

Report of the Executive Director 2016



Partners In Population and Development (PPD)

An Inter-Governmental Organization
Promoting South-South Cooperation

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TABLE OF CONTENTS

Message from
The Chair

03

Message from
The Executive Director

05

Introduction

06

PPD's Achievement in 2016

11

Priority Area 1:

11

Priority Area 2:

15

Priority Area 4:

16

Priority Area 5:

17

Priority Area 6:

18

Priority Area 7:

19

Priority Area 8:

20

Report of
The Africa Regional Office

24

Report of
PPD China Program Office

28



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Message from Chair

Over the past couple of years, I have had the pleasure of working with PPD for greater promotion of South-South Cooperation in the field of Population, Reproductive Health and Development. The importance of South-South Cooperation in population and development remains more valid today – mainly in the context of the SDGs 2030 agenda than it was felt during the establishment of PPD in 1994. South-South Cooperation intends to optimize the maximum benefits of knowledge gained and the lessons learned by member countries in population, reproductive health and development areas by implementing actions or programs.

I am pleased to thank the PPD Board Members, PCCs and Staff Members for their hard work and dedication. They have guided and supported me in taking significant initiatives to strengthen the institutional capacity of PPD globally. PPD has been provided with the 6-point strategic priorities during the 20th Board Meeting held in Dhaka in November 2015. The necessary efforts have been made to translate them into actions in 2016. I believe that with the continued commitment and support of member countries, PPD will make great strides towards strengthening South-South Cooperation through appropriate implementation of programs in line with the 6-point strategic priorities in our member countries.

I am proud to note that the concerted efforts of all our member countries and the Secretariat under the leadership of the Executive Director have fulfilled the long cherished dream of PPD having its own headquarters by constructing the six-storey PPD Secretariat Building Complex in Dhaka on the land donated by the Government of Bangladesh.

It has been a great privilege for the Government of the People's Republic of China to assist in the realization of this dream by contributing US\$2.2 million towards construction of the PPD Building Complex. I wish to express my deep gratitude to my Government for its generous support to me and PPD towards ensuring sustainability of this unique inter-governmental organization.

Apart from globally operating from its independent facility, the PPD Secretariat Complex has also become a resource base for sustaining and promoting South-South Cooperation in the years to come.

It is my earnest wish that PPD moves forward with strong commitment towards broadening the scope of South-South Cooperation in squarely addressing the unfinished ICPD agenda and SDGs. I believe PPD is well-endowed with great governance and executive leadership for propelling its fundamental mandates towards greater heights internationally. I wish PPD and its

member countries the very best in their noble endeavor.

I would like to take this opportunity to thank all my colleagues, the Ministers and Board Members wholeheartedly for their trust and confidence placed in me to serve as the Chair of this prestigious inter-governmental organization.

I am pleased to commit myself to keep up to their expectations and look forward to work together towards a better and brighter future of our people.

H.E. Dr. Li Bin

Honorable Minister

National Health and Family Planning Commission (NHFPC),
Government of the People's Republic of China
Chair, Partners in Population and Development (PPD)



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Message from Executive Director

The year 2016 has been of great significance in the context of being able to translate into action the

6-points priorities of Integration of Population Dynamics; Sexual and Adolescent Reproductive Health; Maternal Health; Ageing; Migration; and Linkage between Poverty and Reproductive Health, decided in 2015. PPD is now moving forward to implement these 6-points priorities. PPD has made substantial achievements to implement the 6-points priorities at the country level and ensure global leadership in promoting South South Cooperation and addressing population, reproductive health and development issues. All branch offices of PPD simultaneously have contributed in our advocacy with funders, ministers, high level officials, parliamentarians, the first ladies, development thinkers and practitioners, and civil society. They deserve special recognition and appreciation.

I note with a great deal of pride that PPD has progressed substantially in its completion of its 6-storey secretariat building complex in Dhaka, Bangladesh. The Secretariat building project is like a dream come true and is undoubtedly majorly due to the immense support from member countries. In year 2016, we received a large grant from our member country China of US\$2 million and this has given us the motivation and incentive to achieve our long cherished dream of having PPD's own office for all its members. It is my great privilege to thank the Government of China, particularly H. E. Dr. Li Bin, Honorable Chair of PPD Board and Minister of National Health and Family Planning Commission and

H. E. Wang Pie'an, Honorable Vice-Minister of NHFPC of Government of China. The year 2016

has given us good opportunity to highlight a notable augmentation of annual contribution from our member countries. I am delighted that the continued funding commitment and support from the member countries will make it possible for PPD to play a visible role towards strengthening SSC and translate the 6-points priorities into actions.

The birth of PPD is a sterling example of the ICPD consensus. PPD is now the combined voice of 59% of the world population. PPD's vibrant presence in the UN and other ongoing debates and discussions have only further endorsed that PPD can play the role of a global inter-governmental agency and a strong actor for implementing SDG17 – Strengthen the means of implementation and revitalize the global partnership for sustainable development.

I am confident that PPD is self-sustained to build on its achievements in promoting South-South experiences in the implementation of the unfinished ICPD PoA and SDGs' 2030 agendas.

It is my great pleasure to thank the members of the PPD Board and the Executive Committee, members of the Finance and Program Committees and Partner Country Coordinators – all of whom comprise the main engine of PPD and the Partner Institutes for their continued support and guidance. I am thankful to PPD staff of the Secretariat, Africa Regional Office, China Program office and New York office for all the dedicated work.

Thank you.

Dr. Joe Thomas
Executive Director

Introduction

A re-energized and expanded global partnership is absolutely essential to achieve the ambitious targets of the 2030 global development agenda. Sustainable Development Goal (SDG) 17 envisages such a partnership. Partnership between the countries of the 'Global South' is a critical element envisaged in achieving SDGs. Many developing countries are striving to evolve appropriate strategies to implement South South Partnership to achieve the SDGs. At this critical juncture, Partners in Population and Development (PPD), an intergovernmental institution dedicated to promote South South Partnership has a critical role to play.

South South Cooperation (SSC) has gained greater acceptance and is considered as an effective paradigm for addressing key determinants of population and development in the developing countries. Since its inception, PPD has contributed to promoting SSC in the area of population dynamics and its impact on development among its member countries. PPD is increasingly playing a critical role in addressing the linkages between population dynamics and international relations as well.

PPD has proved its strong role to play as knowledge broker, capacity development supporter and partnership facilitator across the developing countries under its unique umbrella. PPD has contributed in drawing dynamic approaches for solutions towards common development challenges among the 59% citizens of the world in the arena of Population, Development and SRHR.

During the past decades, SSC has increasingly contributed to knowledge exchanges, technology transfers, financing and seeking collective solutions. Good practices to accelerate sustainable human development are increasingly available in the global South and sharing of those practices have shown bright results for the population who actually have been seeking for dynamic changes in their everyday life.

The unique call from the International Conference on Population and Development (ICPD1994) provided the inter-governmental framework of PPD for its members to speak in one voice on sexual and reproductive health issues. In course of time, countries of the 'Global South' have indeed gained experience and accumulated unique insights into the link between population dynamics and its linkages with international relationships as well.

Emerging opportunities and challenges

In addition to the work plan focusing on the 6-point priority areas for realizing transformation of SSC activities among PPD member countries, a careful review of the global situation has provided further opportunities and challenges to the future of SSC for Population and Development. Some of these emerging opportunities and challenges are:

1. Population Dynamics and related challenges: an unfinished agenda of ICPD:

PPD's thrust to address population dynamics and related challenges will continue. PPD's convening role will provide a catalytic effect in addressing some of the critical issues such as addressing the unfinished family planning agenda, especially the unmet contraceptive needs of married adolescent girls, strategies to reap the benefit of demographic dividend, promoting healthy ageing and the SRHR needs of the migrant population.

