

ANNUAL REPORT

2006

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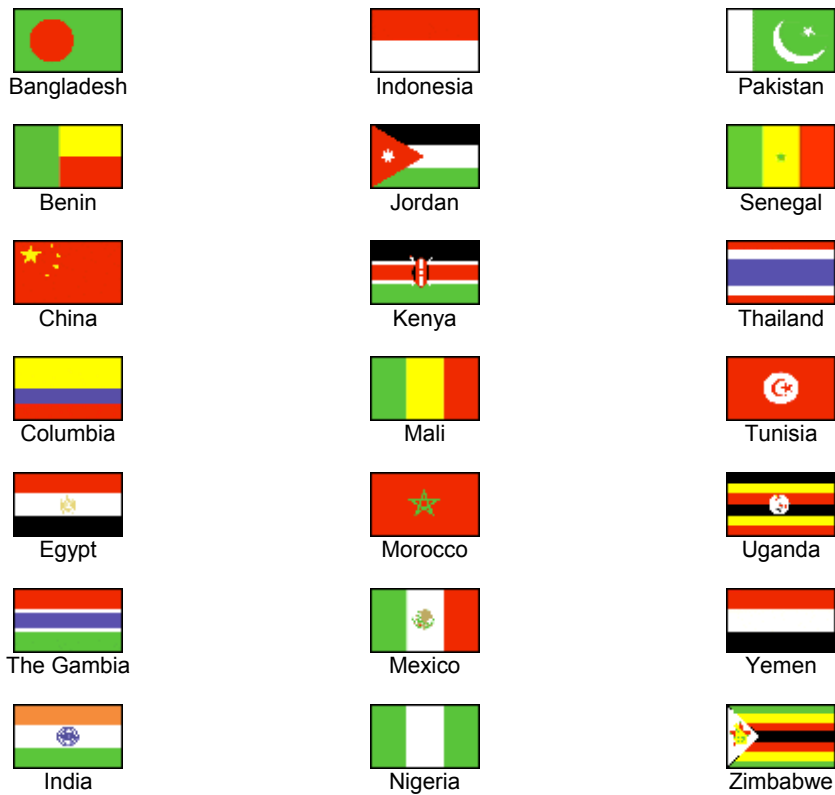
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Member Countries of Partners in Population and Development (PPD)



PPD covers 54% of the world population



1. EXECUTIVE COMMITTEE MEMBERS

Chair, PPD Board

H.E. Zhang Weiqing

Honourable Minister
National Population and Family Planning Commission of China (NPFPC)
Government of the People's Republic of China

Vice-Chair, PPD Board

H.E. Mme Maiga Zeinab Mint YOUBA

Honourable Minister, Ministry of Health
Government of the Republic of Mali

Secretary, PPD Board

H.E. Dr. Cheikh Mohamed Biadillah

Honourable Minister of Health
Government of the Royal Kingdom of Morocco

Treasurer, PPD Board

Dr. Jotham Musinguzi

Treasurer, PPD Board and Director
Population Secretariat, Ministry of Finance
Planning & Economic Development
Government of Uganda

Member, Host Country, PPD Board

H.E. Dr. Khandaker Mosharrif Hossain

Honourable Minister
Ministry of Health and Family Welfare
Government of the People's Republic of Bangladesh.

2. STATEMENT FROM THE CHAIR

I am happy to note that PPD is now moving on a sounder footing with the new leadership and the support from all the member states.

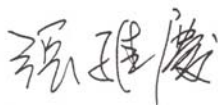
H.E. Mr. Zhang Weiqing
Chair, Partners in Population and Development

Partners in Population and Development (PPD) was created exclusively to give the concept of South-South Cooperation a reality for the first time in history. The Alliance embarked into business immediately after its launching, and it attained many significant successes while still in its formative stage under the administrative and financial management of United Nations. At the end of 2000, the Alliance started operating as an autonomous entity with its own administrative, financial and personnel policies, systems and procedures which marked a new chapter in the history of the organization. The Alliance successfully implemented a wide array of reproductive health, population and development programmes in the Southern countries, and its membership increased from 10 to 21 developing countries in a matter of 10 years, bringing 54% of the world population under its programmatic coverage. The year 2006 carries a special significance in the history of Partners in Population and Development because it marks the completion of 12 years of successful work that began in 1994, the landmark tenth anniversary of ICPD in Cairo. It has been more than a decade now since the nations of the South formed this intergovernmental Alliance of developing countries.

A new Executive Director (ED), Mr. Harry S. Jooseery, was in post early 2006. He launched a number of new activities of PPD with a new dimension that have impressed donor agencies. He made a great effort in renewing the structure and programme of PPD and proposed immediate actions that were discussed and endorsed by the Executive Committee Meeting which met in April 2006. The Executive Committee voted unanimously on a Resolution to strengthen ties with UNFPA, and following a mission of the ED to UNFPA Headquarters in New York, UNFPA agreed on the new proposal that PPD submitted. Alongside with UNFPA, Packard and Hewlett Foundations and the Government of the Netherlands reaffirmed their commitment to provide assistance and support to PPD.

In addition, I am also proud that PPD China Programme Office was inaugurated at Taicang in China, and as Chair of PPD I would like to place on record the impressive assistance being provided by China to PPD. Both parties signed three Memoranda of Understanding to promote Capacity Building, Exchange of Expertise and Experiences and Technologies and Commodity Supply and Security in PPD Member States.

I am happy to note that PPD is now moving on a sounder footing with the new leadership and the support from all the member states. I take this opportunity to thank all the Ministers, High Officials, and PCCs from all the Member States of PPD for their valuable support and assistance to PPD. Thank you also to my colleagues, the Ministers, who have been by my side as Board Members of PPD and for their guidance to me as Chair of PPD. I wish plenty of success to PPD in its endeavour to continuously strengthen South-South Cooperation.



Zhang Weiqing
Minister, National Population and Family Planning Commission
Government of the People's Republic of China
Chair, Partners in Population and Development

3. MESSAGE FROM THE EXECUTIVE DIRECTOR

It is no more the survival of the fittest. It is more the survival of the most practical, proactive and pragmatic. This is what PPD is striving for.

Mr. Harry S. Jooseery

Executive Director, Partners in Population and Development

Besides fostering on advocacy for the integration of HIV/AIDS into the reproductive health programme, delineating the intrinsic linkages between ICPD and MDGs, and promoting commodity security and supply, Partners in Population and Development (PPD) will give special emphasis on capacity building and exchange of experience and expertise to reinforce South-South Cooperation. In recognition of the changing reproductive health scenario, the emergence of the population growth factor likely to jeopardize sustainability of resources, the plight of the most destitute nations of the world in terms of availability and accessibility to reproductive health services and the almost dwindling commitment from donor agencies to reproductive health, we need to concentrate and reinforce our efforts to meet new emerging challenges.

It is no more the survival of the fittest. It is more the survival of the most practical, proactive and pragmatic. This is what PPD is striving for. We believe in ourselves, in our strength and in our commitment. The South constitutes the world's largest grouping in terms of population, land area and human resources, and thus it holds the potential to make a huge difference in assuring the world's health and prosperity. If we fail, the world fails.

PPD since 1994 has made impressive strides in promoting ICPD goals through the South-South Initiative. We have had many realizations to our credit. However, in the light of new challenges, we need to be more resourceful and target oriented. 2006 was a year of transition for PPD, with a new management team and a new Executive Director. The priority was to move PPD away from the sideline and take immediate concrete and practical actions that would put back PPD on its rail. We are glad to report that we have succeeded in repositioning PPD. I would like to place on record the tremendous support and assistance we obtained from all of our Board Members, our PCCs and the Governments of all the 21 member states of PPD for their contributions. I would like to thank UNFPA, the David and Lucile Packard Foundation, the William and Flora Hewlett Foundation, and the Government of the Netherlands for their continued support to PPD. I cannot miss this chance to especially thank H.E. Mr. Zhang Weiqing, the Chair of PPD and also Dr. Thoraya Obaid, the Executive Director of UNFPA for their trust and support for me.

