababa prepared a reporting cable identifying AIM presentations and a review meeting for leaders on the status of the epidemic organized by POLICY as contributing factors to the adoption of *Policy on HIV/AIDS of the Federal Democratic Republic of Ethiopia* in August 1998.

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public or private) for FP/RH

- The National Anti-HIV/AIDS Task Force in Ethiopia (a coalition of religious leaders) identified resources, manpower, and resources to finance TOT and training sessions for church officials in six regions. The training was considered the first step in establishing HIV/AIDS prevention and control programs in each local congregation participating in the training. (SAR9)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or there is evidence of ongoing collaboration

- Regional HIV/AIDS boards in Addis Ababa, Tigray, and Amhara (Ethiopia) each includes government and nongovernment representatives and meets approximately once a month since inception. (SAR10)
- Efforts to involve civil society organizations in the policy implementation process in Ethiopia resulted in the establishment of a National Anti-HIV/AIDS task force with three technical committees. (SAR9)

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- “Policy on HIV/AIDS of the Federal Democratic Republic of Ethiopia” (August 1998); the “Strategic Framework for the National Response to HIV/AIDS for 2000-2004” (September 1999); the Ministry of Health’s “Summary: Federal Level Multisectoral HIV/AIDS Strategic Plan 2000-2004” and “Summary: Regional Level Multisectoral HIV/AIDS Strategic Plan 2000-2004” (September 1999) all use information produced from POLICY-supported AIM booklets and national estimates and projections.

GHANA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH adopted/ approved

- The Minister of Health approved Ghana's National AIDS Policy, which was finalized at a national Consensus Workshop on August 16, 2000. The policy was submitted to the cabinet and awaits cabinet and presidential approval.

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public or private) for FP/RH

- The Standard Chartered Bank of Ghana, Ltd., made a donation to the National AIDS Control Program in the amount of C8 million (*Cedis*) or US\$3,076. This represents Ghana's first major private sector donation to the AIDS awareness effort. (SAR8)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Local networks in Eastern Region of Ghana remained active in carrying out advocacy events including a *durbar* for chiefs and seminars for District Assembly members and heads of decentralized departments to sensitize them on population and RH issues, dangers of teenage pregnancy, and the need for girls education. (SAR8)
- Since 1998, the University of Ghana's Population Impact Project (PIP), as part of an overall advocacy strategy, made numerous presentations and held discussions with policymakers to advocate for continued support for the FP/RH program in Ghana. Audiences included the District Chief Executive in Akwapim South district, various church groups, the Department of Community Health, the Ghana Institute of Journalism, senior staff of the Ghana Armed Forces Military College, Parliamentarians, and members of the cabinet. (SAR6-10)
- Kwaebibirem District network in Ghana advocated for FP/RH issues to District Assembly and also gained support from the Local Council of Churches for future advocacy efforts. (SAR7)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or there is evidence of ongoing collaboration

- The Regional Population Advisory Committees (RPACs) in eight regions of Ghana, have received training and carried out advocacy activities in support of population and development activities, including FP/RH and HIV/AIDS. RPACs are composed of public and private sector representatives. RPACs met with District Assemblies and other opinion leaders to form district-level responses to vexing development issues. In one region, collaborative work culminated in the preparation of a new initiative called "The HIV/AIDS District Response Initiative." (SAR10)
- Four district RH advocacy networks in Ghana have members from the public, NGO, and private sectors and meet regularly to plan and carry out advocacy activities. (SAR6,7)

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- Ghana's recently launched National Communication/Media Campaign against HIV/AIDS draws on AIM analysis. FamPlan projections used to determine targets and program direction for FP/RH program for the Family Health Department and USAID HPN office. Three District Assembly Development Plans cite data generated by Spectrum. (SAR9)
- Pricing strategy for contraceptive commodities finalized in Ghana based on findings from POLICY-funded pricing study. The POLICY study found that setting a pricing policy in isolation would have no lasting affect without structural and systematic changes, including an appropriate system of incentives, monitoring, and accountability. (SAR5)

of national/subnational policies/plans that use information produced with support from POLICY

- The draft adolescent RH policy of Ghana's National Population Council used results of the Spectrum NewGen Model to identify targets for its new adolescent reproductive health policy. The National AIDS Policy also cites AIM results. (August 2000)

GUATEMALA

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- Political and popular support for women's integrated health increased in Guatemala as evidenced by the following: The Minister and Vice Minister of Health publicly pronounce in favor of FP/RH (March 2000); Women's Network for Peace and the Cairo Action Group members pronounce themselves in support of FP/RH initiatives of the Ministry of Health (March 2000); and 25 political and civil society leaders manifest support for FP/RH, gender equity, and women's participation in TV/radio programs and in newspapers between October 1999 and March 2000.
- Political and civil society leaders in Guatemala demonstrate support for population, FP, and women's health programs. Six members of the Cairo Action Group (CAG) publicly pronounce themselves in favor of Cairo's commitments; the sub-secretary of planning (SEGEPLAN) publicly endorses the Law for the Promotion and Dignification of Women; the Central American Parliament ratifies their support through a press release of Resolution AP/9C11-99; and numerous political and civil society leaders manifested support through publication of articles in the monthly edition of the *La Cuerda Supplement*. (SAR8)

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval or adopted/approved

- The Guatemalan Congress ratified the "Law for the Promotion and Dignification of Women" that establishes women's right to integrated health, FP, and RH and access to prenatal and postnatal services. (A result of an advocacy campaign by CALDH, the Center for Legal Action and Human Rights. The law was published as Article 5 in *Diario Oficial* on April 9, 1999. (SAR8)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Networks and NGOs active in RH in Guatemala organized and implemented effective advocacy programs. The Center for Legal Action and Human Rights (CALDH) conducted one national and five regional forums and community organizations organized and implemented local advocacy actions in five departments on the subject of women's reproductive health. Three other advocacy organizations (Matria, AGMM, and the Cairo Action Group) developed campaign proposals, executed them, and obtained results. (SAR8)
- In Guatemala, the Center for Legal Action in Human Rights (CALDH) continues to conduct an ongoing reproductive rights advocacy campaign. (SAR6)
- Advocacy networks in Guatemala (AGMM) carried out advocacy campaigns on their own on such issues as women's participation, reproductive rights, human sexuality, and women's empowerment. (SAR6,7)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or sector continue to meet on an ongoing basis

- Women's Network for Building Peace advocacy network in Guatemala has members from the public, NGO, and private sectors and meets regularly to plan and carry out advocacy activities. (SAR6,7)
- The Guatemalan Congresswomen's Commission invited NGOs to participate in forums on women's participation in Congress for the first time. (SAR6)

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- APROFAM, IGSS, and MOH strategic plans for reducing medical and institutional barriers against family planning in Guatemala used information produced from POLICY studies. (SAR9)

HAITI

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- In Haiti, high-level officials of the executive and legislative branches, including the President, have explicitly stated their strong commitment to formulating and implementing population and human development policies and actions. (SAR5)
 - Ministry of Environment commits to integration of demographic variables in National Environmental Action Plan (2/96)
 - Senate appoints Population Advisor (4/97); MOH appoints population Advisor (7/97)
 - The Minister of the Interior/Health appointed a committee to make recommendations for the creation of a population agency. (SAR6) President endorses creation of state agency to address population issues (date)
 - Parliament announced in the bimonthly bulletin the creation of a Legislative Network on Population (2/98)

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval or adopted/approved

- The State Secretary of Population in Haiti completed the country's first comprehensive national population policy proposal resulting from a participatory process, incorporating input from experts in every sector, 18 public hearings in nine departments, and a national consensus workshop. The State Secretary for Population approved the National Population Policy, which was presented to the public on July 11, 2000, on World Population Day.

