

**Building Actors and Leaders for Advancing Community
Excellence in Development:
The BALANCED Project**

**Semi-Annual Results Report #3
For Period July 1 - December 31, 2009**

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Implemented by:

**Coastal Resources Center at the University of Rhode Island
PATH Foundation Philippines, Inc.
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Acronyms

ADA	Amara Development Association
AOTR	Agreement Officer's Technical Representative
AWF	African Wildlife Foundation
BALANCED	Building Actors and Leaders for Advancing Community Excellence in Development
BHC	Barangay Health Center
BHW	Barangay Health Worker
BNS	Barangay Nutrition Scholars
BMS	Behavioral Monitoring Survey
CAP	Conservation Action Planning
CBD	Community-based Distributors
CBFP	Community-based Family Planning
CDM	Camp, Dresser, & McKee
CI	Conservation International
CIP	Conservation International Philippines
CPE	Couple Peer Educators
CRC	Coastal Resources Center
CDRA	Christian Relief and Development Association
CRM	Coastal Resources Management
CTI	Coral Triangle Initiative
COTR	Contracting Officer's Technical Representative
CTSP	Coral Triangle Support Partnership
DCB	Dual Capacity Building
DENR	Department of Environment and Natural Resources
DIP	Detailed Implementation Plan
DMO	District Medical Officer
EH	Environmental Health
EWNRA	Ethiopian Wetlands and Natural Resources Association
FISH	Fisheries Improved for Sustainable Harvests
FP	Family Planning
GH	Global Health
GH/HIDN/ID	Global Health/Health, Infectious Diseases, and Nutrition/Infectious Diseases
GLC	Global Learning Center
GPSDO	Guraghe People's Self-help Development Organization
GTZ	German Technical Cooperation Agency
ICM	Integrated Coastal Management
IEC	Information, Education and Communication
IR	Intermediate Result
IPOPCORM	Integrated Population and Coastal Resources Management

JGI	Jane Goodall Institute
JHU/CCP	Johns Hopkins University/Center for Communication Programs
K4H	Knowledge for Health
KM	Knowledge Management
ME&L	Monitoring, Evaluation and Learning
MOH	Ministry of Health
MOU	Memorandum of Understanding
NCSE	National Conference on Science and Environment
NGO	Non-Governmental Organization
NOAA	National Oceanic and Atmospheric Administration
NPOA	National Plan of Action
OPRH	Office of Population and Reproductive Health
PEPFAR	President's Emergency Plan for AIDS Relief
PFPI	PATH Foundation Philippines Inc.
PHE	Population-Health-Environment
PPE	Poverty, Population, Environment
PRB	Population Reference Bureau
PSI	Population Services International
PTAL	PHE Technical Assistance Lead
REPS	Regional Environment Program Specialist
RH	Reproductive Health
RHU	Rural Health Units
SANAPA	Saadani National Park
SID	Summit Institute for Development
SO	Strategic Objective
SOTA	State of the Art
SSE-PHE	South-South Exchange on PHE
SUCCESS	Sustainable Coastal Communities and Ecosystems
TA	Technical Assistance
TCMP	Tanzania Coastal Management Partnership
TNC	The Nature Conservancy
TNC CTC	The Nature Conservancy Coral Triangle Center
TOT	Training of Trainers
TRG	Training Resource Group
UNFPA	United Nations Population Fund
URI	University of Rhode Island
USAID	United States Agency for International Development
USG	United States Government
UZIKWASA	Tanzanian Health Organization
VIP	Verde Island Passage
VIPCMP	Verde Island Passage Marine Corridor Management Plan

WWC
WWF

Woodrow Wilson Center
World Wildlife Fund

I. Introduction

On September 17, 2008, the United States Agency for International Development Bureau for Global Health (USAID/GH) awarded the new Population, Health and Environment (PHE) technical leadership Cooperative Agreement, *Building Actors and Leaders for Advancing Community Excellence in Development (BALANCED)*, to the Coastal Resources Center (CRC) at the University of Rhode Island (URI) and its highly qualified team of international partners, PATH Foundation Philippines, Inc. (PFPI) and Conservation International (CI). The five-year BALANCED Project has a ceiling of \$5 million in core funding from the USAID/GH Office of Population and Reproductive Health (OPRH) and a potential additional \$2.5 million budget for Mission buy-ins from all accounts.

The Project's objective is to advance and support wider use of effective PHE approaches worldwide. To accomplish this, BALANCED has three Intermediate Results (IRs).

IR1 – Capacity built for integrated PHE implementation

IR2 – PHE knowledge and tools developed, organized, synthesized and shared

IR3 – Results-oriented PHE field activities implemented in areas of high Biodiversity

II. Project Results

Introduction to Semi-annual report (merging of the three IRs)

This semi-annual report covers the period from July 1, 2009 to December 31, 2009. During this reporting period BALANCED advanced its vision of "Building cadres of competent PHE champions and practitioners from Africa and Asia to: (a) promote the comparative advantage of approaches that simultaneously support family planning and conservation; (b) work collaboratively with other groups GLOBALLY to apply PHE knowledge and State of the Art (SOTA) practices in remote biodiversity-rich areas; and (c) document and share evidence of added-value and better practices of PHE using 21st century knowledge management and learning tools."

During this reporting period, BALANCED Project staff strengthened our team approach and ensured strong connections among the three Intermediate Results (IRs) of the Project:

The summary below contains illustrative examples of how the project has accomplished integration and maximized linkages across the IRs during this reporting cycle. We have made significant progress in ensuring all project staff have a clear vision of the Project goal articulated above and a solid understanding of how all activities feed into the greater overall vision of the BALANCED Project. Additionally, the Advisory Committee meeting held in September 2009 was a productive opportunity for BALANCED to garner strategic input across all Project IRs, and we continue to follow up on the valuable recommendations put forward by the Committee.

Toward this end, the Project continues to *build cadres of competent PHE champions and practitioners through its capacity building activities*. During this reporting period, we:

- Provided 116 individuals (35% women) with training and mentoring on the key components of PHE project implementation with a focus on PHE integration, message development, community-based family planning (CBFP) and development of information, education and communication (IEC) materials.(IR1)
- Provided post-training support to 3 nongovernmental organizations (NGOs) and 1 project attending BALANCED training activities and 6 Ethiopian NGOs and 2 networks who participated in 2008 PHE Program Design workshop (IRs1 and 3)
- Identified and refined tools for helping practitioners to implement PHE activities and made them available to BALANCED trainees (IR2)
- Made curricula and materials developed by other PHE practitioners available to the broader PHE community via the PHE Toolkit on the K4Health website hosted by John Hopkins University/Center for Communications Programs (JHU/CCP) (IR2)
- Provided technical and financial support to NGOs to expand the capacity of PHE practitioners in Tanzania, Ethiopia, and the Philippines to implement PHE at the field level (IRs1 and 3)
- Prepared for the South-South Learning Exchange on PHE (SSE-PHE) scheduled for February 2010. This exchange will bring key government and NGO decision-makers from around the world to visit the “Gold Standard” PHE program in the Philippines. Its purpose is to build capacity and serve as a catalyst for these decision-makers to commit to supporting the design, funding and implementation of PHE initiatives in their own countries when they return (IR1). Lessons learned from the SSE-PHE will be available to the PHE community on the PHE Toolkit in the next reporting period (planned IRs1 and 2 activities)

BALANCED also supported new and existing PHE champions and practitioners to *promote the comparative advantages of approaches that simultaneously support family planning and conservation*. To this end, the Project:

- Provided seed grant funding to a new PHE champion to integrate family planning into an existing conservation wetlands project in Ethiopia (IR3).
- Scaled up PHE activities to Mkalamo (Pangani district) in Tanzania and is looking to expand the integration of family planning into CRC’s new Pwani project as well as the Wildlife Conservation Society (WCS) in Tanzania (IR3).
- Supported scale-up of the existing “Gold Standard” PHE sites in the Philippines (IR3).
- Showcased the advantages of PHE at three global conferences. Conference presentations highlighted the linkages between quality-of-life issues such as family size, human health, food and income security, and a healthy environment and explained the role that each plays as part of *one* interactive and dynamic life system. They also included examples of some of the key components of, and the “how to” for implementing a PHE program (IR2).

- Supported PHE champions to promote their in-country experiences at some of these events (see IR2).
- These champions reported on how an integrated PHE approach—an approach that recognizes and builds off of these linkages—can generate benefits in all three arenas of population, health, and environment (IR2).

BALANCED continues to *work in partnership with other PHE practitioners and champions globally to share information and SOTA practices, facilitate dialogue and provide technical support to PHE activities*. One example was the collaboration between the JHU/CCP/K4Health Project and the CRC/BALANCED Project on the K4Health website and PHE Toolkit—the start of a robust system for communicating the best of PHE from the field, from researchers, and from academe around the world.

- While JHU/CCP led the design and launch of the K4Health website, CRC and the BALANCED knowledge management team provided input that helped shape the design and the site’s functionality features. CRC also discussed options for the specific PHE Toolkit, and for how this could potentially provide a model for how other toolkits on the site might be organized (IR2).
- Worked closely with JHU to continue to ensure that the voices and information from the field are well represented on the site (IR2).
- Worked extensively with PHE partners in helping to identify the information, tools, and materials that need to be accessible on the PHE Toolkit; to encourage promotion of the site by the wider PHE community; and to promote proactive contribution of the “best of”, most useful, and of greatest relevance materials from a wide range of PHE projects and approaches funded by a diversity of donors (IR2).
- Held the BALANCED Advisory Committee in order to tap the experience and strategic thinking of key experts working in the field of PHE, and gain their valuable recommendations on content areas for the PHE Toolkit—e.g., a section for engaging academe (IR2).
- Built capacity of local PHE practitioners in Ethiopia on the PHE community-based distributor (CBD) systems and a unique dual capacity building technique during the provision of technical assistance to seed grant recipient EWNRA (IRs1 and 3).

As part of our efforts to *document and share evidence of added-value and better practices of PHE using 21st century knowledge management and learning tools*, BALANCED:

- Provided financial support to two national PHE networks for PHE activities in their respective countries and globally during this reporting period. This included contributing funds to the Philippines PHE network to promote the PHE Conference scheduled for the next reporting period and to the Consortium for the Integration of Population, Health and Environment (CIPHE) to translate latest PHE Program Design training materials and attend BALANCED training activities (IRs1 and 2).
- In close collaboration with the Population Reference Bureau (PRB), organized a PHE panel for the Uganda Family Planning Conference (IR2).

- As part of PHE panel, co-hosted the Executive Director for CIPHE to make a presentation on the Ethiopia’s current experience with PHE (IR2).
- Saw new PHE champions in Tanzania training in-country volunteers on PHE and CBD systems using a new dual capacity building methodology that is gaining momentum among BALANCED trainees (IR1 and 3).
- Continuously updated the BALANCED website with news from the field and conferences (IR2).
- Worked with the PHE community to develop a protocol for assessing the benefits of PHE approaches in the Philippines—this research project that will take place during the next reporting period (IR2).

The following sections of this report describe in more detail the progress achieved on the illustrative examples above and other activities that contribute to the Project’s vision and overall goal of promoting wider adoption and use of “effective” PHE approaches globally. Each section covering the individual intermediate results (IRs) describes: activities that were implemented during this reporting period; performance monitoring data; and a list of priorities for the next six-months. The final sections include management opportunities and challenges, the total PMP table and annexes. While for reporting purposes activities are organized by IRs, all activities contribute to the Project’s overarching vision and goal. As highlighted in the summary above, and in more detail in the sections that follow, many activities are strongly linked to each other and, as such, create synergies across IRs.

IR1 Capacity built for integrated PHE implementation

The BALANCED Project’s overall capacity building goal is to increase the number of health and environment organizations adopting and implementing PHE approaches globally.

Accomplishments

During the first six months of Year 2, the BALANCED Project continued to build the capacity of NGOs, local governments, and PHE champions in East Africa and Asia to implement PHE activities. Training, follow-up, and hands-on mentoring were provided on how to develop integrated messages and information-education-communication (IEC) materials and integrate community-based family planning (CBFP) into on-going conservation activities.

1.1 Conduct training on how to develop integrated PHE IEC materials in Tanzania

In Tanzania, BALANCED is supporting the integration of family planning into CRC’s on-going work through the Tanzania Coastal Management Partnership (TCMP) through the Sustainable Coastal Communities and Ecosystems (SUCCESS) project. In the SUCCESS project site, there are currently no integrated IEC materials available. Therefore, the BALANCED Project planned to conduct an East Africa regional workshop to train TCMP staff and partners, as well as representatives from other East African NGOs implementing

integrated projects, to develop PHE messages and IEC materials for use in educating the community and mobilizing them to protect their natural resources, health and family.

The criteria for selecting non-TCMP participants from East African NGOs or government entities were that they:

- Are interested in developing integrated messages and IEC materials for their PHE activities
- Already have developed some core PHE, conservation, health, family planning and/or water and sanitation messages
- Can use the integrated PHE messages and materials developed during the workshop in their project interventions
- Have funding to produce IEC materials developed in the workshop and roll out their IEC strategy

In preparation for the IEC workshop, BALANCED developed a handout/job aid entitled *Developing Integrated PHE IEC Materials: A Job Aid for PHE Practitioners* on how to develop an IEC strategy and integrated IEC materials. A training guide was also developed prior to and revised during the workshop to incorporate training activities that worked best for developing integrated PHE messages.

The workshop took place in Dar es Salaam Tanzania from August 10 to 14, 2009 at the TCMP office and was led by the BALANCED Project Director and PFPI consultant, Ricky Hernandez. The purpose was to teach participants how to conceptually link their biodiversity conservation, water and sanitation, HIV and family planning activities; develop integrated PHE messages based on these linkages; and draft and field test IEC material that they will use to inform and sensitize community members on PHE links and interventions in their project areas.

Eighteen individuals attended the workshop. Participants came from government, NGOs, and conservation/health groups and included representatives from TCMP; the Pangani District Governmental Health Center and Natural Resources Office; UZIKWASA-Pangani; Jane Goodall Institute (JGI-Tanzania); Africare (Tanzania), Wildlife Conservation Society (WCS-Tanzania); Africa Wildlife Foundation (AWF-Tanzania); World Wildlife Fund (WWF-Kenya); the Ministry of Health (MOH-Kenya); Ethio-Wetlands and Natural Resources Association (EWNRA-Ethiopia); Ethiopian Consortium for Integration of Population, Health, and Environment (CIPHE); and the Guraghe People's Self-help Development Organization (GPSDO- Ethiopia).

