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

**BALANCED-Philippines Project Overview and
Year 1 Workplan**

December 1, 2010 – September 30, 2011

***Cooperative Agreement No. GPO-A-00-08-00002-00
Population Health Environment Technical Leadership Cooperative
Agreement***

Implemented by:

**PATH Foundation Philippines, Inc.
and
University of Rhode Island Coastal Resources Center**



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Acronyms List

ADB	Asian Development Bank
BALANCED	Building Actors and Leaders for Advancing Community Excellence in Development
BHWs	Barangay Health Workers
BMS	Behavioral Monitoring Survey
CA	Collaborating Agency
CBD	Community Based Distributors
CBFP	Community-based family planning
CI	Conservation International
CRC	Coastal Resources Center
CRM	Coastal Resource Management
CT	Coral Triangle
CTI	Coral Triangle Initiative
CTSP	Coral Triangle Support Partnership
CYP	Couple Year Protection
DOH	Department of Health
FISH	Fisheries Improved For Sustainable Harvest
FP	Family Planning
GH	Global Health
GH/OPRH	Global Health/Office of Population and Reproductive Health
ICM	Integrated Coastal Management
ICRMP	Integrated Coastal Resource Management Program
IEC	Information, Education and Communication
IPC	Interpersonal Communication
IPOPCORM	Integrated Population and Coastal Resources Management
LGU	Local Government Units
ME&L	Monitoring, Evaluation and Learning
MOA	Memorandum of Agreement
MPA	Marine Protected Areas
NGO	Non-Governmental Organization
NRM	Natural Resources Management
OEE	Office of Environment and Energy
OH	Office of Health
PE	Peer Educator
PFPI	PATH Foundation Philippines Inc.
PHE	Population, Health and Environment
PMP	Performance Monitoring Plan
PPE	Poverty, Population, Environment
PTAL	PHE Technical Assistance Lead
RH	Reproductive Health
RH/FP	Reproductive Health/Family Planning
RHU	Rural Health Unit
SIGUE	Philippines PHE Network
STI	Sexually-transmitted infections

TOT	Training of Trainers
URI	University of Rhode Island
US	United States
USAID	United States Agency for International Development
WRA	Women of Reproductive Age
YPE	Youth Peer Educator

Project Summary

The United States Agency for International Development (USAID) Philippines is providing a 22 month—December , 2010 through September 30, 2012—US\$500,000 Buy-in to the BALANCED (Building Actors and Leaders for Advancing Community Excellence in Development) Project to support results-oriented population, health, environment (PHE) field activities in biodiversity-rich marine areas of the Philippines. The Coastal Resources Center (CRC) at the University of Rhode Island (URI), with PATH Foundation Philippines Inc. (PFPI) at the lead, are the implementing agents for the BALANCED-Philippines project.

BALANCED-Philippines will use the integrated PHE strategy to advance family planning (FP) activities in selected key bioregions within the country where demographic factors threaten the diversity and productivity of marine ecosystems and the sustainability of conservation gains. As a Buy-in, the BALANCED-Philippines project furthers the overall BALANCED Project goal to advance and support PHE approaches on the ground as an effective development strategy.

During the next two years, strategic activities are planned to help achieve the goal of BALANCED-Philippines “to meet unmet need for family planning services in targeted marine bioregions where population is identified as a threat to sustainable resource management.” Our vision is that at the end of project, communities in the target marine bioregions will be empowered to meet their expressed needs for voluntary family planning services and information and will understand the underlying linkages between reducing population pressure and improving coastal resources management. Based on our experience with successful integrated PHE projects, we also aspire to create an enabling environment among policymakers at all levels of government (from the barangay to provincial levels) that promotes the integration of PHE into governmental plans and budgets. This vision and these goals are reflected in the first year workplan activities as outlined starting on page 11 of this document.

The program goal will be achieved through three intermediate results (IRs).

- IR1- Improved access to family planning/reproductive health services in key bioregions
- IR2 – Increased community awareness and support of family planning and conservation as a means to improve health, food security and natural resources
- IR3 – Increased policy makers' commitment to promote/support FP/RH services and integrated approaches

Within 22 months of working in the three types of sites described below, we estimate that BALANCED will assist between 31-41 municipal governments to establish/strengthen community-based service delivery mechanisms that would serve more than 1.1 million people and reach an estimated 125,000 under-served women (15-49 years) with FP methods and PHE information in a cost-effective and sustainable manner. The map entitled Geographic Location of the Various Scale-Up Sites (see page 10) shows the geographic location of the various scale-up sites (new, maintenance and rider) and the populations to be served in each bioregion.

Geographic Scope

These results will be achieved by working with and through local government units (LGUs), conservation and health groups, Peoples Organizations (PO) and other local institutions in two biographic regions: 1) South Sea Bioregion covering Verde Island Passage and 2) Visayan Bioregion covering Danajon Bay and the Camotes Sea. In these regions USAID Philippines, the USAID Coral Triangle Support Partnership (CTSP) and others are programming investments for fisheries and coastal resources management by building the capacity of these local institutions to develop and sustain community-based mechanisms for the delivery of FP services and PHE information and education to marine-dependent communities.

The project will build upon the lessons and best practices of prior PHE projects funded by USAID and the David and Lucile Packard Foundation and implemented by PFPI in the Danajon Bank (FISH-Reproductive Health Project/FISH-RH, Alternative Advocacy Project/AAP, and the Integrated Population and Coastal Resource Management Initiative /IPOPCORM) , and in the Verde Island Passage (the Poverty-Population-Environment/PPE project). Over 2.8 million Filipinos reside in these two bioregions of which an estimated 250,000 are women (15-49 years) with unmet need for FP or with a need for more use-effective methods of contraception. Verde Island Passage is the global epicenter of marine biodiversity and a focal area for USAID's CTSP Project, which also endorses the PHE approach. The Danajon Bank has regional significance being one of only three double-barriers reefs in Indo-Pacific. Under the FISH-RH and IPOPCORM initiative, demonstration sites were established in this bioregion and these continue to serve as PHE "learning areas". By building upon the groundwork, networks and institutions fostered under previous projects and by dovetailing the BALANCED Project with current and planned coastal resources management (CRM) programs of USAID, the Asian Development Bank (ADB), local governments and others in the Philippines, this project will be able to achieve a scale of PHE effort that otherwise would not be attainable if BALANCED were to deliver the services independently.

Project Strategy

Building on the PHE experience in the Philippines, BALANCED-Philippines will scale-up best practices and lessons learned reaching additional new communities living in municipalities and areas where coastal/fisheries management activities are ongoing in the South Sea and Visayan Bioregions. BALANCED-Philippines will also maintain PHE initiatives established by PFPI in previous PHE projects in the same two bioregions. To be able to reach more communities, and cover other important bioregions, the project will conduct cross-site exchanges for local government and nongovernment executives from other bioregions where ongoing CRM/fisheries activities are supported by other donors and stakeholders (herein called rider sites) in year 2. Over the next two years of project implementation, a complement of PHE activities is planned for the new, maintenance, and rider sites as follows:

New Sites

The bulk of the project's funds will be invested in nine coastal municipalities in the South Sea bioregion that are "new" to PHE1 but have ongoing LGU coastal resource/fisheries management

¹ Meaning that neither PFPI or other agency has introduced PHE activities into these sites

activities (see Map 1 entitled Network of MPAs in Batangas) and contain 231 barangays where an estimated 41,797 women with unmet FP need reside (see Table 1: Scale-up Coverage per Bioregion). In the “new” sites, BALANCED will provide the full packet of PHE services (PHE advocacy; community-based distribution (CBD) system; peer education (PE) system; contraceptive supply chain; information, education, and communication (IEC); and monitoring), replicating the public-private PHE model (LGU community-based distribution and social marketing of FP methods and PHE concepts) that was developed and refined under a previous Population-Poverty-Environment (PPE) project².