2. Promoting SSC to Address Health and Population Related SDGs:

There are unique challenges in the context of population dynamics and its relationship between SDGs. Many of the PPD countries do need to update the national population policies in the light of SDG targets. PPD aspires that the effective initiative of SSC under the intergovernmental umbrella of PPD would provide an added impetus to achieve SDG targets.

3. Strengthening data collection and data management: The availability of reliable and timely demographic and population data is essential for planning and implementing interventions to achieve the SDGs and to monitor progress towards their achievement. Strengthening vital statistics and population data system are key to this goal. Health, demography, population surveys and periodic census are a primary source of data needed for formulating, implementing and monitoring development policies and programs. Disaggregated data generation is identified as one of the crucial needs for developing countries to achieving the SDGs targets. PPD is committed to facilitate technical support to strengthen data collection mechanisms and management of crucial indicators related to population and development. PPD is firmly committed to advocate for a functioning civil registration and vital statistics system, with disaggregated data to ensure comparable data and to promote necessary knowledge sharing among the member countries in this regard. PPD further acknowledges the urgency of empowering existing regulatory authorities and ensuring the quality of data to reach the set targets of SDGs.

4. Opportunity for population diplomacy: Domestic population policies are increasingly, intricately linked to international policies. Several population goals of the countries are linked to many global treaties, covenants and multilateral agreements related to the status of women, migrants, universal rights to health, global commitment to equity, etc. Greater understanding and skills to address the linkages between foreign policy and population issues are needed.

5. Unmet family planning needs of Married Adolescent Girls (MAG) and Access to non-hormonal contraceptives: Child marriage continues as an unabated social issue. However, family planning needs of such a population are seldom addressed. Ensuring access of non-hormonal contraceptives for adolescent girls and addressing related challenges among the member countries would be another priority area where PPD is expected to provide a catalytic role.

6 Ensuring Quality of Family Planning and Reproductive Health Services: Constant attention and dialogue is needed to ensure the quality of services across the member countries. Almost all the PPD member countries are struggling to provide quality family planning services that include contraceptive services, pregnancy testing and counseling, helping clients achieve pregnancy, basic infertility services, preconception health services, and sexually transmitted disease services. Significant numbers of pregnancies are unintended, adolescent pregnancy of both married and unmarried population is critical. Preterm birth, maternal and infant mortality rates remain high. Quality in Family Planning Service Delivery is identified in the areas of safety, effectiveness, client-centered approach, timeliness, efficiency, accessibility, equity and value. A South South Paradigm promoted by PPD has a great deal to contribute in this area.

7. Migration and Population Dynamics: Migration, especially migration of adolescents and the young population is a key component of population dynamics. Ensuring access to sexual and reproductive health related services to this population is a challenge. The South South Partnership model has great potential to generate deeper understanding about this social phenomenon and address the challenges presented by this social issue.

8. Promoting Healthy Ageing: PPD-Global Commission on Ageing in Developing Countries will continue to provide a platform for addressing the issues related to ageing across the member countries. The Commission's work will continue to alert PPD for future investment for the ageing population, to share knowledge and experience, and to advocate for implementing dynamic policies and programs to address the issues related to ageing.

9. Ensuring Reproductive Health Commodity and Essential Maternal and Child Health Drugs Security: Ensuring access to family planning commodities and essential drugs for maternal and child health require constant vigil and planning and an overall strategy. Such a strategy ensures a reliable

supply of contraceptives and essential drugs for maternal and child health so that every person is able to choose, obtain and use quality contraceptives and medicines, when and if they need them, to save the lives of mothers and children. Political support for appropriate policy implementation is key to ensuring the contraceptive and drug needs of the population. PPD is also committed to explore opportunities for SSC to ensure Reproductive Health Commodity and Essential Maternal and Child Health Drugs Security.

10. Addressing Inequity in SRHR: Sexual and reproductive health and rights (SRHR) are critically important to health outcomes, particularly in developing countries. Reproductive health outcome defines the quality of life and survival of girls and women in their life course in PPD member countries. Inequity in SRHR coupled with gender-based inequity further exasperates the situation. While implementing reproductive health programs there is need to address the inequity in SRHR and the intersection of gender inequity. There is very limited evidence to indicate conscious policy and program efforts towards addressing inequity in SRHR programs.

11. Antimicrobial Resistance (AMR) and its impact on maternal and child health: From the growing data it is evident that AMR will play a critical role in maternal and child health. An uncontrolled AMR may make many of the essential medicines used to fight disease and conditions of maternal and child health ineffective, contributing to increasing maternal and child health issues. In this context, PPD would like to alert its member countries about the implications of Antimicrobial Resistance and its impact on maternal and child health and the need to work with WHO regarding their 'Global action plan on Antimicrobial Resistance'.

12. Monitoring emerging issues: Population and climate change, changing popular opinion, impact of emerging information technology, safe and reliable reproductive health surgical needs (Fistula care), contraceptive technologies, etc., are the emerging issues that need to be monitored.

PPD as an intergovernmental platform would like to further encourage greater cooperation between national research institutions and national statistical offices to foster the in-depth analysis of existing demographic data. Undoubtedly, it will reinforce the measuring technique of the achievement of SDGs. Partnerships with institutions and academics already involved in producing globally integrated datasets or consistent and comparable sets of demographic estimates also will be fostered. PPD is committed to ensure its unique effort through advocacy, policy dialogue, health and population diplomacy, capacity development, technical cooperation, knowledge management and through developing partnerships.

PPD considers the umbrella representation of more than 59% of the world population as a unique opportunity to enhance the development agenda. PPD could also be the only inter-governmental entity mandated through an inter-governmental charter promoting population diplomacy through South South Collaboration. PPD is highly confident and will implement its newly adopted Strategic Plan and ensure engendering all the plans in action to bring the positive change of its member countries population where more than half of the young population of the world resides. The call of SDGs for new and inclusive global partnership is extremely aligned to the SSC where PPD's commitment is reassured.

PPD's Priority areas in 2016

The year 2016 has been a very crucial year for PPD to experience and learn with a new dimension for institutionalization of promoting SSC in reproductive health, population and development. Indeed, challenges have been many since we planned to implement our FY 2016 work plan focusing with the six priority areas for realizing transformation of SSC activities among PPD member countries. The six point priority areas of PPD are:

1	Advancing integration of population dynamics into the national development plan.
2	Improving adolescent's access to Sexual and Reproductive Health and Family Planning services.
3	Unfinished agenda of Improving maternal and child health.
4	Promoting social cohesion of migrant populations by addressing their health care services
5	Promoting healthy ageing
6	Creating greater understanding and addressing the relationship between poverty and health

These six priority areas have been directed by PPD's 20th Board Meeting held in November 2015 in Dhaka, Bangladesh. We have developed our framework of work plan and roadmap for the next 4 years (2016–2019) considering these 6-point priority areas along with the 5-point action plan committed by the participants during the Beijing Ministerial Dialogue held on March 2016 in Beijing in conjunction with the PPD 28th Executive Committee Meeting. The ministerial Dialogue was organized by the Government of China in collaboration with PPD and UNFPA. Despite challenges in financing, we have succeeded to achieve some targets as planned for 2016 that have boosted us to implement our next work plan for years 2017, 2018 and 2019.