Topics covered in the weeklong workshop included: PHE and its importance; the behavior change continuum; audience research techniques; IEC strategy development; how to develop integrated PHE messages; and how to draft action-oriented IEC materials and pretest them to ensure comprehension of intended messages and illustrations. During the workshop, each organization drafted an IEC strategy for their respective project, developed or revised their existing PHE messages, drafted simple print material with the integrated

PHE messages, and field-tested the print material with community members in Bagamoyo, a town close to Dar es Salaam.

Workshop participants also developed a plan for refining and using the IEC materials developed during the workshop. Participants' action plans included the following:

- JGI will develop radio spots with PHE messages for males
- WWF/Kenya will train their counterparts on how to develop IEC materials and develop one integrated coastal management (ICM)/PHE poster
- GPSDO will revise current “integrated” IEC materials, pretest with target audience and finalize
- EWNRA will develop IEC materials for PHE providers and peer educators
- AWF will develop one integrated IEC material for water and sanitation
- Africare will improve current IEC materials
- WCS will develop IEC for PHE materials for water and sanitation activities
- TCMP will develop leaflets and poster for community-based distributors (CBDs) and PHE providers

Results from Activity 1.1 include:

- 7 TCMP staff and partners working on CRC's integrated conservation and health project trained on how to develop an IEC strategy, integrated PHE messages and IEC materials
- 11 representatives from 8 conservation NGOs and 1 government agency trained on how to develop an IEC strategy, integrated PHE messages and IEC materials for their projects
- Handout/job aid entitled *Developing Integrated PHE IEC Material: A Job Aid for PHE Practitioners*
- Draft training guide on how to develop integrated PHE messages and IEC materials (not included in PMP because it is a rough draft)
- 8 draft IEC materials with integrated PHE messages developed—one by each organization attending the workshop, i.e. TCMP, JGI, WCS, AWF, Africare, CIPHE, GPSDO, EWNRA, WWF/Kenya, MOH-Kenya (not included in PMP)

1.2 Provide on-going support to BALANCED Trainees and PHE Practitioners

Support to BALANCED trainees and PHE practitioners was provided remotely (via email) and in person (during in-country visits) by BALANCED personnel. The assistance provided was based on the post-training needs and gaps identified by workshop participants and trainers and the expressed needs of the partners. Key assistance provided during this reporting period is as follows:

The CBD Training-of-Trainer (TOT) manual was revised to incorporate all changes noted in the two previous CBD TOT workshops—conducted in Tanzania in Year 1 and in Ethiopia in Year 2. Following up on the two CBD TOTs, a total of 21 CBD TOT participants received an electronic copy of the revised TOT curriculum entitled *Guide for Training PHE Community-based Distributors, PHE Providers and PHE Adult Peer Educators Working on Integrated PHE Approaches* (9 participants from the Ethiopia TOT—i.e., Amara Development Association (ADA), Oromia Development Association (ODA), CIPHE, LEM (green) Ethiopia, GPSDO, Christian Relief and Development Association (CRDA) and EWNRA; and 12 participants from the Tanzania TOT (JGI, Aphia Coast, Engender Health, Saadani National Park/SANAPA, TCMP and the SPREAD Project—all of whom had email addresses). Related CBD training materials were also provided electronically as an added resource since most participants indicated an interest in using the methodology and the training manual and materials to strengthen their current PHE community-based program. Further, in response to two CBD TOT participants' requests for assistance with youth peer education, PFPI sent them a copy of their youth peer education training materials developed under the Integrated Population and Coastal Resource Management Project (IPOPCORM).

Workshop participants were encouraged to use trained participants from previous workshops in conducting the PHE CBD and PE training activities within their organizations or region. Three individuals trained during the April 2009 PHE CBD TOT held in Tanzania used the PHE materials provided by BALANCED in their November 2009 training of CBDs in Pangani—evidence that the BALANCED materials are being used as a resource and trainees are building capacity of in-country counterparts.

Hands-on and remote post-training follow-up was also provided to TCMP and two of its partners who attended the IEC workshop as they finalized and pre-tested the IEC materials developed during the workshop. Support to other IEC participants was been delayed—two participants left their positions and EWNRA, WCS-TZ and GPSDO will not be ready to finalize their draft IEC materials until 2010. Follow-up and technical support will be provided to WCS, JGI and other Tanzania participants (Africare and AWF) as needed during a March 2010 follow-up visit to Tanzania.

As part of BALANCED post-training support to the PHE Program Design workshop, we:

- Invited the 5 NGOs (GPSDO, LEM Ethiopia, ADA, ODA, Engenderhealth) and 2 networks (CIPHE and CDRA) to the November 2009 CBD TOT in Jimma, Ethiopia (see IR3 section of this report).

- In response to a request from GPSDO, an NGO in Ethiopia receiving financial support from the Packard Foundation to implement PHE activities in the Guraghe region, BALANCED provided hands-on mentoring to GPSDO staff by reviewing their PHE activities and helping them to hone their PHE framework.
- Provided hands-on assessment and support to EWNRA to improve their action plan for integrating family planning and reproductive health into its wetlands conservation and natural resources management project. Based on the program and financial assessment, a seed grant was given to EWNRA (see IR3 section of this report).
- Funded CIPHE to translate the *Designing and Implementing Integrated Approaches to Population, Health, and Environment (PHE): Workshop for Planners and Managers - Participant Manual* into Amharic. The manual was developed by Camp, Dresser & McKee (CDM) International in efforts to create a replicable workshop model that will build local sources of PHE expertise to design and implement cross-sectoral and integrated approaches to population, health and environment. It was pretested in 2008 in a workshop with NGO personnel currently involved in the implementation of field-based family planning, health and environment activities and projects in Ethiopia. CIPHE indicated an interest in conducting PHE Program Design workshops for its members and needed participant materials in Amharic.

Results from Activity 1.2 include:

- JGI and the Spread Project (CBD TOT trainees) received IPOPCORM's youth peer education training materials (not included in PMP)
- TCMP received both hands-on and remote technical support in finalizing and pretesting draft IEC materials developed during the IEC workshop
- GPDSO and EWNRA received hands-on and remote technical support following CDM's 2008 PHE Program Design workshop
- 3 participants from the Year 1 CBD TOT workshop using BALANCED CBD training materials to train local PHE providers and CBDs for the Pangani District

1.3 Conduct South-to-South exchange visit with decision-makers and policy-makers

During this reporting period, preparations to conduct the South-to-South Learning Exchange on PHE (SSE-PHE) were underway. The purpose of the exchange visit is to expose strategically selected representatives from governments and NGOs who have the power to make decisions about resource allocation, program implementation and priority-setting, to the "Gold Standard" PHE interventions in the Philippines. All exchange participants will learn how PHE integration is achieved at the individual and institutional levels by talking to Filipino government and NGO leaders who supported and implemented PHE in their districts, discussing details of implementation with project implementers and program recipients (fisher folks, peer educators, CBDs, and family planning acceptors), and observing the benefits that PHE activities have generated for the entire community. During the visit, participants will also prepare country/site-specific

action plans that outline their commitment to integrating PHE in their own programs and/or local policies. These plans will help the BALANCED Project tailor specific technical assistance follow-up to the exchange visit participants.

The concept paper and program of activities for the exchange were prepared in close collaboration with the BALANCED Project's USAID Technical Advisor (see attached Annex 1: Concept paper for SSE-PHE). A list of potential participants from three BALANCED focus countries was developed and submitted to USAID in September. However, many of the proposed candidates were not deemed appropriate and the October SSE-PHE was postponed until February 2010.

In coordination with USAID PHE Technical Advisor, BALANCED continued to develop and revise the list of potential SSE-PHE candidates by talking to the PHE community, PHE Fellows, BALANCED Advisory Committee, Policy and Practice Meeting members, local PHE networks in Ethiopia, USAID Missions and with organizations involved in the USAID-supported Coral Triangle Initiative (CTI). A new list of candidates was developed that included representatives from key government agencies and NGOs who would be instrumental in supporting and expanding the implementation of PHE in four BALANCED focus countries (Tanzania, Ethiopia, Kenya, Ghana) and the Coral Triangle (CT) region. In December, USAID approved the list of priority participants and invitations were sent.

Results from Activity 1.3 include:

- 8 representatives from NGOs and/or government officials identified and invited to the SSE-PHE in February 2010

1.4 Build capacity of NGOs from CT countries on PHE Program Design

The BALANCED Project builds on lessons learned and best practices from previous PHE projects and existing institutions such as the PHE networks to scale-up and work with new and emerging organizations and groups, and to engage in opportunities to promote wider use of PHE in the CT region. To this end, BALANCED provided planning, financial, and organizational support to the Philippines PHE Network (SIGUE) as it worked with them to incorporate PHE Program Design training in their upcoming Fourth PHE Conference to be held in Mindanao in early 2010. Due to recent election-related unrest in Mindanao, the final dates and venue for this conference were changed and are still being finalized.

BALANCED also worked to integrate and/or scale-up PHE Program Design training into institutions responsible for building the capacity of organizations working in the CT region. PFPI initiated discussions with the National Oceanic and Atmospheric Administration (NOAA) about the potential to integrate PHE dimensions into the agency's coastal resources management (CRM) training curriculum and activities in the CT region. Anne Walton from NOAA was receptive to the idea, but possible funding with USAID Indonesia was still to be decided. BALANCED staff also approached the United Nations Population Fund (UNFPA) Indonesia about possible funding to support a PHE Program Design workshop for Indonesian conservation organizations that will apply the PHE training materials developed by CDM International e.g., *Designing and Implementing*

Integrated Approaches to PHE: Workshop for Planner and Managers- Training Guide. UNFPA Indonesia encouraged BALANCED to identify a local NGO partner to conduct the training. PFPI approached the Summit Institute for Development (SID), who agreed and proceeded to process its NGO registration with UNFPA Indonesia. PFPI helped SID to prepare a concept paper for the PHE training and is awaiting SID's response and estimated budget requirements.

1.5 Integrate PHE into TNC-CTC Global Learning Center

In an effort to integrate PHE into The Nature Conservancy Center's Coral Triangle Center's (TNC-CTC) Global Learning Center, in July 2009 the BALANCED PHE Technical Assistance Lead (PTAL) met with Rili Djohani, the Director of the Coral Triangle Program in Bali, Indonesia, to learn more about the TNC programs, particularly the Training Center and their field-based activities. The PTAL also met with the Communications Manager to learn more about the TNC-CTC Global Learning Center. PFPI learned that TNC has conducted workshops for government agencies, park employees, NGOs, judicial and law enforcement agencies, schools, community, etc. on marine protected area (MPA) planning and management, field monitoring and teacher education. Workshops are conducted when requested and in various venues in Indonesia. The different training programs offered are:

- MPA 101: One-week training on planning and designing MPAs and MPA networks
- Field Monitoring: Course in developing protocols for and field monitoring of MPAs
- Teacher training: Three day course for high school teachers on marine ecology and conservation

The PTAL discussed ways to integrate PHE Program Design into TNC-CTC's training portfolio. TNC-CTC reported that courses are conducted on a needs basis. As such, the Center would only offer a PHE Program Design course once there was a demand for it.

As a follow-up to the meeting, PFPI provided TNC with an electronic copy of the *Designing and Implementing Integrated Approaches to PHE* manual and a link to the PHE website for their reference. TNC-CTC was also invited to participate in PHE South-to-South exchange in the Philippines. BALANCED will continue discussions with Rili Djohani after the exchange.

Status of PMP Results for IR1

INDICATOR	# During this reporting period
SO1: Number of target organizations incorporating PHE tools, protocols, etc. into their work (PRH 1.1)	2 (TCMP + Pangani MOH using CBD training mats)
1.1 Number of individuals trained by BALANCED in PHE know-how and SOTA (State of the Art) practices using 21st century learning tools	21 (IEC workshop-18; ENWRA, GPSDO + TCMP TA)

1.2 Number of participants who received BALANCED training and/or mentoring that are now providing training or TA to others on PHE implementation	3 (Juma, Mary, Owanya)
1.4 Number of technical interventions provided by BALANCED to Missions and organizations to implement PHE within their programs (PRH 3.2)	5 total interventions: 1 – IEC workshop 1- TA to TCMP (IEC and CBD training) 1- TA to GPSDO 1 TA to TCMP (ET) 1 TA to EWNRA
3.1 Number of PHE tools, methodologies, and actionable findings replicated in new countries and geographic areas (PRH 3.1)	1 (IEC job aid)

IR1 Priorities for Next Reporting Period (January 1 to June 30, 2010)

The BALANCED staff person in bold is the lead person responsible for bringing the activity to completion. Supporting team members follow. This is the best estimate at the writing of this report. Leads may change depending on staff availability and other factors.