Maintenance Sites

The project will invest moderate resources in activities to strengthen the functionality and sustainability of existing CBD operations and systems in 20 coastal municipalities located in both the South Sea and Visayan bioregions. Those CBD systems, which were established in the private sector under previous PHE projects, were designed to serve 511 barangays where 57,979 WRA are estimated to have unmet FP needs (Table 1- Scale-up coverage per Bioregion). Some of the CBD agents, however, have discontinued their operations while others potentially could serve larger numbers of clients. BALANCED will conduct a CBD needs assessment in these municipalities, herein referred to as “maintenance sites,” and extend tailored technical assistance (based on assessment findings) and periodic monitoring and mentoring support. In these sites, we will reorient the ongoing PHE model (NGO community-based distribution) by involving more LGUs to increase coverage and ensure sustainability as observed from previous PHE projects. Building a public-private-partnership in these sites will enable a larger scale of PHE effort that otherwise could not be achieved solely through private sector involvement.

Rider Sites

Minimal investment will be made in areas where other donors such as ADB are supporting integrated coastal resource management project (ICRMP) activities implemented by provincial and local government units. ICRMP works in 68 coastal towns of five provinces³ where resources are earmarked for population-environment advocacy and information, education, and IEC campaigns during 2009-2013. These campaigns are expected to create demand for population management (among LGU staff) and family planning (among the general public). BALANCED could capitalize upon this demand and extend technical assistance to enlightened LGU officials that want to establish a CBD system in their municipality. Because BALANCED could theoretically “ride” on ADB’s investment, these areas of PHE scale-up are referred to as “Rider Sites.”

The provinces of Cebu and Siquijor offer interesting opportunities for dovetailing ICRMP and BALANCED resources, particularly given Cebu’s jurisdiction over the Danajon and given Siquijor’s proximity to the same bioregion. Masbate in the Central Bioregion offers similar potential. Approximately 285,500 people could be served if BALANCED were to enable 12 ICRMP municipalities to establish CBD systems in the same towns where ADB is supporting population-environment IEC and advocacy efforts. This can, however, be done if PFPI was to be chosen as the partner to implement the PHE IEC activities in the ICRMP sites.

² During Apr 2008-Mar 2010 PFPI worked with 22 LGUs to develop/refine this public-private sector PHE model .

³ ICRMP is working in the provinces of Cagayan, Masbate, Siquijor, Cebu , Davao Oriental and Zambales

Year 1 activities—outlined in the workplan starting on page 11 of this document, will focus on developing a functional CBD and PE system capable of effectively and rapidly providing family planning and reproductive health (FP/RH) information and services to the target marine bioregions as well as promote the linkages of health-seeking and pro-environment behaviors in improving health, food security and availability of natural resources for the future. We will also begin galvanizing LGUs to support FP/RH services and integrated PHE approaches. Table 2 below summarizes the activities planned for the new, maintenance and rider sites over the next two years. The document outlines the workplan for the first 12-months of PHE activity of the BALANCED-Philippines project.

As can be seen from Map 2 (page 10) the “new” sites and the “rider” sites are clustered around the 22 “maintenance” sites, which will not only will facilitate project savings in terms of transportation and monitoring expenditures but will also provide opportunities for cross-fertilization of experience between veteran LGU executives and those that are novices in terms of PHE awareness and experience.

Table 1: Scale-up Coverage per Bioregion

Biogeographic Representation	Province	Municipality (clusters)	New (# brgs)	Maintenance (# brgs)	Rider (# brgs)	Population 2007	Unmet FP Need	Unmet FP Need	Unmet FP Need	Unmet FP Need
							(# WRA ⁴)	New Sites	Maintenance Sites	Rider Sites
South Sea Bioregion: Verde Island Passage (VIP)	Batangas	Batangas City/ Isla Verde		6		5,876	514		514	
		Calatagan	25			51,544	4,510	4,510		
		Tingloy	15			18,548	1,623	1,623		
		Lobo	36			37,798	3,307	3,307		
		Mabini	34			40,629	3,555	3,555		
		Nasugbu	42			113,926	9,969	9,969		
		San Juan	42			87,276	7,637	7,637		
	Oriental Mindoro	Puerto Galera		14		28,025	2,452	2,452	2,452	
		San Teodoro		8		1,5039	1,316	1,316		
		Baco		27		34,127	2,986	2,986		
	Occidental Mindoro	Abra de Ilog		9		25,152	2,201		2,201	
		Paluan	12			13,718	1,200	1,200		
		Looc	9			11,310	990	770		
		Lubang	16			28,267	2,473	2,473		
Visayan Bioregion: Danajon Bay and Camotes Sea	Bohol	Bien Unido		15		23,412	2,049		2,049	
		Buenavista		35		26,443	2,314		2,314	
		Clarin		24		18,871	1,651		1,651	
		Getafe		24		27,852	2,437		2,437	
		Inabanga		50		43,331	3,791		3,791	
		CP Garcia		23		25,118	2,198		2,198	
		Trinidad		20		27,580	2,413		2,413	
		Talibon		25		59,274	5,186		5,186	

⁴ WRA - women of reproductive age

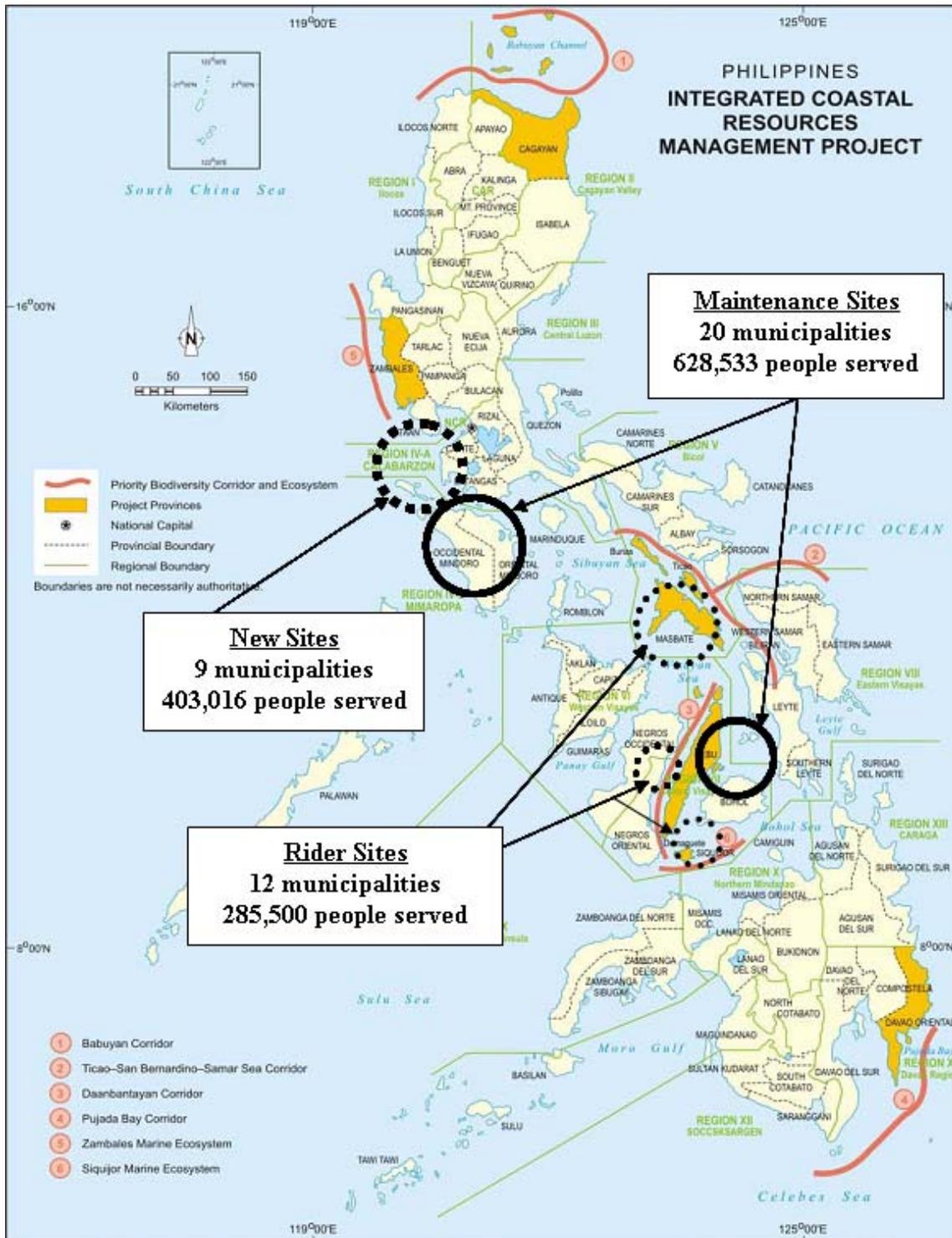
Biogeographic Representation	Province	Municipality (clusters)	New (# brgs)	Maintenance (# brgs)	Rider (# brgs)	Population 2007	Unmet FP Need	Unmet FP Need	Unmet FP Need	Unmet FP Need
							(# WRA ⁴)	New Sites	Maintenance Sites	Rider Sites
		Tubigon		34		44,434	3,888		3,888	
		Ubay		44		65,900	5,766		5,766	
	Leyte	Bato		32		33,930	2,969		2,969	
		Hilongos		51		53,911	4,717		4,717	
		Hindang		20		19,927	1,744		1,744	
		Matalom		30		31,055	2,717		2,717	
		Inopacan		20		19,276	1,687		8,971	
	Cebu	Cordova			13	45,066	3,943			4,000
		Daanbantayan			20	73,254	6,410			6,410
	Central Bioregion: San Miguel	Siquijor & Masbate	10 Towns			200	285,500			24,981
TOTAL	8 provinces	41 towns	231	511	233	1,149,869	125,595	41,797	57,979	35,391

