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News, Updates, and Resources from the U.S. Agency for International Development

USAID Responds to Avian Flu in Africa

By Aditi Sen

Over the past several months, avian influenza has caused increasing concern among health, veterinary, and agriculture policy-makers worldwide. The effect it is having on poultry and poultry production has been devastating. Already, the presence of the highly pathogenic H5N1 strain of avian influenza in chickens has resulted in the culling of more than 140 million birds across Asia. The recent appearance of the virus in Nigeria, Niger, and Cameroon intensifies worries about the spread and potential impact of the virus on the continent.

The spread of avian influenza into Africa is worrisome for several reasons. While cases of avian influenza in humans are rare, the high mortality rate of human avian flu and vaccine development challenges have negative implications for already overburdened African health service systems. Also, as in many parts of Asia, poultry serves as a primary source of both protein and income for many Africans. Now that cases of avian flu have been found in the region, the necessary culling efforts may destroy livelihoods along with birds.

On February 8, the H5N1 strain of avian flu was confirmed among chickens in a commercial farm in the northern Nigerian state of Kaduna. Outbreaks among poultry have since been confirmed in Kano and several other Nigerian states, as well as in bordering regions in Niger and Cameroon. USAID is working with international partners and national Governments to respond to the emergency, while also alerting all Missions to the importance of increasing awareness and reporting of any suspected outbreaks. USAID has provided personal protective equipment for use during culling and is also promoting safe handling of birds to lessen the possibility of human cases.

At the International Pledging Conference on Avian and Pandemic Influenza in Beijing, China, in January 2006, the



African cotton producers such as these in Uganda stand to benefit from the elimination of U.S. cotton export subsidies, as agreed under the WTO negotiations.

WTO Negotiations to Affect Developing Countries

The most recent round of World Trade Organization (WTO) negotiations, the sixth WTO Ministerial Conference held in Hong Kong in December 2005, resulted in more success than was widely expected. These multilateral negotiations, called the Doha Development Agenda, which determine how easily goods and services can be traded among countries, yielded commitments to phase out farm export subsidies by 2013, phase out export subsidies on cotton by developed countries,

Flu continued on page 6

WTO continued on page 2

In this Issue of USAID in Africa...

USAID Assists Rwandan Courts3	Improving Healthcare for Madagascar's Youth8
Benin Students Conduct Environmental Research4	Challenges of Accessing Clean Drinking Water9
Kenyan Farmers Improve Avocado Profits5	Africa Resources10
Gulu Deaf Become Sign Language Trainers7	U.S. First Lady Visits Nigeria12

WTO from page I

and allow most developing countries quota-free and duty-free access to global markets for nearly all their goods.

Negotiations on the Doha Agenda began in 2001 in Doha, Qatar, and must be completed by the end of this year if the finalized Agenda is likely to be ratified by the U.S. Congress. At the end of 2006, President Bush loses the "fast track" authority granted by Congress, which means that if the Agenda is not approved by then, Congress can choose to invalidate individual sections of the Agenda—therefore forcing those sections to be renegotiated—rather than approving the Agenda as a whole.

The Hong Kong conference provided a good opportunity to highlight USAID's trade capacity building efforts and their contribution to the WTO's Doha Development Agenda. "The U.S. already provides more aid for trade than any other country in the world, and

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South Africa's domestic cotton industry is growing, thanks in part to access to U.S. markets under the African Growth and Opportunity Act. These rolls of newly woven cotton fabric await shipment to clothing manufacturers.

we're proud of that," said U.S. Trade Representative Rob Portman during his closing remarks on December 19. "We agreed to continue that leadership by doubling our commitment to aid for trade from \$1.3 billion this year to \$2.7 billion annually by 2010." USAID accounted for 52 percent of total U.S. trade capacity building funding worldwide in FY 2005.

USAID officials, including then-Administrator Andrew S. Natsios and Assistant Administrator for Africa Lloyd O. Pierson, organized several side meetings at the conference. Pierson moderated an event discussing U.S. trade capacity building. African participants in the event expressed appreciation for U.S. trade capacity building efforts and stressed the continuing need for assistance in addressing constraints to providing adequate goods and materials. A delegate from Madagascar noted that in order for African countries to use increased aid efficiently there is a critical need for continued assistance in developing the human capacity to implement good economic and trade policies.