- Revise job aid entitled: *Developing Integrated PHE IEC Materials: A Job Aid for PHE Practitioners* to include examples of successful integrated PHE messages and IEC materials as well as examples of “before and after” messages and materials developed in projects and during workshops. (**Linda**, Joan, Ricky)
- Revise the Facilitator’s Guide for the IEC workshop and test on a subsequent IEC workshop before finalizing and posting on the BALANCED website and PHE toolkit. (**Linda**, Joan, Ricky)
- Make 508 compliant and submit to USAID for review the *Guide for Training Community-Based Distributors and Couple Peer Educators Working on Integrated PHE Activities*. This manual is for facilitators who participated in the BALANCED CBD TOT to train local CBDs, PHE providers and adult peer educators. (**Lesley**, Joan, Tin-tin)
- Finalize Reference Guide for CBDs, PHE providers, and Adult Peer Educators and send to CBD TOT workshop participants. (**Joan**)
- Obtain a copy of *Designing and Implementing Integrated Approaches to Population, Health, and Environment (PHE): Workshop for Planners and Managers - Participant Manual* in Amharic. (**Joan**)
- Conduct the SSE-PHE and document the proceedings. (**Joan**, Ronald, Elin)
- Assist SIGUE in the planning of the PHE Conference and organize and conduct a tailored version of the PHE Program Design workshop for NGOs working on or interested in implementing PHE activities in the Philippines and selected other CT countries for conference attendees. (**Joan**, Ronald)

- Adapt the PHE Program Design curriculum to be incorporated into the TNC-CTC syllabus, pending TNC-CTC interest. (**Joan**, Ronald, consultant)
- Continue to request that all BALANCED workshop trainees develop action plans for how they intend to use the new knowledge and skills acquired and identify specific needs for continuing technical support. (**Joan**, all members of BALANCED team)

IR2 PHE knowledge and tools developed, synthesized, and shared

The knowledge management element of the BALANCED Project lies at the nexus of IR1, *Capacity built for integrated PHE implementation* and IR3, *Results-oriented PHE field activities implemented in areas of high biodiversity*. It draws out the “best of” information and experience generated from IR1 and IR3 activities and synthesizes and disseminates it to trainers, training participants, PHE implementers in the field, the larger PHE community of practice and donors. As such, this intermediate result serves as an “integrating” arm of the Project and focuses on three key activity areas:

- Identify, document, and synthesize knowledge on PHE (2.1)
- Organize existing and new knowledge for the PHE website (2.2)
- Share knowledge within the PHE community and beyond (2.3)

Accomplishments

During this reporting period, significant progress was made in key IR2 activities. This included the convening of the first Advisory Committee of experienced and well-respected PHE experts; advancing the development of the PHE Toolkit, completing the design of the field research on the benefits of PHE; and conducting advocacy and outreach in promotion of the PHE approach and in raising awareness of the BALANCED Project. Specific accomplishments under each key activity area follow.

2.1 Identify, document, and synthesize knowledge

Three key accomplishments under this activity category were achieved. First was the successful conduct of the first Advisory Committee meeting, which provided strategic input into the Project’s knowledge management (KM) and resource mobilization efforts. This group of experts collectively offered many decades of experience in PHE and were a wealth of valuable ideas and recommendations. The second accomplishment was finalization of the PHE value-added research design, which once completed should help strengthen the argument for the benefits of the integrated PHE approach over single or dual-sector only approaches. Finally, we completed initial mapping of the global PHE community of practice incorporating 2,068 individuals which revealed interesting findings. Below are the specifics on the three key accomplishments as well as others:

- The first BALANCED Project Advisory Committee meeting was held in September 2009 at the University of Rhode Island, Narragansett campus. Advisory Committee members in attendance included Dr. David Carr (University of California, Santa

Barbara), Geoff Dabelko (Wilson Center), Judy Oglethorpe (WWF), Dr. Lori Hunter (University of Colorado), Nancy Harris (JSI), Mark Freudenberger (ARD), and Lynne Gaffikin (consultant and PHE expert). BALANCED gathered these experts together to provide input on and help shape various aspects of the Project with an emphasis in this first meeting on the K4Health website/PHE Toolkit and a fundraising strategy for BALANCED Project focus countries. After this meeting, BALANCED staff wrote a summary report of outcomes and recommendations. This has served as a useful guidance document for the team in its strategic decision-making regarding the focus of certain aspects of its KM and resource mobilization strategies.

An example of a follow-up action recommended by the Advisory Committee was to reach out to the research and academic audiences to better ensure they are included as a target audience for communications. Efforts were started in late 2009 to identify relevant peer-reviewed published literature. We will continue to collaborate with academics at University of Colorado at Boulder, University of California at Santa Barbara, and Columbia University to identify documents in this category that could and should be posted on the PHE Toolkit and to exchange ideas for how to proactively engage the academic community in contributing to and using this site and its materials.

Other recommendations that have since been acted upon include extending an invitation to Jason Bremner of PRB to join the Advisory Committee (he has accepted). We were also asked to incorporate voices and stories of PHE champions in the field into the greater body of PHE work (plans are underway to get these voices and stories onto the PHE Toolkit site; and at least one champion “story” will be included in each issue of the BALANCED newsletter). The Committee also strongly supported South-to-South learning opportunities, such as the Philippines SSE-PHE scheduled for February 2010. (See IR1 section this report.)

- In close collaboration with CI, PRB, WWF and the USAID Technical Advisor, we finalized the design of the research methodology for documenting in a quantifiable way how and under what contexts and conditions the PHE approach demonstrates benefits for those who implement it. The field research will be conducted in the Philippines during the next reporting period.
- Completed initial mapping of the global PHE community of practice incorporating 2,068 individuals. These individuals were identified as “affiliated” through an analysis of attendees at more than 40 'events' and through an analysis of the documents uploaded to the K4Health PHE Toolkit. The data set outgrew the utility of maintaining as a single Excel file and is being converted to a MySQL database, with additional data fields to capture available information in a format usable for contact management and citation analysis. It is worth noting how the information in this database is being used by the Project team.
 - The "affiliation network" view of the global community of practice strongly suggests the presence of a digital divide. This confirms the conclusions of the Johns Hopkins K4Health Project study, which identifies the need for region and country-specific collection of and sharing of PHE information. An analysis of the data

shows there is a small core of several dozen prominent individuals centered around the Policy and Practice group. It also shows that a large majority of the network, however, is dispersed with weak ties to each other. Informal test surveys of individuals hint that those *not* at the center of the community of practice are unaware of the proximity they have to who are at the “center”. This highlights the importance of pursuing more proactively the field-based PHE champions and experience that resides “outside” of the core, DC-based PHE network of advocates, whether that be through targeting the field more in our communication mechanisms—e.g., our PHE Toolkit and BALANCED newsletter—or through our training and research.

- The team is using the database in monitoring how well the BALANCED team is rapidly expanding its interactions with and becoming a member of the broader PHE community of practice. Initially the "affiliation network" view showed that only two Project members, Castro and Edmond, occupy positions of very high centrality (positions 2 and 8). However, within the past year, most of the rest of the BALANCED team members have attained 'betweenness' scores in the top 5 percent of the community of practice as a result of their participation in a number of high-centrality events.
- This database of names and information is also helping the BALANCED Project develop its list of PHE champions and helping it in reaching out to new audiences whether that is in selecting participants for training, identifying clients for technical assistance, identifying potential new entry points for BALANCED communications (newsletter and website) and for the PHE Toolkit.
- Common field indicators for documenting the benefits of PHE approaches and field impacts were finalized and data are being collected (see IR3 section). A web-based system for collecting BALANCED PMP indicators was also finalized and is in operation.

2.2 Organize existing and new knowledge for PHE website

The BALANCED Project KM/ information technology team worked closely with the K4Health Project led by JHU/CCP to collaboratively finalize the design of and launch the PHE website on the K4Health site—the PHE section of the larger K4Health site hereafter known as the PHE Toolkit. This effort built upon both teams’ experience in KM as well as the complementary skills of the two different organizations—i.e., JHU/CCP has many years experience in managing health-oriented websites for the large international health community and the BALANCED team has many years experience in integrated PHE.

During this reporting period, the KM team completed the following tasks leading up to the launch of the PHE Toolkit—providing the PHE community with a venue for sharing the best of experience, tools, and lessons learned from PHE Projects around the world.

- Worked with collaborators at JHU/CCP to finalize the design and functionality features of the K4Health PHE Toolkit with the goal of maximizing the site’s user-friendliness and flexibility. When the Year 2 workplan was developed, the target was to launch the

PHE toolkit in August or September 2009. This was not possible due to delays at JHU in setting up the platform. The overall K4Health website was launched at the end of October 2009, and the BALANCED team worked closely with JHU to get the PHE Toolkit launched as soon as possible after that date (Toolkit soft launch in November and hard launch in December 2009).

- Continued identifying gaps in content; completed developing a system for categorization/labeling content/information; developed the Toolkit structure based on the PHE community needs; and drafted text for the Toolkit home page and frequently asked questions (FAQs).
- Drafted a step-by-step explanation of how the key words, topics and text for the PHE Toolkit were created. This documents the thinking and rationale behind the Toolkit's organization and is a guide for future members of the Content Management Team. The JHU team also expressed interest in understanding the process used to organize the PHE Toolkit materials and after a final edit, this document will be shared with them.
- Worked with PRB, WWF, Wilson Center and other NGO representatives to identify key PHE resources for the Toolkit. The CRC KM team then wrote abstracts for the first tranche of PHE materials uploaded (119 documents) to the Toolkit (requirement of the K4Health website structure/system as designed); and uploaded this material to the site.
- On December 16, 2009, launched the PHE Toolkit at a PHE Policy & Practice meeting in Washington, DC, attended by more than 22 PHE partners, collaborating agencies, and USAID representatives, the latter including the BALANCED AOTR, Liz Schoenecker and Madeleine Short, the AOTR for the K4Health project. Other key K4Health staff attended including Project Director Earl Lawrence.

Results from Activity 2.2 include:

- PHE Toolkit on K4Health website designed, populated, and launched
- BALANCED Project website maintained and expanded

2.3 Share knowledge within the PHE and broader community

The primary focus of this activity is to encourage the adoption and improvement of the PHE approach; and to provide insights and ideas from ongoing field experience on why PHE is important, what the PHE approach is, and how to apply PHE concepts in practice. The target audience is people who are aware of PHE approaches and are interested in incorporating them into their own projects, as well as for PHE Champions utilizing PHE messages and methods in the field. The purpose is to bring research and field experience together to support initiation, successful implementation and scaling-up of PHE.

During this reporting period, BALANCED staff made progress as follows.

- Fine-tuned and implemented the Project’s communication strategy in collaboration with external partners, including PRB, WWF and the Woodrow Wilson Center Environmental Change and Security Project (ECSP). This “living” document will be adapted as appropriate throughout the life of the Project, in consultation with USAID.
- Prepared the first issue of the BALANCED semi-annual newsletter for publication to help promote PHE approaches. In support of the global PHE community of practice, BALANCED staff focused the first issue on PHE approaches, and called for articles from PHE implementers such as WWF, PFPI, Blue Ventures, Conservation through Public Health (CTPH) and CRC. As noted earlier, each issue will also include a highlight of a PHE champion from the field. In our Year 2 workplan, we planned to complete the first issue in the second half of this reporting period (October to December 2009). However, the delayed launch of the PHE Toolkit until December 2009—and the workload associated with that launch—pushed the publication date for the first issue of the newsletter to February/March 2010.
- Promoted the PHE toolkit and its launch as part of the Project’s communications strategy. BALANCED staff developed the plan for disseminating information to the PHE community via listservs (e.g., PHE listserv, Africa Biodiversity Collaborative Group), distributed a press release, sent targeted emails to key contacts and posted news items on the CI and BALANCED websites. BALANCED staff members ensured broad-based dissemination of the press release announcement worldwide. We estimate our news releases reached more than 500 people, not including the Wilson Center’s “tweet” to their contacts.
- In December 2009, finalized and printed 1,000 copies of the BALANCED Project brochure. Dissemination is planned for January 2010 to key donors, including PHE champions at USAID and other funding agencies.
- Updated the BALANCED Project website on a regular (monthly) basis with news items and new partner information. Examples of news items in this reporting period included:
 - Report on BALANCED participation in the July 2009 Coastal Zone Conference;
 - Promotion of training courses in Family Planning and Reproductive Health in August 2009;
 - PHE panel at Uganda Family Planning conference in November 2009;
 - Launch of the PHE toolkit in December 2009; and
 - Announcement of URI CRC award by USAID/Tanzania of the Pwani Project in December 2009.
- Demonstrated technical leadership in multi-sectoral conferences involving new partners and potential donors. During this reporting period, BALANCED staff and partners delivered presentations at the following international events:

- Delivered presentations at the International Family Planning Conference held in Uganda from November 15-18, 2009 with financial support provided by the conference organizers. PFPI's paper on "Promoting Family Planning within the Context of Environment Yields Higher MDG achievement: Evidence from the Philippines" was presented in a panel chaired by Malcolm Potts, a Family Planning expert.
- In collaboration with PRB, BALANCED organized a PHE Panel that was accepted by the Uganda Family Planning Conference organizers. During the PHE panel session, BALANCED Project PTAL presented a paper on "Integration with Marine Conservation Enhances the Acceptability and Use of Family Planning in the Philippines". Other presenters included Sam Weru (WWF/Kenya), Gladys Kalema (CTPH) and Negash Teklu (CIPHE). Approximately 70 participants attended, along with other speakers from other Projects implementing PHE in Africa.
- PFPI presented at the Fifth Asia Pacific Conference on Reproductive and Sexual Health and Rights (APCRSHR) in Beijing, China in October 2009 on the topic of "Youth Peer Educators as Behavior Change Agents for Responsible Sexuality, HIV/AIDS Prevention and Environmental Conservation". APCRSR is a regional conference organized by Chinese family planning groups as well as UNFPA and women's research groups. The Conference provided BALANCED with an opportunity to present PHE to approximately 1,000 reproductive and environmental health experts, advocates, supporters and practitioners from around the world.
- CRC presented the example of the Tanzania PHE network in "How Digital Is What Divides Us? The Role of Information and Communication Technology (ICT) In Support Of Regional Networks of Leaders Working toward Sustainable Coastal Communities and Ecosystems" on July 23rd as part of the panel on Technology and Information Management at the Coastal Zone '09 conference held in Boston, MA. A second presentation was made on July 22 as part of the conference panel on Education and Capacity Building in Coastal Communities. This presentation, entitled "Water, People and Nature in a Tanzanian Coastal Watershed: Fostering Ecosystem and Social Ties", detailed the PHE work carried out by RCMP.

Results from Activity 2.3 include:

- PHE Toolkit launch announcement disseminated worldwide
- BALANCED brochure finalized
- PHE news and outreach-specific content disseminated on BALANCED website
- 5 conference presentations and/or papers delivered

Status of PMP results for IR2

INDICATOR	# during this reporting period
2.1 Number of tools, protocols, procedures, systems, methodologies, guides, curricula, or indices with demonstrated programmatic value developed or adapted for country and/or thematic contexts (PRH IR2.1)	2 (PHE toolkit and BALANCED websites)
2.2 Number of success stories, peer review articles, conference papers, research studies documenting key actionable findings about the PHE approaches, their lessons extracted, and value-added (PRH IR2.2)	5 (1 in China; 2 in Uganda; 2 in Boston)

IR2 Priorities for next period (January 1 to June 30, 2010)

The BALANCED staff person in bold is the lead person responsible for bringing the activity to completion. Supporting team members follow. This is the best estimate at the writing of this report. Leads may change depending on staff availability and other factors.