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time

- The Secretariat of State for Population (SEP) and the civil society task force signed a formal agreement to collaborate on all aspects of developing the national population policy (7/99), representing the first time government and civil society organizations in Haiti have collaborated on national policy formulation. (SAR8)

IR4: Improved financing for FP/RH

of countries with new budget line item for FP/RH

- U.S. foundations committed US\$5 million to Haitian NGOs in response to presentations based on "A Call to Action" in support of RH activities. (SAR7)

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- The MOH in Haiti adopted AIM projections as its official HIV/AIDS projections.
- "Call to Action" document produced with POLICY funding presented to U.S. private foundations to obtain funding for support of population and RH activities in Haiti. (SAR6)

INDIA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH
adopted/approved

- The Chief Minister of Madhya Pradesh, India and Cabinet ministers approved the MP Population Policy on January 11, 2000. The Department of Health and Family Welfare approved the operational plan for implementation of the population policy.
- Rajasthan Reproductive and Child Health Policy submitted to Ministry of Health and Family Welfare for approval (December 1998); circulated to the Council of Ministers (January 1999). The Rajasthan (India) Council of Ministers approved the policy on July 31, 1999. The Department of Health prepared and approved an operational plan for implementing the policy. (SAR7&8)
- Five district action plans approved by State Innovations in Family Planning Services Agency (SIFPSA), government of Uttar Pradesh, and USAID. (SAR5). SIFPSA approved action plans for four additional districts in September 2000.
- State Assembly in Andhra Pradesh passes state population and RH policy. (SAR3)

SO(c): Financial and other resources mobilized for FP/RH needs
of countries with increased local resources (public or private) for FP/RH

- The government of Madhya Pradesh, India provided an additional budget of US\$1.2 million for implementation of the population policy (January 2000).
- The Governing Body of SIFPSA approved a budget of \$3.45 million from bilateral funds for a Contraceptive Marketing Project in Uttar Pradesh, India. (SAR9)
- SIFPSA disbursed US\$2.3 million for implementation of DAPS in four additional districts in Uttar Pradesh, India (September 2000), \$2.6 million for implementation of five district action plans (SAR5), and 30 million rupees to implement the Rampur district FP/RH action plan. (SAR4) See SO(b) above.
- Chief Minister and Cabinet of Andhra Pradesh commit state government to increase FP/RH budget by \$5 million for FY97-98 as part of new policy approved by the State Assembly. (SAR2,3)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Pursuant to the passage of the state Population Policy, the Health and Family Welfare Department of Uttar Pradesh, India, conducted a major advocacy campaign in 84 state districts on the legal age at marriage and the health benefits of delayed marriages. NGO and private sector representatives, together with government officials and political leaders, participated in the advocacy campaign (October 2000).

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or sector continue to meet on an ongoing basis

- Government technicians, NGOs, and locally elected leaders in India engaged in local policy dialogue as evidenced by multisectoral involvement in the Madhya Pradesh policy formulation process; participation in a Uttar Pradesh workshop to identify key RCH issues for consideration in policy development; and identification of interventions to be included in district action plans in four districts. (SAR9)
- Strategic planning workshops for FP/RH in Uttar Pradesh, India involve nongovernmental representatives for the first time. (SAR2)

IR4: Improved financing for FP/RH

of countries with new budget line item for FP/RH

- The Andhra Pradesh, India state government in India signed a one-year 44,200,000 Rupees contract with Hindustan Latex Limited (HLL) to initiate a statewide social marketing program. This US\$1.016 million program is a direct result of the POLICY-supported State Population Policy adopted in 1998, which called for a reinvigorated social marketing program for condoms and oral rehydration salts. (SAR8)

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- Data from marketing studies in UP, India used to set benchmarks and to identify indicators for marketing project in UP. (SAR9)
- USAID/New Delhi used results from 10,000 household sample survey in IFPS districts of Uttar Pradesh, India to review strategic objectives. (SAR9)
- Rapid assessments of SIFPSA projects result in scaling up of successful FP/RH projects throughout Uttar Pradesh. (SAR4)

of national/subnational policies/plans that use information produced with support from POLICY

- Baseline survey data collected from 1,500 households in each of four districts used in the preparation of four district action plans in Uttar Pradesh, India. (SAR9)
- The RCH policy in the Indian state of Madhya Pradesh used SPECTRUM results in setting the objectives the policies would address. (SAR8)
- The RCH policy in the Indian state of Rajasthan used SPECTRUM results in setting the objectives the policies would address. (SAR8)
- India (Uttar Pradesh) market research studies provide empirical basis for Market Plan adopted by GOI (Uttar Pradesh) and SIFPSA in 1998. (SAR6)

INDONESIA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval or adopted/approved

- In Indonesia, Presidential Instruction No. 8, issued on July 8, 1999 instituted the National Movement for Intervention on Food and Nutrition. Decree No. 15 of the Coordinating Minister for Social Welfare and Poverty Alleviation was issued on July 15, 1999. (See also IR5) (SAR8)

IR3: More effective planning for FP/RH

of countries with improved national/subnational plans or planning processes

- BKKBN's internal multidisciplinary Policy Management Group plays an instrumental role in improving the planning process in Indonesia and in developing a strong policy foundation for sustainable FP/RH programs according to an independent evaluation (May 2000).

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- In Indonesia, BKKBN's 2000-2005 strategic plan and the Five-Year National Development Plan incorporate findings from POLICY-supported New Era symposium. (SAR10)
- In Indonesia, Presidential Instruction No. 8 instituting the National Movement for Intervention on Food and Nutrition incorporated recommendations for POLICY research on the Crisis Center Rapid Survey Report of malnutrition in four provinces. Decree No. 15 of the Coordinating Minister for Social Welfare and Poverty Alleviation is based on Presidential Instruction No. 8. (SAR8)
- All eleven provinces in Indonesia in which personnel were trained in the use of the Demand Fulfillment Cost Model have adjusted demographic objectives to reflect the model's findings ("Province-Specific Demand Calculations Through the Year 2010"). (SAR8)

JAMAICA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH
adopted/approved

- National Family Planning Board in Jamaica submits Five-year Strategic Plan (2000-2005) to Minister of Health and other representatives of the MOH on June 29, 2000. They fully accept and endorse it for implementation.