Throughout the week, Pierson also participated in daily U.S. delegation meetings on the cotton issue, which had contributed to the derailing of previous WTO negotiations. Benin, Burkina Faso, Chad, and Mali had been pushing

for a less subsidized global cotton market so that their farmers can better compete. They maintain that the now agreedupon elimination of U.S. export subsidies, and eventually reducing domestic subsidies in the United States and other developed countries, will help. However there are technical hurdles holding West African farmers back as well. Their cotton yields are half of the yields of U.S. cotton farmers. And the marketing system allows only 40 cents of every revenue dollar to return to the farmer, contrasting with 80 cents for U.S. farmers. The United States has agreed to provide technical assistance to try to address these problems.

Through the African Growth and Opportunity Act (AGOA), the United States has already been working to make it easier for many African countries to export to U.S. markets. In 2005, AGOA-eligible imports to the United States from Africa totaled \$38.1 billion.

Talks on the remaining issues are expected to resume in Geneva, Switzerland, in April. The challenges yet to be resolved by WTO negotiators include specifics on agricultural produce and trade in industrialized goods, as well as some timetables.

For more information, visit www.ustr. gov/WTO/Section_Index.html.

USAID Encourages Financial Independence for Rwanda's Courts

By Benjamin Allen

In early 2005, USAID supported a team of five international experts from the U.S. National Center for State Courts (NCSC), a U.S.-based nonprofit organization that promotes innovations in judicial systems, to conduct an assessment of the Rwandan court system. The assessment, which was presented to the Rwandan Supreme Court, showed weak financial procedures and court personnel that lacked financial management training, which USAID then set out to help repair.

In 2003, amendments to the Rwandan constitution had strengthened the position of the judiciary as a separate branch of government. This included a declaration of the financial and administrative autonomy of the courts, which had previously negotiated budgets with each separate municipality. However, reforms had not yet been fully effective.

Following the 2005 assessment, USAID and NCSC sought ways to improve the judiciary's budgetary process and financial management procedures. Finding a lack of communication on financial matters between the Supreme Court and provincial courts, the NCSC worked with provincial-level judges to ensure greater participation in the budgetary process. Starting in August 2005, the program successfully trained key staff of the Supreme Court and lower-level courts, including 40 senior staff of the Supreme Court, 57 judges, and 150 clerks. USAID supported a national conference for the provincial courts to plan the judiciary's 2006-2008 budget. USAID also worked to produce a financial procedures manual for the judiciary that met the standards of the Auditor General, the supreme audit institution.

Charles Kariwabo, the president of the Kigali Court, has the new financial procedures manual on his desk. He notes that the process towards greater financial independence is underway. "Today

we can defend our budget, even if they [the government] don't accept all our proposals."

In the past, Kariwabo had to defend his budget at the local prefecture. This dependence on the executive branch, even for purchases as minor as paper and office supplies, significantly weakened the ability of courts to act impartially in cases involving the state.

Today, the provincial courts defend their budgets to the Supreme Court, which presents the budget to the government. This means that while the provincial courts have not yet gained total financial independence, the battles are fought at a much higher level, and that lower courts are relatively isolated from the possibility of direct executive branch manipulation.

Kariwabo is careful to note that he and his colleagues "thought about judicial independence for a long time. Each new step towards independence we receive with pleasure, but we keep demanding more." The assistance provided by USAID has helped the Rwandan judiciary become more empowered to make these demands. Other international



Charles Kariwabo, president of the Kigali Court, views the growing independence of the judiciary as positive and feels empowered to "keep demanding more."

donors, including the Dutch, Belgians, and UNDP, are taking over the mantle from USAID to continue efforts to improve judicial independence in management, financial, and legal issues.

Benjamin Allen is democracy and governance team leader for USAID/Rwanda. For more information, contact him at ballen@usaid.gov.

Starbucks Honors Rwandan Coffee

Starbucks Coffee has selected a blend from Rwanda as this season's prestigious "Black Apron Exclusives" coffee. The coffee, produced with the support of USAID, is now available in the 5,000 Starbucks in the United States.

USAID has invested in the coffee industry in Rwanda since 2001, building coffee washing stations, training farmers, training coffee tasters, and improving rural infrastructure throughout the country. The investment has paid off, and Rwanda is now producing one of the world's best coffees.

"In just five years the coffee industry has taken off in Rwanda," Kevin Mullally, USAID/Rwanda Mission Director, said. "When we started in 2001, Rwanda was producing no specialty coffee. Approximately 1,100 tons of fully washed coffee was produced last year, and we hope that figure will increase every year. Rwanda is becoming famous for its coffee."