- Continue to collaborate with members of the PHE Toolkit content management team to refine and enhance the Toolkit. This includes identifying new resources to be uploaded, managing content to be posted to the site in line with established criteria, developing abstracts for documents and collaborating with team members on refinements throughout the year. As noted earlier, we will work with key contacts to strengthen the collection of materials and documents most relevant to PHE. This includes a special effort to link with the academic community through collaboration with academics at University of Colorado at Boulder, University of California at Santa Barbara, and Columbia University. (**Bob**, Janet, Lesley)
- Based on continued discussions with the BALANCED Advisory Committee, the PHE Policy and Practice Group, and other PHE partners, continue to gather suggestions on additional functions and features for the PHE Toolkit and then continue to partner with JHU/CCP to incorporate these functions and features—as appropriate and as possible under any constraints of the current structure. (**Bob**, Janet)
- In collaboration with PHE Cooperating Agencies, use the PHE Toolkit and the BALANCED newsletter to showcase NGOs and websites that implement PHE (thereby strengthening the PHE community of practice). (**Janet**)
- Finalize the Philippines-based field research on value-added of PHE; analyze the data; and produce a draft report on findings from that analysis. (**Brian**, Richard Pollnac, Kira)
- Continue to identify and refine PHE approaches and tools needed to build PHE capacity in the field. (all members of BALANCED team)

- Provide relevant information in the development of SOTA practices and assist in the dissemination of SOTA practices; in particular, by refining the results of the Philippines behavior monitoring survey (BMS) baseline results and providing inputs to the Tanzania BMS. (for SOTA, all members of BALANCED team; for BMS, **Joan**, Elin and consultant)
- Finalize the design and launch (February/March 2010) the first issue of the BALANCED semi-annual electronic newsletter. (**Janet**)
- Increase implementing and funding agency awareness of PHE approaches and success stories through development and dissemination of tailored PHE factsheets and briefing materials. (**Linda**, Janet, Lesley, Joan)
- Establish mechanisms to engage in dialogue with PHE champions and promote them as spokespersons and technical resources (e.g. through listservs, word-of-mouth networking, etc.) (**Linda**, all BALANCED team members)
- Present at multi-sectoral conferences involving new partners and potential donors, including the presentation of a paper on “Integrating Reproductive Health and Coastal Resource Management towards Achieving Food Security for Healthy People and Communities” in Melbourne on April 11-16, 2010 at the Healthy Parks Healthy People Congress 2010. The organizing committee provided full scholarship to the presenter. (**Linda**, all members of BALANCED team)
- Maintain the BALANCED website based on periodic feedback from partners and visitors to the site to respond to user needs. (**Janet**, Bob, Lesley, Linda)

IR3 Results-oriented PHE field activities implemented in areas of high biodiversity

The BALANCED Project supports PHE scale-up, replication and start-up activities in countries through a small amount of USAID central funds and additional financing from a mix of Mission and Bureau buy-ins, leveraged funds from non-US government donors, and from BALANCED Project partner cost share. The PHE interventions focus mainly on the delivery of family planning services to communities in priority biodiversity conservation areas and corridors within the USAID First Tier Intensive Focus countries.

Building on Year 1 activities, the BALANCED Project continues to facilitate the scale-up of results-oriented PHE field-based activities in Tanzania, Ethiopia and the Philippines. During Year 2, the goal is to further build the capacity of TCMP staff and BALANCED partners in Tanzania to implement integrated PHE projects in the Mkwaja wards next to Saadani National Park. We will also expand PHE and family planning activities to Mkalamo, and will explore other potential sites in Tanzania where PHE could be integrated. BALANCED continues to support the scale-up of PHE activities in Ethiopia and the Philippines through a cost-sharing arrangement with PFPI.

Accomplishments

From July 1 to December 31, 2009, the BALANCED Project implemented a number of activities to scale-up PHE in Tanzania, Ethiopia and the Philippines and to secure funding to expand or scale-up PHE in other places.

3.1 Scale-up PHE activities in Tanzania

In Tanzania, BALANCED is supporting the integration of family planning into CRC's ongoing work through TCMP, first through the SUCCESS project, which ended December 2009, and currently through the follow-on Pwani (Swahili word for "coast") project. The Pwani project will be integrating health and environment in villages surrounding the Saadani National Park area through Mission PEPFAR (President's Emergency Plan for AIDS Relief), biodiversity conservation, and water and sanitation earmark funds. UZIKWASA, an NGO based in Pangani town and a local health partner of CRC/URI, implements the HIV/AIDS component including social marketing of condoms. Livelihoods and natural resources management components are implemented under the leadership of an ICM facilitator located within the Pangani District. TCMP works closely with the regional and district Ministry of Health on the integration of family planning and health components into the project.

During this reporting period, BALANCED trained TCMP staff and its partners on how to develop an IEC strategy, integrated PHE messages and IEC materials (see section under IR1/1.1 activity). After the IEC workshop, the BALANCED team helped TCMP refine its IEC strategy, hone its integrated messages, and craft a plan for pre-testing the draft IEC posters developed during the workshop. Remotely, BALANCED staff provided continuing

technical support to further refine, field test, and finalize two posters and two sets of educational leaflets for use by PHE providers and trained CBDs in their counseling of community members on conservation, family planning, and other health behaviors. BALANCED also provided guidance on developing a distribution plan for the IEC materials, which were finalized in December and will be printed in January 2010.

During their visit to Tanzania, the BALANCED team also explored issues related to the upcoming CBD training. They met with the Tanga Regional Medical Officer (RMO), GTZ (German Technical Cooperation Agency), and the District medical Officer in Pangani to discuss logistics related to this training. As a result of these discussions, BALANCED was able to more effectively organize the CBD training to reflect the quality of the GTZ CBD training. Further, GTZ offered to provide copies of the IEC materials for all BALANCED-trained CBDs as part of a cost-share arrangement for Pangani.

The BALANCED team, along with the PHE Coordinator also visited the trained PHE providers in Mkwaja ward, and participated in BALANCED Project orientations. A total of 53 local leaders participated in three project orientations. The local leaders represented the Pangani District Primary Health Care Committee, the Pangani District Council Health Management Team (CHMT) and local officials and religious leaders from Mkalamo and Mkwaja wards. The BALANCED Project fact sheet was translated to Swahili and distributed to the participants.

In October 2009, BALANCED trained 47 additional PHE providers in the Mkwaja and Mkalamo wards. The objective was to work with existing small shop owners who will talk to their customers about health and conservation, distribute condoms, and refer individuals who need other family planning commodities to CBDs and health centers. The training included sessions about the linkages between reproductive health/family planning and coastal resources management and the mechanics and operation of the PHE provider system. Criteria for selecting the PHE providers were that they must:

- be a shop owner
- have a positive attitude on family planning and be interested in selling condoms
- be literate
- keep confidential the names and other information about their clients
- be ready to volunteer and be interested in teaching others about PHE
- be a permanent resident of the village

After the training, PHE providers were given different reporting forms and instructed how to purchase condoms from Population Services International (PSI) in Tanga town. The TCMP PHE coordinator has periodically followed up with the PHE providers that were trained in Year 1. The last supervision visit, which took place in December 2009, included the new PHE providers. At this time, the PHE providers had sold 1,150 condoms and convinced 138 new condom acceptors. They had also referred six individuals to the health centers for other types of family planning commodities. PHE providers are selling condoms and at the same time trying to explain to their clients the benefits of integrating issues of population with those of health and environment. Some clients, however, are in a hurry and have no time to listen. Two issues were highlighted during the supervisory visit.

One is that community awareness about PHE linkages remains low. Second, is that condom sales by the PHE providers is slow because customers prefer the free condoms that are distributed at the government dispensaries.

In November 2009, BALANCED trained 30 PHE CBDs and two CBD supervisors. The CBDs were selected from a pool of applicants to the program. PFPI developed criteria for selecting the CBDs, which included the requirements that they be: 18 to 45 years old; a permanent member of the community; acceptable to the community; a willing to volunteer; and a role model for the FP/RH issues. Applicants were required to submit a written essay describing how they interpret the word “community”. After being interviewed by the village leaders, BALANCED staff and the Pangani District Medical Officer and reproductive health officer, there were 15 men and 15 women selected. They came from varied backgrounds—village leaders, members of a traditional dance group, youth, farmers, housewives, community health workers (volunteers), and small businessmen.

During the 13-day training, the participants attended various sessions that provided them with the knowledge that they will need to distribute family planning commodities. They were also trained in the PHE approach. While the training went well, there will be a need for continuous follow-up to ensure the CBDs provide integrated messages to the community members they speak with. Three of the facilitators who led the workshop had been trained during the April 2009 BALANCED PHE CBD TOT.

At the end of the training, CBDs received working tools, including penile models, bags, standard CBD boxes, copies of IEC materials, CBD guidelines, condoms, contraceptive pills, and reporting forms. The CBDs were asked to draw a map of their catchments area and collect information about the area that they will serve, including the total population, number of households, and number of women and men of reproductive age (between 15 and 49 years old). They are supposed to complete this task by the end of January 2010.

In the current reporting period, we also started analyzing the data collected during the Tanzania BMS conducted during the second half of Year 1. A few of the surveys were improperly coded and sorting out these problems delayed the analysis. The final report from Tanzania will be completed in the second half of Year 2 and the results will be compared with the Philippines study. UZIKWASA incorporated the BMS methodology developed by PFPI into their behavior monitoring program.

We also continued to build the capacity of the PHE Coordinator at TCMP to facilitate implementation of the PHE activities both at the national and district level. This included involving him in the decision *not* to develop a memorandum of understanding (MOU) between BALANCED and the Pangani District government, but to instead wait and integrate PHE into the MOU that will be developed between TCMP and the district as part of the new Pwani project. We have tasked the PHE Coordinator with determining if there are existing CBD structures on Zanzibar and in the Bagamoyo District (both are part of the Pwani Project) —as a first step in assessing where it makes the most sense to scale-up PHE. The intent is to scale-up PHE within Pwani sites that already have CBDs in place.

Results from Activity 3.1 include:

- 47 PHE providers from Mkwaja and Mkalamo Wards trained
- 30 CBDs and 2 CBD supervisors from Mkwaja and Mkalamo trained
- 2 posters and 2 educational leaflets with integrated PHE messages developed—one for Mkwaja and another for Mkalamo
- Distance to access FP commodities reduced from an average of 7.8 kilometers to less than one kilometer
- 6 referrals for FP provided by PHE providers (referrals)
- 30 USG-assisted service delivery points

Tanzania PMP field Data Summary

INDICATOR	Year 2 to date	Cumulative Results Year 1 and 2	Comments
General			
Number of individuals trained	87	108 (Yr 1 we reported 8, but failed to count the 13 that attended the CBD TOT)	These individuals are also reported under the BALANCED global indicators
Family Planning and Reproductive Health			
Number of new users	0	0	
Number of counseling visits for family planning/reproductive health (FP/RH) as a result of USG assistance	6	6	Six individuals counseled and referred by PHE providers
Number of USG-assisted service delivery points providing FP counseling or services	30	30	These are CBDs (PHE providers not counted since they only provide condoms)
Average household distance/time to access family planning commodities	Distance to PHE providers and CBDs is now less than one kilometer.		Before the PHE providers were established, the distance to access FP commodities from the dispensaries ranged from 0 to 25 kilometers, with an average distance of 7.8 kilometers
Integrated indicators			
Number of population, health, environment organizations addressing non-traditional audiences	1		TCMP, an organization formerly focusing only on environment and health (HIV-AIDS), now addressing FP needs and audiences

3.2 Scale-up PHE activities in the Philippines

Through the support from The David and Lucile Packard Foundation, PFPI has continued implementing the Poverty-Population-Environment (PPE) Project in three eco-regions—the Danajon Bank, the Verde Island Passage and the Mt. Capotoan-Mt. Cabalantian Watershed Complex. To establish a functional referral mechanism between the project’s community-based family planning services and the government’s rural health service in the project sites, PFPI/PPE trained additional government health personnel to update them on modern family planning methods and ways to increase their awareness and support for linked FP/RH and natural/coastal resources management (N/CRM) approaches and programs.

For this reporting period, PFPI/PPE mobilized, trained and upgraded the skills and knowledge of an additional 31 government health personnel in Rural Health Units (RHU) who provide technical oversight, monitoring and referral services for the project (for a total of 114 during life of project). In order to more effectively deliver services and information on linked FP/RH and N/CRM at the villages and subvillage levels, already-trained government health personnel identified and trained an additional 99 CBD outlets and 25 adult peer educators (PE)—the result being a total of 355 CBDs and 67 PEs brought to the project sites. The newly trained RHU personnel, CBDs and PEs helped expand access to FP services in the project sites, resulting in 4,542 new users of modern FP methods in just the last six months.

PFPI/PPE’s monitoring of PHE scale-up activities in the VIP revealed an increased demand for family planning in general and modern contraceptives, in particular, especially on Verde Island. The local government unit (LGU) attributes this increase to the peer educators trained under the PPE project. The reporting mechanism established by PFPI is also working well. The health offices are receiving regular quarterly reports from the Barangay Health Centers (BHCs) on Verde. As a result of the increasing numbers of women seeking FP services from the BHCs, the midwives, barangay health workers (BHW), and barangay nutrition scholars (BNS) are able to reach more infants and children with immunization, nutrition and other child health services because the mothers seeking FP bring their children with them to the BHC. The BHWs were particularly vocal in extolling the excellent work done by the PEs—the BHWs see the PEs as their “helping hands” in reaching out to areas the BHWs do not have time to pursue.

During the monitoring visit to Verde, PFPI was asked by the communities to help fill the void in CRM assistance on Verde Island. In discussions with municipal and barangay officials, PFPI clarified that its current funds are limited to FP/RH activities but is willing to mobilize other sources of support to address CRM needs. The most pressing of these appear to be: conflicts over aquarium fishing, which most residents on Verde oppose although one barangay is practicing in a manner believed to be unsustainable; the lack of alternative livelihood opportunities; and poor enforcement of MPA protection.