The salient achievements in the year 2016 are as follows:

1. We organized our International Inter-Ministerial Conference with the theme of "Priority Population and Development Challenges in the Context of SDGs" that focused on the 6-point priority areas as different technical sessions. The objective of the Conference was to foster a political understanding of the importance of these 6-point priority areas, and at the global and country levels understanding their conceptual competency, operational and experimental situation. At least 3

presentations by PPD's honorable Board Members or PCCs were made under each of the priority areas based on the PPD country experiment and situation. We wish to congratulate the PCCs for their great contribution to PPD as well as their commitment towards partnerships for transforming knowledge and creating opportunities for scaling up the PPD country knowledge/good practices.

2. PPD organized a ministerial strategic dialogue with the support of the Government of China and UNFPA held in Beijing, China in March 2016 in conjunction with the 28th PPD Executive Committee Meeting. The dialogue concluded with a 5-point action plan that already has been transmitted into PPD's WP 2016.
3. The country assessment on the need and opportunity for SSC helped us to identify individual country needs. Further, this enabled the countries that have to reach out and contribute to those countries in need. We are committing to at least one activity for SSC highlighting the 6 areas to be implemented considering country priority in our MCs from 2017 onwards. The specific country would be requested to create an enabling environment for operationalization of our SS activities. Board members are also requested to provide political and financial support to enable the Secretariat to implement its operational tasks at the country level smoothly. We have created a national taskforce for SSC in 16 countries. However, they are not functional as there is lack of technical and financial commitments from MCs.
4. PPD Global Commission on Ageing in Developing Countries is now fully operational. We have commissioned 11 Commissioners with financial support that matches their technical support to conduct country assessment on ageing in selected 11 countries. The country reports are almost finalized and we are in the process of publishing a compendium of Ageing Reports in 11 selected countries by March 2017. We have organized in 2016

a healthy ageing seminar in partnership with the Government of China and UNFPA in Hangzhou, China and invited 5 selected Ageing Commissioners from 5 countries to attend and present the country reports.

5. PPD strengthened its network with the Mexico Network of SSC for Healthy Ageing and organized an international seminar on ageing in Mexico City in collaboration with the Governments of Mexico and Japan.
6. We have developed a conceptual report on migration through a consultative process on southern countries – the situation and opportunity for addressing problems related to migrants, particularly health services of migrants in the destination country. PPD also addressed the migration issue relating to the large scale movement of refugee and migrants during the Seventy First Session of the UN General Assembly held in September 2016 in the UN Headquarters, New York.
7. A high level roundtable symposium on adapting the SSC framework for strengthening cross-border action on AIDS, Tuberculosis and Malaria was organized during the 12th International Congress on AIDS in Asia and the Pacific in Dhaka. PCCs of PPD, along with experts from different countries attended the meeting. A concept note was developed as the outcome of the symposium for donor support.
8. We have organized multi-level advocacy activities and participated in the national and global advocacy platforms to promote and address our 6-point priority areas.
9. The PPD Chair Office has extended its support to PPD to revitalize its effective partnership with UNFPA. The Beijing Ministerial Dialogue for SSC and its outcome action plan addressed and directed the partnership issue.
10. PPD acknowledges the great contribution of an amount of US\$2 million from the Government of China towards PPD building construction and program activity. With this contribution of US\$2 million, we will complete the construction of the PPD 6-storey building complex by February 2017.
11. With the support of member countries namely India, Egypt and South Africa, 45 scholarships were facilitated in 2016 towards capacity building of professionals working in the RH, Population and Development fields. PPD also facilitated, with support from the Government of Bangladesh, about 200 scholarships including PCCs of PPD to attend the 12th International Congress on AIDS in Asia and the Pacific. Experts from 28 countries including PPD MCs received the scholarships. The Congress declared ending AIDs by 2030.
12. Both the organizations of PPD and WHO agreed to have a partnership for joint efforts to address the RH, population and development issues focusing on the 6-point priority areas. During the inter-ministerial conference a policy session was conducted on “Women on the Move: Review of WHO Migration Report”.

PPD's Achievement in 2016

The following sections will provide details about PPD's achievements in implementation of the 6 points priority areas in 2016

Priority Area 1: Advancing integration of population dynamics into national development plan

1.1 Organization of 13th International Inter-Ministerial Conference on Population and Development



Delegates of 13th IIMC, Dakar, Senegal 2016

The Government of Senegal and PPD jointly organized the 13th International Inter-Ministerial Conference (IIMC) on Population and Development with the theme, "Priority Population and Development Challenges in the context of SDGs" held in Dakar, Senegal from 28 to 29 November 2016. Over 300 participants representing Ministers and Secretaries of the respective health departments representing the 26 MCs, senior leaders, health and development professionals, international organizations and NGOs, World Health Organization, UNFPA, academicians, media persons, activists among others were present at this Conference. H.E. Dr. Awa Marie Coll Seck the Minister of Health and Social Action

and the honorable Board Member of PPD represented H.E. Mohammed Dionne Prime Minister of Senegal and inaugurated the conference. The 13th IIMC concluded with the commitment of the 'Dakar Call for Action' aiming to strengthen SSC as the best potential to accomplish the unfinished development agenda.

1.2 Organization of Ministerial Strategic Dialogue on SSC for Population and Development in Beijing, China

The Ministerial Strategic Dialogue on SSC for Population and Development officially opened in Beijing, China on 18 May 2016. The dialogue was rolled into action by His Excellency

Dr. Li Bin, Minister of National Health and Family Planning Commission, Government of China with the Chairmanship of H. E. Wang Pei'an, Vice Minister of National Health and Family Planning Commission, Government of China. The dialogue was jointly organized by the PPD, NHFPC of the Government of China, and UNFPA. The dialogue brought together 100 delegates from 24 countries and development partners including ministers, health and population experts, researchers, government representatives, and donor agencies. The dialogue aimed to strengthen SSC for Population and Development for the next five years in efforts geared at realizing the Sustainable Development Goals (SDGs). The delegates of the dialogue agreed that to implement successfully the 2030 Agenda for Sustainable Development and the International Conference on Population and Development (ICPD) Beyond 2014 Framework of Action, the international community

Action 1: Establish an International Forum on SSC in Population and Development

Action 2: Set-up a Coordinating Committee for SSC in Population and Development as a mechanism to identify and coordinate support to SSC programs focused on responding to country needs, particularly on matching needs for, and offers of SSC.

Action 3: Strengthen partnerships for SSC in Population and Development, sexual and reproductive health and reproductive rights and gender equality.

Action 4: Enhance efforts to accelerate reproductive health commodity security in developing countries.

Action 5: Strengthen human resource development in population dynamics and sexual and reproductive health.

Action 6: Establish the "Population and Development SSC Center of Excellence".



Delegates of ministerial dialogue, Beijing, China 2016

should deepen South-South and triangular cooperation to support stakeholders, including civil society and the private sector to play a greater role in building effective multi-stakeholder partnerships. The dialogue concluded with the "Beijing Call for Action" that aims to accelerate and outline key actions to further promote SSC in the field of population and development, including population dynamics, sexual and reproductive health and reproductive rights, and gender equality within the next five years. The Beijing Call for Action recommends the following 6-point actions:

1.3 Government of China's US\$2 million contribution towards institutionalization and sustainability of SSC in the field of population and development

A MoU has been signed on 19 March 2016 in Beijing China between PPD and the National Health and Family Planning Commission (NHFPC), Government of China for the donation of US\$2 million towards building PPD's permanent premises and resource base for SSC. The signatories of this MoU are H.E. Mr. Wang Pei'an, Honorable Vice-Minister of National Health and Family Planning Commission (NPFPC), Government

of the People's Republic of China and Dr. Joe Thomas, Executive Director of PPD in the presence of H.E. Dr. Li Bin, Honourable Minister of NPFPC, Government of China and PPD Executive Committee Members. This US\$2 is not only contributing to complete the 6-storey PPD Building but also creating assets for sustaining PPD's SSC country level programs. An amount of US\$150,000/p.a. will be generated by renting 19,250 sq.ft. from 2017. A MoU is already signed with ILO for renting 19,250 sq.ft. space within PPD's complex.