Alfred Nuno, a Starbucks representative who visited Rwanda to arrange the promotion, agrees. "We are amazed at how quickly Rwanda has learned to produce this exceptional coffee," he said during his visit.

Students Contribute to Environmental Research in Benin

Students at the General Education Secondary School of Lokossa, Benin, are contributing to worldwide environmental science knowledge. Through the U.S. Government's Global Learning and Observations to Benefit the Environment (GLOBE) program, since 1995



Stephanie Gbetoho (left) is presented with an award from the GLOBE organization for her school's participation.

students have collected daily atmospheric measurements at their school and transmitted the data regularly to the GLOBE database where scientists worldwide can access it.

GLOBE is an interagency program funded by NASA, the National Science Foundation, the State Department, USAID, and others. It brings together students, teachers, and scientists from around the world to enhance environmental awareness of individuals, increase scientific understanding of the Earth, and support improved student achievement in science and mathematics. USAID/Benin has funded teacher training and equipment purchases in Benin's 108 participating schools since the program started in 1995.

Stephanie Gbetoho, a biology teacher at the Lokossa school, has worked with GLOBE from the outset. Now a national GLOBE training team member, Gbetoho has inspired her students to achieve in science. Under her tutelage,

in 1996 they decided to begin a longterm study to verify the hypothesis that the maximum number of malaria cases occurred during the peak of the rainy seasons.

With the daily data collected each year, students calculated monthly air tempera-

ture and total monthly rainfall in the two rainy seasons and two dry seasons in the Lokossa area. They then obtained the statistics on malaria cases registered in health centers in their locality each year from the regional public health division.

After comparing the climatic and health data, the students saw that the greatest peak of malaria cases was indeed observed during the long rainy

season and this peak appeared the month

following the peak rainfall amount. In 2000, when only one rainy season was registered, only one peak in the number of malaria cases was observed. Sometimes the two peaks were equal in magnitude; this occurred when the amount of rainfall during the short rainy season was high.

Gbetoho's students have used the project results to increase public awareness of the means of malaria prevention, such as removing the standing water that mosquitoes use as breeding areas and sleeping under bednets. They are also putting pressure on the Lokossa municipality to ensure adequate drainage of the streets.

In recognition of their work, Gbetoho and her students received official congratulations from GLOBE in November 2004.

For more information, visit www.globe.gov.

Never Too Young to Learn

Munawya Abubakar Abdhakim is 4 years old and proudly attends the Tuwa Mtoni Kigomeni Madrasa Preschool on Zanzibar Island, Tanzania. Opened in 2004 with support from USAID, her school is a madrasa—a learning institution that respects Muslim culture while promoting reading, writing, math and analytical learning skills. Munawya's mother, Riziki, recently visited the school to meet with her daughter's teacher, and the visit filled her with pride and admiration for how much her little girl had learned in a very short time and despite her age.

Riziki recalls many times when she heard her daughter tell other children what she learned that day in school. "Wash your hands before and after eating." "Greet your parents warmly in the morning." "Don't play in dirty water." Although Munawya cannot yet read or write, she can recite stories, rhymes, and poems and is learning to count. Riziki says her only regret is that the preschool was not built in time for her older son to attend it.

Looking proudly at her daughter, Riziki said, "Do not think these children are too young to learn and make a difference. Young children can be the best teachers of all. They grasp ideas quickly and immediately want to pass what they have learned on to others."

For more information, visit http://tanzania.usaid.gov.

Kenyan Farmers Improve their Avocado Harvests and Profits

Mbugua Gitau depends on his 210 treeavocado orchard in Kenya as the sole source of income for his family. Gitau expected that the avocado fruits would give him adequate funds to cover his family's financial needs. Unfortunately, this has not been the case. Farmers like Gitau have depended on freelance brokers, who have offered only low prices and unreliable timing, and left rejected fruit rotting on the ground.

In the meantime, three new avocado oil processing factories were getting ready to open in June 2005, towards the end of the growing season. Each factory needed a reliable supply of avocados in order to export the crude avocado oil to their customers in South Africa to be refined for the cosmetics industry. The challenge was to connect the 5,400 farmers like Gitau with the processors. USAID/Kenya's Business Development Services (BDS) program has attempted to do just that.