PFPI mentored the barangay councils in six coastal barangays to formulate barangay development plans and budgets that support RH/FP activities linked to CRM. As a result, the Baco LGU, in the province of Oriental Mindoro, provided counterpart contributions

such as meals, venue, and transportation, for the PE training and the barangay development planning meetings in six coastal barangays. The budget used for these activities is part of the budget allocated in the annual investment plan of the LGU for integrated RH-CRM activities. The LGU of Baco is the first municipality in the Province of Oriental Mindoro to issue an Executive Order for the organization of the Integrated Family Planning, Reproductive Health and Coastal Resource Management Council.

PFPI also provided technical assistance to the Province of Oriental Mindoro on how to integrate reproductive health and population management dimensions into the Verde Island Passage Marine Corridor Management Plan (VIPCMP) for the Province of Oriental Mindoro. Consequently, several activities related to reproductive health and population management are now included in the VIPCMP under the social sector component.

Through the BALANCED Project, BMS were conducted in the PPE project sites during April-May 2009. The baseline BMS showed that a majority of those surveyed across the sites (>72%) believe food insecurity is linked to “too many people and not enough fish to go around.” Similar percentages agree that “if couples do not practice family planning, there may not be enough natural resources to go around in the future.” A report on the highlights of the BMS is attached (see Annex 2: Highlights of the 2009 Behavioral Monitoring Surveys Danajon Bank and Verde Island Passage, Philippines).

During this reporting period, CI Philippines (CIP) staff continued to revise and refine an eight page advocacy brief entitled, “Wellbeing of People and their Environment in the Verde Island Passage”, based on existing projects in the Verde Islands area. The advocacy brief describes the benefits of the PHE approach and possible interventions in existing CIP marine sites, such as the VIP along the Batangas coast.

The target audience for the advocacy materials within the VIP and national-level units are the Environment Office at the municipal, provincial and national levels; Health Office Heads at the municipal provincial and national levels; Rural Health Units (at the municipal level); science teachers at the secondary school and college level within the VIP (in coordination with the Department of Education and the Commission on Higher Education); and NGOs within the area. The advocacy brief will be finalized and printed in the next reporting period.

Results from Activity 3.2 include:

- PHE activities in VIP scaled-up
- Report on BMS conducted in Tanzania and the Philippines being finalized and results to be fed into KM activities in next reporting period

Philippines PMP field Data Summary

INDICATOR	Year 2 to date	Cumulative Results Year 1 and 2	Comments
General			
Number of individuals trained	155	536	
Family Planning and Reproductive Health			
Number of new users	4,542	7,311	
Number of counseling visits for family planning/reproductive health (FP/RH) as a result of USG assistance	0	0	Counseling visits were not collected by PFPI at the project level; partner health units collect the numbers
Number of USG-assisted service delivery points providing FP counseling or services	103	379	
Average household distance/time to access family planning commodities	Less than 1 km		Health centers were main source of FP commodities in the villages estimated at more than 1 km to 5 km and were not open everyday; with CBDs, access is everyday, can be anytime in some areas and in the neighborhood less than 1 km away
Integrated indicators			
Number of population, health, environment organizations addressing non-traditional audiences	11	49 (In YR 1 report, PFPI failed to count 38 organizations addressing non-traditional audiences.)	Elin provided PFPI with M&E training and was able to gather additional data from Year 1 activities that was not recorded, but is included in cumulative total
Number of enabling local ordinances/policies enacted that integrate PHE	1		The LGU of Baco is the first municipality in the Province of Oriental Mindoro to issue an Executive Order for the organization of the Integrated Family Planning, Reproductive Health and Coastal Resource Management Council

3.3 Scale-up PHE activities in Madagascar

In Madagascar, BALANCED had been assessing capacity building needs and planning to conduct a workshop on PHE program design for NGOs implementing or new to PHE interventions. At the beginning of this reporting period, CI/Arlington (CI/HQ) and CI/Madagascar (CI/M) staff began reviewing and revising the draft report on Madagascar PHE activities and capacity building needs. The draft report was produced in the previous reporting period, in collaboration with USAID/Washington, PRB and WWF-US, WWF/Madagascar and Voahary Salama, a national network of PHE organizations working in Madagascar. These groups had formed a Madagascar PHE working group in the spring of 2009.

The Madagascar-based PHE working group members met on July 23, 2009 to review the report and develop a collaborative workplan for the next year. At the same time, the US State Department issued a suspension decision memo instructing all US-based NGOs to stop activities by August 14, 2009 and to initiate close-out procedures. Termination of US Government assistance was the result of the country's latest political crisis, in which in the democratically-elected Malagasy president was overthrown in the spring 2009. The change in government caused the US Government (USG) to suspend support for development (health and conservation, in particular) activities.

Therefore, the Madagascar PHE report has not been finalized and members of the PHE working group in Madagascar have been reassigned to other non-USG funded tasks by their respective organizations. This represents a major challenge to CI and the BALANCED Project, since we have lost a significant opportunity for PHE in Madagascar. Future capacity building and scaling-up activities will depend up on a resolution to the political crisis and a resumption of USG support. Year 2 funds for these capacity building activities were pipelined in order to respond to Madagascar once USAID restrictions are lifted.

3.4 Provide one seed grant to one conservation NGO in Ethiopia

Shewaye Deribe from the Ethio-Wetlands and Natural Resource Association (EWNRA) participated in the PHE Program Design workshop conducted in Addis Ababa, Ethiopia in 2008 by CDM international. As an output of the workshop, EWNRA produced a PHE proposal and framework that showed strong potential for PHE integration. Due to the strength of its proposal and framework, BALANCED decided to explore giving EWNRA a seed grant to integrate CBFP into its on-going wetlands conservation activities. In August 2009, the Project Director and PFPI consultant, Ricky Hernandez, met in Ethiopia with key EWNRA personnel to assess the programmatic and financial capacity of the organization to implement what would now be a PHE project. Both also traveled to visit the proposed project site and met with key field staff and stakeholders.

EWNRA is now implementing the "Integrated Wetland and Watershed Management: A Landscape Approach towards Improved Food Security, Poverty Reduction and Livelihood Enhancement" project in the Agelo Shenkora watershed in Metu Woreda, located in Ilu Aba Bora Zone, Oromia region (South West Ethiopia). This area contains some of the last

remaining intact wetlands and forest ecosystems in the country. The project uses a landscape approach that aims to ensure environmental wellbeing, improved food security, poverty reduction or livelihood enhancement, better water and sanitation practices, and increased awareness on HIV/AIDS and family planning. It aims to build the capacity of local communities to implement management practices that can improve the economical and environmental values of wetland/watershed resources for improved food security and livelihoods. Because it seeks to improve both environmental and human wellbeing and incorporates multidisciplinary interventions, including health and FP that are delivered in a coordinated fashion, the project can be regarded as an integrated PHE initiative.

Subsequent to the visit with EWNRA, PFPI helped EWNRA staff finalize their seed grant project proposal and detailed implementation plan. BALANCED then administered the seed grant to EWNRA to provide what will be two years of supplemental support to strengthen the family planning component of its PHE approach in the Wichi wetland-watershed region and its current project in Agelo-Shenkora watershed.

Part of the project implementation plan was training nine key EWNRA personnel and their project partners on PHE community-based distribution and peer education as a means for providing greater family planning service delivery to communities served by the project. This TOT took place in November 2009 in Jimma, Ethiopia. Seven additional participants from five NGOs and two networks implementing PHE activities in Ethiopia were also invited and paid their own way to attend the TOT (GPDSO, LEM Ethiopia, ODA, ADA, Engenderhealth, CIPHE and CRDA).

BALANCED also linked EWNRA with DKT International—as another source of support, particularly for the provision FP commodities through a start-up revolving fund for the PHE providers trained by EWNRA. DKT agreed to provide starter kits good for up to three months, cash boxes, and other support materials. DKT also sent its key personnel to assist in the CBD TOT training conducted in Jimma and gave FP commodities and other free-of-charge materials for the training activity.

Results from Activity 3.4 include

- 9 EWNRA project personnel and partners trained on PHE, CBD and PE systems and how to train local CBDs and adult PEs (1.1)
- 7 participants (one each from 5 NGOs and 2 Ethiopian networks) attended the CBD TOT in Jimma Ethiopia

3.5 Support PHE Activities in Coral Triangle Countries

From July 27-29, 2009, the BALANCED PTAL participated in a three-day US CTI workshop in Denpasar, Indonesia. Workshop participants included the three region-wide implementing partners—the Coral Triangle Support Partnership (CTSP), the Program Integrator (PI) and NOAA. Other participants included the bilateral partners in the Philippines, Indonesia and PFPI from the BALANCED Project. Expected outcomes were:

- Shared vision, results and plan for success of the US CTI Support Program

- Shared understanding of US CTI Program organization and coordination
- Agreement on alignment of regional and bilateral inputs to US CTI Program
- Draft consolidated workplan and leads, process and timeline for finalization
- Draft consolidated performance management plan (PMP) and leads, process, timeline for finalization
- Final consolidated US CTI outreach and communications plan
- Plan for consolidated reporting against workplan, PMP and communications plan

During the meeting, the PTAL presented a brief overview of PHE—what it is and how it works—as well as a broad overview of BALANCED activities, including those planned as Year 2 activities relative to the CT areas.

BALANCED prepared a preliminary analysis of demographic dynamics in CT countries, which points to several criteria that could be used to narrow down the selection of focal areas within the CT ecosystem for investment in family planning activities. The data suggest that priority should be given to countries with large populations living within the CT ecosystem and high rates of population momentum (youth bulge) and total fertility (see Annex 3: CT Demographic profile).

The demographic profile was shared in whole or in part with Maurice Knight of CTSP. USAID Philippines personnel also received this data in a debriefing on BALANCED activities in the CT and became interested in the PHE potential for the CT region.

Results from Activity 3.5 include

- Demographic profiles and population projections for CT coastal zones including population size, density, momentum and annual rate of growth for the six countries

3.6 Secure funding for PHE expansion or scale-up in at least two countries for Years 2 and 3

The majority of funds for field-based PHE activities will come from cost share, leveraged funds, and Mission or Bureau buy-ins. The BALANCED Project will mainly seek opportunities to expand and support PHE field activities through funding from USAID entities, and non-USG organizations. The BALANCED Project’s resource mobilization strategy has three objectives. During this reporting period, the following resource mobilization efforts were pursued under each objective:

Objective 1: Obtain Mission buy-ins (from FP, NRM, or other sources) for new and scaled-up field-based PHE activities in USAID family planning focus countries (including First Tier and Second Tier countries) that also have biodiversity conservation priorities. These funds would support conservation NGOs operating in biodiversity-rich areas of a country and interested in the PHE approach to integrate community-based family planning services into their conservation activities.

- Through the assistance of the BALANCED Project’s USAID Technical Advisor, received a \$300,000 buy-in from USAID Madagascar. This was rescinded in August

2009 due to political unrest and the subsequent withdrawal of USAID support to that country.

- Through assistance of the BALANCED Project's USAID Technical Advisor, received a buy-in for \$281,000 from the Asia Near East (ANE) Bureau in September 2009 for glacial melt activities, which will be implemented during Year 3 of the Project.
- As part of its SUCCESS project, CRC leveraged \$808,306 from USAID/Tanzania for PHE activities in Tanzania (Pwani Project).
- For the CT region, BALANCED did the following in order to galvanize political and financial support for PHE activities in the CT region:
 - Shared the demographic information collected by BALANCED with Maurice Knight of CTSP who became more interested in PHE and BALANCED after learning about the population momentum situation in CT and its implications for expanding anthropogenic stresses on coastal-marine habitats and resources.
 - Participated in CTI activities during the regional exchange for the six country teams in the Philippines, and the US CTI planning workshop where BALANCED introduced and advocated the PHE approach
 - Discussed with Maurice Knight and Rene Acosta the possibilities of BALANCED providing a seed grant for the integration of CBFP into a conservation project in the CT region; thereafter, CTSP/PI could support other integrated programs, complemented by technical assistance from BALANCED.
- The BALANCED team honed its resource mobilization strategy with a focus on countries where BALANCED is integrating CBFP and health into conservation activities and where the Mission has indicated a strong interest in an integrated approach to development. Tanzania and Ghana are two such countries and where CRC recently won two five-year Associate Awards to their SUCCESS Leader Award.

Objective 2: Leverage funds from conservation and health NGOs and/or government agencies working in environment, health, agriculture, energy or rural development sectors to support new or scaled-up field-based PHE activities in priority biodiversity conservation areas in USAID family planning focus First Tier Intensive and First Tier countries.

- \$1,000 dollars leveraged from WWF to support participation of their staff/partners in the August 2009 IEC workshop.
- Seven additional participants from five NGOs and two networks implementing PHE activities in Ethiopia paid their own way to attend BALANCED CBD TOT workshop in Jimma. (Cost not calculated nor included in amount of leveraged funds)
- During the September 2009 meeting, Advisory Committee members suggested that BALANCED look to the Malaria Initiative and health programs as options for leveraging funds to support health activities within existing PHE activities in BALANCED focus countries. To this end, the BALANCED Project Director met with Peter Mamacos from the USAID Bureau of Global Health/Health, Infectious Diseases, and Nutrition/Infectious Diseases (GH/HIDN/ID) about the President's Malaria and potential leveraging of funds to integrate this health activity into integrated PHE

activities. The Project Director will follow-up on recommendations during the next reporting period.

Objective 3: Mobilize non-USG resources to support field-based PHE activities in USAID family planning focus countries with biodiversity conservation priorities.

- Leveraged \$584 from PRB contribution (private funds) to support sending CIPHE executive director to present as part of the PHE panel at the FP Conference in Uganda.
- Leveraged \$4,713 for PFPI staff to attend training workshop in China.
- BALANCED leveraged \$40,322 for PHE scale-up in the Philippines as part of its match to the project (Note - this is not included in PMP).
- BALANCED engaged UNFPA in discussions about PHE in the CT region and explored possibilities for leveraging resources to support country-specific demonstration projects.
- BALANCED also held discussions with the TNC-CTI-GLC in Bali to integrate a module on PHE Program Design into its training workshops on Conservation Action Planning (CAP) for program managers from CTI countries.
- The team engaged in revitalizing collaborative efforts of the PHE partners working in organizations with offices in Washington DC to increase funding agency awareness of PHE approaches and tools with the goal of increasing the support for, including increased funding for, PHE. Toward this end, the team convened a PHE international fundraising meeting at PRB on December 15, 2009. Ten key PHE professionals attended and the group developed a plan for follow-up in 2010. This meeting represents a significant accomplishment in terms of the BALANCED resource mobilization strategy and contributes to the overall Project goals of increasing funding for PHE worldwide.
- CI and CRC developed a one page project summary of CRC's Pwani Project in Tanzania and submitted it to CI staff that support the CI Women in Conservation Forum. On February 3, 2010, Pwani will be one of three projects presented, and the forum will select one of these to receive an estimated \$5,000 in funding support.