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from *POLICY*

- Results from NFPB's presentation/analysis on "Reproductive Health in Jamaica: Analysis of Current Reproductive Health Status, Gaps, and Opportunities" used as the basis for developing the MOH strategic plan for family planning. (SAR9)

JORDAN

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- Chief Justice of Religious Courts in Jordan prepared the document Islam Stance on Family Planning in 1998 upon a request from the general secretariat of the National Population Commission (NPC) as a result of POLICY-supported advocacy activities among religious leaders. The booklet is a FATWA, a document from the highest religious authority in the country endorsing FP. Since then, the document was disseminated as advocacy material in several POP/RH/FP conferences and workshops organized by the NPC for religious and community leaders, policymakers, and the media. The booklet came as a result of POLICY-supported advocacy activities among high-level religious leaders, board members, and the general secretariat of the NPC.

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- The Jordanian National Forum for Women conducted 23 workshops on women's political participation in preparation for municipal elections. Eight women were elected to the municipal councils of three regions. (SAR8)

IR4: Improved financing for FP/RH

of countries with new budget line item for FP/RH

- USAID completed an agreement with the government of Jordan to establish an endowment for the National Population Council valued at \$4.3 million. POLICY assisted in the design and preparation of the endowment. (SAR9)

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- Results from POLICY document, "Setting National Goals for Family Planning and Reproductive Health," (August 1997) incorporated into revised goals for the Jordanian National Population Strategy. (SAR7)

of national/subnational policies/plans that use information produced with support from POLICY

- Jordan's National Development Plan (Chapter 8 on Population and Reproductive Health) and the National Population Strategy use data from POLICY-supported studies. (SAR10)

KAZAKHSTAN

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- Based on presentations and technical analyses of recent data (including POLICY-supported studies and Spectrum analyses), the Prime Minister of Kazakhstan withdrew recommendations for a fertility stimulation programs, saying that the recommendations would be revised in accordance with the opinions expressed by the majority of persons attending conference on International Population Day, July 7, 2000. He charged the Agency for Demography and Migration and the Agency for Strategic Planning to review and revise plans for repatriate and refugee settlement and to determine funding requirements to implement the agreed upon recommendations.

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval or adopted/approved

- KIAWG (Kazakhstan Interagency Working Group) of the National Committee on Women and Families drafted a National Policy of Reproductive Health in June 2000. The National Committee on Women will shepherd the policy through the government system, first at the ministerial level, then at the parliamentary level.
- Resolution 999 (July 19, 1999) on the “National Plan on Improving the Status of Women in Kazakhstan” was approved by the National Committee on Women and Families under the President of the Republic of Kazakhstan. The action plan was prepared by KIAWG with participation from the NGO Women in Kazakhstan for Future Generations (6/99). (SAR8)
- In Kazakhstan, the “President’s Policy on the Health of the Population” was approved in November 1998 and included an article in support of family planning prepared by KIAWG. (SAR7)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or there is evidence of ongoing collaboration

- The National Commission on Women and Families granted formal recognition to KIAWG, enhancing its credibility in the spheres of FP/RH and demography. The committee is a multisectoral group of government ministries/agencies and NGOs concerned with improving the quality of life for women and families. KIAWG has been an active participant in the policy process since June 1999. KIAWG’s members are acknowledged in the page credits of the National Policy on Reproductive Health, thus documenting the multisectoral collaboration that led to the policy’s development. (SAR8-10)

IR4: Improved financing for FP/RH

of countries with new budget line item for FP/RH

- In October 1999, the Minister of Finance in Kazakhstan provided a line item in national and local budgets for FY 2000 specifically for RH services to be provided by the Agency for Health. The budget of 3,419.6 million Tenge for local budgets represents 7.7 percent of total government budget for RH/Safe Motherhood.

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- Agency for Demography and Migration in Kazakhstan used information from SPECTRUM application to change program focus from stimulating fertility to relying on return migration and improving the health of the population to attain its demographic objectives. (SAR7)
- “President’s Policy on the Health of the Population” draws on research from POLICY’s Global Policy Research Program entitled “Replacement of Abortion by Contraception in Three Central Asian Republics.” (SAR7)

of national/subnational policies/plans that use information produced with support from POLICY

- The technical analyses and graphics in Kazakhstan’s draft National Policy on Reproductive Health are based on results from Spectrum models (June 2000).

KENYA

SO: Improved policy environment for FP/RH programs, including HIV/AIDS

- The HIV/AIDS Policy Environment Score improved from 41.6 in 1996 to 57.6 in 1998.

SO(a): Political and popular support strengthened

countries where political or civil society leaders made public statements in support of FP/RH

- In November 1999 at a Conference in Mombasa for Members of Parliament, President Moi stated that “AIDS is a national disaster.” This was the first time the President made such an unequivocal statement about HIV/AIDS, which led to a great leap forward in HIV/AIDS policy, program development, and funding, and to the formation a few months later of the National AIDS Control Council in the Office of the President. The President’s statement was the culmination of many regional forums for MPs during the previous year that were organized and conducted by POLICY, KANCO (with funding and TA from POLICY), and other POLICY partners.

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

- In November 2000, the Ministry of Education announced that its AIDS curriculum was ready for distribution to schools. The decision to provide AIDS prevention education in schools was taken immediately following—and was a direct result of—the President’s declaration at the November 1999 Mombasa Conference.

IR1: Effective advocacy for FP/RH

of countries in which government officials, NGOs, or networks conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Several presentations were made by the Kenya AIDS NGOs Consortium (KANCO) on RH Advocacy for Youth, in accordance with the KANCO’s advocacy plan.
- KANCO made numerous advocacy presentations on implementation of the *AIDS Sessional Paper*, in accordance with KANCO’s advocacy plan.

IR2: Strengthened collaboration among government and NGO sectors

of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- Participants in KANCO workshops from government, NGOs, and the private sector continue to meet at least two times per year after the workshops.

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- National HIV/AIDS Strategic Plan in Kenya uses revised national HIV estimates produced by group of experts including POLICY staff (May 2000).
- POLICY-sponsored AIDS in Kenya booklet used as the main source of empirical information in the preparation of the Sessional Paper No. 4 of 1997 on AIDS in Kenya.
- New population and FP analyses and projections made using SPECTRUM (and published in April 2000 by NCPD in collaboration with MOH and POLICY) have been incorporated into several official GOK planning documents.