The program, implemented by the international development consulting firm Emerging Markets Group, contracted local facilitator Christine Guchu-Katee to teach farmers about commercial agriculture. She held 278 meetings for more than 7,700 farmers. By the end of September 2005, a total of 97 producer groups had been formed and registered, representing 2,809 farmers. The team held trainings for the farmer groups on by-laws, group dynamics, elections and registration, and record-keeping. Kenya BDS also reached out to local administrators and opinion leaders for support. After buy-in from all sides, the team helped negotiate supply contracts, and championed the entire enterprise to ensure that business commenced as planned in June 2005 and maximized the remainder of the harvesting season. An additional challenge facing Guchu-Katee and her team was facilitating the

market link with each of the three newly

formed processing firms to ensure the most mature fruit in time for purchasing in June. They were able to accomplish this through intensive geographical mapping, analysis of production clusters, and careful negotiation on the terms of supply contracts.

By the end of September, a total of 178 tons of avocados had been delivered, valued at over US\$15,000. Considering that the program commenced towards the end of harvesting season, this was a good initial start, and proved instructive for both processors and farmers. For the farmers, the combination of three processing firms and more efficient marketing channels has led to a guaranteed market and a 400-500 percent price increase per kilogram. For the processors, there was initial anxiety that the demands of three processing factories would exceed the supply of fruit. However, after the first season it appears that adequate supply exists.

After selling over 800 kilograms of avocados, Gitau has a renewed opti-

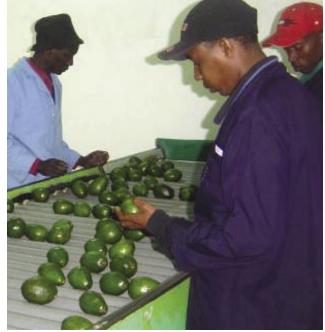
mism in avocado farming. The Ichagaki 'A' Self Help Group he belongs to now approaches avocado farming as a business. As the quality of the group's fruit increases, he and other members look forward to graduating into the more lucrative whole fruit export market.

With an assured market, the key challenge that remains for farmers is to improve the quality and productivity of their orchards through integrated pest management

(including agrochemical spray) services, as well as fertilizers. To meet this need, Kenya BDS has formed a network of trained spray service providers. The spray programs have been carefully developed to meet export standards. Kenya BDS has also made commercial financial arrangements so that farmers can pay for spraying on credit. This program is expected to more than triple the productivity of orchards and turn avocado production into a lucrative business for farmers.

With his anticipated increased income from the upcoming season, Gitau looks forward to reinvesting his earnings towards an extra piece of land to increase his avocado acreage. As his business grows, he plans to renovate his house, buy some milk goats, and eventually purchase a piece of land in nearby Maragua town on which he can build rental homes.

For more information, contact David Knopp with the Kenya BDS program at david@kenyabds.com.



Workers sort avocados for processing.

Flu from page I

United States pledged \$334 million to support the global campaign against highly pathogenic avian influenza and a potential human flu pandemic. These funds will be largely grants and technical assistance from USAID and the U.S. Departments of State and Health and Human Services to support countries threatened by the virus. In Africa, USAID will emphasize the need to strengthen existing surveillance systems for animal and human health, plan for response to animal and/or human outbreaks, and mount effective communications campaigns to educate the public about prevention of avian influenza, as well as methods for recognizing signs of the disease among poultry and reporting it to relevant authorities.

USAID is working closely with the U.S. Department of Agriculture, as well as with international organizations such as the Food and Agriculture Organization of the United Nations and the



These boys would be at risk of contracting avian influenza if the chicken they are plucking in Togo were infected.

World Organization for Animal Health to address preparedness, animal surveillance, and containment as the first lines of defense to protect humans.

USAID Missions in Africa have designated specific points of contact for avian influenza, and are collaborating with other U.S. Government, donor, and local partners to support national efforts to prepare for outbreaks and conduct surveillance. Missions in Ethiopia, Ghana, Mozambique, and Senegal, among others, have supported the coordination of national-level avian influenza task forces consisting of representatives from ministries of health, agriculture, wildlife, and livestock, as well as nongovernmental organizations and the private sector.