Results for Activity 3.3 include:

- \$281,000 in buy-ins from the ANE Bureau for glacial melt activities—to be programmed after completion of a needs assessment underway by another contractor.
- \$808,306 leveraged as part of CRC's USAID/Tanzania funded Pwani Project.
- \$6,297 leveraged from various donors to support capacity building and participation of PHE champions in conferences.

Status of PMP Indicators for IR3

INDICATOR	# during reporting period
SO1: Number of target organizations incorporating PHE tools, protocols, etc. into their work (PRH 1.1)	1 (UZIKWASA using BMS methodology)
SO2 Dollar value of funds leveraged from USAID Missions and non-USG sources to support PHE implementation and scale-ups (in millions US\$) (PRH 1.2)	\$1,095,603
1.1 Number of individuals trained by BALANCED in PHE know-how and SOTA (State of the Art) practices using 21st century learning tools	95 (CBD TOT-16; PHE provider-47; CBD 32)
3.1 Number of PHE tools, methodologies, and actionable findings replicated in new countries and geographic areas	1 (Ethiopia CBD TOT curriculum)
3.2 Number PHE programs scaled-up (PRH 3.4)	2 (Philippines and Tanzania)
3.3 Number of BALANCED field site activities that produce results that can feed into KM activities (development of tools and success stories)	1 (BMS conducted in the Philippines & Tanzania. A report will be developed and results fed into KM activities in next reporting period.)

IR3 Priorities for next period (January 1 to June 30, 2009)

The BALANCED staff person in bold is the lead person responsible for bringing the activity to completion. Supporting team members follow. This is the best estimate at the writing of this report. Leads may change depending on staff availability and other factors.

In general

- Develop a plan with the USAID Technical Advisor and key senior BALANCED staff for approaching Missions in Tanzania, Ghana and Zambia regarding buy-in opportunities for scaling-up PHE in these countries, and implement that plan. **(Linda)**
- Following the February 2010 South-to-South Exchange, re-engage US-CTI on leveraging resources for integrating CBFP into conservation programs in the CT region. **(Joan)**
- Follow up with the President's Malaria Initiative and other health initiatives working in key BALANCED countries to leverage funds to integrate health activities into on-going PHE activities. **(Linda)**

Tanzania

- Provide continuing technical oversight for the integration of CBFP planning into the on-going USAID/Tanzania funded Pwani project in Tanzania. (**Elin, Juma, Ricky**)
- Explore the possibility of integrating CBFP in Bagamoyo and/or Zanzibar through TCMP's new Pwani project. Expansion will take place in Year 3. (**Elin, Juma, Ricky**)
- Provide technical assistance to WCS/Tanzania as the organization integrates CBFP information and/or service provision in their project sites. (**Ricky**)
- In collaboration with the Pangani district hospital, the department of natural resources, UZIKWASA, and Population Services International, conduct social mobilization that will include public meetings in each village, theater shows, and distribution of PHE IEC materials. (**Juma, Ricky, Elin**)
- Support CBD supervisors to monitor and support CBDs and adult PEs in the Mkwaja and Mkalamo wards. (**Juma**)
- Conduct monthly monitoring and mentoring visits with CBDs/PEs in the Mkwaja and Mkalamo wards. (**Juma**)
- Develop an MOU between the Pangani District and TCMP for integrating PHE into its coastal management activities and for provision of FP commodities to CBDs. (**Juma**)
- Finalize report on BMS conducted in Pangani and draft case study on the results. (**Elin**)

The Philippines and CT region

- Continue implementation of the scale-up of the PHE model in Danajon Double Barrier Eco-region, the Verde Island corridor and the Mt. Capotoan-Mt Cabalantian watershed complex. (**Ronald**, Joan, Ricky)
- Disseminate the baseline BMS findings in Danajon and Verde to local stakeholders. (**Joan**, Ronald, Ricky)
- CI/P to print and distribute 2000 copies of the above to key stakeholders. (**Janet**)
- Continue to advocate for the integration of PHE activities in the US-CTI, especially as follow-up to the SSE-PHE participants from the CT region. (**Joan**)
- Following the SSE-PHE, identify a second seed grant recipient, preferably from the CT region. (**Joan**)
- Once identified, work with the potential seed grant recipient to develop a proposal and detailed implementation plan, and build capacity of the seed grant recipient to integrate CBFP into organization's conservation/health activities. (**Joan**, Ronald)

Ethiopia

- Follow-up with the seed grant recipient, EWNRA, and provide technical support as needed. (**Joan**, Ricky)

Zambia

- Based on a technical assistance visit to WCS Zambia to assist with integrating family planning messages into conservation/health IEC materials, follow-up on opportunities for integrating CBFP into WCS activities. (**Joan**, Ricky, Linda)

III. Key Management Tasks

Accomplishments

- Developed guidelines and forms for the BALANCED Project Seed Grant Program. This includes criteria for the selection of seed grant recipients, award guidelines, subgrant agreements and monitoring instruments.
- Made significant strides in integration across the IRs as noted in the introductory section of this report.
- Strengthened the communications and overall working relationship amongst the members of this project's virtual team, through scheduled Skype calls, posting of all team meeting minutes on the Forum, meeting more frequently with PFPI staff during TA visits, conferences, meetings, etc.
- Planned a strategic visioning and planning meeting for the team's key staff (to be held in January 2010)
- Participated in the Management Review with USAID, which not only highlighted where the Project is making good progress, but areas where additional attention and focus will be given moving forward.
- Made important inroads in engaging with wider PHE community and significant progress in leveraging BALANCED resources with those of other PHE partners on activities of mutual interest and benefit

Challenges

- Although the Coastal Resources Center (CRC) has been the recipient for over 25 years of USAID Cooperative Agreements, these have been from the agency's Bureau for Economic Growth Agriculture and Trade/EGAT. The BALANCED Project is the Center's first funding from Bureau for Global Health Bureau, which has a greater number and frequency of, and different formatting for both its programmatic and fiscal reports than those of EGAT. These factors have created a learning curve for CRC and have put additional administrative demands on the Project's fiscal/administrative team.
- The Project has and continues to follow what is a recognized project activity and expenditure cycle—i.e., a bell curve—with more modest activity and expenditures levels in the first and last years, and increasing levels in years 2-4. However, the Bureau for Global Health averages out the burn rate of expenditures evenly—i.e., divides the expenses-to-date over the number of months since Project award. This method “penalizes” the Cooperator for the slower spending that routinely occurs during a project's first year to 18 months and in its final close-out year. This negatively compromises the funding available for the Project to carry out its obligations. CRC is working closely with the USAID Technical Advisor and AOTR on this issue. .
- With the Project's technical lead, PFPI, located in the Philippines, Project senior staff are considering the need for a senior level PHE expert in East Africa who can

provide technical support, capacity building, and advocacy on an ongoing and more frequent basis than the few times per year that PFPI is able to travel to the region. BALANCED will continue to explore this and other strategies to maximize ways to cost-effectively carry out its mission, pending funding.

Priorities for next reporting period

In the next six-month period, the management team will give priority to:

- Finalizing a budget request of over US \$1 million to fund activities as outlined in the Year 3 workplan. Year 3 is the Project midpoint when, logically, the level of Project activities and spending should be at its highest.
- Taking steps to ensure an accelerated burn rate through the remainder of Year 2 and looking forward into the Project's third and fourth years.
- Conducting an efficient and productive annual team meeting for Year 3 work planning (to be held at CRC)

IV. Performance Management and Reporting Plan (PMP)

The primary goal of the PMP is to build an evidence base for the value-added of an integrated PHE model—i.e., tracking indicators that will demonstrate that integrated projects are more cost efficient, take less time to implement, and are perceived to increase the overall perception of well-being and environmental quality among local communities. A secondary goal of the M&E effort is to report results to USAID, addressing the Results Framework and indicators of both USAID/GH/RPH and Missions that host field activities.

The PMP defines how progress on the BALANCED Program is measured and is used to monitor the activities and accomplishments of the Program, determining to what extent the Program is successful in meeting its goals and targets.

The BALANCED Project Indicators and Progress towards Targets

INDICATOR	Year 2		Cumulative Results (YR1 + YR 2)	LOP Target	Comments
	Total	Target			
SO1: Number of target organizations incorporating PHE tools, protocols, etc. into their work (PRH 1.1)	3	2	3	24	TCMP, UZIKWASA and the Pangani District have implemented PHE tools introduced by BALANCED
SO2: Dollar value of funds leveraged from USAID Missions and non-USG sources to support PHE implementation and scale-ups (million dollars) (PRH 1.2)	\$1,095,603	\$350,000	\$1,445,603	\$3,000,000	Including over \$800,000 leveraged from USAID Tanzania for field activities in the Pangani District, the ANE buy-in and leveraged funds for capacity building and conferences, BALANCED exceeded Year 2 target
1.1 Number of individuals trained by BALANCED in PHE know-how and SOTA using 21st century learning tools	116	72	137	200	Target exceeded in Year 2 to catch up with trainings that were delayed in Year 1
1.2 Number of participants who received BALANCED training and/or mentoring that are now providing training or TA to others on PHE implementation	3	2	3	45	Target exceeded for year 2
1.3 Number of new and/or strengthened partnerships established and actively involved in advancing and supporting wider use of PHE approaches as a result of BALANCED capacity-building intervention (PRH 1.3)	0	2	0	16	Target not met during this reporting period. We anticipate meeting target in next reporting period

INDICATOR	Year 2		Cumulative Results (YR1 + YR 2)	LOP Target	Comments
	Total	Target			
1.4 Number of technical support interventions provided by BALANCED to Missions and to organizations to implement PHE within their programs (PRH 3.2)	5	9	7	30	Target not met during this reporting period, We anticipate meeting target in 2 nd half of Year 2
2.1 Tools, protocols, procedures, systems, methodologies, guides, curricula, or indices with demonstrated programmatic value developed or adapted for country and/or thematic contexts (PRH IR2.1)	2	4	2	25	BALANCED and K4H websites launched in the fall of 2009; several additional tools are in the final stages of preparation
2.2 Number of success stories, peer review articles, conference papers, research studies documenting key actionable findings about the PHE approaches, their lessons extracted, and value-added (PRH IR2.2)	5	5	9	12	BALANCED staff anticipate attending additional conferences in 2 nd half of Year 2
3.1 Number of PHE tools, methodologies, and actionable findings replicated in new countries and geographic areas (PRH 3.1)	2	2	4	9	Target met, but other tools may be developed during 2 nd half of Year 2
3.2 Number PHE programs scaled up (PRH 3.4)	2	1	3	6	Total includes scale up in Tanzania and two different geographical regions – Danajon Bank and Verde Island Passage - in the Philippines. Project scale-up in Ethiopia will be

INDICATOR	Year 2		Cumulative Results (YR1 + YR 2)	LOP Target	Comments
	Total	Target			
					counted after CBDs are trained and up and running
3.3 Number of BALANCED field site activities that produce results that can feed into KM activities (development of tools and success stories)	1	1	1	8	Report on BMS survey conducted in the Philippines and Tanzania expected to feed into KM activities in next reporting period

Field Indicator Report

BALANCED provides evidence of outcomes that illustrate the value-added of an integrated PHE approach by collecting data on a set of common field-level PMP indicators. Data on these indicators are collected on an annual basis in field sites where BALANCED is working. Each field site reports only on those indicators that fit within the scope of their specific activities (e.g., a field project that does not include HIV/AIDS activities will not report on the indicators related to that topic).

This report includes only progress on indicators where BALANCED in some way is contributing towards the result. For example, this means there is no reporting on biodiversity, HIV/AIDS, water and sanitation, or economic growth indicators from Tanzania. Once the PHE activities have become better integrated in Tanzania, it may be more appropriate to report on those indicators as well.

INDICATOR	Year 2		
	Philippines	Tanzania	Total
General			
Number of individuals trained (disaggregated by population (P), health (H), and environment (E) topic-specific training, integrated trainings, and gender)	155	87	256
Family Planning and Reproductive Health			
Number of new users	4,542	0	4,542
Number of counseling visits for family planning/reproductive health (FP/RH) as a result of USG assistance	0	6	6
Number of USG-assisted service delivery points providing FP counseling or services	103	30	133
Average household distance/time to access family planning commodities	Less than 1 km (The health centers were the main source of FP commodities in the villages estimated at more than 1 km to 5 km and were not open everyday. With CBDs, access is everyday, can be anytime in some areas and in the neighborhood less than 1 km away.)	Less than 1 km (Before the PHE providers, the distance to access FP commodities from the dispensaries ranged from 0 to 25 kilometers, with an average distance of 7.8 kilometers.)	Less than 1 kilometer

	Year 2		
INDICATOR	Philippines	Tanzania	Total
Integrated indicators			
Number of population, health, environment organizations addressing non-traditional audiences	11	1	12
Number of enabling local ordinances/policies enacted that integrate PHE	1	0	1

Annex 1:

CONCEPT PAPER FOR SOUTH-TO-SOUTH EXCHANGE ON INTEGRATED POPULATION- HEALTH-ENVIRONMENT (SSE-PHE) February 1 to February 8, 2010 Philippines

Background

The USAID-supported Building Actors and Leaders for Advancing Community Excellence in Development (BALANCED) Project is a global initiative that promotes and supports integrated population, health and environment (PHE) programs worldwide. The project is implemented by the Coastal Resource Center of the University of Rhode Island (CRC-URI) with PATH Foundation Philippines, Inc. (PFPI) and Conservation International (CI) as partners. The goal of the BALANCED Project is to advance and support wider use of effective PHE approaches worldwide. To that end, the project has three key strategies: 1) build capacity of organizations to implement integrated PHE activities, 2) share state of the art (SOTA) PHE knowledge and tools and 3) scale-up PHE field activities in countries with biodiversity conservation areas and high population growth.