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- Analyses and projections made by POLICY (November 1999–April 2000) of the number of condoms needed during 2000-03 were used to develop the GOK’s condom procurement strategy/plan in discussions and negotiations (April–August 2000) with the World Bank and other stakeholders about a new World Bank loan.

MADAGASCAR

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH adopted/approved

- PNLS (national AIDS organization) in Madagascar develops and approves guidelines for treatment of STDs. (SAR5)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- The national HIV/AIDS organization (PLNS/LNR) in Madagascar implemented an advocacy plan based on “Etude de l’impact socio-économique du SIDA à Madagascar” and its associated video. PLNS/LNR conducted over 52 advocacy events in four cities targeted to key stakeholders during the period April 1997 to June 1998. (SAR6)

MALAWI

SO: Improved policy environment for FP/RH programs, including HIV/AIDS

- The HIV/AIDS Policy Environment Score improved from 48.8 in 1998 to 72.5 in 2000.

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH # of countries with national/subnational policies, plans, guidelines in support of FP/RH adopted/approved

- Malawi's National HIV/AIDS Strategic Framework and Agenda for Action approved by President Muluzi on October 29, 1999 at a national HIV/AIDS launch of the strategic plan.

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- In Malawi, NAS (National AIDS Secretariat) with POLICY support, leads an 18-month participatory national HIV/AIDS strategy development process that involves NGOs and the private sector. (SAR6,7,8)

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- Malawi's "National Response to HIV/AIDS for 2000-2004: Combatting HIV/AIDS with Renewed Hope and Vigor in the New Millennium summarizes results of September 1999 AIM projections and briefing book.

MALI

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- In Mali, GTZ implemented recommendations from the legal and regulatory/political economy study to strengthen policy and programs of community health associations in the MOPTI region. (SAR9)

MEXICO

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- Between July and September 1998, the Health Commissioners in Yucatan and Guerrero pledged publicly to support the state-level Multisectoral Citizens Groups (MCG) in the implementation of a multisectoral strategic plan for HIV/AIDS prevention and services and provided funds to the groups to help conduct some of its activities. (July-September 1997)
- Federal District of Mexico opened the Federal District Office of HIV/AIDS and installed a program director and council members. The CODFSIDA is the first district-government-supported program to address the HIV/AIDS epidemic in the city and surrounding areas. (February 2000).

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

of countries with national/subnational policies, plans, guidelines in support of FP/RH adopted/approved

- The National AIDS Council approved the Yucatan, Mexico multisectoral plan (February 2000); the State Secretary of Health approved it in June 2000 and submitted it to the Governor of Yucatan for approval on July 18, 2000.
- The HIV/AIDS multisectoral plan in Guerrero (Mexico) has been approved by the State Secretary of Health and other organizations identified in the plan.

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public or private) for FP/RH

- The Guerrero and Yucatan MCGs obtained funding from private and public sources to cover the costs of training workshops on HIV/AIDS for 124 and 140 health workers, teachers, and others (7/99). These were the first state-level courses in basic aspects of HIV/AIDS.
- Since April 1999, the Federal District government in Mexico has been paying a consultant to design and coordinate the new HIV/AIDS/STD program for the Federal District.
- In October 1998, the Yucatan MCG obtained funds from 22 sources, including government, commercial firms, and NGOs to help cover the costs of a training workshop in HIV/AIDS for health care providers.

IR1: Effective advocacy for FP/RH

of countries in which government officials, NGOs, or networks conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Members of the Multisectoral Citizen's Group in Yucatan launched a letter writing campaign to the President of Mexico, CONASIDA, and the media, to advocate for the long overdue establishment of a laboratory in the state capable of HIV/AIDS testing and treatment needs, per national guidelines. The campaign succeeded in forcing the State Sec. of Health to yield on the issue and promise to set aside funds for the facility. (SAR9)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or continue to meet on an ongoing basis

- In the Federal District, the newly formed CODFSIDA included representatives from the government, NGOs, and the private sector, reflecting POLICY's advocacy efforts to involve civil society in HIV/AIDS/STI policymaking bodies.
- Since 1998, the MCGs in Guerrero, Yucatan, and the Federal District have met regularly, carried out activities, and obtained funds from public and private sources in support of their activities. The MCGs

are composed of individuals from the public and private sectors, as well as civil society organizations. (SAR7-10)

IR4: Improved financing for FP/RH

of countries with new budget line item for FP/RH

- In March 2000, the Mexico State Secretary of Health agreed to set aside a section of a state health facility for use by the multisectoral planning group to establish a resource collection/reference center for HIV/AIDS/STIs.
- As a result of advocacy efforts of the POLICY-supported advocacy groups in 2 states, the state budgets in Yucatan and Guerrero show increased line items for HIV/AIDS/STI activities (February 2000). In the Yucatan, this is the first time that state funds have been allocated specifically for HIV/AIDS/STIs (2 million pesos). In Guerrero, the state increased funding by 6 percent over the 1999 budget.

MOROCCO

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time

- Regional public-private sector Committee on Health and Population formed (June 2000) in Sous-Maara-Draa, Morocco.

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- In Morocco, the MOH used results from the FAMPLAN model to develop national FP objectives that were submitted to the Prime Minister's office for use in the national Five-Year Plan (1999–2003). (SAR6)

MOZAMBIQUE

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or there is evidence of ongoing collaboration

- Official recognition of the multisectoral technical group and its activities manifest in the authorship of the government publication: *Demographic Impact of HIV/AIDS in Mozambique* (August 2000).

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- Government publication, *Demographic Impact of HIV/AIDS in Mozambique* (August 2000), includes directive that all sectoral impact studies use the demographic projections in the document, which were produced with AIM.

of national/subnational policies/plans that use information produced with support from POLICY

- The National AIDS Control Program in Mozambique adopted the AIDSProj projections produced with POLICY assistance as the official projections of the epidemic. The projections are included as part of the Mozambique National Strategic Plan for HIV/AIDS. (SAR8)
- Projections from RAPID presentation in Mozambique incorporated into final version of the National Population Policy (October 1998). (SAR7)

NEPAL

SO(a): Political and popular support strengthened

of countries with increased percentage of identified political or civil society leaders who support FP/RH

of countries where political or civil society leaders made public statements in support of FP/RH

- POLICY supported the development of RAPID and Cost-Benefit models for Nepal. The results of the RAPID model was developed into a video, a booklet, and PowerPoint presentation. The Cost-Benefit model was used in a PowerPoint presentation format. A social science research organization (New Era) disseminated the policy tools to a variety of audiences including government ministries, training institutions, NGOs, journalists, parliamentarians over a period of 16 months. The impact of the dissemination was monitored through a media scan. Results of the media scan show a 57.7 % increase (26 vs. 15 articles) in the number of articles covering FP/RH. (SAR9)

IR4: Improved financing for FP/RH

of countries using planning processes that consider the relative cost-effectiveness of FP/RH services

- The MOH in Nepal implemented a planning process for setting priorities in RH that considers the cost-effectiveness of FP/RH interventions as one of the main criteria. (SAR7)

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- In Nepal, MOPE conducted five meetings to review past demographic data and develop revised projections, developed a multifaceted dissemination plan, and conducted two dissemination events. The National Planning Commission approved the projections, which formed the basis for the targets in the Ninth Development Plan 1997-2002. (SAR6)
- MOPE used sectoral plans developed with POLICY assistance in the annual planning cycle. (SAR7)

NIGERIA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH
adopted/approved

- President of Nigeria established an Interministerial National Action Committee for HIV/AIDS to replace the national AIDS & STDs Control Program and the Presidential Commission on AIDS (December 1999).