Many African countries have developed national preparedness plans and intend to reinvigorate pandemic plans developed for the potential threat of Severe Acute Respiratory Syndrome

(SARS) to address that of avian flu. Ghana's plan relies on culling and compensation systems developed for the threat of rinderpest (a highly contagious disease in cattle that did \$500 million in damage in 1982-84), as well as on surveillance plans developed for previous pandemic threats. In Tanzania, USAID is supporting wild bird surveillance activities, while support in Ethiopia enabled testing of samples from birds initially suspected of having avian flu (since shown to be negative). USAID/Mozambique is using existing programs to support immediate actions including the development and dissemination of communications messages. Strengthening regional laboratory capacity has also been identified as a priority.

In October 2005, Under Secretary of State for Democracy and Global Affairs Ambassador Paula Dobriansky, Assistant Administrator for Africa

Lloyd O. Pierson, other senior USAID officials, and a USAID-wide Avian and Pandemic Influenza Preparedness and Response Unit met with members of the African diplomatic corps to discuss how to prepare African countries for potential outbreaks of avian flu. In addition, with USAID support, the World Health Organization's Regional Office for Africa is leading the critical effort to determine laboratory, diagnostic, and surveillance capacity in Africa and promote development of national plans to manage a potential avian influenza outbreak.

Effective communications efforts will be a key element of USAID's activities in Africa. These efforts will include dissemination of accurate information and education campaigns on the spread of avian flu, symptoms of avian flu in animals and humans, activities to reduce risk of human disease, and proper handling of poultry and poultry products. These campaigns will especially target farmers, populations living near areas where migratory birds roost, community health workers, and community leaders and local officials. In many cases, these campaigns will use networks already in place for polio and other vaccination campaigns.

The fact that Africa's surveillance and service capacities are already overwhelmed by extreme poverty, malnutrition, and diseases such as malaria and HIV/AIDS requires that steps be taken now to plan a comprehensive response to possible outbreaks of avian influenza in animals or humans. USAID is partnering with colleagues around the world to craft this response.

Aditi Sen is a member of the Africa Bureau's health team.

For more information, visit www.usaid. gov/our work/global health/home/ News/news items/avian influenza. html.

Gulu Deaf Association Members Become Sign Language Trainers

In Uganda, where one in 25 people is disabled and 15 percent of those are deaf, the Gulu Association of the Deaf is training some of its members to teach sign language to deaf persons living in nearby communities. This pilot project, supported by USAID's Leahy War Victims Fund, is part of a broader initiative of USAID's mission in Uganda to integrate the concerns of people with disabilities into its ongoing activities.

The Gulu Association of the Deaf, established in 1996 as a member of the Uganda National Association of the Deaf, currently has over 60 members from the deaf community in both rural and urban areas. Many of them do not have adequate sign language to understand complex messages.

This project aims to increase language skills of deaf persons in communities that have been impacted either directly or indirectly by the ongoing conflict in the northern Uganda region. Association members wanted to focus on training deaf persons in sign language in this first phase of the program and train hearing persons later.

Initially, 50 members of the Gulu Association of the Deaf participated in a training-of-trainers program for sign language instructors. After the training, 23 trainers were selected to continue with the project as sign language trainers in 23 Gulu District sub-counties and other municipalities. They have since gone on to teach classes in December and January for over 400 persons.

A second series of 3-week courses started in February to train an expected 250 hearing individuals in sign language.

For additional information, contact Kim Burns, USAID/Uganda development and outreach communications officer, at kburns@usaid.gov.



Members of the sign language class express their satisfaction through their own form of hand clapping.



Sign language student Adwar Rose provides information about her living situation in Gulu. Rose has a 1-year-old child and has been selected as one of the 23 trainers to train other deaf persons in Gulu.

USAID Responds to Need for Improved Healthcare and Health Information for Youth in Madagascar

Madagascar is one of the poorest countries in the world. Over 75 percent of the population lives in rural areas of the country where a woman has on average 5.7 children in her lifetime. Nearly half the Malagasy population is under the age of 15 years and population growth in the country is estimated to be nearly 3 percent.

According to the most recent USAIDsponsored Demographic and Health Survey (2003-2004), more than 40 percent of rural women have never attended school and 80 percent have never used family planning. At the time of the survey, only 7 percent used a modern method of family planning. The rural population in Madagascar has nearly doubled since 1980 to 13.4 million last year.

Maternal mortality is high (at approximately 500 per 100,000 live births) and although infant mortality rates have decreased over the past decade, it is still high at 58 deaths per 1,000 children. Access to quality reproductive and sexual health programs is one demonstrated way to improve the health of women (and their children).