Table 2: Strategies and Activities per IR per Site

Site Type	Yr 1 Activities (Jan 2011 – Sept/2011)	Yr 2 Activities (Oct 2011 – Sept 2012)
	IR 1: Improved access to FP/RH services in key bioregions	
	<ul style="list-style-type: none"> • Conduct Training of Trainers (TOTs) on CBD and PHE Peer Educators (PEs) systems. <ul style="list-style-type: none"> - 3 trainings and 60 LGU/NGO (health & Environment) personnel trained • Trainers recruit and train/updated CBDs <ul style="list-style-type: none"> - 246 CBDs trained in new sites • Establish social marketing arrangements at each municipality <ul style="list-style-type: none"> - 9 social marketing arrangements established in new sites • Train RHU staff on FP/RH information and services and CBD systems <ul style="list-style-type: none"> - 110 RHU staff trained • Provide monthly monitoring/ support to LGUs, CBDs 	<ul style="list-style-type: none"> • Provide monthly monitoring/mentoring support to LGU, CBDs (on CBD reporting , CBD service quality assessment, etc) • Train RHU staff on FP/RH information and services and CBD systems <ul style="list-style-type: none"> - 110 RHU staff trained
	IR 2: Increased awareness and support of FP and conservation in key bioregions	
New 9 coastal municipalities, 231 barangays	<ul style="list-style-type: none"> • LGU trainers recruit and train adult PEs <ul style="list-style-type: none"> - At least 155 PEs trained by LGU/NGO trainers • Adult PEs conduct IPCs <ul style="list-style-type: none"> - At least 4,000 IPCs conducted • Develop/adapt and implement PHE IEC package and monitoring <ul style="list-style-type: none"> - Existing PHE, FP/RH, CRM IEC materials collected, assessed, reprinted/disseminated - PHE messages and IEC materials developed, pretested and disseminated, as needed - IEC Monitored planned and adjusted • Provide monthly monitoring/mentoring for adult PEs and LGUs 	<ul style="list-style-type: none"> • Conduct adult PE training <ul style="list-style-type: none"> - At least 155 adult PEs trained by LGU/NGO trainers • Adult PEs conduct IPCs <ul style="list-style-type: none"> - At least 10,000 IPCs conducted • Implement community level IEC activities <ul style="list-style-type: none"> - At least 10 community IEC activities conducted(1 per LGU) - IEC materials disseminated - IEC activities monitored <p>Monthly monitoring/ mentoring for adult PEs and LGUs</p>
	IR 3: Increased policymakers commitment to integrated PHE Policies in key bioregions	
	<ul style="list-style-type: none"> • Conduct LGU PHE orientation • Establish MOAs with LGUs <ul style="list-style-type: none"> - At least 5 MOAs executed 	<ul style="list-style-type: none"> • Advocate for PHE activities /budgets to be integrated into LGU policies (CRM, development plans, investment plans, etc.)

	<ul style="list-style-type: none"> Advocate for PHE activities/budgets to be integrated into LGU policies (CRM, development plans, investment plans, etc. <ul style="list-style-type: none"> At least 10 integrated policy reforms/plans initiated 	<ul style="list-style-type: none"> Regularly monitor/support MOA compliance and PHE integration in LGU CRM/ development plans
Maintenance 15 coastal municipalities, 510 barangays	IR 1: Improved access to FP/RH services in key bioregions	
	<ul style="list-style-type: none"> Capacity assessment of existing LGU, RHU, CBD, and social marketing franchises in each municipality CBD and RHU refresher training <ul style="list-style-type: none"> 249 CBDs receive refresher training 48 RHUs trained on FP/RH and CBD systems Establish social marketing arrangements at each municipality <ul style="list-style-type: none"> 10 social marketing arrangements assessed and functioning Monthly monitoring/ support to LGUs, CBDs 	<ul style="list-style-type: none"> CBD and RHU refresher training <ul style="list-style-type: none"> 248 CBDs receive refresher training 47 RHUs trained on FP/RH and CBD systems At least 300 CBDs active and functioning Monthly monitoring/support to LGU and CBDs
	IR 2: Increased awareness and support of FP and conservation in key bioregions	
	<ul style="list-style-type: none"> Adult PEs recruited and trained by LGU/NGO trainers <ul style="list-style-type: none"> At least 249 adult PEs trained by LGUs Adult PEs conduct IPCs <ul style="list-style-type: none"> At least 6,000 IPCs conducted PHE IEC activities and materials developed, pretested & implemented <ul style="list-style-type: none"> Existing PHE, FP/RH, CRM IEC materials collected, assessed, reprinted/disseminated PHE messages and IEC materials developed, pretested and regularly disseminated Community IEC activities implemented (at least 5) Monthly monitoring/ mentoring for adult PEs & LGUs 	<ul style="list-style-type: none"> Adult PEs recruited and trained by LGU/NGO trainers <ul style="list-style-type: none"> At least 248 adult PEs trained by LGU/NGO trainers Adult PEs conduct IPCs <ul style="list-style-type: none"> At least 16,000 IPCs conducted Community level IEC activities implemented <ul style="list-style-type: none"> At least 10 IEC activities (1 per municipality) IEC materials disseminated Monthly monitoring/mentoring for adult PEs & LGUs

Map 2: Geographic Location of the Various Scale-Up Sites



Year 1 Workplan

Start-up Activities

During the first quarter of the BALANCED–Philippines project, start-up activities will include hiring project staff, working with USAID Philippines to refine site selection, and meeting with USAID Philippines strategic objective 3 (SO3) collaborating agencies (CAs), as well as other local partners in target sites—e.g., LGUs, rural health units (RHUs), health and conservation NGOs/civil society, community-based organizations (CBOs), and others to galvanize their interest in PHE approaches and develop partnerships with them to initiate project activities. BALANCED Philippines will also gather necessary baseline information (e.g., current level of contraceptive prevalence, number of FP acceptors, MPAs established and planned) that is essential to monitor progress during the duration of the project. As management, financial, and administrative systems are already in place as part of the global BALANCED Project, non-programmatic start-up needs will be minimal. That, as well as PFPI’s established track record in PHE in the Philippines, and the fact that some IEC materials and resources for capacity building in PHE are already developed and tested allow for a rapid start to BALANCED-Philippines programmatic activities as outlined in this workplan.