The Government of the People's Republic of China has also been instrumental during the transition period. Three Memoranda of Understanding were signed in 2006 between PPD and China in the area of Capacity Building, Sharing of Expertise and Technology and Commodity Security and Supply. The Government of Morocco took immediate action to honour its financial commitment to PPD together with other member states. It gives me great pleasure to report that PPD's financial resources increased by 373% in 2006 compared to 2005.

PPD is now moving forward positively, and with assistance from UNFPA is in the process of developing a Strategic Business Plan for the coming years. We cannot, in the light of daunting challenges, continue to act routinely. We need to show distinctiveness, farsightedness and wisdom. I have firm conviction that PPD will remain a forerunner in the promotion of South-South Cooperation in the field of Reproductive Health, Population and Development. We need your support and assistance. South-South Cooperation thrives best when it meets the shores of the North and blends into indistinguishable movements. PPD waves towards North-South-South stretches. Thank you to all our well wishers.



Harry S. Jooseery

Executive Director

Partners in Population and Development

4. About PPD

I. Brief History of PPD

South-South Cooperation is increasingly seen as an innovative, cost-effective and result-oriented modality for transferring and exchanging relevant knowledge, experience and expertise in the areas of reproductive health and population among developing countries.

The unprecedented population explosion throughout the world, particularly in the eastern hemisphere, during the first half of the twentieth century triggered large-scale international development cooperation by the international community. Three successive decades of North-South Cooperation and massive transfer of technology and resources from developed to developing countries through bi/multilateral channels produced remarkable success in contraceptive prevalence, fertility decline and stabilization in population growth worldwide. However, attaining comprehensive and sustainable sexual and reproductive health and rights for men, women and adolescents through universal access to reproductive health information, services and commodities; reduction in maternal morbidity and mortality; prevention and treatment of Sexually Transmitted Diseases (STD) and combating HIV/AIDS pandemic still remain grossly unmet.

After thirty years of efforts many developing countries have evolved successful programmes with pools of planning, programming, supervisory and evaluation expertise that could be made available in order to help other less advanced countries with family planning and sexual and reproductive programme developments. Many of these developing countries stepped into the forefront of design and implementation of population policies and programmes and were eager to share their knowledge, experience and expertise with countries which were in the early stages of formulation and implementation of policies and programmes and were looking for more effective approaches. South-South Cooperation is increasingly seen as an innovative, cost-effective and result-oriented modality for transferring and exchanging relevant knowledge, experience and expertise in the areas of reproductive health and population among developing countries. The preparatory process leading to the 1994 International Conference on Population and Development (ICPD) in Cairo gave South-South Cooperation particular impetus. Conscious of the need to give this concept a specific framework of its own, a group of 10 developing countries decided during the ICPD conference to establish Partners in Population and Development (PPD) as an Intergovernmental Alliance. ICPD Programme of Action ratified by 189 participating nations accepted this concept as the framework for the South-South Cooperation towards:

- Appropriate integration of sexual and reproductive health programmes into family planning initiatives;
- Ensuring adequate allocation resources for securing the availability of a broad range of essential products and services in reproductive health;
- Addressing adolescent sexual and reproductive health;
- Significantly slashing maternal morbidity and mortality and ensuring safe motherhood;
- Combating the scourge of STD/HIV/AIDS pandemic and integration of effective prevention, care and treatment of STD/HIV/AIDS within the broader framework of family planning and reproductive health programmes;
- Alleviation of poverty and enhancement of the quality of life of the people;
- Establishment of gender equality and equity in every sphere of economic, social, political and cultural arena; and,
- Development and implementation of vital health reforms towards greater health equity.

The Alliance established itself as a legal entity by adoption of its organizational Charter and the by-laws; constituted its vision, mission, strategic directions and institutional framework; and elected the first Governing Board and Executive Committee in its first Annual Board Meeting in May 1995, from which point it commenced its formal operation. The Permanent Secretariat of the Alliance was established in Dhaka, Bangladesh by a unanimous consensus to carry out its executive functions.

II. Vision

Our Vision is that by the year 2014, PPD, as an Intergovernmental Alliance, will be steering the global reproductive health and population agenda to attain sustainable development.

III. Mission

Our Mission is to assist each other and other developing countries to address successfully sexual and reproductive health (SRH) and rights, including Family Planning (FP) and HIV/AIDS, population and development challenges through South-South (S-S) Collaboration by raising a common voice and sharing sustainable, effective, efficient, accessible and acceptable solutions, while also considering the diverse economic, social, political, religious and cultural characteristics of our countries.

IV. Strategic Directions

The core strategic directions of Partners in Population and Development (PPD) are:

- ALIGN with member countries' priorities.
- ALLIANCE building at all levels.
- ADVOCATE for the Alliance and its priorities.
- ASSETS creation and consolidation for the Alliances' sustainability.



V. Strategic Goals/Objectives

1. ALIGN: The Alliance will align and be responsive to member countries' priorities in reproductive health and rights, including family planning and HIV/AIDS, population and development.

During its first decade of establishment, PPD has formulated its programmes in line with global priorities in reproductive health (RH) including family planning (FP) and HIV/AIDS, population and development. However, as time progressed, member countries demanded that more emphasis be put in addressing specific country and regional needs and concerns such as adolescent's reproductive health, reproductive health commodity security (RHCS), migration and ageing. This strategic direction represents a shift for PPD to focus on meeting the requirements and providing solutions to the needs and concerns of the member countries.

2. ADVOCATE: The Alliance will obtain support from different stakeholders, both at national and international levels by advocating for South-South Collaboration.

S-S Collaboration as an approach or methodology has not been clearly understood or fully utilized in scaling up the successful interventions through effective partnerships in addressing reproductive health programmes. Over the last decade, PPD has published lessons learned on how S-S Collaboration can be more efficient in saving time and resources through trial and error. Advocacy will bring to bear the application of these lessons through the multiple channels that the Alliance has at its disposal, in particular in its status at the United Nations General Assembly to advocate for scaling up interventions through S-S Collaboration. The following scenario supports this concept:

"Investing in health and making improvements in health is crucial for economic growth and also for the achievement of the Millennium Development Goals. The majority of diseases faced by developing countries are preventable using interventions already existing in the world. Scaling up these interventions world-wide and enabling the poor to access them would save 8 million lives each year by 2010, and this would provide a distinct way of reducing poverty, stimulating economic growth and human security",

Jeffrey Sachs.

3. ALLIANCES: PPD will form Alliances with selected stakeholders to advance strengthened partnerships in meeting the ICPD/PoA and the MDGs in the member countries.

The increasingly complex challenges in the fields of RH, population and development exceed the capacity of any single organization or sector to overcome them. In 1994, ICPD Programme of Action (PoA) identified partnership as the way forward in the implementation of this multifaceted agenda. PPD in itself is a partnership for S-S Collaboration beyond government constituencies to multiple other sectors and stakeholders at national and international levels. This puts the Alliance in the best position to address resource constraints and to bring revolutionary reforms in the field of RH, population and development.

4. ASSESTS: The Alliance will increase its financial base assets for supporting South-South Collaboration activities on a sustainable basis, diversifying the sources of funding and raising its Endowment Fund.

The Alliance is making a strategic shift from donor-dependence to become self-sustained. Greater effort is to be made to mobilize resources from the member countries and the private sector. This would entail involving other government ministries beyond health and population, such as treasury, foreign affairs, education and women affairs. Higher political will of the member countries is a significant pre-requisite to successful mobilization of resources.

5. Program Implementation

I. Capacity Building of Reproductive Health Consultants from Developing Countries in Jordan and Morocco

PPD has a pool of 117 Consultants who have been trained in RH consultancy skills and techniques. The Consultants are all from the 21 PPD member states and are constantly utilized by the governments, UN agencies, NGOs, PPD and other agencies to help develop RH, population and development programmes in developing countries. Their areas of expertise are strategic planning, management of programme, management information system, monitoring and evaluation, research, capacity building and others.