MoU signing on 19 March 2016 in Beijing between PPD and Government of China on donation of US\$2 million towards construction of PPD's building complex in Agaragaon, Dhaka

1.4 PPD is represented at the 49th UNCPD, United Nations Headquarters, New York, 11-15 April 2016

PPD made a statement addressing support towards SSC at the 49th Session of the United Nations Commission on Population and Development (UNCPD). During the meeting, PPD also followed-up with the Office of the UN Secretary-General on the PPD involvement in the implementation of the "2nd Updated Strategy on Every Women, Every Child and Every Adolescent" in the PPD Member States.

PPD organized the side-event on "South-South Cooperation on Population and Development: Chartering Strategic Roadmap for 2030 Agenda" and also facilitated bilateral meetings between delegations of PPD member states on partnerships for mutual benefits in



Delegates of UNCPD, 2016



Delegates on a side event for chartering a strategic roadmap for 2030 agenda

RH, population and development. PPD also held a meet with the UNFPA leadership on the implementation of the "Beijing Call for Action" adopted at the "Ministerial Strategic Dialogue on South-South Cooperation on Population and Development".

1.4 Facilitation of South-South Scholarships for capacity building of young professionals addressing the issue of integration of population dynamics into the National Development Plan

The Governments of India, South Africa and Egypt offered a total of 25 scholarships to young professionals from PPD MCs to pursue post-graduation diploma in 2016. The PPD scholarship program is a unique program specially designed for capacity building of young professionals working in the field of RH population and development in the PPD MCs. The course provides opportunity for promoting South-South partnerships for sharing and exchanging knowledge among the southern countries.

1.4.1 Egypt provided 5 Scholarships for pursuing the Diploma in Demography at the Cairo Demographic Centre (CDC) 2016. Fourteen applications were received for 5 awards. Five fellows were selected based on the relevant educational background and expertise from The Gambia, Nigeria, Pakistan and Uganda.

1.4.2 South Africa offered 5 scholarships for pursuing the Post Graduate Diploma in Population and Policy Analysis (PGDPPA). 8 applications were received for 5 scholarships. Candidates from The Gambia, Kenya, Ghana, Nigeria and Uganda were selected based on the relevant educational background and expertise.

1.4.3 India offered 10 scholarships in Public Health Management through the National Institute of Health and Family Welfare (NIHFW). Out of the 13 applications received, 10 were selected from Ethiopia, The Gambia, Ghana, Mali, Nigeria, Uganda, Vietnam and Zimbabwe.

1.4.4 In addition to the diploma course, South Africa also offered 25 scholarships for a short course through 2 sessions on Leadership Training in Sustainable Development: the Population, Environment and Development (PED) Nexus for Integrated Development Planning short course. Eleven professionals from The Gambia, Ghana, Nigeria, Pakistan, Tunisia, Vietnam and Zimbabwe participated.



PPD scholars at PED NEXUS course in South Africa

1.5 Provide technical support to PPD partner institutions in India

PPD is partnering with Tata Institute of Social Sciences (TISS) to develop a consultative document on the SDGs for policy recommendations to the Government of India. The aim of the consultation is to promote SDGs through the people – a people led way.



Keynote presentation made by PPD Executive Director during a consultative workshop on SDGs

1.6 Planning meeting between PPD and Indonesia Government for organization of 14th International Inter-Ministerial Conference 2017 in Indonesia

A meeting between the PPD Board Member of Indonesia – Dr. Surya Chandra Surapaty, M.D., M.P.H., PhD, Honorable Chairperson, the National Population and Family Planning Board (NPFPPB), Government of Indonesia and Dr. Joe Thomas, Executive Director of PPD was held on 17 May 2016 in Denmark regarding the hosting of the PPD 14th International Inter-Ministerial Conference 2017 and annual governance meeting 2017 in Indonesia. The meeting also discussed the financial involvement of the hosting of PPD annual events in Indonesia. The theme for 2017 conference has been proposed with a broader theme on "Population and Sustainable Development".



Priority Area 2: Improving adolescent's access to Sexual and Reproductive Health and Family Planning services

2.1 PPD's engagement with Georgetown University, USA for joint efforts to advance health and population diplomacy for a global legal framework towards sexual and reproductive health

PPD and the O'Neill Institute for National and Global Health Law of Georgetown University is working jointly to develop a project for analyzing PPD member states' legal frameworks for sexual and reproductive health (SRH) and institutional mechanisms for implementing these frameworks. A meeting was held with Georgetown University on September 2016 to discuss about preparation of a joint action plan that highlights the implementation of PPD's 6-point priority areas.

2.2 PPD at a high-level meeting of the General Assembly on HIV/AIDS, United Nations Headquarters, New York, 8 to 10 June, 2016

PPD attended the high-level meeting of the UN General Assembly on HIV/AIDS. PPD member countries: Bangladesh, India, Mexico, Kenya, Zimbabwe, Tunisia, Thailand, Benin, Indonesia, Senegal, Nigeria, South Africa, The Gambia, Egypt, China, Pakistan, Jordan, and Morocco attended the meeting. The Permanent Observer to the UN represented PPD and made a statement during the meeting that focuses on the importance of enhanced international cooperation, particularly South-South efforts, to support the goal of ending the AIDS epidemic by 2030. The official statement from Bangladesh acknowledged PPD's contribution for the organization of the 12th International Congress on AIDS in Asia and the Pacific and its commitment towards ending AIDS by 2030.

Priority Area 3: Unfinished agenda of improving Maternal and Child Health

3.1 PPD is a steering member of "Every Woman Every Child Every Adolescent Campaign"

PPD attended the Every Woman Every Child Every Adolescent (EWECEA) Steering Committee Meeting as a member. It was held in Geneva, Switzerland on 8 April 2016. During the Geneva meeting PPD also had a meeting with PMNCH relating to the renewal of their partnership contract under consideration. PPD is providing technical support to the EWECEA campaign for ending maternal and child death and promoting adolescent health in PPD countries.

3.2 PPD Exhibits South-South activities at "Women Deliver" 4th Global Conference held in Copenhagen, Denmark from 16 to 18 May 2016

With the support of Gillespie Foundation, PPD demonstrated its South-South activities at Women Deliver held in Copenhagen, Denmark from 16 to 18 May 2016. The PPD booth attracted thousands of visitors including health professionals, donors, international agencies, policy makers, youth health activists, media, private sector representatives and academicians from all over the world. During the conference PPD organized and attended several side events.



Ms. Traci L. Baird, Executive Vice President of Ipas visited PPD Booth

PPD hosted the Bangladesh caucus meeting at the fringe of #WD2016 on 18 May 2016. Hon. State Minister of Finance, Parliamentarian Hon. Prof. Millat, Hon. MoHFW, Dr. Sathya Doraiswamy, Chief Health of UNFPA and Dr. Joe Thomas, Executive Director of PPD participated in the discussion. Almost 50 delegations from PPD countries attended the meeting. The unanimous take home message from the conference is that all development programs need to mainstream women's issues as a priority. "Stop child marriage" will be the priority agenda where combined efforts need to be ensured.