IR 1: Improved access to family planning/reproductive health services in key bioregions

Total Year 1 IR 1 Activities

- 1.1 Conduct Training-of-Trainers on PHE CBD and adult PE systems
 - 1.2 Recruit and train non-clinical, non-pharmaceutical outlets, PO members, deputized wardens BHWs and other community members to serve as CBD outlets and promote family planning and PHE linkages
 - 1.3 Develop or strengthen the system for supplying FP methods to CBD outlets
 - 1.4 Strengthen LGU and RHU personnel knowledge and skills on FP/RH , PHE linkages and managing CBD systems
-

A whole complement of capacity building activities will be conducted in all the “new” project sites. A team of trainers per municipality will be trained, mentored and supervised to establish a PHE CBD system in each of the villages in their own municipalities. In “maintenance” sites, we will scale up reach and coverage by assessing, upgrading and realigning the existing CBD system to provide coverage for every barangay and by ensuring that FP commodities are easily accessible

During Year 1, BALANCED-Philippines will expand access to FP information and methods to poor marginalized women living around target bioregions and help increase their understanding of the benefits that a PHE approach can bring to people’s quality of life and to the marine environment. A focus will be on new sites with high population and high-unmet need, i.e. those with limited or no access to FP/RH information and services.

To achieve this goal, we will develop a network of CBD outlets and strengthen the RHU referral systems. We will build the capacity of the local governments involving the various line agencies, i.e., environment, RHU, and development planning CBOs and/or POs, such as fish wardens, women's groups, fisheries and aquatic resource management councils; and non-clinical/non-pharmaceutical outlets to deliver FP and PHE information, to make referrals, and to serve as the CBD outlets. We will also build the skills of RHU health personnel to effectively counsel women referred to them on FP/RH as well as serve as CBDs when private-sector CBD outlets are not possible in the target area. Further, we will work with private sources of FP supplies such as DKT Philippines, Alphamed and PRISM 2 to establish franchisee and other arrangements that can help ensure there is a continuous supply of contraceptive products to the CBDs and RHUs trained under the project.

In the “new” sites, BALANCED Philippines will work towards replicating the public-private PHE model (LGU-social marketing organization-CBD) developed and refined under the previous PPE project. For the “maintenance” sites we will upgrade the ongoing PHE model, which was more private sector centered (NGO-community-based distribution) towards becoming a public-private model of PHE service delivery. This modification will enable broader coverage and ensure sustainability of the CBD systems beyond the project.

1.1 Conduct training of trainers on PHE CBD and adult peer education system

This activity will take place in the new sites only—as maintenance sites have already received these trainings under previous projects. *In the new sites*, a five-day training of trainers (TOT) will be conducted for a selected team of at least five LGU/nongovernmental organization (NGO) staff per targeted municipality. The training will build their knowledge and skills in the local relationships between population dynamics, family planning and reproductive health, fisheries and coastal environments and poverty and/or food security (hereafter referred to as “PHE linkages”), interpersonal communications (IPC) techniques on PHE linkages, and facilitation skills—all to strengthen their ability to train local PHE CBDs and PHE Adult PEs in selected sites and bioregions. All information provided about family planning and reproductive health will emphasize the importance of informed choice and volunteerism. These TOT participants will be responsible for developing a training plan and conducting the local workshops for PHE CBDs and adult PEs (see IR2) in their community. They will also regularly supervise them and monitor their activities. Building a cadre of LGU/NGO trainers and making them responsible for the training, supervision and monitoring will also ensure sustainability of efforts within the local institutions.

At least five participants per municipality from both the health and environment line agencies of the LGU will be selected for the TOT. If possible and present in the project site, NGOs will also be invited to become trainers. BALANCED-Philippines staff will work closely with LGUs and local leaders and other influential people to identify and select TOT participants.

PFPI will use the BALANCED Project's PHE CBD and PE training and reference materials adapted from those developed by PFPI as part of its IPOPCORM project and updated under the BALANCED Project. These training modules and reference materials also promote informed choice and voluntarism. The training will use a participatory, dual capacity building learning methodology that enables participants to acquire skills in PHE training delivery at the same time they acquire knowledge on PHE content (as noted above). All training materials and resources

developed and/or identified for use will be cleared with USAID Philippines prior to use in training activities.

Organizations Involved

- Collaborative Partners: LGU, RHUs, NGOs and relevant USAID SO3 CAs

Key Expected Results

- At least 60 selected LGU/NGO staff trained as PHE CBD and adult PE training facilitators in 9 municipalities.
- PHE CBD training and reference materials made available to newly trained TOT participants

1.2 Recruit and train non-clinical/non-pharmaceutical outlet owners, PO members, deputized wardens, BHWs and other community members to serve as CBD outlets and promote family planning and PHE linkages

In new sites, those that have participated in the TOT outlined in activity 1.1 will develop a plan for training PHE CBDs. Subsequently, they will go out into the project sites and, in consultation with the local community leaders, RHU staff, and other stakeholders, identify and recruit potential CBDs. CBDs will be chosen from target groups such as non-clinical/non-pharmaceutical outlet owners, Barangay Health Workers (BHWs), representatives from POs engaged in fisheries and/or coastal protected area management, and cooperative members. In cases where these private sector or community groups are not available to act as CBDs or are not sufficient in number, RHU personnel or barangay health workers (BHWs) will also be trained as CBDs. Next, those identified and interested to become active volunteer CBDs of the project will be trained on the social marketing of FP products (pills and condoms) and the provision of information on PHE linkages, family planning, and relevant site-specific fisheries conservation. They will then serve as CBD outlets for pills and condoms, deliver information on FP PHE linkages to the community, and refer clients to the RHU health center for other RH/FP needs. In the new sites, the project will train at least one CBD for each village/barangay in each municipality covered by the project.

In the maintenance sites—where CBDs were recruited, trained, and deployed by local NGOs under previous PHE projects—BALANCED Philippines will assess the status of the CBDs to determine if they are still active, have adequate and reliable supplies of FP commodities and the capacity to serve a larger catchment area. The assessment, which will be performed in collaboration with RHU personnel, will also afford an opportunity for forging an alliance between the government and private-sector CBD agents. For active CBDs, the project will conduct refresher trainings that will upgrade their capacity to deliver quality FP/RH services, referral information and PHE education, and their understanding of the joint effort and collaborative relationship with the RHU.

In barangays where there are no active CBDs, the project will conduct new trainings for CBD candidates identified in consultation with local leaders. To the extent possible, PFPI will utilize LGU personnel that were developed under previous projects as master trainers to facilitate the above trainings. Approximately one CBD per barangay will receive a refresher or new training in all 511 maintenance barangays.

Organizations Involved

- Collaborative Partners: LGUs, POs, RHUs, non-clinical/non pharmaceutical outlet owners, POs, deputized wardens, local USAID SO3 CAs

Key Expected Results

- At least 495 non clinical/non pharmaceutical outlet owners, POs, deputized wardens, etc. trained/updated to be PHE CBDs (246 newly trained CBDs in new sites and 249 CBDs in maintenance sites skills updated)
- PHE CBD training and reference materials made available to newly trained and existing and updated CBDs

1.3 Develop or strengthen system for supplying FP methods to CBD outlets

The PHE CBD system needs a cost-recovery mechanism that makes FP supplies readily available and helps ensure their distribution is sustained over the long term. Toward this end *in the new sites*, BALANCED-Philippines will work with private sector FP suppliers such as the Global Development Alliance partner Alphamed, DKT Philippines, and PRISM 2 to establish franchisee and other arrangements that keep an uninterrupted supply of affordable, quality contraceptive products flowing to the RHUs and the CBDs that are trained under the project not just for the short term but after the project ends in 2012. This will be necessary if they are to maintain and sustain the CBD social marketing activities initiated by BALANCED-Philippines. In the *maintenance sites*, BALANCED Philippines will assess existing social marketing franchisee or other current arrangements and will work with FP suppliers to improve existing systems if necessary.

Organizations Involved

- Collaborative Partners: RHU partners, DKT Philippines, Alphamed, PRISM 2 and/or other private sector sources of family planning supplies

Key Expected Results

- Cost recovery supply system for community-based distribution of FP supplies established or strengthened in 19 new and maintenance municipalities
- Partnership with private sources of FP supplies established and CBDs linked to sources to ensure continuous FP supply

1.4 Strengthen LGU and Rural Health Unit (RHU) staff knowledge and skills on FP/RH, PHE linkages, and managing CBD systems

CBDs and community volunteers will be referring community members to public RHUs for FP methods and RH services not available at CBD outlets. However, most RHU personnel in rural areas of the country have not received FP/RH refresher training over the past 10 to 15 years, and many have misconceptions and out-of-date information about contraceptives and consequently misinform potential acceptors. *In new sites*, LGU and RHU personnel will be oriented on PHE and provided with the current updates on FP/RH. *In maintenance sites*, BALANCED-Philippines will provide refresher training to RHU staff on the most up-to-date FP/RH information and methods, the reporting systems to link CBD-generated data to the RHU, and

PHE linkages. This training will strengthen RHU capacity in new and maintenance sites to deliver quality FP and PHE information and services to both men and women clients referred by CBDs and peer educators—particularly persons seeking intrauterine devices, surgical methods of contraception, treatment for sexually transmitted diseases, and other RH/FP services.