Since 2004, PPD has organized a series of training and orientation programme for the Consultants to upgrade their knowledge and skills and also to expand their field of consultancy. In this endeavour, PPD had the support of experts from Management Sciences for Health (MSH), USA, Centre for African Studies (CAFS) and other renowned individuals, and financial assistance from the Government of the Netherlands.

The objectives of the courses offered by PPD were to strengthen the consulting capability of RH, population and development professionals from the developing countries. Specific skill building exercises were also introduced to emphasize the interpersonal aspects of consultant-client relationship.



Participants of the workshop in Amman, Jordan

In 2006, PPD organized two intensive training workshops for professionals on consultancy skills: one in Amman, Jordan from 22-24 August 2006 for the Anglophone Member Countries and the other one in Rabat, Morocco from 5-7 December 2006 for the Francophone Member Countries.

In Jordan, 18 professionals from eight developing countries, namely Bangladesh, China, India, Uganda, Zimbabwe, Kenya, Nigeria and Jordan were trained. The workshop was attended by over seventy representatives of the international agencies, UN agencies, foreign missions and senior officials from the Ministry of Health, Jordan and local media. In Morocco, sixteen mid to senior level professionals were trained from Mali, Morocco, Senegal and Tunisia.



Participants of the "Consulting for Results" workshop in Rabat, Morocco

In both workshops, the Executive Director (ED) of PPD addressed the participants and gave press briefings. The ED also took the opportunity to meet and discuss with the respective Ministers of Health, H.E. Engineer Said S. Darwazah in Jordan and H.E. Dr. Mohamed Cheikh Biadillah in Morocco.



Mr. Jooseery met H.E. Dr. Mohamed Cheikh Biadillah, Secretary, PPD Board and Honourable Minister, Ministry of Health, Morocco during his visit to Morocco.

PPD is in the process of updating its consultant database and is planning to conduct a "Real Life Experience Sharing Workshop" in 2007 among experienced and less experienced consultants.

II. Enhancing Leadership Skills in Developing Countries

The Visionary Leadership Programme (VLP) was a joint initiative and implemented by a Consortium of three agencies - PPD, International Council on Management of Population Program (ICOMP) and the Centre for African Family Studies (CAFS). PPD, as the Lead Agency, provided overall leadership of the project and it was implemented in India, Ethiopia, Nigeria and Sudan.

The objectives of the project were:

1. To improve leadership skills of 200 professional.
2. To enhance their knowledge and vision.
3. To strengthen their competency for resource mobilization and policy dialogues at national, regional and international levels.

The Consortium was guided by an International Steering Committee (ISC) whose members were chosen for their extensive personal experience and global perspective on FP, RH and leadership issues. The ISC reviewed the progress of VLP activities and provides guidance on strategic directions of the programme.

The members of International Steering Committee were:

- Dr. Nina Puri, International Planned Parenthood Federation, UK
- Prof. Robert Minnis, University of California at Santa Cruz, USA
- Dr. Negusste Teffera, Population Media Center, Ethiopia
- Mr. Benson Morah, UNFPA Country Support Team, Ethiopia
- Ms. Susanna Galdos, Management Sciences for Health, USA
- Dr. Florence Manguyu, SOS Children's Village, Kenya

The Project was coordinated by the following National Anchor Institutions (NAIs):

- Addis Ababa University, Department of Community Health, Ethiopia
- Child in Need Institute, Jharkhand Unit, India
- Adolescent Health and Information Project (AHIP), Nigeria
- Ahfad University for Women, Center for Family Sciences and Nutrition, Sudan

The Third and Final Steering Committee Meeting of the Programme was held in Dhaka, Bangladesh from 29 March to 31 March 2006. The purpose of the meeting was to discuss the overview of the project inputs including planned, realized and ongoing activities. A request for a third extension of an additional three months had been proposed by the Consortium for implementing the project. Concrete future activities with specific deadlines were discussed and agreed by all implementing partners. .



Participants of the Final Steering Committee Meeting of VLP

The ED of PPD, Mr. Harry Jooseery attended a Consultative Meeting in Nigeria from 17 – 19 May, 2006 with the Anchor Institution, AHIP. The purpose of the meeting was to discuss the end of project activities, capacity development requirements of the institution and to consult with the VLP fellows the achievements and weaknesses in programme implementation. The project completed the printing of two volumes of leadership profiles, containing 42 exemplary leaders from Asia and Africa. The objective of developing these profiles was to highlight through documentation and training the real experiences of many exemplary leaders working in the field of RH, population and development. An independent evaluation of the programme was commissioned and was conducted by an External Evaluator supported by four country-level evaluators from India, Ethiopia, Nigeria, and Sudan.



Mr. Jooseery in discussion with Ms. Mairo Bello from AHIP Nigeria

The project ended in August 2006. As output the project trained a total of 187 visionary leaders of which 55 were from India, 38 from Ethiopia, 60 from Nigeria and 34 from Sudan who brought a rich diversity in terms of sector and organizational representation from these four countries. The leaders represented 151 organizations and departments from both governmental and non-governmental sectors in the population and development field. Of these fellows, 56% were women and 56 outstanding programme leaders from Asia and Africa were attached with the 163 fellows for guided learning. Four NAIs were strengthened for sustained leadership development training in their respective countries. 21 networks of fellows were established for continued dialogues, learning, facing challenges, and undertaking new initiatives.

III. Strategic Business Plan (2008 – 2011) for PPD

Given the urgency to address the burning emergency RH needs, especially in the context of achieving ICPD and MDGs, PPD is moving strategically for the coming four years. In 2007, PPD will develop in consultation with all stakeholders a Strategic Business Plan (SBP), 2008-2011. Initially, PPD will carry out a Needs Assessment among its member countries.

The objectives of the Needs Assessment are:

- To identify focus areas for capacity development and related capacity development needs and priorities of member countries;
- To assess potentials within each country to assist other countries in developing their capacities;
- To seek views on issues that constrain South-South Cooperation; and,
- To understand member countries' expectations of PPD in responding to the identified needs and priorities and in addressing the constraints to South-South Cooperation.

The expected outcomes will be reviewing of existing strategies, assessing the progress made, identifying and analyzing the constraints and developing a new Strategic Business Plan (SBP), which will be operated as from 2008.

IV. Enhancing Capacity Development in the Context of Achieving ICPD PoA and MDGs

Capacity development continues to receive a great deal of attention in almost all global development discussions. At present, capacity development is a critical issue of concern as the developing countries struggle to achieve the MDGs, and especially because of capacity constraints. Likewise, it is an issue that has been discussed by the donors in the context of ensuring that developing countries possess the

capacity to take due advantage of resources and opportunities available so as to maximize their economic and social development.

PPD is committed to capacity development of its member countries as a priority for building the requisites for long-standing development, and for the realization of the ICPD PoA and MDGs. Accordingly PPD initiated an Inquiry assessment among its Partner Institutions on their current and potential capacity development needs and priorities as well as on factors that constrain the headway. A consultant was appointed to coordinate an Inquiry assessment among 17 Partner Institutions of PPD. The analysis of the Inquiry data will permit a detailed examination of the training curricula and content of training courses, based on which the appropriateness of current courses to help achieve the ICPD Goals and MDGs can be assessed. A capacity building action plan will be developed in 2007.

V. International Workshop for Senior Officials on South-South Cooperation in Population and Development

PPD in collaboration with China Training Center (CTC) organized an International Workshop for the Senior Officials on South-South Cooperation in Population and Development in 23-27 April, 2006 in Taicang Century Hotel, Taicang, China. The workshop centered around six thematic areas as follows:

- China's Strategies for Population Development
- Partners in Population and Development: The Way Forward
- MDGs and China's Harmonious Development of Population, Society and Economy
- MDGs and South-South Cooperation
- China's Reform, Opening-up and Economic Development
- Scientific View of Development and China's Practice

In conjunction with the above-mentioned workshop, two additional side events were organized by CTC in three different venues in the city of Taicang. They were:

1. The Conference of the BFA World Pharmaceutical Industry that addressed the following thematic areas:
 - I. World Pharmaceutical Development and Global Economic Integration,
 - II. World Pharmaceutical R&D and Industry Growth, and
 - III. Innovation – Important issue of Pharmaceutical industry and R&D.
2. The Seminar on "Healthier City, Better Life", under the sponsorship of 2010 World Expo Shanghai on 27th April 2006.