PARAGUAY

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH
adopted/approved

- The Secretary of the Technical Planning Secretariat in Paraguay signed a resolution in February 2000 to create a Population and Development Unit within the Secretariat.

PERU

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- The Department of Health and the RNPM (Red Nacional de Promocion de la Mujer) Departmental Network in Peru signed an agreement for implementation of citizen surveillance committees on reproductive and sexual health in the department of Callao (5/99). (SAR8)

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval or adopted/approved

- Law 27240 in Peru, approved in December 1999, grants permission for working mothers to nurse their infants on the work premises. The law was passed as a result of activities conducted under a minigrant to Asociacion Aurora Vivar, associated with the National Network for the Promotion of Women.
- “Plan Nacional de Poblacion 1998-2002” approved by the President of Peru in December 1998.

IR1: Effective advocacy for FP/RH

of advocacy networks that conducted periodic advocacy activities for FP/RH issues without POLICY assistance

- Advocacy campaigns implemented by regional members of the RNPM in Peru in 2000 included the following: candidates from six political parties signed a commitment to legislate in favor of sexual and reproductive health (Cusco, March 25); candidates from five political parties signed a commitment to legislate in favor of sexual and reproductive health (Huancavelica, March 29); Health departmental directors from Tumbes, Piura, and Lambayeque signed an agreement with the Northern Network to support the Reproductive Health Surveillance Committees promoted by the network; Ica’s Prefecto, local authorities, and the Departmental Network signed an agreement to collaborate in the implementation of adolescent sexual and reproductive health policies (Ica, July 22); six Arequipa district mayors, the local MOH Director, and the NGO ASERVIR signed a commitment to assist municipalities to include sexual and reproductive rights in their plans (Arequipa, July 22); Vice’s Local Committee for Health Administration signed an agreement with the NGO CEPROMUJJ for the implementation of a reproductive health commission (Piura, July 24); and Chachapoyas’ authorities, MOH representative, Departmental Network, and five grassroots organizations signed an agreement to coordinate intersectoral activities for the prevention of gender violence (Amazonas, July 25).
- The North Regional Network in Peru conducted policy dialogue forums on sexual and reproductive health and rights addressed to political candidates to the National C42 Congress. Candidates from five political parties signed a commitment to legislate in favor of sexual and reproductive health (March 2000).
- In Peru, ReproSalud conducted three subnational advocacy campaigns to obtain commitments from the health sector to improve RH services and five national campaigns to sensitize health authorities to women’s needs and facilitate collaboration between the MOH and grassroots organizations. (SAR6)
- RNPM carried out numerous advocacy campaigns on its own to advance the Cairo agenda, local government policies on RH, sexual and reproductive rights of teenagers, and programs to reduce violence against women. (SAR5-7) RNPM also conducted one national and four subnational forums for the Campaign on Civil Society Observance for a Healthy and Reliable Maternity.

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or there is evidence of ongoing collaboration

- Opportunities for collaboration between the public and private sectors have increased. PROMUDEH has contracted with RNPM to train its staff on issues related to violence against women. MOH also contracted with RNPM to raise awareness of SRH rights among health care providers. (SAR10)
- The prefecto (highest departmental political authority) of Moquegua, Peru organized a working group of government and nongovernmental organizations, including community-based and civil society organizations, to implement coordinated actions for the prevention of violence against women (3/99). Previous working groups were composed only of government organizations. (SAR8)
- The RNPM in Peru was invited to join the *Mesa Tripartita*, a partnership of government, NGOs, and international donors, which is monitoring and evaluating national ICPD implementation. (SAR7)

PHILIPPINES

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- Following an extensive media campaign in support of the population and FP/RH between April and June 2000, 76 local influentials in the City of Butuan, Philippines, including chief executives, legislators, and heads of offices, signed pledges of commitment and support of the population program.
- Following an extensive advocacy campaign in summer 2000 by the Municipal Advocacy Teams in Balincasag, Tanjay, and Sorsogon (Philippines) aimed at gaining media support for FP/RH media coverage, 84 youth leaders signed a manifesto asking local government, school boards, and other organizations to support adolescent RH concerns; people's organizations and NGOs signed resolutions signifying support to population and FP/RH programs; local populations in 14 barangays signed a manifesto asking local government to address population and FP/RH concerns.
- Political support for population and FP was considerably strengthened in the Philippines as evidenced by the following: 51 member legislators of the Philippines Legislator's Committee for Population and Development (PLCPD) signaled support to population and FP/RH programs during the 11th Congress by identifying the Population Act as one of the top five priority legislative measures in their legislative agendas; 169 local government executives signed pledges of commitment and support to the Philippines Population Management Program (PPMP); and 26 media groups signed pledges of commitment and support to the PPMP. In addition, the results of the recently released 1998 Local Government Unit (LGU) Commitment Survey showed that 91 percent of local chief executives (LCE) said that FP is an important intervention in addressing development programs; 77 percent mentioned FP or the PPMP in public speeches; and 72 percent approved policies or administrative orders/memos/circulars to support FP/PPMP implementation. (SAR8)
- Two governors in the Philippines signed executive orders urging municipal mayors to support the population program. Five local radio stations in Region 1 signed pledges of commitment to the Population Program and allocated free air-time for the program to disseminate information on the population program. (SAR6)
- President Ramos in the Philippines endorsed POPCOM's five-year directional plan and national advocacy plan and certified support for the Population Bill. (SAR4)
- President Ramos gave the strongest verbal support for family planning to date by any Philippine executive (at POPCOM Board of Director's meeting). (SAR1)

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

of countries with national/subnational policies, plans, guidelines in support of FP/RH adopted/approved

- Between January and August 2000, the Local Advocacy Project in three municipalities of the Philippines (Balincasag, Sorsogon, and Tanjay) produced the following legislation: 3 municipal and 22 barangay ordinances allocating an annual budget of P50,000-150,000 for population, FP/RH; 2 ordinances creating a population office for a municipal population officers; 1 municipal and 57 barangay memorandum/executive orders designating population officers; an ordinance that includes a FP/RH orientation for NGO accreditation requirements; an ordinance integrating the ARH program in all secondary schools and an appropriation of P50,000 for it; and 3 resolutions creating municipal advocacy teams.
- Through the National Advocacy Campaign for Population and Development implemented by POPCOM in the Philippines, the following legislation was approved at the local level between April and September 2000: 5 ordinances/resolutions establishing provincial/city population offices; 16 office orders designating/appointing provincial/municipal/barangay population officers; 21 executive

orders/resolutions creating municipal population and development committees or pre-marriage counseling teams; and 4 resolutions creating provincial/city advocacy teams.