In recognition of this, USAID has been working to increase geographic and economic access to voluntary family planning and other health services and products, especially in the more remote areas. Community-based distributors and sales agents promote maternal, child, and reproductive health, including HIV prevention. They are backed up with informational radio programs. One aspect of USAID's program focuses on sexual delay and abstinence strategies for youth, promotion of mutual fidelity and partner reduction for sexually active adults, and correct and consistent condom use for high risk groups. Such messages are sensitive to the values of the churches and other communitylevel stakeholders in the country. To

promote these messages and achieve behavior change, USAID uses an innovative approach that engages community leaders and families in setting and achieving health and other development objectives.

In addition to these rural efforts, a program focusing on the health needs of at-risk urban young adults has started in some of Madagascar's major cities and will eventually spread to more areas. In partnership with Population Services International, USAID has established a network of youth-friendly, affordable private clinics called Top Reseau (French for "Top Connection"). Teams of peer educators, most of whom are 18 to 20 years old, mix humor and entertainment with serious discussions about reproductive and sexual health issues both in the clinics and in "face to face" sessions in night clubs, bars, sports venues, and cafes. They act as a major link between physicians and young clients and have reached over 280,000 youth since the start of Top Reseau in 2001. Nearly 90,000 clients have visited Top Reseau's health centers.

A media campaign is also central to the Top Reseau program. USAID promotes the program and sexual risk awareness on television, radio, and billboards. The campaign also uses mobile video units to deliver sexual health messages to large crowds. Facilitators engage audiences with a mix of discussions

and games, and spread information on clinic services. These mobile video teams have now reached over 40,000 youth.

Clients are pleased with Top Reseau's services. Nineteen-year-old Mialy R. says "I just want to get accurate information on sexual health...Top Reseau provides a very friendly stage for open discussion and advice for youth."

Physicians are also impressed by the reach and effectiveness of the program. According to a program physician, the total number of the general consultations has tripled in six months, and the majority is composed of youth less than 20 years of age. Youth are getting the message.

With USAID making strides in promoting reproductive and sexual health programs, family planning, and HIV/AIDS activities, the people of Madagascar can lead healthier, more productive lives.

For more information, contact Jeffrey Ashley, USAID/REDSO, at jashley@usaid.gov.



A physician in her private clinic with some educational materials for the Top Reseau youth health program.

Access to Clean Drinking Water and Proper Sanitation is a Growing Challenge

Each year more than 5 million children and adults worldwide die from illnesses related to dirty or polluted drinking water and unclean domestic environments. The World Health Organization has estimated that nearly 1.2 billion people lack access to clean drinking water and that twice that number, 2.4 billion, lack access to adequate sanitation services. Water-borne infections such as cholera, typhoid fever, and dysentery burden public health systems and can impose significant economic losses.



Flooding in Dakar, Senegal, last year, caused in part by inadequate drainage, led to several cases of cholera in the city.

In addition to the health consequences, every day in Africa many people, particularly women and girls, have to walk up to 10 miles to fetch water.

Worldwide demand for water is doubling every 20 years as industrialization, agricultural use, urbanization, and rising standards of living for the growing population drive water consumption ever higher. Slightly more than onehalf of available freshwater supplies are currently used for human purposes.

USAID's drinking water and sanitation projects address the availability of clean drinking water supplies, and the protection of these supplies from contamination by household waste, inadequate sanitation, and improper handling of domestic water.

Residents in villages in southern Sudan, for example, are working with USAID to form committees to install and repair water boreholes. Within three months of the start of a new water project in the region, 15 village committees and communities in the Upper Nile area

had been trained to operate and manage eight new boreholes. With every new water source that is established, fewer women have to spend time away from their families. The clean water is helping to reduce the number of children and adults that fall sick or die from waterrelated illnesses.

USAID has helped the 2,000 villagers in the community of Talatamaty, Madagascar, to launch an information campaign about the advantages of village sanitation, waste disposal, and wellwater protection. This has been followed by actions to protect water quality in communal streams and surrounding rice paddies from domestic wastewater and livestock contamination. In addition, USAID's socially marketed water disinfectant solution, Sûr'Eau (safe water in French) is helping to improve access to potable water in other communities in Madagascar. USAID surpassed its 450,000 annual target for units of solution sold, providing over 529,000 people with one year's supply of safe water in the process. Sûr'Eau is yielding

cleaner, potable water and decreasing the incidence of waterborne diseases in communities.