VI. Lessons Learnt from Capacity Development Programme using South-South Cooperation in Five Developing Countries

PPD conducted a study on experiences gained and lessons learned in capacity development through S-S Collaboration in five selected developing countries, namely Bangladesh, India, Indonesia, Thailand and Tunisia. This was undertaken by exploring the contributions of various activities in S-S Cooperation, including those related to technology transfer and know-how, and towards strengthening and building national capacity and capability for FP and RH in these countries. Capacity development initiatives for transferring skills from one country to another through diverse approaches were focused largely on reproductive health. A number of training courses were addressed in the Capacity Development Programme. Major topics covered were:

- Strategic Planning and Policy
- Implementation, Management and Service Delivery
- Monitoring, Supervision and Evaluation
- Mobilization of Information and Knowledge

The study was undertaken considering sixteen cases of S-S Collaborative activities from the five countries. The South-South activities selected for the study were implemented by governmental organizations, non-governmental organizations (NGOs), universities and professional associations in the area of training, research, advocacy and commodity exchange in RH/FP, safe motherhood and HIV/AIDS. The data was collected through interviews, group discussions, reports and publications. Each case represented a unique experience in terms of the nature of the intervention, its duration, the scope of the work and networking institutions. Most cases of S-S Collaborations were found to be beneficial for both the providers' and recipients' sides. Many activities proved to be very meaningful and effective in terms of their conceptualization, implementation plan, programme management, monitoring, follow-up action and evaluation mechanism.



A report on lessons learnt from successful intervention including the five country reports is available at the PPD Secretariat. The report gives a clear explanation of the national policies and programmatic interactions between the experiences gained and lessons learned in capacity development. It also provides concrete and practical guidelines for further action by national governments, development aid agencies, foundations and NGOs. Moreover, the report was published, disseminated through PPD website and others and used as an advocacy tool for policy dialogues organized by PPD.

VII. Enhancing RH Commodity Supply and Security among Developing Countries

PPD and NPFPC of China jointly organized a Roundtable on Reproductive Health Commodity Supply among Developing Countries on 7th November 2006 at the Beijing Friendship Hotel in Beijing, China. The Roundtable brought together generic reproductive health drug manufacturers from China, India, Indonesia, South Africa, and Thailand in addition to prominent experts in the field to deliberate on the modalities and mechanisms for the provision of generic drugs in ensuring reproductive health commodity security among the developing countries.



In the panel from the left Ms. Hao Linna, Director General, Department of International Cooperation, NPFPC, Dr. Jotham Musinguzi, Treasurer, PPD Board and Director – Population Secretariat, Ministry of State for Finance, Planning & Economic Development of Uganda, Mr. Harry S. Jooseery, Executive Director, PPD, H.E. Dr. Zhao Baige, Vice Minister, National Population and Family Planning Commission (NPFPC) of China, H.E. Dr. Safa El-Baz, Assistant Minister for Health and Population of Egypt and Dr. Fouad Hamadi, General Secretary, Ministry of Health Morocco.

The Roundtable was divided into following three substantive sessions:

- Developing Countries: RH Commodity Needs and Indigenous Suppliers' Practice
- Quality Control of RH Commodities
- Transparency of RH Commodity Supply Chain

The discussion of the Roundtable centred on different aspects of manufacturing, quality control, storage, marketing, and distribution and the role of generic drugs towards ensuring commodity security as economic, safe and effective substitute of patented and costlier contraceptive commodities.



Participants of the Roundtable

It was observed that there are huge demands for RH commodity and service in the developing countries, and the pressing demand has generated the development of appropriate technologies. However, countries need to further enhance their management standards and enable their commodities to comply with international quality standards. Manufacturers from the developing countries are ready to meet existing demands. On the other hand, procurement and service delivery agencies, faced with severe financial difficulties, desire access to low cost products of assured quality as well as supportive mechanisms, such as greater use of the commercial sector to allow resources to be focused on poorer users.

VIII. International Workshop for Senior Officials on Capacity-Building in Programme Management on Population and Development

PPD and NPFPC of China jointly organized an International Workshop for Senior Officials on “Capacity Building in Programme Management on Population and Development” at the Beijing Friendship Hotel in Beijing, China in 8-10 November 2006.



H.E. Mr. Zhang Weiqing, Honourable Minister, National Population and Family Planning Commission (NPFPC) delivering his speech in the opening session of the workshop.

The inaugural ceremony coincided with the signing of Three Memoranda of Understanding (MoUs) between PPD and the Government of the People’s Republic of China in respect to the assistance to be provided by China to the PPD member states from 2006 to 2010. The areas of assistance are:

- (i) Capacity Building
- (ii) Contraceptive Supply and Security, and
- (iii) Institutional Development for Reproductive Health Service Delivery



Mr. Harry S. Jooseery, Executive Director of PPD making the opening statement

The discussions and deliberations of the workshop were conducted in the following four thematic sessions:

Session One: Strategic Directions for S-S Cooperation in Population and Development,
Session Two: Experience Sharing on S-S Cooperation in Population and Development,
Session Three: ODA and S-S Cooperation, and
Session Four: Capacity Building on Programme Management



Participants of the Workshop

Presentations and discussions in the workshop covered the following major areas:

- The general framework for capacity building
- Strategic directions for capacity development as pathway towards achieving S-S Collaboration in RH, Population and Development
Human Resources, Institutional Capacity Development and Transfer of Technologies
- Sharing of experiences and expertise from national and regional perspectives from China, Africa, Asia and Arab world
- Policy dialogue for integration of RH and HIV/AIDS
- Repositioning of FP and RH for attainment of the MDGs towards alleviation of poverty
- Enhanced advocacy to reposition RH on the Agenda for poverty alleviation
- Support to S-S Collaboration as the key route to sustainable development

The workshop was followed by field visits to the grass-root health institutions, elementary schools, community cultural centres, homes for the elderly, and villagers' households in the suburban areas of Beijing.

IX. Study on the Capability of Manufacturers of Generic Hormonal Contraceptive in Lower and Middle Income Countries

PPD has been working closely with RH Supplies Coalition, UNFPA and WHO to ensure RHCSS in the developing world. PPD strongly believes that developing country manufacturers can play a vital role in ensuring the continuing supply of affordable RH commodities and generic hormonal contraceptives that can effectively substitute the costly, patented drugs manufactured by multinational companies of the developed countries. Moreover, there is no need to establish new facilities; rather it is essential to develop a network of existing companies to ensure continuing supply of easily accessible and affordable generic hormonal products to the people in developing countries. As an endeavour towards this objective, two studies were commissioned on the generic hormonal contraceptives manufactures in non-OECD countries.

The first study was a mapping exercise and qualitative assessment conducted by PPD in China, India and Thailand to ascertain the capacity, capability and competence of manufacturers of generic hormonal contraceptives and their potential role in addressing the need for quality, affordable and accessible

contraceptives in low income countries. The second study was a quantitative study undertaken by Concept Foundation in 18 non-OECD countries in the form of inspecting the manufacturing sites to determine manufacturers' capability for meeting modern standards of Good Manufacturing Practices (GMP) and their ability to provide supplies to procurement agencies.

Accordingly, a meeting was organized in Copenhagen by UNFPA Procurement Branch based in Copenhagen, Denmark to:

- Review the findings of both the studies;
- Discuss reports to be generated from the studies and to whom they should be made available; and
- Identify the remaining gaps and future action.