BALANCED-Philippines will also work closely with RHU staff to develop and/or strengthen the referral system for women who are seeking FP methods that are not available at the CBD outlets. LGU/RHUs will manage and supervise the CBDs, ensure they are resupplied with commodities, and collect and collate service statistics.

Organizations Involved

Collaborative Partners: LGUs, RHUs, relevant USAID SO3 CAs

Key Expected Results

- At least 158 RHU public health personnel trained/updated and providing information on PHE links and family planning (110 RHUs trained in new sites and 48 RHUs trained in maintenance sites);
- At least 15 RHUs serving as referral points for other FP/RH services by clients referred by project CBDs and PEs in both new and maintenance sites.

SUMMARY OF IR1 EXPECTED RESULTS AND INDICATORS

- At least 60 master trainers able to deliver RH/FP and PHE training to community volunteers (PHE CBDs and PEs) in new sites
- At least 495 CBDs in new and maintenance sites trained/updated, active /established and functional
- At least 158 RHU public health personnel trained/updated in new sites and maintenance sites
- At least 15 RHUs serving as referral points
- At least 15% of FP users obtaining their method from project-trained CBDs
- Community-based distribution system for continuous supply of FP methods to CBDs established in 19 municipalities
- LGUs with training and skills on PHE that demonstrate the commitment to assume management/supervision of CBDs and private sector commodity supply chain by the project end

INDICATOR	YR 1 TARGET
Number of couple years protection (USAID/PH/FP-PE1)	17,160
Number of people counseled in RH/FP as a result of USAID assistance (USAID/OH/PE-2)	22,000
Number of New Users of Family Planning	9,900
Number of people trained in FP/RH with USG funds (USAID/OH + BALANCED 1.1) (New sites: CBD-246, TOT-60, RHU-110 = 416) (Maintenance sites: CBD-249, RHU-48 = 297)	713
Number of participants who received BALANCED training and/or mentoring that are now providing training or TA to others on PHE (BALANCED 1.2)	60
Percent of FP users of modern methods obtaining supplies and services from private sectors sources (CBDs, etc.)(USAID/PH/FP)	15%
Number of USG-assisted service delivery points providing FP services (BALANCED field indicator) (New sites: 246 CBDs (Maintenance sites: 249 CBDs)	495
Number of target organizations incorporating PHE tools, protocols, etc. into their work (BALANCED SO-1)	15 LGUs

IR 2: Increased community awareness and support of family planning and conservation as a means to improved health, food security and natural resources in key bioregions

Year 1 IR 2 Activities

2.1 Recruit, train and deploy PHE adult peer educators

2.2 Develop and implement PHE IEC strategy

To promote pro-health and pro-environment behaviors, we will also develop a network of PHE adult PEs chosen from among the communities' indigenous leaders and/or individuals living in key bioregions who might be members of CBOs or POs engaged in fisheries conservation and MPA management. This approach is based on past experience under previous PHE projects that demonstrate the effectiveness of community volunteers in promoting health-seeking and pro-environment behaviours.

The project will work within the Department of Health's (DOH) family planning communications framework linking PHE IEC strategies and activities geared toward a variety of audiences, with special emphasis on fishers and coastal resource users, both men and women, as the target groups. In developing the PHE IEC strategy, the project will consider existing IEC materials on integrated PHE, FP/RH, and CRM and fisheries in the Philippines to enrich the strategy. IEC materials developed and/or identified for use will be cleared with USAID Philippines prior to re-printing/printing and distribution. PFPI and partners may also gather additional data from other NGOs, SO3 CAs, collaborators (health and environment sector) and beneficiaries to refine appropriate messages and materials relevant for certain target areas.

The IEC strategy will primarily focus on IPC by the adult PEs, CBDs, and LGUs tailored to specific target communities such as fishers and policymakers to encourage positive behavior change. Whenever possible, BALANCED-Philippines will build upon existing LGU IEC strategies to incorporate traditional (i.e. group discussions, display of posters, calendars, etc.) and non-traditional (e.g., street drama) IEC activities. Integrated IEC messages will emphasize the interrelationships between people and the marine environment to change individual behaviors around family planning and fisheries conservation.

2.1 Recruit, train, and deploy PHE Adult Peer Educators

To increase demand for family planning and promote pro-environment behaviour, BALANCED-Philippines will develop a network of volunteer PHE adult PEs (male and female) ages 15-49 years old in *both new and maintenance sites*. As was the process for identifying the CBDs, the TOT participants (from Activity 1.1) will develop a plan for training adult PEs and subsequently meet with local officials, indigenous leaders and other influential individuals, stakeholders and communities to identify peer educators. They will use a set of selection criteria/guidelines to identify and recruit representatives from POs engaged in fisheries and/or protected area management, deputized fish wardens, and other indigenous community leaders living in the selected key bioregions to serve as adult PEs. At least one adult per barangay will be chosen and trained as a PE. Additional PEs will be selected particularly in areas where there are existing MPAs and where organized fisher organizations/MPA management committees exist. These PEs will then receive a two-day training on PHE linkages, family planning and referral system—including the importance of informed choice and volunteerism—fisheries conservation, IPC, and on educating their peers on the benefits of family planning and protecting their coastal and fisheries resources.

Working together, the trained LGU/NGO staff, adult PEs and CBDs will use their newly gained information and experience to conduct peer outreach to educate fishers, women and men on modern FP methods. Each peer educator will be expected to conduct at least two new or repeat contacts with their peers per week.

Throughout, the BALANCED-Philippines team will assist supervise, monitor FP compliance and mentor the TOT participants in each municipality as they conduct the local adult PE training. They will also provide technical support and backstopping as they monitor and supervise the CBDs and adult PEs. Regular supervision, mentoring and monitoring will likewise be provided by the field-based coordinators who will be strategically placed in key target sites to provide monitor project activities and provide technical support as needed.

Organizations Involved

- Collaborative partners: LGUs, RHUs, NGO, POs, relevant USAID SO3 CAs

Key expected Results

- At least 155 in new and 249 in maintenance adult peer educators recruited and trained
- At least 400 adult peer educators actively providing community outreach and information on PHE links, FP/RH and referrals to CBDs and RHUs

2.2 Develop and implement IEC strategy

A key strategy in implementing PHE projects is to develop strong, persuasive IEC messages and activities that build awareness of the linkages between family planning and fisheries and marine conservation and how cross sectoral linkages work in tandem to improve human health, food security and the health of natural resources. For example, IPOPCORM developed targeted IEC messages that encouraged youth to become “stewards of their sexuality and the environment.” For communities, the preferred message was “IPOPCORM fits with our life style.”

During Year 1, BALANCED-Philippines will prepare a PHE IEC package framed within the DOH Family Planning framework. It will include communications objectives, integrated PHE messages, a package of PHE activities and IEC materials geared toward a variety of audiences but targeting fishers, other coastal resource users and policy makers in the BALANCED-Philippines project sites. BALANCED-Philippines will also draw on the best IEC materials and activities from past PHE activities and will collect, assess, reprint these materials for use in project activities, as well as develop a limited number of new materials based on the IEC strategy. The IEC materials and activities will seek to promote and monitor positive behavior change both in the health and fisheries/CRM areas and will be geared toward a variety of target communities, especially fishers and LGU policy makers.

In order to achieve impact in changing individual fisheries or CRM behaviors, it will be important to tailor these IEC materials and messages to the specific environmental behaviors that need to be changed, for example stopping all fishing in MPAs, reporting illegal fishermen and poachers, or participating in coastal clean-ups. BALANCED-Philippines will coordinate with the implementing partners of the follow-on FISH project to better understand and link key IEC messages. In the event of further funding, this activity could be strengthened and expanded to specifically target key fisheries and coastal management behaviors for each bioregion.