Since 1999, USAID has offered loan guarantees to private financial institutions as a way to increase financing for water and sanitation infrastructure development. The presence of a guarantee can help municipalities access credit for high-priority projects in poor areas. In South Africa, this enabled the Vlakfontein Outfall Sewer District in Johannesburg to provide

sanitation to approximately 100,000 people.

The West Africa Water Initiative (WAWI), launched in 2002, uses both USAID and private resources to target water and sanitation activities for rural and peri-urban communities in three West African countries: Ghana, Mali, and Niger. In its initial phase, the initiative invested in smallscale potable water supply and sanitation activities in these three countries. The activities undertaken include well drilling and rehabilitation, hand and solar pump installation, alternative water source development, construction of latrines, household and school-based sanitation, and hygiene education. Under WAWI, more than \$40 million in support from a wide range of partners over six years is expected to result in improved access to water supply and sanitation for nearly half a million people.

For additional information, visit www. usaid.gov/our_work/environment/ water/index.html.

A selection of recent USAIDfunded publications on Africa

The Governance Dimensions of Food Security in Malawi

USAID/DCHA/DG; USAID/DCHA/FFP. June 2005

PN-ADE-034

This report assesses the underlying governance causes of food security problems in Malawi, concluding that the closer state legitimacy is linked to maize availability, the more likely food security policy will be politicized. In aid-dependent Malawi, external influences are as important, if not more so, in determining policy choices than is internal competition. Donors need to be sensitive to allowing government, private sector interests, and civil society to establish their vision for Malawi. Further, ownership leads to institutionalization. Donors need to integrate projects into governance structures, facilitate creative partnerships between food security implementers and government, continue to support decentralized democratic governance, and encourage accountability structures. Increased citizen participation, if channeled peacefully, will positively affect the policy agenda.

Assessments & Appeals: Strengthening Non-Food Emergency Responses in Ethiopia

Sue Lautze, Yacob Aklilu, and Erin Boyd. USAID/ Ethiopia. September 2005

PN-ADE-150

This study, supported by USAID and Ethiopia's Disaster Prevention and Preparedness Commission, analyzes non-food emergency assessment methodologies and structures in Ethiopia. Results were based on case studies in Oromiya and the Southern Nations and Nationalities People's Region tracing how some 2005 nonfood aid appeal numbers were derived from the local to the federal level, as well as on meetings with concerned government and nongovernment personnel. Annexes cover various emergency responses such as water, health, and food security programs. The report ends with a 10-point agenda for strengthening non-food emergency disaster assessments and appeals, contingency planning, and the underlying management system.

Youth on the Streets: The Importance of Social Interactions on Psychological Well-Being in an African Context

USAID/DCHA/DG; George Washington University. May 2005

PN-ADD-170

This report identifies five key program components that promote the psychosocial well-being of street youth: community participation in all aspects of programming; youth participation and empowerment; economic incentives and skills development; spiritual development; and counseling for both youth and families. Examples of program interventions for African street youth are included, as are psychosocial outcome indicators, developed by field work in Ethiopia, for monitoring changes in behavior and attitude in both the individual and the community. The report also presents six options for action, targeted for donor and implementing agencies within the field of psychosocial assistance

HIV-Related Stigma, Discrimination and Human Rights Violations: Case Studies of Successful Programmes

UNAIDS; USAID/GH/OHA. April 2005 PN-ADC-528

This study examines the inner dynamics of stigmatization associated with HIV/AIDS and presents brief case studies of projects, programs, and activities in Namibia, South Africa, Uganda, and Zambia that have had success in breaking it. Some of these efforts are in the process of being scaled up, although it is important to note that many have not yet been formally evaluated. The case studies are classified under three broad categories. 1) Stigma-reduction initiatives tend to be community-based or community-focused, and have been located within a range of prevention and care activities. 2) Anti-discrimination measures tend to take place in institutional settings -specifically, workplaces or health services—and aim to de-institutionalize stigma and discrimination. 3) Human rights and legal approaches include a wide ranges of activities, such as instituting legal action to challenge discrimination; ensuring access to redress; and conducting rights awareness campaigns, including promoting understanding among people living with HIV of their rights.