Based on the discussion and review of the findings of both the studies, a report was produced reflecting the above-mentioned objectives with co-authorship of PPD Executive Director Mr. Harry Jooseery, Consultant Dr. Peter Hall and Mr. Joachim Ohler of Concept Foundation among others. The study findings were presented in the journal [*Contraception* 75 (2007) 311 – 317].

X. South-South Fellowship Programme

PPD has been implementing the S-S Fellowship Programme since the beginning of 1999 following its approval by the Board of Trustees at its Fourth Annual Board Meeting held in Cairo, Egypt on 10 November 1998. The member countries agreed to mutually exchange S-S Fellowships in their respective areas of strength to enhance their FP and RH programmes through improvement of their human resource base.

The Fellowship Programme commenced its implementation with five fellowships offered by Cairo Demographic Centre (CDC) on behalf of the Government of Egypt on one-year Diploma in Demography conducted at CDC's premises. Since then, CDC continued to offer 5 one-year long fellowships annually to PPD for the professionals of the member states. Moreover, fellows who graduated from the General Diploma Course with distinction were inducted into the Special Diploma Course automatically. Other member states, such as, Bangladesh, China, India, Indonesia and Morocco also offered short and medium-term institutional fellowships and study-tours to different member states.

In 2006, CDC offered five fellowships to PPD on one-year Diploma in Demography. The following five professionals from four member states benefited from the 2007 CDC fellowships:

1. Ms. Zhang Cuiling (China)
2. Mr. Abdikadir Salat Hussien (Kenya)
3. Mr. Syed Muhammad Saleem (Pakistan)
4. Mr. Muhammad Mumtaz Reza Khan (Pakistan)
5. Mr. Egesa Antony (Uganda)

6. Advocacy and Resource Mobilization

I. Public-Private Partnerships for Reproductive Health in Bangladesh

A roundtable meeting on “Public Private Partnership for Reproductive Health in Bangladesh: a Positive Innovative” was held in Dhaka, Bangladesh on 13 July 2006. The purpose of the roundtable meeting was to discuss the importance of establishing private partnerships, including NGOs, to provide integrated RH services to rural Bangladesh alongside governmental endeavour. The meeting was organized by PPD in collaboration with *The Weekly Financial Mirror* and Beximco Pharmaceuticals, a leading private sector enterprise of Bangladesh.



H.E. Mr. Mizanur Rahman Sinha, Honourable Minister of State, Ministry of Health and Family Welfare of Bangladesh delivering his speech in the opening session.

Public Private Partnerships (PPP) in the health sector are seen as ‘win-win’ arrangements in which diverse actors with varied motivations and philosophies work together, albeit with different motivations and are able to contribute to health development. It involves including at least one ‘for-profit’ and one ‘not for profit’ actor. Scopes for PPP are local, national or global. Serious resource constraints make pooling of all available resources necessary in the developing world. PPPs would contribute to health equity and directing public resources in the sector from several competing private providers in Bangladesh to those who cannot pay. Many components of RH services like STI services and treatment of infertility were available mainly through the private sector. Social marketing, a form of PPP, is already well practiced in Bangladesh. The ICPD-PoA calls for promoting the role of the private sector in service delivery as well as production and distribution of commodities. Those were the issues that were discussed at the meeting.

The roundtable was attended by representatives of PPD, UNFPA, and several drug manufacturers as well as several experts and resource persons from the government, civil society, private sector and media. Conceptual framework of PPP and its relationship to reproductive health as a way forward was discussed in the meeting. The Government of Bangladesh, through H.E. Mr. Mizanur Rahman Sinha, Honourable Minister of State, Ministry of Health and Family Welfare of Bangladesh, congratulated PPD for the initiative and stated that Public-Private-Partnership is instrumental in the present context to achieve the ICPD PoA and the MDGs.

II. Workshop on “South-South Cooperation on Population and Sustainable Development” in Islamabad, Pakistan

A one-day workshop on “S-S Cooperation and Sustainable Development” was held in Islamabad, Pakistan on 5 September 2006. The workshop was organized by PPD in collaboration with the Ministry of Population Welfare, Government of Pakistan. The workshop was attended by a number of high officials from the government and international organizations of Pakistan. The Honourable Federal Minister for

Population Welfare, Pakistan and PPD Board Member H.E. Mr. Ch. Shahbaz Hussain inaugurated the opening ceremony.

One of the major objectives of the workshop was to generate greater understanding at national level on how S-S Collaboration can contribute effectively towards attainment of sustainable development in the context of achieving the ICPD and MDGs. The Government of Pakistan urged the PPD member countries to demonstrate national commitments for creating a positive image of PPD and S-S Cooperation in national and international forums.



Federal Minister for Population Welfare and Honourable Member of PPD Board H.E. Ch. Shahbaz Hussain presenting his keynote speech

H.E. Mr. Ch. Shahbaz Hussain, Federal Minister for Population Welfare, Pakistan, congratulated the initiatives of PPD in organizing the workshop in Pakistan and reiterated his commitment and that of the Government of Pakistan to promoting South-South Cooperation and supporting PPD.



Mr. Jooseery met the press after the workshop in Islamabad

The workshop received wide media coverage in Pakistan, both from press and television. The ED of PPD made a presentation on the benefit of South-South Cooperation and the role of member states in promoting ICPD and Millennium Development Goals.

III. Workshop on South-South Cooperation for Sustainable Development in Sana'a, Yemen

A one day workshop was organized by the National Population Council / Technical Secretariat of Yemen with assistance from PPD on 25 December 2006 in Sana'a, Yemen titled "South-South Cooperation for Sustainable Development". The workshop was attended by around 100 participants from government,

NGOs, international organizations, donor communities, local and international organizations and both print and electronic media. The purpose of the workshop was to disseminate information on PPD's programmes and other activities as well as to discuss and understand how S-S Cooperation can better contribute to sustainable development.



H.E. Mr. Amin Maaroo Al-Janadthe, Board Member of PPD and Secretary General of NPC, Yemen delivering an inaugural speech in the workshop. To his left, Mr. Mutaher Zabara, the Secretary assistant of NPC and to the right, Mr. Abdul-Malik Sharafuddin, PCC of Yemen.

H.E. Mr. Amin Maaroo Al-Janadthe, Board Member of PPD and Secretary General of NPC, Yemen, made the opening statement and stressed on the importance of conducting the workshop to introduce the PDD and its activities. He stressed on the importance of enhancing the cooperation between member countries of the Alliance, institutions and individuals in areas of mutual interests within S-S Collaboration.

The Board Member also stated that the member countries of the Alliance are rich with experts, knowledge and experiences, and this expertise can be shared among member states and consultants can be used in the areas of population and development. The participants were very interested to know more about PPD. They commented that the knowledge and expertise of PPD needs to be further highlighted and exchanged among the member countries.

IV. XVI International AIDS Conference in Toronto, Canada

The Executive Director of PPD, Mr. Harry S. Jooseery represented PPD at the XVI International AIDS Conference held in Toronto, Canada from 13-- 18 August, 2006. This mammoth world conference brought together over sixty thousand participants from all over the world which consisted of cabinet ministers, senior government officials, scientists, researchers, NGO workers, civil society members, civil rights activities, lobbyists and people living with HIV/AIDS. The theme of the 2006 AIDS Conference was "Time to Deliver". The worlds' foremost researchers, community leaders and policy specialists made presentations reflecting the many facets of the conference theme.

The Conference was divided into seven technical segments, such as (1) Daily Plenary Sessions, (2) Abstract Driven Sessions, (3) Non-abstract Driven Sessions, (4) Skill Building Workshops, (5) The Way to Accessible Learning and Living, (6) CME Credits, and (7) Rapporteur Sessions.

The Conference focused and sought solutions to five key challenges in regards to HIV/AIDS pandemic, which were:

- Accelerating research to end HIV/AIDS Epidemic
- Expanding and sustaining human resources to scale up treatment and prevention
- Intensifying involvement of affected individuals and communities
- Building new leadership to advance the response
- Scaling-up lessons from the field

Among many encouraging outcomes, the Conference recommended the development, production and distribution of microbicides for prevention of male/ female transmission of HIV/AIDS. A recent research

revealed that people having circumcision are less likely to contract HIV than the people without. The Conference, therefore, recommended circumcision as a prevention strategy.