- The Integrated Population and Development Act of 1999 (House Bill 8110) was filed in the 11th Congress in the Philippines on August 16. The bill integrates all facets of interdependence among population, development, and the environment into policies and programs that aim to achieve poverty eradication, economic growth and food security, sustainable patterns of consumption and production, empowerment of women, and sustainable development. (SAR8)
- The president of the Philippines created the Presidential Task Force in July to review and update accomplishments with respect to ICPD commitments and to set priorities for the country in the implementation of the ICPD Program of Action. The task force developed the Framework for the Program of Action on Population and Development for 1999-2004, which the cabinet approved for implementation and the president endorsed in September. (SAR8)
- Reformulated Philippine Population Policy Statement and Framework approved by Cabinet Cluster C on March 17, 1999 and by POPCOM Board on March 30, 1999. (SAR7)

of countries with national/subnational policies or plans approved that include explicit discussion of financing issues for FP/RH

- Philippines National Family Planning Strategy explicitly addressed roles of public, private, and NGO services. (SAR4)

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public or private) for FP/RH

- The Philippine Secretary of Health provided P70 million in the department budget for contraceptive commodities as a result of policy dialogue with senior Health department and NEDA staff, including the Secretaries of both departments, and a review of contraceptive requirement projections and associated costs (July 2000).
- Since December 1999, Local Advocacy Project in the Philippines (POPCOM, PLCPD, PNGOG) generated P750,000 from local government unit funds for advocacy/IEC activities promoting population and family planning.
- The Philippine NGO Council on Population, Health, and Welfare (PNGOC) allotted a total of PhP 360,000 to seven local NGOs in support of FP/RH advocacy plans implemented between December 1998 and July 1999. (SAR8)
- POPCOM regional advocacy efforts succeed in obtaining increased funding from local government units for the Philippine Population Management Program. (SAR7)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- POLICY-supported NGOs in the Philippines (PLCPD, PNGOC) and Municipal Advocacy Teams in Balingasag, Sorsogan, and Tanjay continued advocacy activities beyond the end of the project supported subcontracts. (August 2000)
- PLCPD in the Philippines conducted a Legislator's/NGO/Media Forum on population and reproductive health policy (4/99); PNGOC has continued to conduct advocacy activities among target NGOs for RH using its SIKAT advocacy network after POLICY funding ceased. (SAR8)
- In the Philippines, a POLICY partner NGO organized and conducted a "Legislative-Media Forum on Reproductive Health," where the POPCOM Executive Director presented the RAPID model to senatorial staff and the press. The Philippine Legislator's Committee on Population and Development (PLCPD) continued production of advocacy materials through its four ongoing publications. (SAR6)

- POPCOM regional offices carried out advocacy efforts that resulted in signed pledges of commitment, increased funding from local government units, and development of advocacy plans and resolutions for the Philippine Population Management Program. (SAR7)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- The POPCOM Board passed a resolution in January 2000 creating a multisectoral task force in the Philippines to promote discussion of issues in the operationalization of the Contraceptive Independence Initiative. The Policy Forum convened 48 leaders of government, NGOs, and executives of pharmaceutical companies to secure political and popular support for policy reforms to promote better access to FP/RH services.
- Circular signed in the Philippines and sent to all POPCOM regional directors as part of the Guidelines for the Formulation of the Population Management Program Implementation Plan stipulating formation of five Technical Working Groups (TWG) composed of representatives from government and nongovernmental sectors. (SAR6)
- New stakeholders (NGOs, commercial sector leaders) and interagency cooperation integrated into preparation of the Philippines National Family Planning Strategy. (SAR2)

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- The Philippine Policy Forum's 9-Point Policy Reform Initiative Agenda draws on results from three major research studies in the areas of market segmentation, commercial market share of the contraceptive market, and client preferences for FP service facilities. The agenda focuses on contraceptive distribution, expansion of the role of NGOs, and the private commercial sector in FP/RH service delivery. (SAR9)

of national/subnational policies/plans that use information produced with support from POLICY

- POLICY-generated data on fertility goal scenarios for the Philippines 2000-2004 and projections of contraceptive requirements incorporated into the Philippine Population Management Program Directional Plan for 2000-2004 (July 2000). The National Advocacy Plan chapter of the Directional Plan was modeled after the National Advocacy Plan for Population and Development 1996-2000, produced by POPCOM with assistance from POLICY.
- The Municipal Advocacy Plans in three Local Advocacy Project districts in the Philippines use results from the Policy Environment Score survey. (SAR9)
- USAID/Manila uses results of POLICY's study of LGU commitment and support to the **Philippine** Population and Family Planning Program to assess the extent of LGU funding of the population program. USAID uses analysis of contraceptive users by methods and costs as bench-line data in its Master Plan for Contraceptive Commodities Assistance to the Philippines 2000-2010. (SAR9)
- House Bill 8110 in the Philippines used results from the national RAPID model in its explanatory note; the Framework for the Program of Action and Development 1999-2004 used FamPlan and Cost-Benefit model results to present FP as a crosscutting issue. (SAR8)
- Philippine government incorporated local government unit (LGU) survey results into National Population/Development Advocacy Plan and National Family Planning Strategy. (SAR2)
- "Restatement of the Philippine Population management Program" used findings from POLICY-funded studies and position papers.

REDSO/ESA

IR5: Information used for policy and program development

of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- Communities in Zimbabwe used research on postabortion care (PAC) to develop action plans that address the issue of unsafe abortion (6/99). (REDSO/ESA) (SAR8)
- Marie Stopes Tanzania used the results from a POLICY-funded analysis of its postabortion care (PAC) client data to design a new youth project. (SAR6)
- CBOH, UTH, General Nursing Council in Zambia use PAC assessment results to develop PAC strategy in September 1998. (SAR6)

REDSO/WCA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH
adopted/approved

- RH Law enacted in Guinea (Conakry) in July 2000 is based on the model law of the FAAPPD, which was developed with assistance from POLICY in August 1999, and as a result of advocacy by member of national committee benefiting from POLICY TA and training in advocacy.