Priority Area 4: Promoting social cohesion of migrant populations by addressing their health care services

4.1 PPD at the high-level meeting during UN General Assembly, 71st session, UN Headquarters, New York, 19 September 2016

PPD Executive Director represented SS countries at a high-level meeting on a large movement of refugees and migrants in the UN Headquarters on 19 September 2016 during the UN General Assembly. PPD strongly reaffirmed that all human beings are born free and equal in dignity and rights, and that everyone has the right to be respected everywhere as a person before the law. PPD reiterated its full commitment to the spirit of the adopted "New York Declaration for Refugees and Migrants" and the fostering of inter-governmental efforts in pushing the agenda for adoption of a global compact for safe, ordinary and regular migration, in the framework of South-South Partnership.



Executive Director of PPD, representing PPD at UN General Assembly, Seventy First Session, UN Headquarters, 19 September 2016

Priority Area 5: Promoting healthy ageing

5.1 Organization of 2016 international seminar for SSC on “Healthy Ageing” in Hangzhou, China from 17 to 19 October 2016

PPD, in collaboration with the National Health and Family Planning Commission (NHFPC), Government of China and United Nations Population Fund (UNFPA), organized a 3-day seminar on “2016 International Seminar for South-South Cooperation on Healthy Ageing” at Hangzhou, China, from 17–19 October 2016. The objective of this seminar is to exchange experience and explore future strategies

for the integrated medical care with home care for the elderly so as to promote healthy ageing in developing countries. Panel discussions were followed by field visits relating to healthy ageing and integrated services. The seminar was inaugurated by the H.E. Hon. Vice Minister Mr. Wang Pie'an of NHFPC, Government of China. A total of 35 senior government officials, program managers, and scholars mainly from the developing countries and representatives from international organizations and NGOs attended the Seminar.



Participants of the healthy ageing seminar along with H.E. Mr. Wang Pien', Vice Minister of NHFPC

5.2 PPD extends its networking with the National Institute for Geriatrics (INGER), Government of Mexico and JICA to organize a Healthy Ageing Meeting

PPD, in collaboration with the National Population Council (CONAPO), JICA, Mexican Ministry of Health, National Institute of Geriatrics and National Academy of Medicine

organized the Second Mexico-Japan Meeting on “Healthy Ageing” in Mexico City from 20 to 21 June 2016. This meeting created the opportunity for PPD to extend its partnership with Latin American networks for SSC and JICA to conduct evidence-based research and sharing of Mexican experiences and success stories with other PPD member states.



PPD ED speeches during the meeting

5.3 PPD is represented at the World Health Assembly (WHA) as Permanent Observer to the UN

PPD's contribution to SSC for RH, Population and Development has been acknowledged by all the UN agencies including WHO. The present status of PPD within the WHO system has been strengthened. PPD is currently recognized as a representative of its member states during the World Health Assembly (WHA) and can thereby address PPD countries' needs towards improving maternal health, child health, adolescent health, unmet needs, migration, and ageing. PPD attended the 69th WHA held from 23 to 28 May 2016 in Geneva, Switzerland.

5.4 PPD Secretariat provided technical support to the Africa Regional Office (ARO)

Technical support was provided to the ARO by PPD for organizing the Network of African Parliamentary Committees of Health (NEAPACOH) meeting held from 28 June to 1 July 2016 in Kampala, Uganda. PPD Executive Director attended the meeting as resource person.



PPD ED addresses during the NEAPACOH in Kampala, Uganda

Priority Area 6: Creating greater understanding and addressing the relationship between poverty and health

6.1 PPD-TRAction, University Research Co., LLC USA collaboration for Health Evaluation, Research and Development (HERD) Project under the Health Research Program 2.0 (HaRP 2.0) RFA No.: RFA-OAA-16-000013.

PPD joined with TRAction, URC as a resource partner to advance applied health research and evaluations in low- and middle-income countries (LMICs) in order to accelerate progress towards achieving global health and development goals.

6.2 Strengthening Community Health Programs in Bangladesh through South-South Cooperation between Bangladesh and India

The Indian High Commission to Dhaka, Government of India donated US\$1.15 million to PPD to provide technical support towards strengthening Community Health Programs in Bangladesh and lessons learned to promote SSC. The funding includes strengthening 36 community facilities, capacity building of the health workers and documentation and transformation of the practices.

6.3 PPD-Makerere University Joint Consortium for proposal submission to Bill & Melinda Gates Foundation for support and strengthening Geospatial data in Africa

The aim of the proposal was to advance the quality completeness and sustainability of geospatial data in Africa and to serve as strategic grant maker, capacity builder and effectively coordinate with others working in mapping and data on the continent. The consortium members include the Department of Population Studies of Makerere University, Uganda, Dure Technology, PPD Africa Regional Office, Kampala, Uganda and ten partner institutions. The proposal was regretted.

6.4 PPD is engaged in launching an “International Journal for Population, Development and Health”

The journal will focus mainly on evidence based research output relating to reproductive health, population and development and good practices on SSC and population in PPD countries. It will also cover policy issues with social sciences – demography, economics, sociology, anthropology and population diplomacy. Special attention would be given to create a peer review mechanism to increase greater dialogue to address the relationship between poverty and health. The first issue is expected to be available by the end of the year 2017.

7. Strengthening PPD's Institutional Capacity for SSC

7.1 Enrollment of New Membership

A meeting was held with H.E. Mr. Mouly Ieng, Senior Minister, National AIDS Authority, Kingdom of Cambodia at PPD Office in March 2016. The honorable minister has shown his interest to become a member of PPD. PPD Executive Director has discussed about PPD and its role in SSC in population and development during Cambodian minister's visit to PPD office.



Honorable Cambodian Minister's visit to PPD Office

Follow-up with the Philippines, Brazil, East Timor, Nepal and Afghanistan had not progressed as these countries have other priority commitments to meet other than population and reproductive health issues due to their respective transitional political situation.

H.E. David Bhati, Hon. Minister of State for Finance, Planning and Economic Development and PPD Board Member, Government of Uganda and Dr. Joe Thomas, Executive Director, PPD

PPD Executive Director attended a meeting with the Hon. Board Member and PCC of Uganda and ARO Staff in April 2016 in Kampala, Uganda. The aim of the meeting was to discuss the interim arrangement for operation of ARO management and program activities as the Regional Director position had fallen vacant due to the retirement of Dr. Joutam Musungugi. The discussion held on how to strengthen the regional office for creating more opportunities for SSC, advocacy needs, and partnership opportunities.



H.E. David Bhati, Hon. Minister of State for Finance, Planning and Economic Development and PPD Board Member, Government of Uganda and Dr. Joe Thomas, Executive Director, PPD

7.3 Completion of Building Construction

The 6-storey building construction is in full swing and scheduled to complete by February 2017. PPD office will shift to its own building complex by March 2017. A MoU is being progressed to sign between ILO and PPD on renting about 19,290sq.ft. spare spaces to ILO that will generate an amount of US\$150,000 per annum.

8. Organization of PPD Annual Events 2016

8.1 Organization of 8th Program, Planning and Development Committee Meeting held in Dakar, Senegal on 26 Nov 2017.

Uganda represented by Dr. Jotham Musinguzi, Director General, National Population Council chaired the Meeting. The committee



Members of PPD Program, Planning and Development Committee, Dakar, Senegal 2016

emphasized implementation of a number of SSC programs in member countries so that it can facilitate partnership for commodity security for contraceptive needs of young people. PPD needs to engage with targeted

advocacy for this purpose with India, China and other countries.