V. South-South Cooperation and Maputo Plan of Action

PPD Executive Director Mr. Harry Jooseery, at the Special Session of the African Union Conference of the Ministers of Health held at Maputo, Mozambique from 18 – 22 September 2006, earnestly pleaded that S-S Cooperation be adopted as one of the key strategies to achieve universal and comprehensive SRH and rights in Africa.

His plea was strongly supported by a high level delegation from China, headed by H. E. Madam Peng Peiyun, Vice Chairperson of the Standing Committee of the Ninth National People's Congress of the People's Republic of China, delegations of other PPD African member states and UNFPA. We are happy to note that South-South Cooperation has been accepted by African Ministers of Health as one of the key strategies to address the Continental Policy Framework on Reproductive Health for Africa and implement the Maputo Plan of Action 2006.

The Maputo Plan of Action in Section 17.vi mentioned "African and South-South Cooperation" as one of the key strategies for operationalization of the Sexual and Reproductive Health Policy Framework "for the attainment of ICPD and MDG goals in Africa". PPD is indebted to Africa Union, China and all those who supported its advocacy effort to promote South-South Cooperation as a way forward.

7. Governance

I. Eleventh Executive Committee Meeting

The Eleventh Executive Committee Meeting was held in China on 25 April 2006. H.E. Dr. Zhao Baige, Vice Minister of NPFPC of the People's Republic of China, presided over the meeting and welcomed participants in the name of the Chair of PPD, H.E. Mr. Zhang Weiqing Honourable Minister NPFPC of the People's Republic of China. The participants at the meeting were Vice Chair H.E. Mme. Maiga Zeinab Mint YOUBA, Minister for Health, Mali, Secretary General Dr. Fouad Hamadi, Ministry of Health, Government of the Kingdom of Morocco, Treasurer Dr. Jotham Musinguzi, Director Population Secretariat, Minister of Finance, Planning & Economic Development, Government of Uganda, H.E. Mr. Mizanur Rahman Sinha, Minister of State, Ministry of Health and Family Welfare, Government of Bangladesh and Mr. Harry S. Jooseery, Executive Director of PPD.



Participants of the Executive Committee Meeting

Participants reflected on the review and adoption of the Minutes of PPD Tenth Board Meeting in Agra, Delhi on 22 -23 November 2005, the matters arising from the decisions of the Agra Board Meeting and the Kampala Executive Committee Meeting, and the programmatic, operational and financial issues of PPD. They also reviewed the Agenda and Preparations for the Eleventh Annual Board Meeting 2006 in China. The following ten recommendations were presented by the Executive Director and adopted by the Executive Committee (EXCO) members:

- That the EXCO adopts the resolution to strengthen PPD's collaboration with UNFPA.
- That EXCO collectively request assistance to UNFPA to PPD and its Executive Director.
- That member countries earmark in their national budget specific budget line for promotion for S-S Collaboration.
- That member countries pay all their dues as agreed and consider making a special contribution to an Emergency Fund, as per their ability to pay as indicated in the matrix presented by the Executive Director.
- That proper strategies be adopted to make communication among member countries easier.
- That the Board Members support the Secretariat in its Resource Mobilization activities.
- That the EXCO Members consider opening a PPD office in Africa for more effective resource mobilization and as requested by donors.
- That the PPD New York office be revamped.
- That negotiations and advocacy campaign with South Africa and Brazil be reinforced to enlist them as PPD member countries.
- That PPD network with WHO on the issue of prequalification on RH commodities.

II. Eleventh Annual Board Meeting

The Eleventh Annual Board Meeting of PPD was held on 11 November 2006 at the Beijing Friendship Hotel in Beijing, China. Chaired by H.E. Mr. Zhang Weiqing, Chair of PPD. The Board Meeting was attended by the Board Members and Partners Country Coordinators (PCCs) of Bangladesh, Benin, China, Egypt, the Gambia, Indonesia, Jordan, Kenya, Mali, Morocco, Nigeria, Pakistan, Senegal, Thailand, Tunisia, Uganda, Yemen and Zimbabwe. The Board discussed the past, ongoing and future governance and programmatic issues of the Alliance.

The Board reviewed the progress made over the last nine months since Mr. Harry S. Jooseery assumed office as the Executive Director and considered his suggestions and vision for the Alliance in the days to come. The Board noted with great satisfaction the substantial progress made by the Alliance over the short period of time under the leadership of the new Executive Director and his farsighted, pragmatic and forward-looking vision for the promotion of S-S Cooperation towards the achievement of ICPD and MDGs.

The Board expressed its deepest appreciation to the Executive Director and his team and pledged all support and assistance to him in his future endeavours. The Board Members renewed commitment and support of their respective governments towards South-South Cooperation in the greater interest of the developing countries.



*From the left Mr. Harry S. Jooseery, Executive Director of PPD
H.E. Mr. Zhang Weiqing, Chair - PPD Board and Minister, NPFPC, China
H.E. Dr. Zhao Baige, Vice Minister, NPFPC, China and H.E. Dr. Fouad Hamadi, General Secretary
Ministry of Health, Morocco.*

The Board approved the opening of an Africa Programme Office in Kampala, Uganda and the following strategic directions proposed by the Executive Director as the way forward towards achieving ICPD and MDGs for balanced and sustainable development of the Southern nations. The strategic directions are:

1. High-level advocacy for the strengthening of RH programme and for the adoption of an integrated approach for the attainment of ICPD and MDGs.
2. Integrating RH and HIV/AIDS programme activities
3. Ensuring Reproductive Health Commodity Supply and Security(RHCSS)



Honourable Board Members, PCCs, representatives from the member countries and PPD staff in the PPD's Eleventh Annual Board Meeting at the Beijing Friendship Hotel, Beijing, China.

The Board placed on records the substantial assistance and support of UNFPA, the William and Flora Hewlett Foundation, the David and Lucile Packard Foundation and the Government of the Netherlands to PPD.

8. Highlights

I. PPD Opens China Programme Office

One of the landmarks in PPD history is the opening of its first Programme Office in Taicang, China with the gracious support from the Government of People's Republic of China, on 23 April 2006.



*Opening Ceremony of China Programme Office of PPD.
From the left Mr. Sultan A. Aziz, Director, Asia and Pacific Division, UNFPA,
Mr. Harry S. Jooseery, Executive Director, PPD, H.E. Mr. Zhang Weiqing,
Honourable Chair Board of PPD and Minister, NPFPC, Government of the People's Republic of China
and H.E. Dr. Zhao Baige, Honourable Vice-Minister, NPFPC,
Government of the People's Republic of China.*

The opening ceremony was inaugurated by H. E. Mr. Zhang Weiqing, Chair of the PPD Board and Minister for NPFPC together with Mr. Harry S. Jooseery, the PPD Executive Director, in the presence of Dr. Zhao Baige, Vice Minister of NPFPC, Mr. Sultan Aziz, Director, UNFPA, Asia and Pacific Division and many other dignitaries. The Programme Office in China is meant to galvanise PPD efforts at meeting RH

needs of developing countries, especially through capacity building, sharing of expertise and technologies and Commodity Supplies and Security, as highlighted by the MoUs signed between PPD and the Government of People's Republic of China.

II. New York Office Revamped

In 2005, following a decision made by the PPD Board, the New York PPD Liaison Office was officially closed due to financial constraints of PPD. However, this office was revived during 2006, and a new office was hired under the leadership of Mr. Jyoti Shankar Singh, the PPD Permanent Observer at the UN. PPD had been conferred a Permanent Observer Status at the UN General Assembly in November 2002. The role of the Liaison Office is to:

- Provide high level representation for PPD at the meetings of the General Assembly, Economic and Social Council, UNDP/UNFPA Executive Board and other UN organs;
- Maintain regular liaison with the permanent missions of PPD member countries and other UN members, and senior officials of UN organizations;
- Explore the possibility of establishing a US Committee as a non-profit entity for the PPD; and
- Undertake other external relations activities, as appropriate, and develop or participate in projects and fund raising relevant to the work of the PPD.