Normally the BALANCED Project would also gather qualitative information via Focus Group Discussions (FGDs) and other qualitative methods to inform IEC strategy and message development. However, we are restricted by the limited funds available under this project. As such, existing IEC materials developed under previous PHE project and existing FP/RH materials developed by the DOH will have to suffice for Yr 1 implementation. However, BALANCED Philippines would be able to conduct qualitative research among representatives of the main target groups in order to refine the IEC strategy and materials should USAID consider incremental resources during Yr 2.

Organizations Involved

- Collaborative partners: LGUs, FISH follow on implementing partners, DOH, relevant USAID SO3 CAs

Key Expected Results

- PHE IEC communications and monitoring plan
- Printed IEC materials
- Traditional and non-traditional IEC activities implemented in each municipality

SUMMARY OF IR2 EXPECTED RESULTS AND INDICATORS

- At least 400 adult peer educators trained in new and maintenance sites educating the community on the benefits of family planning and conservation measures and making referrals
- IEC materials and activities with integrated messages reprinted/developed and distributed
- At least 75,000 individuals having seen or heard specific FP/RH message(s)

INDICATOR	YR 1 TARGET
Number of people trained in FP/RH with USG funds (USAID/OH + BALANCED 1.1)	404
Number of people who have seen or heard a specific FP/RH message (USAID/OH)	75,000

IR 3: Increased policy makers commitment to FP/RH services and integrated PHE policies

Year 1 IR 3 Activities

3.1 Conduct PHE orientation and planning with LGUs, NGOs, POs and project stakeholders

3.2 Advocate and provide support for local Development/Environment/CRM/Fisheries plans and leverage resources for PHE into local policies and agenda

The BALANCED-Philippines project will capitalize on PFPI's PHE experience in the Philippines to galvanize acceptance and support for integrated approaches among local policymakers. Existing sites and areas with successful PHE programs will serve as learning sites for the local policymakers from the new BALANCED-Philippines project sites (where PHE integration will be implemented and/or scaled-up). While achieving policy reforms takes time and entails a process embroiled in the local governance process, the project will also build on existing collaboration and partnership with existing PHE leaders and champions. It will also build on the existing Memoranda of Agreement (MOA) with the League of Municipalities in the Philippines to gain support and a commitment to the PHE integrated approach. During Year 1 *in the new sites*, PFPI will conduct various group and one-on-one meetings, such as courtesy calls, project orientations to the local chief executives, LGU PHE orientations, planning, regular project briefing and updates, with local policy-makers and other local stakeholders to increase support and commitment for integrated PHE policy reforms and to advocate for the allocation of a local budget for family planning and for the conservation of important natural resources. Key activities during year one includes:

3.1 Conduct PHE orientation and planning with LGU, NGO, PO and project stakeholders

At the start of the BALANCED-Philippines, project staff will conduct courtesy calls to local chief executives and officials in target sites to introduce them to the project, galvanize their support and help establish a partnership and mutual collaboration. PHE orientation meetings will be conducted for municipal and barangay officials in *both new and maintenance sites*. This one-day PHE orientation for relevant stakeholders, such as those from the Executive and Legislative offices and line agencies, will be organized collaboratively with the local chief executive's office. Participants will include representatives from the LGUs (municipal and barangay leaders), executives of local NGOs and POs—such as representatives of fisher folk organizations—and management councils. The purpose of the PHE orientation meeting is to: a) stimulate dialogue about the PHE dynamics in the bioregions and the main threats to human and ecosystem health and wellbeing in their respective municipality; b) share information about ongoing programs/projects (NRM, conservation, FP, micro-credit etc. implemented by different stakeholders; c) identify gaps in services and resources; and d) mobilize participation across the sectors (public, private and commercial) and disciplines (family planning, environment, health, governance etc.) for a coordinated response to redress the FP unmet needs and achieve LGU fisheries objectives. This and other advocacy activities will be used to ensure LGU support for project activities and ensure sustainability by developing a municipal-specific integrated PHE action plan.

BALANCED Philippines will follow up on the progress of the site-specific action plans developed during these consultations for the duration of the project. Staff will also work to help ensure compliance and integration into local policies such as through MOAs, investment plans, development plans, etc

Organizations Involved

- Collaborative partners: LGUs, NGOs, POs

Key expected Results

- At least 15 site-specific PHE action plans (one per municipality new and maintenance)
- NGO, PO, LGU representatives participating in the PHE orientation

3.2 Advocate and provide support for local development environment, CRM and/or fisheries plans and leverage resources for PHE into local policies and agenda

Building on the support generated by various advocacy activities—including the one-on-one advocacy meetings—and on LGU involvement in the various community-based project activities, BALANCED-Philippines will also work towards integrating both fisheries/CRM and FP/RH activities into municipality's planning processes as a development approach to food security and/or poverty alleviation. These efforts will initiate the process towards institutionalizing PHE and the long-term sustainability of the PHE approach and ensuring the gains achieved by the project are not lost. The process may entail a series of consultations and meetings to assess existing plan/s such as fisheries or coastal management plans and/or municipal medium term development plans to identify entry points for PHE interventions; and outline specific FP/RH or CRM activities and the corresponding budgetary implications for those activities.

During Year 1, the project will work with local development councils and support municipal planning activities to ensure the integration of PHE perspectives and to assist with identifying realistic budgets to implement PHE activities.

Organizations Involved

- Collaborative partners: LGUs, Municipal Planning and Development Office, Environment/CRM Office, RHUs, Barangay Development Council, Municipal Development Council

Key Expected Results

- At least 10 Local Development/Environment/CRM/Fisheries plans with PHE and FP/RH activities initiated
- Funds leveraged for PHE activities

SUMMARY OF IR3 EXPECTED RESULTS AND INDICATORS

- At least U\$15,000 leveraged from local sources (cash and in-kind)

- At least 10 local Development/Environment/CRM/Fisheries plans with PHE and FP/RH activities initiated

INDICATOR	YR 1 TARGET
Amount of in-country public and private financial resources leveraged by USG programs for FP/RH (USAID/OH + BALANCED)	At least US \$15,000
Number of local policy reforms/plans with integrated PHE	10

Project Management

PFPI and CRC-URI will assemble a team of experts with technical and management skills in integrating population, health and environment to address the needs and the challenges of the project. The team will be supported by consultants and institutions that are established in the field of PHE integration. The expertise offered by the staff and consultants include project management, monitoring and evaluation, training, behavior change communication, policy advocacy in health and environment both in the Philippines and internationally. All staff and consultants will be obligated to take USAID's Family Planning E-Learning course (at <http://www.globalhealthlearning.org>). Those who took the training at the start of the BALANCED Project will repeat the course as refresher training.

The project manager will be based in Manila, but will travel extensively with the support of the deputy project manager. The BALANCED PHE Technical Assistance Lead (PTAL) will also provide technical and field support as needed. The team also includes an RH training specialist who will help train and provide hands-on support to the LGU and to the field coordinators in the key bioregions who will be assisting with implementation of BALANCED-Philippines PHE activities. The field coordinators will be responsible in helping plan, organize and coordinate technical and logistics support of the various training/workshops and meetings with LGUs, the community and other key stakeholders. They will also help monitor the compliance of site action plans, identify gaps and opportunities for scale-up and relevant support activities.

CRC-URI as the prime contractor will backstop the project and will conduct an end-of-Year 1 assessment to determine the success of the scale-up approach implemented by the BALANCED-Philippines project and, as such, inform and discuss with USAID any needed re-design or adjustments in Year 2 project activities, targets, etc. that would help ensure that the intended goals for the life-of the project have the greatest chance of being achieved. As well, there will be an end-of-project evaluation to: 1) encourage continued learning and adaptations to the PHE approach/model, 2) promote the sharing of best practices for PHE on-the-ground implementation, 3) and to document those factors that encourage or challenge long-term sustainability of the PHE approach and its benefits to the individuals, communities, and countries that adopt this integrated strategy.