8.2 Organization of 8th Finance, Audit and Risk Management Committee Meeting held in Dakar, Senegal on 26 Nov. 2017.

Tunisia represented by Dr. Ridha Gataa, President Director General, National Board of Family and Population, chaired the Committee Meeting. The Committee recommended that the Secretariat need to develop a template with certain generic principles and requirements accompanied by estimated budget and provide to the country interested to host the PPD annual events, including the Inter Ministerial conference. PPD should document lessons learned from the Bangladesh, India, PPD tripartite partnership for strengthening community clinics in Bangladesh and see how similar projects could be replicated to benefit other countries. The Committee guided PPD to review the work and mandate of NY office and emphasize their involvement in active resource mobilization liaising with donor agencies in NY.



Members of PPD Finance, Audit and Risk Management Committee, Dakar, Senegal 2016

8.3 Organization of 18th PCCs and Partner Institutions Meeting held in Dakar, Senegal on 27 November 2017

All the PCCs except Ethiopia attended the meeting. The meeting recommended the following;

- Revitalization of national taskforce for SSC in member countries
- Ensuring the implementation of at least one activity/one action plan of SSC in each country.
- Taking serious initiative to address unfinished ICPD agenda
- Engaging the foreign ministries of countries to increase national capacity to advocate on population and development issues globally.
- Facilitating country level activities based on country needs as Egypt and Uganda need partnership with India and China for contraceptive security.
- Mobilization of resources for SSC is essential. Membership fees of PPD need to be emphasized since South South program is not often the priority of the donors.
- Enhancing the resource based at PPD Secretariat with the completion of its own building complex-Bringing PPD Partner

- Institutions (PI) together for mobilization and implementation of large scale research/program.
- Secretariat should request countries for their assistance to resource mobilization. Particularly, China and India can provide assistance to PPD to promote SSC and mobilize resources.
- Strengthening evidence based data management for making SSC in population and development works.

8.4 Organization of 28th Executive Committee Meeting and 21st Board Meeting held in Dakar, Senegal on 29 and 30 November 2017. The meeting was chaired by China represented by

H.E.Mr. Wang Pei'an, Honorable Vice Minister of National Health and Population Commission, Government of China. The Executive Committee and the Board emphasized PPD to strengthen its programmatic actions and strengthen SSC. The salient decisions are as follows:

- PPD needs to strengthen capacity building of PPD Member States highlighting the 6-point priorities of PPD through organization of international Training Seminars and Workshops for senior government officials.



PPD PCCs and Representatives of Partner Institutions, Dakar, Senegal 2016



Members of PPD Executive Committee, Dakar, Senegal 2016

- Secretariat will develop annual plan accommodating 6-point priorities within the available annual income.
- Secretariat will work for formal accreditation of PPD as an intergovernmental organization with the African Union similar to that of PPD with the UN General Assembly.
- Committee instructed PPD to facilitate more activities for helping countries like Egypt, Uganda and other countries in the areas of commodity security for contraceptive needs. PPD was requested to facilitate and actively engage with targeted advocacy for this purpose with India and China.
- Secretariat directed to make clear meeting plans and budget requirements for organization of annual events well in advance for 2018 and 2019 meetings for internal discussions and the budget allocation in the financial cycles of potential countries.
- Committee directed to create better communication tools between the Secretariat and the Finance Committee on proposals and action plans, main opportunities with the countries and UN agencies to help with PPD's resource mobilization.
- Committee agreed that each member country should implement at least one SS activity for strengthening partnerships to achieve greater understanding of PPD SSC.
- Committee agreed that the Secretariat will collaborate with each country to strengthen SSC at the national level through promoting the national taskforce and implementing national level SS activities.
- Committee agreed that country should encourage conducting south-south study tour for increasing visibility of the benefits of SSC to the national policy and program changes by scaling-up, replication and adaptation of good practices and transformation of lessons learned.



Members of PPD Board, Dakar, Senegal, 2016

- Member countries should contribute in kind or cash to implement more exchange programs, to replicate and scale up good practices so that PPD can achieve its mandate.
- Initiative to be taken for strengthening the visible partnerships between 2 or more countries that would be facilitated by the Secretariat towards addressing country needs every year.
- Committee agreed that each member country would implement at least one SSC activity through strengthening the National Taskforce for SSC for addressing national level reproductive health, family planning and population issues.
- Member countries are requested to assume leadership in providing accelerated support to PPD and to promote SSC towards attaining the SDGs.
- Member states are requested to demonstrate accelerated commitment towards settlement of the annual membership contribution to ensure smooth functioning of PPD and strengthening of SSC.
- Secretariat is directed to revise the work plan and budget 2017 through constituting a small team and presenting it to the Executive Committee for approval before the Board meeting.
- Committee agreed that the PPD Charter is a very important document and needs serious attention for developing a comprehensive document to be approved by all members.

REPORT OF PPD AFRICA REGIONAL OFFICE (ARO)

Strategic Intervention: Advocacy & Policy development

1. Orientation meetings for Members of Parliament of Uganda, March–May, 2016

PPD ARO organized meetings of Members of Parliament of Uganda, in March and May 2016, in Kampala, Uganda with the aim of orienting new and re-elected MPs and technical officials on the reproductive health and family planning related commitments that Uganda has made at different global initiatives. These include the Maputo Plan of Action (2006), the Muskoka Initiative on Maternal, New-born and Child Health (2010), Global Strategy for Women's, Children's and Adolescents' Health (Every Woman, Every Child 2010), HAND to HAND Campaign (2010), the UN Commission on Life-Saving Commodities for Women and Children (2012), FP2020 (2012) and the International Conference on Population and Development (ICPD). The meetings helped to share progress on achievements made on the commitments and challenges remaining. The parliamentarians committed to engage with their peers and technical people of the concerned ministries to ensure that the country delivers on the commitments made. In addition, consensus was generated on including FP2020 financial commitments in the FY 2016/17. Support for FP/RH budget was generated and a strategy/way forward developed for allocating funds to FP in FY 2016/17 and subsequent financial years.

2. Meeting of Members of Parliament of Kenya, March 2016

With support from DFID through the Strengthening Evidence for Programming for Unintended Pregnancies (STEP UP) project, PPD ARO, in partnership with Population Council of Kenya, National Council for Population and Development of Kenya, Ministry of Health, Kenya and Africa Population and Health Research Centre (APHRC), organized a one-day meeting of selected Kenya parliamentarians and technical staff that was held on 24 March 2016 at the Intercontinental Hotel, in Nairobi, Kenya. The objectives of the meeting were to have the parliamentarians obtain a better understanding and appreciation of Kenya's Reproductive Health/Family Planning,

Population and Development challenges from the policy perspectives; to discuss and have a consensus on solutions for accessing family planning (FP) and reproductive health (RH) information and services among the adolescents and young people of Kenya; to present the current funding gaps for FP/RH commodities; and discuss and chart the way forward on the challenges. The meeting was attended by over 40 participants, 20 of them being parliamentarians. During the meeting, high quality, policy- and program-relevant evidence was effectively communicated and its utilization enhanced. The policy makers were mobilized and sensitized on population, RH and related issues. The meeting discussed, developed and agreed on a policy relevant action plan/way forward for addressing the RH needs of adolescent girls and young women in Kenya

3. Meeting of members of Parliament of Senegal, June 2016, Dakar, Senegal

On June 2, 2016, PPD ARO, in partnership with the Senegalese Directorate of Reproductive Health and Child Survival (DSRSE), the Senegal Parliamentary Commission of Health, and the Population Council of Senegal organized a workshop of selected parliamentarians and technical staff to disseminate and discuss the Senegal Country profile on unintended pregnancies. The workshop was held at Radisson Blu Hotel, Dakar Senegal. It was attended by a total of 45 participants including 25 Members of Parliament, and 20 representatives of CSOs including staff of the Population Council of Senegal. The specific objectives of the workshop were to learn about the situation of unintended pregnancies amongst the adolescents in Senegal, and develop recommendations and an action plan for increasing access to RH/FP services and information among the adolescents. The workshop came up with several recommendations and concrete action points in the areas of resources for service delivery; reproductive health services for the adolescents, and sexuality education and support for SRH needs in schools.