Community-Based Solutions for Effective Malaria Control: Lessons from Mozambique

Child Survival Collaborations and Resources Group; USAID/DCHA/PVC. March 2005

PN-ADC-936

Mozambique is among the 10 nations most affected by malaria. This case study presents a situational analysis of Gaza Province and details achievements and lessons under the World Relief "Vurhonga" Child Survival Program, which has been implemented in that province with USAID support since 1994. Vurhonga staff developed a strategy known as the Care Group Model as an efficient and cost-effective means to reach every household within a defined geographic area. The model is based on strengthening health system capacity for improving quality of care; ensuring access to health services; training caregivers to achieve 100 percent coverage for health education; and creating effective links between communities and the health system. From 1999 to 2003, the model helped increase the use of insecticide-treated mosquito nets by pregnant women and children under 2 years of age from 1 percent to 85 percent; community access to health facilities and essential drug treatment from 65 percent to 99 percent; and the percent of children under 2 years seen at a health facility within 24 hours of malaria symptoms increased from 28 percent to 90 percent.

Darfur 2005: **Livelihoods Under Siege-Final Report**

USAID/DCHA/OFDA; Tufts University, Feinstein International Famine Center. February 2005

PN-ADC-475

This study examines the effects of the current conflict and humanitarian crisis on the livelihoods of selected communities in Darfur in order to refine strategic humanitarian interventions. While the provision of food aid can partially redress crop failures, a much wider raft of interventions is needed to begin to address the various other issues, including systematic asset-stripping, blocked access to natural resources, and constraints on the remittances of migrant labor.

At the international, national, and state levels, major structural changes of land restitution and compensation; livestock restitution, reconciliation and compensation; and the opening up of transport routes to provide safe passage for people, livestock, and goods need to be addressed. Ideally, the wider processes of reconciliation should be linked with livelihood support. Extensive and detailed recommendations in the study cover six broad areas: security, land, livestock, markets, labor migration, and international humanitarian response.

Children's Reintegration in Liberia

John Williamson and Carter Randolph. USAID. February 2005

PN-ADE-015

The impacts of years of war and disruption of life in Liberia have had profound effects on children, whether they were made to be soldiers or sex slaves, or were separated from their families. This study identifies critical priorities with respect to social and economic integration of children and adolescents over the next three to five years. It identifies several elements critical to the successful reintegration of former child soldiers including community sensitization, formal disarmament and demobilization, a transition period in separate centers for boys and girls located well away from adult rehabilitation program sites, tracing and family mediation, and extended monitoring for children not placed with their parents. It also identifies traditional cleansing ceremonies, traditional healing, and religious support; school or skills training of adequate quality and duration, coupled with literacy and numeracy instruction and provision of tools, materials, and follow-up counseling; ongoing access to health care, particularly for war-related conditions, for those in school or training; and individual supportive counseling, facilitation, and encouragement. The report includes specific recommendations.

Unless otherwise noted, these and other documents can be downloaded in full-text free of charge at the web address given or at www.dec.org. Search for the desired document ID number (DOCID, eg. PN-ACX-650) in the field search option.

U.S. First Lady's Visit Brings Hope to Nigerians Living with HIV/AIDS

By Ebun Aleshinloye

During her trip to West Africa in January, First Lady Laura Bush visited a small Catholic-run hospital in Gwagwalada, half an hour away from Nigeria's capital city of Abuja, to raise the hopes of Nigerians affected by HIV/ AIDS. There she affirmed that Nigeria will receive U.S. assistance worth \$163 million to fight AIDS in 2006, a \$53 million increase from the previous year's level.

While in Gwagwalada, Mrs. Bush and her daughter, Barbara, commissioned the new St. Kizito's complex within St. Mary's Hospital, which will provide counseling services and HIV and other blood tests, as well as housing a blood bank and pharmacy. The hospital is one of more than 400 implementing members of the Christian Health Association of Nigeria, a USAID-funded activity that is part of the President's Emergency Plan for AIDS Relief.

Mrs. Bush delivered four cartons of anti-retroviral (ARV) drugs to the facility—the first shipment to the hospital under the Emergency Plan. This consignment of drugs will treat an estimated 500 patients for 12 months. In Nigeria, USAID currently provides 3,800 people living with AIDS antiretroviral drugs, of which approximately 60 percent are women.

The First Lady talked with representatives from the hospital staff, local community, and St. Mary's HIV/AIDS support group during a roundtable discussion, hearing the moving stories of several HIV-positive Nigerians.

During her visit to West Africa, Mrs. Bush also attended the presidential



Laura and Barbara Bush with the nuns of St. Mary's

inauguration of Ellen Johnson-Sirleaf in Liberia and announced the donation of 25,000 books to school libraries in Ghana.

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