As part of our strategy to share SOTA knowledge and build capacity of organizations to implement effective PHE approaches, the BALANCED Project will conduct a south-to-south exchange (SSE-PHE) with organizations and their government counterparts poised to advance effective PHE approaches in their countries. The SSE-PHE is a cross-institutional learning opportunity targeted to key decision makers and policy makers from conservation non-governmental organizations (NGOs) and, if appropriate, their government counterparts ready to support PHE in their region. Participants will be selected based on their position in the organization and ability to make decisions about resource allocation, site selection and program implementation for PHE activities in their own settings.

The exchange will take place in the Philippines and showcase PFPI's "gold standard" PHE approach called Integrated Population and Coastal Resource Management (IPOPCORM). This project was implemented in partnership with local government units and community-based organizations. IPOPCORM's experience demonstrates that sustainable approaches to PHE require collaboration between NGO and a local government counterpart (GO-NGO) and local communities. As such, the SSE-PHE seeks to expose the participants to a successful PHE model and the opportunity to jointly develop a plan of action for adapting best practices in PHE service delivery for replication in their country settings.

The specific objectives of the south-to-south exchange are the following:

- 1) Broaden participants' understanding and support for effective integrated approaches to population, health and environment

- 2) Strengthen participants' knowledge of community-based and integrated PHE systems and service delivery mechanisms
- 3) Develop a country/region-specific PHE action plan
- 4) Promote alliances and/or teamwork among GO and NGO decision and policy makers intending to implement PHE interventions
- 5) Galvanize commitment to PHE among the GO and NGO decision and policy makers and willingness to mobilize local resources
- 6) Strengthen the capacity of GO and NGO decision and policy makers to act as champions and leaders of effective integrated PHE programs

Key decision makers from NGOs and, if appropriate a GO policy maker will be selected from select BALANCED focus countries in Eastern Africa and key participant(s) from the Coral Triangle region. The participants for the SSE-PHE will be selected on the basis of the following criteria: They must:

- Be key decision maker from an NGO working on funded conservation activities who is new to PHE (in their country or region)
- Be a key decision maker from an NGO working on a newly established or recently established PHE sites who may be facing a challenge to the successful implementation or further investment in the PHE approach paired with a key government official
- Be a key decision or policy maker from an NGO or GO who is in a position to mobilize resources (cash or in-kind) and/or opportunities for PHE implementation
- Be a key decision maker who has the potential to convince other government policymakers and non government leaders on the benefits of PHE and galvanize government commitment to integrated PHE approaches in their countries/project sites
- Have no reservations about family planning or contraceptives
- Be committed to implement their integrated PHE action plan developed during the SSE-PHE upon your return home
- Be able to communicate in the English language

The following results are expected from the south-to-south exchange participants:

- A commitment to using CBFP activities as a conservation approach to improving environmental and health outcomes in your country/region.
- Willingness to learn more about effective integrated PHE approaches and mechanisms for involving community leaders and volunteers in the delivery of PHE services;
- Willingness to work together with your NGO and/or government counterpart to support PHE approaches in your region/country

- Willingness to jointly develop your site-specific action plans that include advocacy communication for the integration of family planning and other health strategies into natural resource management (NRM)/conservation agendas and capacity building for local institutions and communities to implement community-based family planning activities in conjunction with conservation actions
- Ability to mobilize resources identified to support implementation of advocacy communication and/or integrated PHE activities
- Willingness to become champions to advocate and plan for PHE implementation

The effectiveness of the South-to-South Exchange shall be assessed through the following activities which will be implemented by PFPI in conjunction with the BALANCED Project Director and other staff:

- (a) Measuring the participants' level of PHE knowledge and skill level before and after the SSE-PHE.
- (b) Monitoring the follow-on activities of the NGO or GO-NOV team particularly in the areas of PHE advocacy, policy reform and implementation and co-financing of the PHE action plan and field based activities.
- (c) Assessing whether, and or to what extent, the action plans developed during the SSE-PHE were implemented.

Annex 2: Highlights of the 2009 Behavioral Monitoring Surveys Danajon Bank and Verde Island Passage, Philippines

The Coral Triangle is a vast expanse of ocean bordered by the Philippines, Indonesia, Malaysia, Papua New Guinea, Timor-Leste and the Solomon Islands. It is the most diverse marine territory on earth and one of the planet's major food sources. Two globally significant ecosystems within the Coral Triangle (CT) are located in the Philippines' Central Visayas region, namely the Verde Island Passage (global epicenter of marine biodiversity) and the Danajon Bank (one of two double barrier reefs in the CT).

About 2.7 million Filipinos reside in coastal areas bordering the Verde Island Passage (VIP¹) and the Danajon,² and rely on the goods and services that flow from these bionetworks for food and livelihood. In recent years, however, the biodiversity and productivity of these life-sustaining ecosystems have deteriorated due to anthropogenic stresses driven, in part, by demographic factors (high population density and growth) and policy gaps and institutional weaknesses. As a result, food insecurity and conflicts among resource users are escalating - with severe consequences for human well-being and social stability in the regions. While government and private groups are addressing these concerns, the gains of their sectoral management programs have proven difficult to sustain in the face of increasing population growth and demand for aquatic resources.

The same anthropogenic stresses that pose threats to the sustainability of fish and other aquatic resources are also aggravating the impacts of climate change in coastal Philippines. This was borne out by recent tropical storm Ketsana whose devastating impacts on the coastal city of Manila were exacerbated by its overcrowded condition, poor urban planning (inadequate drainage and garbage disposal) and deforestation in the nearby Cordillera Mountains, which compounded the flash floods triggered by the storm's record level of rainfall. And unless steps are taken to build resilience to climate change, it can be expected that an increased number of people in Philippines will be "at risk of hunger," according to a current assessment by the Asian Development Bank³.

Recognizing the need for a more holistic response to the multi-faceted challenges confronting coastal communities, PATH Foundation Philippines Inc. (PFPI) developed a model that links population, health and environment (PHE) factors and supports cross-sectoral coordination and collaboration. Using a quasi-experimental evaluation design, PFPI tested its "integrated population and coastal resource management"

(IPOPCORM) approach in several coastal areas during 2001-2007

Results of this six-year research demonstrate that PHE approaches are cost-effective and can generate higher impacts on human *and* ecosystem health outcomes compared to sectoral management programs. The model also demonstrated potential for strengthening

¹ 33 coastal municipalities whose population total about 1.7 million people lie within the borders of the VIP

² 19 municipalities with populations totaling about 1.0 million border the Danajon Double Barrier Reef

³ Pongphon Sarnsamak. "Climate Change to Have Severe Impact on Food in Region: ADB." Friday, October 2, 2009. The Nation, Vol. 34, No 52373. October 2, 2009.

community and ecosystem resilience to climate change⁴. IPOPCORM has since been replicated in 1,070 coastal *sitios* (hamlets) of 33 municipalities spanning 8 marine conservation priority areas in southern Philippines. This was achieved through unique partnership arrangements involving local governments units (LGU), non-governmental organizations (NGO), fisherfolk and other coastal resource users, and their Peoples Organizations (PO).

The current challenge is to test the scalability of PHE at the level of the ecosystem, which has yet to be demonstrated anywhere in the world. In 2008 PATH Foundation initiated work to bring IPOPCORM to scale in the Danajon and VIP ecosystems under a project entitled Poverty, Population and Environment (PPE) funded by the Packard Foundation and local collaborators⁵. The USAID-funded BALANCED⁶ project is also supporting activities designed to monitor the scale-up process and documents its lessons and best practices.

BEHAVIORAL MONITORING SYSTEM (BMS)

The Behavioral Monitoring System (BMS) is one of the information systems developed by PFPI for program monitoring purposes. It uses population-based surveys to collect quantitative information in order to describe target groups in the community, monitor progress toward desired changes, and calibrate implementation strategies. PFPI has refined the system over a period of 14 years and applied BMS methodologies in both urban and rural areas to monitor HIV/AIDS prevention, family planning and PHE activities. For the IPOPCORM initiative, the BMS was designed to gather information on attitudes and behavior related to indicators for reproductive health, coastal resource management and their integration. For the PPE project, additional indicators were added to monitor levels of poverty, food security and climate change awareness that may influence PHE in the coverage areas.

1. Methodology

A. Study Design

This study considered a cross-sectional design using quantitative methods and face-to-face interview of sample respondents. Data from BMS surveys are then triangulation with qualitative information from other sources (local government, field supervision reports) to draw inferences for program refinement and policy reforms.

⁴ Castro, J. and L. D'Agnes. (2008) Fishing for Families: Reproductive Health and Integrated Coastal Management in the Philippines. FOCUS Article. ECSP Woodrow Wilson Center for Scholars.

⁵ Local NGOs and local government units

⁶ Building Actors and Leaders for Advancement of Excellent in Community Development (BALANCED) is a global program of USAID's Office of Population and Reproductive Health which seeks to advance use of effective PHE programs worldwide.

B. Survey Instrument

The (BMS) instrument (questionnaire) was translated and pre-tested in April 2009 by individuals with prior BMS implementation experience. The instrument was finalized, based on pre-test findings, and contains socio-demographic, health and CRM-related questions as well as opinion questions on population-environment and poverty linkages. Manuals of procedures and coding instructions were prepared to guide the interviewers in the sampling method and in the conduct of the survey.

C. Survey Areas

The 2009 BMS surveys were conducted in three areas where IPOPCORM is being scaled-up under the PPE project. The study sites include Ubay (Bohol) and Bato (Leyte) as part of the Danajon Bank and Isla Verde (Batangas) as part of the Verde Island Passage (VIP). Within each site, six coastal *barangays* (villages) were selected based on the level of cooperation of the local government and their accessibility and proximity to a marine protected areas (MPA).

Target areas for the BMS share a set of common characteristics that render them ideal candidates for PHE policy and program development. All are rural and have relatively high rates of population density and growth compared to national figures. Their populations also have high momentum with more than 35% of people under the age of 15 years - which also is an indication of future anthropogenic stress. Incidence of poverty is high and increasing in these areas. All are located in ecosystems that are ranked by the government as “extremely high priority” for conservation of marine biodiversity.

D. Data Collection Methods

The target respondents for the 2009 BMS comprise individuals in the reproductive age group (15-49 years). A sample of 300 respondents per study site was targeted (total 900 respondents). The interviewers who conducted the survey are community outreach workers who received prior training from PFPI on BMS survey processes and interview methods. The enumerators were given a 2-day training to discuss the nature, purpose, survey procedures, fieldwork techniques and specific aspects of the study to be carried out by the team. Social preparation (e.g. courtesy calls to local officials) was also conducted by the enumerators and project coordinator to secure permission and support from the local authorities in conducting the survey.

Selection of Subjects

The interviewers conducted an initial preparation in the field before the actual survey. They secured master lists of households from the selected *barangays* and used them to systematically select the sample households. A sample of 1080 households was drawn from all the study *barangays* (20% adjustment was

included). From these sample households, only one eligible household member was interviewed.

The interviewers selected the respondents from each sampled household using the Kish method/grid. This method provides a mechanism for selecting a member of each household in a systematically varying fashion so that, across the entire sample, all possible household member-types are represented in the same proportions as in the population (McBurney 1988).

After the interviewer identified the respondent in the household, the interview proper was performed using the pretested BMS questionnaire. All the respondents were interviewed in their local dialect and their answers were recorded on the questionnaire during the interview.

E. Data Processing

The questionnaires were edited by the interviewers while they were still in the field. They also coded the responses using the coding instruction as their guide. Responses in local dialects were also translated to English. After the editing and coding process, the questionnaires were then submitted to PFPI office for further checking for accuracy and completeness. The data were encoded in the data entry program constructed using CPro 3.4 software. After encoding, a series of range and consistency checks were done. Inconsistencies were traced back to the specific questionnaires and subsequently corrected. To ensure quality of data, 20% of the encoded data were manually validated against the responses on the questionnaires. STATA software version 10.0 was used for data management and analysis.

F. Data Analyses

Descriptive statistics were generated for the responses. For categorical variables, frequency and percent distributions, and bar graphs were presented. For continuous variables (e.g. age), summary statistics such as means or medians and range were generated. Chi-square (χ^2) test was used to determine if presence of a disease in the family within the last 12 months is associated with: i) perceived change in the environment; ii) waste management; iii) water source; and, iv) sanitary toilet. All the analyses were two-tailed, and *p-values* of 0.05 or less were considered significant.

OVERVIEW OF 2009 BMS RESULTS IN VIP and DANAJON

Demographic and Socio-economic Profile

A total of 897 respondents from 18 coastal *barangays* were surveyed in May for the 2009 BMS. The age of the respondents averages 31.6 years. Young (age 15-24 years) adults comprise 29 percent of the BMS sample while females represent six out of 10 respondents. Majority of those interviewed are married or living in union and have completed high school. Most are natives of their respective *barangay* and reside in households with 5.1

members, on average, which is similar to the national figure (5.0). Despite having high education level, 34 percent of respondents are unemployed (“no source of income”) while those with jobs mainly engage in trading, handicraft/cottage industry work (non-formal sector), farming and fishing – all of which rely on natural resources. Sixty percent of working respondents report no secondary source of income.

The high rate of unemployment among BMS respondents is consistent with the low levels of household income reported by the same interviewees. Overall, 62 percent of respondent households earn less than P5000 (US\$110) per month from all sources, which is below the official poverty threshold for a family of five⁷. Incidence of poverty in the BMS sites is considerably higher than the national average rate (40%) and the estimated rate for coastal municipalities in the Philippines (54%)⁸.

The average monthly income figure for BMS respondents, however, masks wide disparities in poverty incidence across the survey sites. On Isla Verde, poverty lurks at 79 percent, whereas in the Danajon it ranges from 62 percent of households on Ubay to 45 percent on Bato⁹. Even more striking is the proportion of households living in “abject” poverty on Isla Verde (38%) and in Ubay (18%) with combined monthly income from all sources ≤ P1500 (\$30) per month which translates into a daily income share of P10 (US\$0.20) per household members.

Despite the impoverished state of the BMS communities, 59 percent of respondents with monthly income below P5000 claim it is “sufficient to meet daily needs” with yet another 6 percent saying they are able to “save money after meeting daily needs”. Other BMS data showing majority of respondents own a cell phone (70%), radio (61%) or television set (50%) support these claims and the implication that even “poor” households have some disposable income. This augurs well for the social marketing strategy used in IPOPCORM to promote contraceptive self reliance in coastal areas.