Project implementation key staff includes:

Project Manager: Ronaldo Quintana, MD is a Senior Program Officer of PFPI. Dr. Quintana played an instrumental role in PFPI's PHE projects funded by the David and Lucile Packard Foundation and United Nations Population Fund. His expertise is in capacity building, health behavior change communications, integrated PHE, family planning, STI/HIV/AIDS prevention programs, and reproductive health. He provides PFPI Programs with leadership and technical support for reproductive health, integrated PHE and behavior change activities. Dr. Quintana collaborates with local partners to mobilize communities and develop practical, gender-sensitive approaches to involve key stakeholders in integrated PHE programs. He has over nine years of experience designing and implementing PHE approaches under the IPOPCORM Initiative, the expanded IPOPCORM Project and the Integrated FISH-RH project in the Philippines. He has completed certificate courses on disaster risk reduction and climate change from the World Bank Institute and Earthquakes Megacities, Inc. Before joining PFPI, he was a medical officer and program manager at ReachOut Foundation.

Deputy Project Manager: Francis Magbanua worked as a program officer in the IPOPCORM Project from 2004-2006. He is the proposed Deputy Project Manager for this initiative. His technical areas of expertise are capacity building, research, integrated CRM-FP/RH and participatory resource monitoring and assessment. Mr. Magbanua is an expert on integration given his role and experience with IPOPCORM. He had a Masters of Science in Environmental Science and recently completed his PhD studies in zoology at the University of Otago, Dunedin, New Zealand. His previous professional experiences includes serving as technical staff to the Office of the Secretary, Department of Agriculture; and as Technical Assistant for Monitoring & Evaluation with the World Bank and the Department of Finance's Community-based Resource Management Project (CBRMP). Mr. Magbanua brings important skills in conservation as well as government work experience that rounds out the project team.

Technical Support Lead: Joan L. Castro, MD is the Executive Vice-President of PFPI and PHE Technical Assistance Lead of the BALANCED Project, which is advocating for and expanding PHE approaches worldwide. Dr. Castro has 10 years of experience designing and implementing PHE approaches under the IPOPCORM Initiative (2001-2007), the expanded IPOPCORM Project (2005-2007), and the Integrated RH-FISH project (2004-2008) in the Philippines and the BALANCED Project (2008-present). Dr. Castro is a medical physician and a fellow of the International Family Planning Leadership Program in Santa Cruz, California, USA.

CRC Lead: Linda Bruce as BALANCED Project Director has overall responsibility under BALANCED for ensuring that the results expected of this Buy-in are achieved. Ms. Bruce has over 20 years experience in capacity building, behavior change communication, and designing, implementing and managing reproductive health and family planning programs in Asia, Africa and Latin America.

Additional technical support will be provided by the following individuals:

Leona D'Agnes has over 20 years of international health experience in Southeast Asia. Her technical expertise is in capacity building, family planning, food security, health policy, health behavior change communications, HIV/AIDS prevention, integrated population programming, policy development, reproductive health, organizational development, program management, reproductive health, and training. Prior to PFPI, Ms. D'Agnes was Country Director for the

Program for Appropriate Technology (PATH) Philippines and Indonesia offices. She established PATH's presence in the Philippines, developed and managed PATH's program in Indonesia and served as an advisor to the Population and Development Association of Thailand.

Enrique Hernandez, MD, MPH is a Senior Policy Consultant/Reproductive Health for PFPI. His technical expertise is in capacity building, health behavior change communications, HIV/AIDS prevention programs, HIV/AIDS care and support, multi-sectoral approaches to HIV/AIDS, operations research, reproductive health, STD programs, training, voluntary counseling and testing, and youth/adolescent health. He managed the Tetra-Tech/USAID supported Fisheries for Improved Sustainable Harvest – RH Component. He worked as an expert in training and communication for the HIV/AIDS Prevention Project at Brown University, USA and provided technical assistance, developed training curricula, and conducted training sessions for Philippine-based HIV/AIDS NGOs. Dr. Hernandez was the first program manager for the Philippines' Department of Health's National AIDS/STD Program.

Brian Crawford, PhD, is the Director of International Programs at CRC. He has over 25 years of experience working in coastal and fisheries management projects and managing large scale long-term USAID projects. Brian lived for four years in the Philippines during his previous Peace Corps experience there and has continued to be involved with CRC initiatives in that country and the region over the past decade. He has limited local language capability in Tagalog and Ilocano

Elin Torell, PhD, is the BALANCED Project's Monitoring, Evaluation and Learning Specialist. She has over 10 years experience designing and coordinating monitoring, evaluation, and learning initiatives in South East Asia, East Africa and Latin America. Through her work in East Africa, she has pioneered the integration of HIV/AIDS and population and gender issues into coastal and marine conservation initiatives. She brings extensive expertise in monitoring and evaluation, HIV/AIDS prevention, gender mainstreaming, and the design and implementation of USAID performance management plans.

General roles and Responsibilities of Project Personnel

Project Manager (100% FTE): Dr. Ronald Quintana

Reports to Joan Castro, PFPI Executive Vice President and BALANCED Project PHE Technical Assistance Lead

- Provides overall technical management, supervision and implementation of the project
- Responsible for coordination with USAID Philippines, LGUs, NGOs, DOH, Bureau of Fisheries and Aquatic Resources (BFAR), Department of Environment and Natural Resources (DENR) and other key stakeholders
- Monitors family planning compliance
- Ensures efficient project implementation and team synergy
- Supervises Deputy Project Manager
- Responsible for collecting PMP data for Philippines activities and reporting to CRC
- Prepares all project reports for USAID on the BALANCED-Philippines project (for this activity), subcontracts, scopes of work for consultants and other related documents
- Submits any revised training materials, narrative, and financial reports and other documents that go to USAID Philippines for CRC for review and approval

<p>Deputy Project Manager (50% Year 1): Francis Magbanua, PhD candidate <i>Reports to PM Ronald Quintana</i></p> <ul style="list-style-type: none"> • Supports the Project Manager in all aspects of technical and management aspects of the project implementation • Responsible for supervising selected technical consultants and monitoring of administrative staff
<p>RH Training Specialist (100%): Dr Luz Escubil, MD, MPH <i>Reports to PM Ronald Quintana</i></p> <ul style="list-style-type: none"> • Conducts training needs assessment and use the findings to draft a training plan. • Assesses knowledge and skills for LGU/RHU TOT trainings and CBD refresher courses or those not covered in BALANCED CBD/PE and other training materials. • Develops additional PHE training modules, manuals and materials, as needed. • Facilitates training and capacity building activities in the project sites. • Identifies other capacity building inputs that may be required to enable the partners to adequately support the trained PHE service providers in the field • Supervises and monitor training activities conducted in the field • Coordinates and conducts post-training monitoring and evaluation activities and assess transfer of learning. • Collects data on training activities and develop/maintain a training database in coordination with CRC
<p>4 Field Coordinators Officers (100% LOE): TBA <i>Reports to PM Ronald Quintana</i></p> <ul style="list-style-type: none"> • Based in selected bioregions, their main function is to coordinate activities working closely with the LCE and the respective lines of agencies to establish a functional CBD • Liaises with local partners and local stakeholders • Monitors all field activities with the LGU, identify opportunities ,gaps and assist in resolving issues • Coordinates all activities with local government with the executive and legislative to help the LGU identify and train CBDs and PEs and assist in all field activities • Helps facilitate local advocacy activities
<p>PHE Technical Assistance Lead (3.5% per year LOE): Dr. Joan Castro <i>Reports to Linda Bruce, BALANCED Project Director</i></p> <ul style="list-style-type: none"> • Provides overall strategic vision, technical leadership and oversight • Assists in the implementation of the Project • Supervises Project Manager and Deputy Project Manager • Provides financial oversight for management of buy-in budget • Liaises with USAID Philippines Mission for and on behalf of the BALANCED-Philippines regarding the technical and strategic directions of the project • Communicates with CRC on project activities, challenges, etc. • Serves as a member of the larger BALANCED cross-portfolio learning initiatives

International Travel

Elin Torell – Year 1 - to assist with project monitoring, assess lessons learned from Year one activities, help with Year 2 workplanning, and provide technical support on PMP reporting – Mission field support

Brian Crawford – Year 1 (end of) – to provide technical guidance on CRM integration and conduct Year 1 assessment – BALANCED Core funds

Linda Bruce – Year 2 – to monitor project activities, assess lessons learned and assist with project reports, etc. – BALANCED Core funds

Project Monitoring and Performance Monitoring Plan

The level of funding for this 22-month initiative is insufficient to support the development and implementation of a behavioral change monitoring (BMS) system in the project sites, which would entail primary data collection and the fielding of trained enumerators as well as expenditures for data management and analysis. Instead, we will conduct basic program monitoring in both the *new and maintenance sites utilizing* secondary information from various sources (e.g., the Municipal Health Office, Rural Health Units, Municipal Planning and Development Offices, etc.) to monitor the levels of family planning practice (e.g., contraceptive prevalence rate) and protected area management (number and size of MPAs under improved management) in the project sites. PFPI has already developed and applied this simplified program monitoring approach in the 22 municipalities where it implemented the PPE project, and the LGUs have continued to report data to PFPI from the system even through the project has been completed.