4. Network of African Parliamentary

Committees of Health (NEAPACOH) meeting, June 2016, Kampala, Uganda

PPD ARO, in collaboration with partners, organized a meeting of the Network of African Parliamentary Committees on Health (NEAPACOH) that was held at Speke Resort Munyonyo, Kampala, Uganda, on 29–30 June 2016. The meeting gathered members of parliamentary committees responsible for health from 19 countries. It was also attended by representatives of development partners, NGOs, Civil Society and other stakeholders engaged in Family Planning, Reproductive Health and Maternal and Child Health programs. Countries that attended were Angola, Botswana, Burundi, Chad, Ethiopia, Ghana, Kenya, Lesotho, Malawi, Namibia, Nigeria, Senegal, South Sudan, Swaziland, The Gambia, Togo, Uganda, Zambia and Zimbabwe. Altogether, 145 participants attended the meeting among whom 58 representing 40% were females and 87 representing 60% were males.

The objectives of the meeting were to assess progress made, challenges and lessons learned in achieving the country commitments made at the September 2014 NEAPACOH meeting; share experiences and innovative practices on the implementation of reproductive health (RH) including family planning (FP) commitments in the post-2015 development agenda; enhance accountability, political leadership and stewardship for the implementation of RH/FP frameworks in the region within the context of the SDGs; and develop country-specific action plans that promote RH/FP for implementation over the coming 12 months. The theme of the meeting was “From Millennium Development Goals (MDGs) to Sustainable Development Goals (SDGs): Challenges and Opportunities for Parliaments to enhance Reproductive Health/Family Planning”.

At the end of the meeting, the parliamentarians developed and adopted the Kampala Call for Action on June 30, 2016 based on sustainable development as the core principle. The Kampala Call for Action aims to accelerate and outline key actions to further promote SRH & FP, gender equality, population and development for the next five years, recommends actions under leadership, legislation, advocacy, financing and strategies

and programs all aimed at promoting good governance and accountability in all matters of RH/FP, providing leadership and stewardship on policy, legislation and budgetary oversight for reproductive health and family planning, championing actions that enable increased use of evidence in decision making, and ensuring that FP and population issues are integrated into national development strategies, including poverty reduction strategies and action plans.

Each country in attendance at the 2016 NEAPACOH meeting committed to some actions to promote RH/FP that will be implemented over the course of one year. When the NEAPACOH convenes again in 2017, countries will be expected to report progress on the implementation of the commitments.

5. Activities on accountability for the implementation of national FP/RH commitments

On 4 August 2016, in Kampala, PPD ARO organised a meeting for launching a report on the RH/FP commodities budget tracking for FY 2015/16. The meeting was presided over by the Minister of State for Health (Primary Health Care) Hon. Sarah Opendi. Participants included officials from the Ministry of Health, Ugandan parliamentarians, members of the parliamentary commission on health, Civil Society Organizations as well as the media. The report highlighted that the government released only US\$2,446,937 out of the US\$5 million that was committed. The gap was attributed to the completion of the World Bank Project on Health Systems Strengthening that had a component on RH commodities procurement. The Parliamentarians committed to engage their peers as well as the Ministry of Finance officials to ensure that the budget for FP is upped to the level of the FP2020 financial commitment for the subsequent financial years.

6. Advocacy activities for increased domestic funding for FP

During the period March–October 2016, PPD ARO, with funding from Advance Family Planning organized several meetings with Uganda Districts’ political leadership and policy makers aimed at sensitizing them to have better understanding of the linkages between family planning and social economic

transformation of economies. The meetings were organized in the seven districts of Soroti, Kabarole, Mukono, Mayuge, Rakai, Kibaale and Kamwenge. As a result, all the districts committed to mainstream family planning and reproductive health in their sector planning and budgeting processes. In addition, to sustain the momentum for advocacy for RH/FP that has been created by PPD ARO, all the districts were helped to establish District Family Planning Advocacy Groups whose activities are coordinated by the district health officers. In terms of funding for FP, Mukono district was able to allocate UGX12 million for family planning in the FY 2016/17 budget. The districts of Soroti, Mayuge, Rakai and Kamwenge committed to allocate funds to FP activities in the FY 2017/18 as shown in the table that follows:

District funding commitments for FP for FY 2017/18

No.	District	Amount (UGX)
1.	Soroti	6 million
2.	Mayuge	5 million
3.	Kamwenge	17 million
4.	Rakai	30 million

7. Global Financing Facility (GFF) meeting, 11 October 2016, Kampala

With funding from the AFP, PPD ARO organized a breakfast meeting on GFF that was held on Tuesday 11 October 2016 at Sheraton Hotel in Kampala. The purpose of the meeting was to disseminate the GFF Investment Case for Uganda, have a broader and better understanding of the GFF implementation modalities and its linkages, with other similar national processes. The meeting observed that involvement of non-state partners in Uganda's GFF investment case remains weak and uncoordinated. It was recommended that another meeting be organized to map out the non-state partners' engagement strategy and strengthen coordination in an inclusive and transparent manner. It was further recommended that the GFF be popularized so that stakeholders can innovatively contribute to the implementation of the GFF investment case.

Strategic Intervention: Partnerships and relationships

1. ICFP 2016 Conference in Indonesia, January 2016

The Program Manager, Patrick Mugirwa, attended the International Family Planning Conference that was held in Bali, Indonesia in January 2016. The conference created a rebranded environment and momentum for FP advocacy in African member countries. As an example, the conference was heavily attended by Ugandan politicians and ministers, researchers, technocrats, representatives of CSOs, NGOs, among others, who have since placed advocacy for FP as unprecedented priorities in the development agendas.

2. 28th PPD EXCO, Beijing, China, March 18–19, 2016

The Program Manager, Patrick Mugirwa, attended the Inter-ministerial strategic dialogue on South-South Cooperation in Population and Development and the 28th PPD EXCOM meeting that were held in Beijing, China on 18 and 19 March respectively. The dialogue was jointly organized by the National Health and Family Planning Commission (NHFPC), Government of the People's Republic of China, the United Nations Population Fund (UNFPA) and PPD. The outcome of the dialogue was a Beijing Call for Action to strengthen and promote SSC for Population and Development for the next five years.

3. Uganda RH Commitments Initiative: South-South good practices transfer

With funding from PATH, PPD ARO worked collaboratively with Samasha Medical Foundation, and implemented the Uganda RH Commitments Initiative. This initiative is a country-driven approach that aims at accelerating progress on RH/FP commitments made by Uganda at different levels. A Motion Tracker was developed as a monitoring tool to track the progress made towards the achievement of commitments. This approach greatly enhanced transparency, participation and accountability for the RH commitments that Uganda made. Due to good lessons from Uganda, RHSC requested PPD ARO to facilitate a workshop on the methodology, strategy, and lessons learned from Uganda

with a view of adopting it in Burkina Faso. PPD ARO's Program Officer, Achilles Kiwanuka travelled to Burkina Faso between 5–10 September 2016 and facilitated a workshop wherein the objective was to inform the key government sector officials about the Uganda Commitments Initiative and provide them with relevant tools and resources to start up a similar kind of initiative. The workshop was attended by 63 persons representing 23 key member organizations, representatives from the MoH Directorate for Reproductive Health as well as development partners (WHO, UNFPA, HP+, GIZ). The workshop participants unanimously agreed that Burkina Faso was capable and ready to adapt and adopt the initiative. The MoH committed itself to the government of Burkina Faso's support for the Initiative.