IR2: Strengthened collaboration among govt. and nongovernmental sectors
of countries in which representatives of government, NGOs, and/or commercial sector continue to
meet on an ongoing basis

- The parliamentary network, FAAPPD (REDSO/W), initiated collaboration with follow-up committees (public/private advocacy groups) in seven countries for purposes of developing model legislation governing RH services and rights. (SAR8)

ROMANIA

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public or private) for FP/RH

- The government of Romania included FP and cervical/breast cancer screening as part of health insurance capitation services (reported in the *Official Monitor* on September 7, 1999). Other RH services, such as pre- and postnatal care and detection/treatment of sexually transmitted diseases (STDs), are included in the health insurance fee-for-service package. Funding for the FP reference centers and clinics, operating in early 1999 through funding from the Ministry of Health state budget, has been shifted to the health insurance houses. (SAR8)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Over a three-year period, NGO members of the RH Coalition in Romania successfully advocated for increased access to RH services, especially continued support for FP centers, through women's health events in the judets (caravans, health fairs, and multisectoral forums). The Coalition also carried out successful letter writing campaign to the President of the College of Physicians and the State Secretary of the MOH, urging inclusion of RH services in the national health insurance system to ensure access to services and improved health of mothers and children. (1997-2000)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time or continue to meet on an ongoing basis

- In Romania, the MOH sponsored a national RH workshop, which brought together FP providers, ob-gyns, general practitioners, and service delivery NGOs with MOH officials for first-time discussions of components of RH and how RH should be covered under health insurance. (SAR6)
- Coalition for Reproductive Health in Romania consists of 21 NGOs and 5 government officials (12/98) and has met on more than 11 occasions since formation in 1996.

IR4: Improved financing for FP/RH

of countries with new budget line item for FP/RH

- Significant policy documents were issued in Romania in July/August 2000 that will dramatically improve financing for FP/RH in the country. MOH memorandum 648 (June 22, 2000) informed judet public health authorities about the release of state budget funds for MOH Program No. 12 (Mother and Child Health) and that contraceptive procurement will be undertaken centrally by the MOH and locally by the judets. The year 2000 Health Insurance (HI) norms in Romania, Order 921/1.765 (July 25, 2000), states that family doctors at the PHC level in Romania can provide basic FP services, including prescription of methods, for persons without risk, and that they will be reimbursed under HI. Technical Norms to apply MOH Program No. 12 for National Assistance for Women and Children's Health and Family Planning (issued August 22, 2000) instructs judets to tap MOH-procured contraceptives using the Program No. 12 line item. It also states that contraceptives procured centrally by the MOH should be given free to certain segments of the population, while those procured by the judets should be sold at acquisition price to the rest of the population. Moreover, the Prime Minister, the Minister of Health, and the Minister of Finance signed a Government Decision on August 22, 2000, approving the structure and funding for the national public health programs, including Article 2, funding for the family planning program. The GOR Decision

provides guidelines for distribution of free contraceptives to identified marginal populations through FP clinics and also creates a revolving fund for contraceptives. It also mandates that in areas without FP clinics, contraceptives can be distributed through family doctors at the primary care level. This is a landmark policy for Romania because it marks the first-time ever that Romania procured contraceptives using government funds, mandates free distribution of government-procured contraceptives to populations with special needs, legitimizes contraceptive distribution through the FP clinics and through family doctors, and sets up a revolving fund for contraceptives.

- In February 2000, the National Health Insurance House in Romania signed a letter of agreement with the Ministry of Health for the NHIH to pay salaries of staff of FP centers from October 1999 until the by the Parliament and Prime Minister approve the MOH State Budget.
- In September, the MOH in Romania requested \$300,000 from a parastatal procurement agency (UNIFARM) to procure low-cost contraceptives for use in FP centers. (SAR8)
- The MOH in Romania has approved funding and created a line item for family planning centers under the national budget. (SAR6)

of countries with new regulations facilitating increased private sector participation in service delivery or financing

- Methodological norms for the proposed national health insurance system in Romania includes RH services (FP, prenatal and postnatal care, and STD detection and treatment) under the basic package of services covered. (SAR7)

RUSSIA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH
adopted/approved

- As a result of advocacy efforts of POLICY-trained member of the RH network, in February 2000 the governor instructed the government of Sverdlovsk Region in Russia to create and implement a RH program. Officials were charged with issuing a decree and a task force formed to develop the new RH program.
- Language in an article of the 1998 reproductive health law was amended to ease restrictions on foreign assistance for reproductive health as a result of advocacy by Network members in Russia, who drafted and led a successful advocacy campaign for adoption of a comprehensive RH policy in the Ivanova region. (SAR7)

IR1: Effective advocacy for FP/RH

of countries in which government officials, NGOs, or networks conduct FP/RH advocacy events on their own as a result of POLICY assistance

- RH Network members in Russia successfully carry out advocacy campaign on contraceptive supplies. (SAR10)

Sahel/CERPOD

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH
adopted/approved

- Ministers and NGOs from nine CILSS countries adopted a regional Plan of Action and signed the Declaration of Ouagadougou. (SAR5)

IR2: Strengthened collaboration among govt. and nongovernmental sectors
of countries where government invited NGOs or other private sector organizations to participate in
an FP/RH event for the first time

- NGOs from 9 countries in the Sahel region prepare materials and are invited to first regional ministerial-level conference held in October 1997. (SAR5)

SENEGAL

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH adopted/approved

- The MOH in Senegal made a policy decision to reinstate a long-dormant community-based distribution (CBD) program as a result of research on barriers to CBD and social marketing (3/99). (SAR8)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- Regional population councils in Senegal developed dissemination plans and showed presentations to more than 50 groups of elected leaders, government officials, and NGOs since January 1997.

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- The committee on the removal of judicial and nonjudicial barriers to RH, formed in Senegal in March 1998, consists of members from four governmental ministries and 10 NGOs, has met regularly and contributed to adaptation of a model RH law and efforts to update the national population policy.