During the first month of BALANCED-Philippine and every six months thereafter, the field coordinators will gather information pertaining to the IR Indicators (see PMP table below) from LGUs (provincial, municipal and local), CBD agents and other sources. This data will provide some insights as to whether the anticipated outputs of the project have been achieved. The CYP data that will be gathered and collated from the RHUs will reveal trends in contraceptive use among WRA over the 22-month period of the project which, theoretically, could be attributed in part to the project's inputs. Although not ideal, this simple program monitoring method will, nonetheless, generate the information needed to meet more of the IR data requirements.

Intermediate Results	Indicator	Expected Year 1 Results
IR1: Improved access to RH/FP services in key mKBAs	1.1 Number of couple years protection (USAID/PH/FP-PE1)	17,160
	1.2 Number of people counseled in RH/FP as a result of USAID assistance (USAID/OH/PE-2)	22,000
	1.3 Number of New Users of Family Planning	9,900
	1.4 Number of people trained in RH/FP with USG funds	713
	1.5 Number of participants who received BALANCED training and/or mentoring that are now providing training or TA to others on PHE (BALANCED 1.2)	60
	1.6 Percent of FP users (new and current) of modern methods obtaining supplies and services from private sector sources (CBDs, etc) (Surrogate BALANCED field indicator)	15% ⁵
	1.7 Number of USG-assisted service delivery points providing FP services (BALANCED field indicator)	495
	1.8 Number of target organizations incorporating PHE tools, protocols, etc. into their work (BALANCED SO-1)	15
IR2: Increased community awareness of family planning and conservation as a means to improved health, food security and natural resources	2.1 Number of people who have seen or heard a specific RH/FP message (USAID/OH)	75,000
	2.2 Number of people trained in RH/FP with USG funds	404
IR 3: Increased LGU Policymakers commitment to RH/FP services and integrated PHE policies	3.1 Amount of in-country public and private financial resources leveraged by USG programs for RH/FP (USAID/OH + BALANCED)	At least US\$15,000
	3.2 Number of local policy reforms/plans with integrated PHE (BALANCED field indicator) initiated	10

⁵ % computed from baseline data in non clinic based service points (CBDs, etc.)

Annex 1: Year 1 Timeline

Activities	Q1	Q2	Q3	Q4
Preparatory Phase				
Hiring, staff project orientation and planning , meetings with relevant CAs, private sector, etc.				
Field site visit: Meet with LGUs, etc introduce project,				
Prepare PHE IEC strategy				
Implementation Phase				
PHE Orientation/planning with municipal LGUs, NGOs, POs and project stakeholders				
Conduct Training of Trainers on PHE CBD and PE System				
Local partners recruit and train PHE Community Based Distributors				
Local partners recruit and train PHE Adult Peer Educators				
Train public health personnel on integrated PHE and CBD system				
Implement PHE IEC strategy to include development/ reproduction and distribution of PHE IEC materials and related materials ,LGU advocacy, etc				
Study tour/cross site visit				
Monitoring/Evaluation Phase				
Field project monitoring				
Prepare and submit project reports				
End of Year 1 Assessment				

Annex 2: Indicator Definitions

Indicators and definitions

1.1 Number of couple years protection: The estimated protection provided by family planning services during a one-year period, based upon the volume of all contraceptives provided to clients during that period, including sales of contraceptives and services for non-supply FP methods.

1.2 Number of people counseled in RH/FP as a result of USAID assistance: Number of individuals counseled on FP by trained clinic-based or itinerant health service providers, community workers/volunteers, and peer educators through USG-assisted programs. Note that “counseling visits” include one-on-one and small group discussions with 2-10 participants.

1.3 Number of new users of family planning: A user is a person using any modern contraceptive method for the first time in his or her life within the last year. Modern contraceptive methods include IUDs, the pill, injections, condoms, NFP, LAM, tubal ligation, and vasectomy.

1.4 Number of people trained in RH/FP with USG funds: Number of people (health professionals, primary health care workers, community health workers, volunteers, non-health personnel) trained in FP/RH (including in-service delivery, communication, policy and systems, research, etc.). For the BALANCED-Philippines Project, this indicator tracks the number of individuals (gender disaggregated) that are trained by the project. All trainings in RH/FP and PHE-know how (knowledge and skills on how to design, implement, and promote PHE) and state-of-the-art (SOTA) (the highest level and most successful) procedures, processes, techniques to implement and assess the impacts of PHE interventions conducted by BALANCED-Philippines will be reported under this indicator. It will measure participation in a broad range of training activities, including classroom trainings, workshops, and one-on-one mentoring.

1.5 Number of participants who received BALANCED-Philippines training and/or mentoring that are now providing training or TA to others on PHE implementation: This indicator measures the number of individuals that have been trained and/or mentored by BALANCED-Philippines that are now providing training or technical assistance on PHE to others. We expect that most of the individuals will provide training or TA within their own organizations. Disaggregated by gender.

1.6 Percent of FP users of modern methods obtaining supplies and services from private sectors sources (CBDs, etc.): This indicator measures the percentage of new and current FP users who are obtaining FP supplies from private sources such as CBDs, etc. It will be computed from baseline data in non-clinic based service points such as CBDs, etc.

1.7 Number of USG-assisted service delivery points providing FP services: A service delivery point must either offer a range of modern contraceptive methods. Modern contraceptive methods include IUDs, the pill, implants, injections, condoms, spermicides, diaphragms, tubal ligation, and vasectomy. A facility must offer more than condoms to count. However, facilities that only offer condoms count if they provide referrals for other modern contraceptives.

1.8 Number of target organizations incorporating PHE tools, protocols, etc. into their work: This indicator measures evidence that target organizations and projects incorporate PHE tools, protocols, procedures, systems, methodologies, guides, curricula, indices, and/or key actionable findings etc. promoted by BALANCED-Philippines capacity building and initiatives. Target organizations include organizations new to PHE, donors, USAID Missions, local governments. Projects that have already started to implement PHE activities can also be counted if they incorporate BALANCED tools, protocols, etc to improve their PHE implementation. Disaggregated by type of tool and organization.

2.1 Number of people who have seen or heard a specific RH/FP message: Size of target population that has seen or heard a specific USG-supported FP/RH message in USG-assisted sites through mass media, group orientation/discussion/IEC activities with more than 10 participants and interpersonal communication.

3.1 Amount of in-country public and private financial resources leveraged by USG programs for RH/FP: Dollar value of monetary contributions, staff time, and in-kind contributions. It counts funding leveraged by our partners to implement activities that complements or directly contribute to BALANCED-Philippines. The leveraged funding can come from local sources, LGUs, NGOs, private sectors and other donor agencies which includes but is not limited to volunteer time (CBD, PE, etc.) computed as % per daily wage established per region to participate in project activities, office space, LGU time, allocation from investment funds, etc

3.2 Number of local policy reforms/plans with integrated PHE: An enabling policy refers to a policy that promotes integrated municipal and/or regional plans linking human and ecosystem health. This could be on a variety of topics or technical areas involving forests or marine ecosystems and different issues that enhance the quality of human life. Achieving this is a strong indication that elements in local government are supportive of PHE integration. For BALANCED-Philippines project, this includes plans with integrated PHE.