4. East Africa and West Africa Health Policy and Research Organizations Partners meeting, 1–2 Sept., 2016, Nairobi, Kenya

PPD ARO Program Manager attended the EA-HPRO and WA-HPRO partners meeting held on 1–2 Sept. 2016 in Nairobi, Kenya. EA-HPRO partners include PPD ARO and ECSA Health Community with APHRC as the lead. The meeting was organized by APHRC under the rubric of the Innovating for Maternal and Child Health in Africa (IMCHA) program. The objectives of the meeting were to maximize opportunities for exchange and collaboration between East and West Africa Health Policy Research Organizations and IDRC; to build on 'learning by doing' and feedback from HPRO survey to modify and maximize future activities, with particular emphasis on knowledge translation; to identify modalities of engagement between HRPOs, Implementation Research Teams (IRTs) and IDRC and to ensure a common understanding of IMCHA commitments. The outcome of the meeting was a clearer understanding and appreciation of the roles, synergies and contributions of the partners in the IMCHA initiative, drawing from each partner's comparative advantage.

5. AFP Partners meeting, 18–22 July 2016, Nairobi, Kenya

The Program Manager, Patrick Mugirwa and Program Officer, Eva Nakimuli attended AFP Partners meeting that was held on 18–22 July 2016 in Nairobi, Kenya. The goal of the meeting

was to have greater synergy among AFP partners and collaborators in working to fulfil the FP2020 vision through increased political and financial support for family planning. The specific objectives of the meeting were to have a shared understanding of AFP priorities for expanded and sustainable advocacy moving forward in 5–8 project years and increased awareness of internal and external opportunities and challenges; knowledge of what is needed to achieve and implement family planning policies and specifically address contraceptive choice, quality of care, postpartum family planning, and youth; stronger advocacy for family planning at local, national and global levels through partnerships developed with Opportunity Fund recipients, the Advocacy Collaborative members, and Latin American colleagues; better skills and new methods for facilitating AFP SMART advocacy strategy sessions; and improved ability of partners to use and analyze information to monitor progress, capture AFP's contribution to impact, and validate the theory of change.

Strategic Intervention: Capacity development and technical cooperation

1 Communications and media advocacy training, May 2016, Dar-es-Salaam, Tanzania

Program Officer, Eva Nakimuli attended the AFP organised workshop on 23–28 May 2016 in Dar-es-Salaam, Tanzania that aimed at building the capacity in communication and media advocacy of all AFP East Africa partners. The outputs of the workshop were the participants' increased knowledge of AFP's communication tools, best practices and tone; sharpening skills on how to write simple and effectively; and ability to adapt advocacy messages for different audiences. The Officer is now able to apply writing, editing and messaging techniques to advocacy communication materials and is able to contribute to the development of an AFP SMART media advocacy work plan.

Report of PPD China Program Office

During the period of January to December 2016, with constant guidance and support from PPD Secretariat, National Health and Family Planning Commission of China (NHFPC), Ministry of Commerce (MOC) and many other domestic and international institutes and organizations, PPD China Program Office (PPD China) continued to promote SSC in the field of population and development mainly through one dialogue and three seminars on SSC.

As a platform of China to communicate with other countries and regions in the field of population and development, PPD China is highly responsive and active to promote a set of works, such as security to ensure the success of the seminars. With great support from NHFPC, MOC and Taicang municipal government, PPD China is able to host each foreign affair activity without any mistake or any untoward incident. All the participants and experts have highly praised our professional, superior and efficient services and organizing ability. This will now have an increase in China's impact on the international environment. Further, it will enhance China's ability to better serve the development of PPD and other international affairs in the field of population and development.

I. Ministerial Dialogue on SSC in Population and Development

Ministerial Dialogue on SSC in Population and Development (hereinafter referred to as the dialogue), jointly organized by NHFPC,

the United Nations Population Fund (UNFPA), and PPD, was held in Beijing, China from 18–19 March 2016. Through the discussion about future strategy and action plan on SSC in population and development, the dialogue aims to deepen SSC in population and development, sexual and reproductive health, reproductive rights and gender equality.

The dialogue brought together more than 100 delegates from 24 countries, including ministers from 9 countries namely Bangladesh, The Gambia, Guinea, Indonesia, Liberia, Pakistan, Sierra Leone, Uganda, Zimbabwe, senior government officials responsible for population affairs from PPD member countries and other developing countries, representatives from relevant UN agencies and experts from the academic and research institutions.

II. Seminar on Promoting Maternal and Child Health Care for Developing Countries

A seminar on promoting maternal and child healthcare in developing countries held from 10 to 30 May 2016 in Beijing and Taicang, China. This seminar was organized jointly by NHFPC and MOC. The seminar emphasized on sharing China's experiences in policy, law, management and technical services in maternal and child health care, with the aim to enhance the level of policy and law making, program management capability, professional skill for maternal and child health care services in developing countries, and helping to improve service quality of maternal and child health care and reproductive health in developing countries and promoting the building of SS Partnership among developing countries in relevant areas.

The seminar brought in altogether 20 delegates from 8 developing countries including Panama, Dominica, Lesotho, Malawi, Mexico, South Sudan, Serbia and Uganda. These delegates are government officials and medical personnel, mainly in charge of medical care and public health.





Delegates of Seminar on Promoting Maternal and Child Health Care, 2016

III. Seminar on Promoting Healthy Aging for Developing Countries

Sponsored by NHFPC and MOC and organized by PPD China, the seminar on “Promoting Healthy Aging for Developing Countries” was successfully held from 27 June to 17 July 2016 in Beijing and Taicang, China. The seminar shared experiences in relevant new policy making patterns to deal with the aging problem, establishment of aging society model enabling sustainable development and

improvement of public health management and service quality. The seminar served the purpose of promoting and developing a healthy aging policy for developing countries and development of new program management capability and professional skills, helping to improve the quality of public service for the aging population in developing countries and promoting the building of win-win South South Partnership among developing countries in the above areas.



Delegates of Healthy Ageing Seminar, Taicang, China, 2016

There were altogether 21 delegates from 9 developing countries, including Ethiopia, Grenada, Kenya, Mauritius, Nepal, Panama, Sierra Leone, South Sudan, and Zambia who attended the seminar. Participants were government officials and medical personnel engaging in medical care, social security and foreign affairs.

IV. Ministerial Seminar on Population and Sustainable Development for Developing Countries

The Ministerial Seminar on Population and Sustainable Development for Developing Countries held from 24 Oct to 2 Nov 2016 in Beijing and Taicang, China. This seminar was organised jointly by NHFPC, MOC and PPD. Seminar highlights the China's experiences in population policy – the long-term economic and social development, eliminating poverty, promoting sustainable development and also the latest progress, dynamics and best practices in world population and development. The seminar aimed to strengthen the ability of

developing countries to plan and manage population, sustainable development and poverty reduction and promote the building of a win-win South-South Partnership among developing countries in these areas.

The seminar brought together 21 delegates from 7 developing countries, including Egypt, Palestine, South Sudan, the Philippines, Uganda, Uzbekistan, and Vietnam. These delegates, 2 at the ministerial level and 19 at the bureau or department level, are government officials and medical personnel working mainly in the field of demographic statistics and family planning.

Moreover, through organizing cumulatively 26 foreign aid training programs, PPD China has also obtained rich experience in international communication and cooperation in the field of health and family planning – all of these being critical to the continuous improvement of service quality in the above fields



Delegates of Ministerial Seminar on Population and Sustainable Development, 2016



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Partners In Population and Development (PPD)

An Inter-Governmental Organization
Promoting South-South Cooperation