IR3: More effective planning for FP/RH

of countries with improved national/subnational plans or planning processes

- Senegal's DPRH reorganized with the help of POLICY to improve the effectiveness of their planning efforts. DPRH prepared a results framework and job descriptions for the reorganization as summarized in "Organisation du Conseil national de la population et des ressources humains." (SAR10)

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- The regional plan for St. Louis, Senegal (Bilan Diagnostic PRDI St. Louis) uses data from the POLICY-supported study of locally elected leaders (December 1999).
- Integrated regional development plans for Kaolack, Senegal incorporated demographic projections from SPECTRUM. Fatick region also used SPECTRUM results in a diagnostic study of the regional demographic situation (6/99). (SAR8)
- Government technicians in region of Fatick are using demographic projections from SPECTRUM in development of a new project with the German Aid Organization (GTZ). (SAR7)

SOUTH AFRICA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval or adopted/approved

- Mpenjata Local Council in South Africa developed an HIV/AIDS policy, implemented HIV/AIDS activities, and strengthened their networks with civil society. (SAR9)
- Provincial AIDS Training, Information, and Counseling Centers in South Africa developed business and strategic plans for their own organizations to access funds from the provincial government. (SAR8)
- Department of Agriculture and the Department of Environmental Affairs and Tourism in South Africa prepared HIV/AIDS and STD Workplace Policy and Program. Policies are in the process of review before submission to Director General/Ministers. (SAR7)

IR1: Effective advocacy for FP/RH

of countries in which government officials or NGOs conduct FP/RH advocacy events on their own as a result of POLICY assistance

- NGOs with previous training from POLICY, together with the Department of Health, carried out advocacy activities in seven provinces in South Africa to ensure greater participation of local governments in implementing AIDS policies and programs. (SAR8)
- In South Africa, provincial NACOSA coordinators previously trained by POLICY organized and conducted “political commitment” advocacy workshops in six provinces in Sept. 1998 to raise awareness of HIV/AIDS issues. (SAR6)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries where government invited NGOs or other private sector organizations to participate in an FP/RH event for the first time

- Partnerships for AIDS program in South Africa broadened participation to include representatives from the PLWHA (persons with AIDS) and celebrity sectors. (SAR8)

of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- Seven provincial AIDS programs in South Africa have continually included NGO representatives in advocacy and planning activities, which have become more action-oriented as a result. For example, NGOs and the provincial government in Western Cape have worked together on the MTCT pilot program; in Gauteng, the multisectoral advocacy teams in the province have helped to expand the partnership against HIV/AIDS as NGOs, not previously involved with HIV/AIDS, have joined the effort. (SAR8)

IR4: Improved financing for FP/RH

of countries with new budget line item for FP/RH

- Department of Environmental Affairs and Tourism in South Africa now has line item for HIV/AIDS activities as a result of advocacy training. (SAR7)

TANZANIA

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH
of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval

- The prime minister of Tanzania appointed an HIV/AIDS advisory board (4/99). (SAR8)
- National AIDS Control Program in Tanzania drafts Medium-Term Plan III, which articulates the government's multisectoral response to HIV/AIDS. (SAR5)

IR2: Strengthened collaboration among govt. and nongovernmental sectors
of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- MOH departments and NGOs in Tanzania continued to meet following September 1997 POLICY workshops culminating in MOH reorganization and formation in March 1998 of the Reproductive and Child Health Unit. (SAR5&6)
- National AIDS Control Programme (NACP) Secretariat in Tanzania continues collaborative meetings with NGOs and government departments to produce draft Medium-Term Plan (MTP) III, following POLICY February 1998 workshop. (SAR6)

IR5: Information used for policy and program development
of countries that use information from POLICY documents or models produced or used with support from POLICY for policy and program development

- User-friendly version of the Reproductive and Child Health Strategy, which is produced with POLICY support, distributed and used as guidelines at all service delivery sites in Tanzania for program development and reorganization. (SAR6)
- Vision and action plan developed during MOH integration workshop in Tanzania is included in the Health Sector Reform Workplan, 1998-2001 (10/97). (SAR5)

TURKEY

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- The President of Turkey indicated strong support for family planning as a result of a meeting with KIDOG representatives and directed the MOH to mobilize government funds for public sector procurement of contraceptives. (SAR6)

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public and private) for FP/RH

- Since 1997, the Ministry of Health in Turkey mobilized US\$3.3 million to purchase approximately 160,000 IUDs, 1.2 million oral contraceptive cycles, 37 million condoms, and 162,000 injectables. (SAR 5,6,7) The Ministry of Health in Turkey completed its procurement of \$1.2 million¹ worth of contraceptives, using funds from the Special Minister's Fund. (SAR8)
- Turkish government increases MOH/MCH/FP division's budget by 38 percent. (SAR3)

IR2: Strengthened collaboration among govt. and nongovernmental sectors

of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- Turkish Ministry of Health includes NGO representatives (KIDOG) in strategic planning process. (SAR2)
- New stakeholders, including NGOs and commercial firms, represented in policy dialogue and decision making on self-reliance for contraceptives in Turkey. (SAR4)

IR4: Improved financing for FP/RH

of countries with new budget line item for FP/RH

- The ministries of health and finance in Turkey made a landmark decision to earmark funds for contraceptives under line item 400 and agreed to mobilize funds to fill this year's supply gap (\$0.4 million). (SAR8)

¹ Previously reported that \$1.6 million was available for the procurement; only \$1.2 million was obtained.

UKRAINE

SO(a): Political and popular support strengthened

of countries where political or civil society leaders made public statements in support of FP/RH

- The President of Ukraine issued a decree on August 8, 2000, “On additional activities aimed at improving Ukraine’s health care,” which addresses a number of health issues and endorses the MOH’s proposed national reproductive health program.

SO(b): National and subnational policies, guidelines, and plans developed in support of FP/RH

of countries with national/subnational policies, plans, guidelines in support of FP/RH developed and presented for approval

- The Minister of Health of Ukraine sent the draft National Program “Reproductive Health 2001-2005” to the Cabinet of Ministers for approval on July 4, 2000, accompanied by a draft budget for the program and a budget requirement analysis.
- The Cabinet of Ministers approved the “Law on the Concept of Safe Motherhood in Ukraine;” the law was then sent to Parliament in September 1999 to be read by the Parliamentary Committee on Health, Motherhood, and Childhood. (SAR8)

IR2: Strengthened collaboration among government and nongovernmental sectors

of countries in which representatives of government, NGOs, and/or commercial sector continue to meet on an ongoing basis

- The Policy Development Group, a multisectoral and intergovernmental group of RH stakeholders met regularly over a period of two years to develop the RH policy and mobilize support for the national FP program. (SAR7-10)

ZAMBIA

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public or private) for FP/RH

- DANIDA continues policy work and funds HIV/AIDS strategic planning in Nchelenge District in Zambia. (SAR9)

IR3: More effective planning for FP/RH

of countries with improved national/subnational plans or planning processes

- Four districts in Zambia prepared new HIV/AIDS Strategic Plans as a result of POLICY training in strategic planning and follow-up support. (SAR7)

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- The Ministry of Education in Zambia used AIM statistics to draft its HIV/AIDS policy statement and response framework. (SAR9)
- Zambian government is using information from AIM briefing book in development of revised national policy (SAR7)

ZIMBABWE

SO(c): Financial and other resources mobilized for FP/RH needs

of countries with increased local resources (public or private) for FP/RH

- In February 2000, the government of Zimbabwe established a 3 percent AIDS levy on income to support AIDS programs.

IR5: Information used for policy and program development

of national/subnational policies/plans that use information produced with support from POLICY

- Zimbabwe's national HIV/AIDS policy cites information from AIM (2000).