The NY office has particularly been instrumental in discussion with funding agencies in 2006 such as with UNFPA. Regular contacts with Mrs. Thoraya Obaid, the Executive Director of UNFPA, Dr. Rogelio Fernandez-Castilla, Director, Technical Support Division and other high officials of UNFPA were maintained in 2006.

III. Memoranda of Understanding with China

China's commitment to reinforce and strengthen South-South Cooperation and to support PPD in its mission was translated by the signing of three MoUs between China and PPD on 8 November 2006.



Signing Ceremony of MoUs for South-South Cooperation

The Memoranda of Understanding underscore China's support in the following areas:

(1) Capacity Building

China committed to train more than 100 professionals from developing countries yearly till 2010 in the field of Reproductive Health, Population and Development.

(2) Transfer of Experience and Technologies

China agreed to transfer skills, expertise and technologies to six selected developing countries, namely, Bangladesh, Kenya, Mali, Nigeria, Uganda and Zimbabwe to the tune of more than US \$800,000 to each country.

(3) Commodity Security

China committed to donate RH commodities to PPD member states. Egypt, Kenya, Mali, Nigeria, Pakistan, Senegal, Uganda, and Yemen have already benefited from these.

The 3 MoUs will remain in force till 2010, and PPD would like to place on record the tremendous support received from the Government of the People's Republic of China and that of H.E. Mr. Zhang Weizing, Minister, National Population and Family Planning Commission of China and Chair of PPD.

IV. New Staff in PPD

The following staff members joined PPD during the course of the year 2006:

Ms. A. K. Mahal Sadhona joined PPD as Programme Officer in December 2006. She has a Master's degree in Social and Cultural Anthropology from the University of Helsinki, Finland, and a Bachelor's in Sociology from International School of Social Sciences, Finland. She possesses strong academic record in qualitative research methodology, development studies, gender studies, environmental policy, discourse analysis, and intercultural communications. Her professional areas of interest includes women's rights to sexual and reproductive health, human rights, North-South development cooperation, pro-people/alternative theory of socio-economic development, participatory learning, and behaviour centred programming (BCP). She has skills in project design and coordination, research and documentation, policy advocacy, communication and networking, resource mobilization, training, and social/community mobilization. She worked for Save the Children - USA, World Food Program (WFP), the University of Copenhagen, and the University of Helsinki before joining PPD.

Ms. Shermin Ferdoushy has a Masters degree in Islamic History and Culture from Eden University and College, Bangladesh. She joined PPD as Office Secretary in November 2006. Before joining PPD, she worked for Partners in Health and Development (PHD) and Armana Fashions Ltd. She has seven years working experience as Secretary and Commercial Officer in Import, Export and Banking Department. She has a Diploma in Computer from APTECH, Business English Language from The British Council and General Computing from YMCA.

9. Financial Report

PPD started the fiscal year 2006 under the leadership of the new Executive Director with a reduced fund balance of USD 0.76 million in hand and commitment from the donors. In fact, during the last few years, PPD fund has been reduced by 90%, and the financial situation was really precarious at the beginning of the year 2006.

At the beginning of this fiscal year the organization had only two running projects that ended in 2006. There were no long-term projects, nor any new commitment from the donors in place.

To come out of this insecure situation, an immediate and intensive resource mobilization campaign was launched by the incoming Executive Director. Well-articulated project proposals were developed and submitted to different donors and international funding agencies. During the fiscal year 2006, PPD succeeded in mobilizing USD 2.30 million as acquired and committed fund for the coming two years from UNFPA, Packard Foundation, Hewlett Foundation and the Netherlands Government.

Effective measures have also been taken to realize outstanding membership fees from the member states. Many countries have responded positively and have paid their dues. Member countries' contributions have improved compared to last year. The realizing of contributions was 20% higher than the previous year. The total core fund also increased by 44% during the fiscal year 2006.

A Finance Committee was instituted following the 11th Executive Committee Meeting in April 2006 in China. The Committee consists of four member countries, namely China, Morocco, Uganda and Kenya. The Finance Committee met on 7 November 2007 in China and made recommendations to rebuild PPD and to take concrete actions to regain its financial strength and creditworthiness. The recommendations have been discussed in the 11th Annual Board Meeting held in China in November 2006.

The financial audit for the fiscal year 2006 has been completed. The auditors have given positive opinion to the Accounts and Financial Statements which follows.

**AUDITORS' REPORT
TO THE BOARD OF
PARTNERS IN POPULATION AND DEVELOPMENT (PPD)
DHAKA, BANGLADESH**

We have audited the accompanying Balance Sheet of **Partners in Population and Development (PPD)** as of December 31, 2006 and the related Income and Expenditure Account, Receipts and Payments Account and Cash Flow Statement for the year then ended. The financial statements are the responsibility of the PPD management. Our responsibility is to express an independent opinion on these financial statements based on our audit.

Basis of Opinion:

We conducted our audit in accordance with International Standards on Auditing as adopted in Bangladesh. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provide a reasonable basis for our opinion.

Opinion:

In our opinion the financial statements give a true and fair view of the financial position of PPD affairs as of December 31, 2006 and of the results of its operations and its cash flows for the year then ended in accordance with International Accounting Standards as adopted in Bangladesh and comply with applicable laws and regulations.

We also report that:

- (a) We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purpose of our audit and made due verification thereof.
- (b) In our opinion, proper books of account as required by law have been kept by the organization so far as it appeared from our examination of those books.
- (c) PPD's Balance Sheet, Income and Expenditure Account, Receipts and Payments Account and Cash Flow Statement dealt with by the report are in agreement with the books of account.

Dhaka
March 03, 2007



(A. Qasem & Co.)
Chartered Accountants

An Associated Firm of
PricewaterhouseCoopers

Partners in Population and Development (PPD)

Dhaka, Bangladesh

Balance Sheet

as of 31 December 2006

	2006 US\$	2005 US\$
Fixed Assets		
At cost less accumulated depreciation	21,975	23,296
Current Assets	986,835	902,149
Accounts receivable	4,294	4,863
Advances, deposits & prepayments	22,122	117,843
Short term deposits	550,000	600,000
Cash and bank balances	410,419	179,443
Current Liabilities		
Other liabilities	295,566	120,510
Net Current Assets	691,269	781,639
Total Assets	713,244	804,935
Financed By		
Core Fund	620,919	419,183
Fixed Assets Fund	21,975	19,858
Donors Fund	70,350	365,894
Total	713,244	804,935

Partners in Population and Development (PPD)

Dhaka, Bangladesh

Income and Expenditure Account

For the year ended 31 December 2006

	2006 US\$	2005 US\$
Income :		
Donations/Grants Income	977,327	1,273,800
Other Income	1,319	3,478
Total Income	978,646	1,277,278
Expenditure :		
Core Expenditure	239,510	366,724
Programme Expenditure	969,612	1,269,573
Total Expenditure	1,209,122	1,636,297
Excess of Expenditure Over Income	(230,476)	(359,019)

Partners in Population and Development (PPD)
Dhaka, Bangladesh
Cash Flow Statement
For the year ended 31 December 2006

	2006 US\$	2005 US\$
Cash Flow from Operating Activities		
Adjustment of non-cash item (depreciation)	10,707	16,007
Increase/(Decrease) in Current Liabilities	175,056	50,295
(Increase) /Decrease in Accounts Receivable	569	37,670
(Increase) /Decrease Advance Deposit & Prepayments	95,721	661,329
Net Cash flow from Operating Activities	282,053	765,301
Cash Flow from Investing Activities		
Purchasing of Fixed Assets	(9,385)	(1,677)
(Increase)/Decrease in short term deposits	50,000	-
Net Cash flow from Investing Activities	40,615	(1,677)
Cash Flow from Financing Activities		
Increase/ (Decrease) in Core Fund	201,736	2,243
Increase/ (Decrease) in Fixed Assets Fund	2,117	(14,330)
Increase/ (Decrease) in Donors Fund	(295,544)	(697,432)
Net Cash flow from Financing Activities	(91,692)	(709,519)
Net Increase in cash and cash equivalents	230,976	54,105
Cash and Cash equivalents at the beginning of the year	179,443	125,338
Cash and cash equivalents at the ending of the year	410,419	179,443