Reproductive Health Situation and Practices

More than 80 percent of BMS respondents are sexually active. The average age of sexual debut is 21 years and ranges from 6-38 years with the youngest age reported in Ubay¹⁰. Majority of BMS respondents (80%) have children with the average number being 3.7, which is higher than the national total fertility rate (3.2 children per woman). The high fertility rate corresponds with the low levels of contraceptive use (modern methods) among BMS respondents which range from 13 percent in Verde to 23 percent in the Danajon areas (compared to 35% for rural Philippines). Among those currently using modern FP methods, oral pill is the method of choice in Verde and Ubay whereas IUD is population in Bato. Most users obtain their supplies from drugstores or the government’s rural health units (RHU). Other information showing drugstores are few and far between in these study

⁷ P6195 (US\$136) per month

⁸ Philippines National Statistics Coordinating Board (NSCB), 2007.

⁹ These rates mirror the government’s most recent statistics for poverty incidence among fisher households which averaged 66.7 percent in 2007.

¹⁰ Information from other sources supports the implication of child sex abuse in Ubay.

areas and RHUs often run out of FP supplies suggest lack of access may be a reason for low levels of contraceptive use and FP practice.

There is a disconnect between what respondents cite as their “preferred” number of children (3.2) and the actual number of their offspring (3.7) suggesting unmet need for family planning is prevalent in these areas. This inference is supported by the same BMS data showing high numbers of unintended pregnancies especially in Bato where 44 percent of those who reported a pregnancy in the 12 month period preceding the survey said it was “unplanned” compared to about 35 percent in the other study sites. These rates are higher than the national figure for unintended pregnancy among women of childbearing age (30%)¹¹. However, 70 percent of the new mothers breastfed their infants which is encouraging given that only 16 percent of Filipino mothers nationwide initiate breast-feeding.

The majority of BMS respondents believe that youth should have access to contraceptives and information on sexuality suggesting these communities will be receptive to programs targeting teens with reproductive health services, which are clearly needed as 44 percent of young (15-24 yrs) people who participated in the BMS are already having sex and less than 8 percent said they used any method to prevent pregnancy during first sex.

Across the sites, there is a high level of awareness among BMS respondents of the dual-protection that condom use affords with 68 percent saying it can prevent pregnancy *and* sexually transmitted infections. Few (<4%), however, report recent use of condom for either pregnancy or disease prevention purposes which again could be due to access constraints.

Awareness of reproductive health rights is also high in the study areas as evidenced by 86 percent of respondents who agree with the opinion statement “Everyone should have the right to choose how many children they want and when to have them.” This result implies people are more likely to follow their conscience rather than dictates of the Catholic Church that prohibit contraceptive use. Another BMS finding that supports this notion is the high level of concern among BMS respondents that “if couples do not practice FP they may not be able to send all of their children to school.” The huge value that Filipinos place on education should be exploited by programs that aim to reduce unmet demand for family planning in these coastal communities.

Public Health and Environmental Health Situation and Practices

Access to safe drinking water varies across the BMS study sites with less than 1 percent of households on Isla Verde having a protected water source compared to 6.6 percent on Ubay and 64 percent on Bato. Sanitary toilet facilities, on the other hand, are widely available with 72 percent or more of households in each area having toilets. Majority of respondents (65%) burn their garbage while one-fourth dumps waste in lowland areas or the ocean. Composting is practiced by about 20 percent of respondents. Bato is the only

¹¹ Guttmacher Institute (2009) *Meeting Women's Contraceptive Needs in the Philippines*. In Brief: 2009 Services Volume 1. http://www.guttmacher.org/pubs/2009/04/15/IB_MWCNP.pdf

site where respondents reportedly have access to municipal garbage collection and 45 percent use it to dispose of waste.

The respondents were asked if they or a member of their family had experienced one of the following diseases or symptoms in the last 12 months: severe diarrhea, pneumonia, skin disease, dengue, malaria, tuberculosis, sexually transmitted disease (ST) and jaundice. Nearly half reported a disease incidence with severe diarrhea, skin diseases and pneumonia being the most frequently cited. The rates differ significantly ($p\text{-value} < 0.001$) across the study areas with respondents on Bato reporting the highest incidence (57%) followed by Ubay (55%) and Verde (34%).

Climate Change Awareness and Impacts

The respondents were queried about changes in the climate or environment in their area over the past three years. Across the survey sites, “irregular rainfall” was the most frequently cited change followed by “increasing drought” (Ubay and Verde) and “ocean pollution” (Bato).

Chi-square tests were performed to determine if the percentage of respondents experiencing any of the diseases differed from those who perceived changes in the environment/climate and those who did not. The results indicate a higher rate of illness among those who observed environment/climate changes in their area compared and those who did not. The rate of illness suffered by the respondents (or any family member) was also analyzed in association with their waste management practice, source of drinking water, and access to sanitary toilet. At 5% level of significance, it was found out that the proportion of respondents who suffered any illness is greater for those who did not dump their garbage ($p\text{-value} < 0.04$) and for those who do not have sanitary toilets ($p\text{-value} < 0.002$).

Marine Coastal Resource Use and Food Security

Less than 10 percent of respondents across the sites report fishing as a source of income. However, 50 percent of the surveyed households own fishing gear which suggests a higher level of fishing effort in these communities. Among those currently earning an income from fishing, the median catch during the last fishing activity ranges from 2.5 kg to 3.0 kg with Bato (Danajon site) reporting the lower level. The BMS overlooked the need to ask fishers about the average number of hours spend fishing during the last activity. Such data would have enabled our analysts to calculate the catch rate per unit of effort (CPUE) which, for small-scale fishers in the Philippines averages 2.0 kg per fisher-hour¹². Given that 72 percent of BMS respondents also report “there has been a decline in fish availability over the past few years”, we can infer that the fisher-respondents are having to travel further distances and spend longer hours fishing in order to meet their families’ daily

¹² Green, Stuart J., Alan T. White, Jimely O. Flores, Marciano F. Carreon III, & Asuncion E. Sia. (2003). *Philippine fisheries in crisis: A framework for management* (CRMP Document No. 03-CRM/20003). Cebu City, Philippines: CRMP of the DENR.

needs, and that their hourly catch rate is less than the median catch rate reported during the last fishing expedition.

The respondents' perception of declining fish availability is consistent with the levels of food insecurity revealed in the BMS data. In the Danajon sites, 64 percent of respondents agree with the opinion statement "sometimes there is not enough food to go around and the family goes hungry," compared to 42 percent on Isla Verde. These levels of hunger are high compared to national estimates of the number of Filipino families that lack food (30%).

More respondents on Ubay (57%) are aware of the existence of a fish sanctuary or other type of marine protected area (MPA) in their area compared to Verde (36%) and Bato (17%). This trend emulates the actual numbers of MPAs in the study sites with Ubay having four MPAs compared to two in Isla Verde and only one in Bato. Among the respondents who are aware of a sanctuary in their area, majority value the sanctuary because it "increases the number of fish in the community." Other frequently mentioned benefits include "conservation of coral reefs" and "gives additional income to the community. Among those with awareness, 90 percent report no involvement whatsoever in the management of the fish sanctuary. This result together with other BMS data showing 16 percent of respondents lack knowledge of MPA benefits suggests a need for more intensive education and advocacy efforts to increase coastal inhabitants' appreciation of, and participation in, marine protected area management particularly given the food insecurity concerns discussed earlier.

When asked about issues pertaining to community empowerment and responsibility for environmental protection, over half of the respondents in the Danajon sites claim "our community is helpless in protecting the environment" compared to fewer than 24 percent on Isla Verde. Similarly, more respondents in the Danajon think the government is solely responsible for conservation, compared to Verde. These trends reflect a need for interventions that can enhance community understanding of the links between coastal conservation and improved food security and increase their awareness of provisions under the law that delegate shared responsibility for environmental protection to local government units and civil society (e.g., Local Government Code). More inputs are also needed to encourage local governments to enter into co-management arrangements with local communities for protection of coral reefs, mangrove stands and other coastal habitats particularly in the Danajon ecosystem.

Awareness of Population-Health-Environment (PHE) Linkages

The respondents were presented with several opinion statements designed to gain insights into their level of awareness of PHE linkages. Majority of those surveyed across the sites (>72%) believe food insecurity is linked to "too many people and not enough fish to go around." Similar proportions agree that "if couples do not practice family planning, there may not be enough natural resources to go around in the future." Over half perceive linkages between the overcrowded conditions in their communities and spiraling garbage problems. Majority also know that mangrove forests offer protection against the effects of

a tsunami. A disturbing number of responders in Ubay, however, believe that it is acceptable to throw garbage on the beach “because the ocean takes it away and it causes no harm.” These perceptions could be due to the lower level of higher education (high school and college) among Ubay respondents compared to their peers in the other study sites, and indicate need for information, education and communication (IEC) campaigns tailored to their levels of schooling in order to reduce harmful practices and correct misunderstanding. The same campaigns can capitalize on other findings from Ubay showing “ocean pollution” and “floating dead fish” rank among the environmental changes frequently cited by BMS respondents from that area and their possible correlation with incidence of severe diarrhea (32%) and skin diseases (28%) which topped the list of communicable diseases that affected households in the last twelve months.

A considerable number of respondents in the Danajon still perceive large numbers of children to be an economic advantage with the highest proportion found in Ubay (29%). And the disaggregated BMS data indicate Ubay respondents *indeed* have larger household size (5.3), higher rate of recent fertility (28%) and higher total fertility (4.0) compared to their peers in the other survey areas. Again, this could be due to their lower education attainment which other researchers note directly correlates with higher fertility. Their perception that larger families enjoy better economic status, however, does not hold true for households in their communities where poverty lurks at 62 percent and nearly one-in-five households lives in “abject” poverty with income from all sources averaging less than P1500 (US\$30) per month. This disconnect should be brought to the attention of Ubay’s leaders in a policy brief drawing on data from the BMS. PFPI staff should also feedback the BMS findings to communities that participated in the study and members of their barangay development councils.

Parallels can be drawn with the situation in Verde where larger numbers of households suffer from poverty and lack access to safe drinking water and electricity compared to Ubay but are better able to cope because of their smaller household size, fewer numbers of children, and lower rates of recent and total fertility. Verde respondents also enjoy better health status with fewer families lacking for food (42%) compared to Ubay (66%). Fishers from both sites report similar rate of fish catch (3.0 kg) with the difference being that the daily harvest is shared among 4.6 household members in Verde compared to 5.3 in Ubay. Verde residents also feel more empowered and responsible for protection of their environment and have greater appreciation of the benefits of MPA and conservation of coral reefs. Fewer residents on Verde (26%) compared to Ubay (63%) cite “ocean pollution” as an environmental change issue and the vast majority (90%) disapprove of throwing garbage on the beach whereas in Ubay over one-third consider it to be an acceptable practice. Overall, the PHE dynamics on Verde are more conducive to human and ecosystem health compared to Ubay - despite the less favorable economic situation of households in the former site.

Recommendations

- PFPI should feed-back the BMS results to LGUs and communities that participated in the study and use the findings to guide the development of site-specific IEC and

advocacy strategies drawing on the facts and implications documented in this report.

- Advocacy efforts should encourage local government to respond to the following factors which are contributing to resource depletion and environmental decline in the study areas: high unemployment, heavy reliance on natural resources, and absence of secondary sources of income.
- LGUs should encourage and facilitate greater community participation in the protection and management of coastal resources and work with and through barangay development councils to address the growing problem of ocean pollution linked to coastal resident's inappropriate waste disposal practices
- Involvement of peoples' organizations and other local institutions in the development and delivery of appropriate IEC messages and campaign materials is strongly urged to enhance effectiveness and assure that messages and media are appropriate to the education level and cultural context of the areas.
- Lack of access to condoms may not be the only reason use is low despite high awareness. There may be other reasons for awareness not being translated to actual use which could be identified using focus group discussion methods.
- The high awareness on reproductive health rights reflected in the BMS results can be used as an opportunity to convince local governments (concerned about the stand of the Catholic Church) to integrate RH into environment and climate change adaptation agendas.
- The high rate of women initiating breastfeeding is encouraging but exclusive breastfeeding (first 4 6-months of life) is needed to impact child survival and enhance birth-spacing. The BMS instrument should incorporate an additional question to determine the length of duration of exclusive breastfeeding and use the results to guide IEC strategies and messages.
- The BMS results shed important light on climate changes occurring in the study area. Additional questions are warranted to determine how individuals are coping with the change in their area.
- PFPI should repeat the BMS survey in 18-24 months so as to track changes in PHE and climate change awareness and prevention/coping practices over time.

Annex 3: Coral Triangle Countries Demographic profiles

DEMOGRAPHIC PROFILE : CORAL TRIANGLE (CT) COUNTRIES (Draft Dec 09)								
CT Country	Total Population (millions)	Pop Growth Rate ¹ (%)	Doubling Time (years)	Total Fertility	Youth Bulge ²	Pop Density ³ (pax/km ²)	Estimated no. of people living within CT borders (millions)	Comments
Indonesia	239.9	1.4	43	2.6	29	126	7.0	E. Kalimantan and N. Sulawesi
Malaysia	27.7	1.7		2.6	32	84	2.0	Sabah
Philippines	88.6	2.04	30	3.3	35	302	25.0	Sulu-Sulawesi corridor
Timor-Leste	1.1	3.2		6.7	45	73	TBD	
Papua New Guinea	6.4	2.2	31	3.9	40	29	TBD	
Solomon Islands	0.41	2.8		4.6	41	18	TBD	

1. Average annual growth rate of population based on latest census data
2. Youth bulge= proportion of population in the age group 0-14 years. The most important demographic characteristic of a population is its age-sex structure. Populations with large numbers of people under the age 15 years have high momentum (a driver if future population growth and pressure on the environment)
3. Population densities in excess of 200 persons per square kilometer have been linked to high biodiversity loss, according to a UNFPA study (Harrison, P. 1997. Population and Sustainable Development. Five years after Rio)

Analysis: In establishing criteria for selection of CT countries that should be prioritized for FP/RH investment, the following factors should be given high consideration:

- a) Countries that have the largest number of people living in the CT region
- b) Population density of those countries that have large number of people residing in the CT region
- c) Youth bulge and total fertility rate of those countries