Partners in Population and Development (PPD)
Dhaka, Bangladesh
Receipts and Payments Account
For the year ended 31 December 2006

	2006 US\$	2005 US\$
Opening Balance:	658,933	655,123
Core	445,147	275,346
Programme	213,786	379,777
Receipts during the year :	1,113,992	968,359
Core	441,711	404,520
Programme	672,281	563,839
Total available :	1,772,926	1,623,482
Core	886,857	679,866
Programme	886,069	943,616
Payments and expenditure during the year:	1,108,073	964,549
Core	247,119	234,720
Programme	860,954	729,829
Closing Balance:	664,853	658,933
Core	639,739	445,147
Programme	25,114	213,786

10. Annexes

I. Board Members

Bangladesh

H.E. Dr. Khandaker Mosharraf Hossain
Member, PPD Board and Honourable Minister
Ministry of Health and Family Welfare
Government of the People's Republic of Bangladesh.
Bangladesh Secretariat, Dhaka-1000, Bangladesh

Benin

H.E. Pr Dorothée Kinde-Gazard
Member, PPD Board and Honourable Minister
Ministre de la Santé Publique du Bénin
01 BP 882, Cotonou, Bénin
PK3 Akpakpa, Cotonou, Benin

China

H.E. Mr. Zhang Weiqing
Chair, PPD Board, and Honourable Minister
National Population and Family Planning Commission of China (NPFPC)
Government of the People's Republic of China
14 Zhi Chun Road, Haidian District, Beijing 100088, China

Egypt

H.E. Dr. Hatem El-Gably
Member, PPD Board and Honourable Minister of Health and Population
Government of the Arab Republic of Egypt
3 Magles El Shaab Street, Cairo, Egypt

The Gambia

H.E. Mrs. Isatou Njie-Saidy
Member, PPD Board and Honourable Vice President and Secretary
State for Women's Affairs
Government of the Gambia
State House, Banjul, The Gambia

India

H.E. Anbumani Ramadoss
Member, PPD Board and Honourable Minister
Union Ministry of Health and Family Welfare
Government of India
Nirman Bhawan, A Wing, Maulana Azad Road, New Delhi-110011, India

Indonesia

Dr. Sumarjati Arjoso, SKM
Member, PPD Board and Chairperson
BKKBN, Government of Indonesia
JI. Permata No. 1, Halim Perdanakusuma
Jakarta 13650, Indonesia

Jordan

H.E. Engineer Said Darwazah
Member, PPD Board and Honourable Minister
Ministry of Health
Government of the Hashemite Kingdom of Jordan
Amman, Jordan

Kenya

Dr. Richard Otieno Muga
Member, PPD Board and Director
National Council on Population and Development
Chancery Building, Valley Road, PO Box 48994, Nairobi, Kenya

Mali

H.E. Mme Maiga Zeinab Mint YOUBA
Vice-Chair, PPD Board, and Honourable Minister
Ministry of Health, Government of Mali
KOULOUBA, BP 232 (PO BOX), BAMAKO MALI

Morocco

H.E. Dr. Mohamed Cheikh Biadillah
Secretary, PPD Board, and Honourable Minister
Ministry of Health, Government of the Kingdom of Morocco
335 Avenue Med V, Rabat, Morocco

Nigeria

H.E. Professor Osita Ogbu
Member, PPD Board and Honourable Economic Advisor to the President
Government of the Federal Republic of Nigeria
National Planning Commission, The Presidency, Federal Secretariat Complex
Maitama, P.M.B. 230 Garki, Abuja

Pakistan

H.E. Ch. Shahbaz Hussain
Member, PPD Board and Honourable Minister
Ministry for Population Welfare
Jamil Mohsin Mansion
CDA Civic Centre
Near G.P.O
Islamabad, Pakistan.

Senegal

H.E. Mr. Abdou Fall
Member, PPD Board and Honourable Minister
Ministre de la Santé et de la Prévention
Republique du Senegal
Building Administratif, 1re étage – BP 4024 – Dakar, Senegal.

Thailand

Dr. Somyos Charoensak
Member, PPD Board and Honourable Director-General
Department of Health, Ministry of Public Health

The Royal Thai Government
Tiwanon Road, Nonthaburi 11000, Thailand

Tunisia

Prof. Dr. Nabiha Gueddana
Member, PPD Board and Director General
National Office of Health and Population (ONFP)
42 Avenue de Madrid, Tunis, Tunisia

Uganda

Dr. Jotham Musinguzi
Treasurer, PPD Board and Director
Population Secretariat, Ministry of Finance
Planning & Economic Development
Government of Uganda
Statistics House, Plot 9, Colville Street
PO Box 2666, Kampala, Uganda

Yemen

H.E. Mr. Amin Maaroo Al-Janad
Member, PPD Board and Secretary General
Technical Secretariat, National Population Council, Council of Ministers
P.O Box 12551, Sana'a, Republic of Yemen

Zimbabwe

H.E. Dr. David Parirenyatwa
Member, PPD Board, and Honourable Minister
Ministry of Health and Child Welfare
Kaguvi Building, Fourth Street,
PO Box CY 1122, Causeway, Harare, Zimbabwe

II. Partners Country Coordinators (PCCs)

Bangladesh

Mr. Ayubur Rahman
PCC and Joint Secretary
Ministry of Health and Family Welfare
Government of the People's Republic of Bangladesh
Bangladesh Secretariat, Dhaka-1000, Bangladesh

Benin

Dr. Ekue Noel
PCC and Directeur de la Santé Familiale
Ministre de la Santé Publique du BÉNIN,
01 BP 882, Cotonou, Bénin
PK3 Akpakpa, Cotonou,
Benin

China

Mr. Hu Hongtao
PCC and Director-General
Department of International Cooperation
National Population and Family Planning Commission
Government of the People's Republic of China
14 Zhichun Road, Haidian District, Beijing-100088, China

Egypt

Dr. Safa El-Baz
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Acronyms

AIDS	Acquired Immune Deficiency Syndrome
API	Active Pharmaceutical Ingredients
BCP	Behaviour Centred Programming
CAFS	Centre for African Family Studies
CD	Capacity Development
EXCO	Executive Committee
FP	Family Planning
GAAP	Generally Accepted Accounting Principal
GDP	Gross Domestic Product
GMP	Good Manufacturing Practices
GO	Governmental Organization
HIV	Human Immune Deficiency Virus
IAC	International Advisory Committee
IAS	International Accounting Standard
ICOMP	International Council on Management of Population Programmes
ICPD	International Conference of Population and Development
IPPF	International Planned Parenthood Federation
ISC	International Steering Committee
IUD	Intra-Uterine Device
MDG	Millennium Development Goal
MOHFW	Ministry Of Health and Family Welfare
MoU	Memorandum of Understanding
NAI	National Anchor Institutes
NDW	National Dissemination Workshop
NGO	Non-Governmental Organization
NPFFC	National Population and Family Planning Commission
ODA	Overseas Development Assistance
OECD	Organisation for Economic Co-operation and Development
PCC	Partners Country Coordinator
PoA	Programme of Action
PPD	Partners in Population and Development
PPP	Public-Private-Partnership
RH	Reproductive Health
RHCSS	Reproductive Health Commodity Supply and Security
SBP	Strategic Business Plan
SRH	Sexual Reproductive Health
S-S	South-South
STAS	South-South Technical Advisory Service
TRIPS	Trade Related Intellectual Property Rights
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
VLP	Visionary Leadership Programme
WFP	World Food Program
WHO	World Health Organization