

Data Sheet

USAID Mission:	Indonesia
Program Title:	Basic Human Services
Pillar:	Global Health
Strategic Objective:	497-019
Status:	Continuing
Planned FY 2006 Obligation:	\$28,017,000 CSH; \$5,354,000 DA
Prior Year Unobligated:	\$220,000 DCA
Proposed FY 2007 Obligation:	\$27,507,000 CSH; \$5,212,000 DA
Year of Initial Obligation:	2004
Estimated Year of Final Obligation:	2008

Summary: The Basic Human Services program focuses on the interdependence of human health and the environment. The program will increase access and utilization of key health and environmental services at the district level. Activities include: health and hygiene for vulnerable women and children; better nutrition; access to safe water and sanitation; sustainable management of natural resources and biodiversity conservation; family planning and reproductive health systems; infectious disease reduction, including tuberculosis (TB); HIV/AIDS prevention among at-risk populations; and polio and avian influenza (AI) surveillance and other prevention/eradication efforts. All family planning assistance agreements incorporate clauses that implement the President's directive restoring the Mexico City policy.

Inputs, Outputs, Activities:

FY 2006 Program:

Improve Access to Clean Water and Sanitation (\$1,980,000 CSH; \$4,364,000 DA). USAID is providing technical assistance to water and sanitation utilities and partnering with the private sector to provide home chlorination technology to increase access to safe water for low-income families. A total of \$1 million will be transferred to Development Credit Authority (DCA) for a guarantee for water utilities to expand service delivery to a greater numbers of poor people. Principal Implementers: Development Alternatives Inc. (DAI), Johns Hopkins University (JHU), and CARE International.

Improve Child Survival Health and Nutrition (\$4,257,000 CSH). USAID is providing technical assistance and training to service providers and community members to reduce diarrheal diseases, increase skilled personnel at birth, and increase the modern contraceptive rate. Principal Implementers: JHU and John Snow International (JSI).

Improve Maternal Health and Nutrition (\$3,465,000 CSH; \$220,000 CSH Prior Year Unobligated). USAID is providing technical assistance to health care providers to reduce maternal, neonatal, and child mortality and morbidity. Funds are supporting a DCA guarantee to expand financial loans to midwives to increase access and quality of maternal and newborn health services. Principal Implementer: JSI.

Prevent and Control Infectious Diseases of Major Importance (\$5,445,000 CSH). USAID is providing technical assistance and training to expand malaria prevention in eastern Indonesia, supporting and expanding the Direct Observed Treatment Short-course for TB in nine priority provinces, and supporting polio surveillance and vaccination. The program is also supporting AI prevention by expanding surveillance and funding a communications campaign to increase public awareness of how AI is transmitted. Principal Implementers: Academy for Educational Development (AED), World Health Organization, JSI, and Royal Netherlands Tuberculosis.

Protect and Increase Food Security of Vulnerable Populations (\$990,000 DA; \$1,980,000 CSH). USAID is providing training to service providers and community members to complement the P.L. 480 Title II resources to support maternal-child feeding and food-for-work activities. Principal Implementers: CARE International, Mercy Corps International (MCI), Save the Children, and World Vision.

Reduce Transmission and Impact of HIV/AIDS (\$7,920,000 CSH). Through technical assistance to the

Government of Indonesia and local non-governmental organizations, USAID is scaling up HIV/AIDS prevention, care, and support interventions in high-risk populations and increasing HIV/AIDS prevention efforts in seven provinces. Principal Implementers: Family Health International (FHI) and Project Concern International (PCI).

Support Family Planning (\$2,970,000 CSH). USAID is providing technical assistance to the Ministry of Health at the central and district level to ensure quality family planning services in order to improve mother and child health. Principal Implementer: JSI.

FY 2007 Program:

Improve Access to Clean Water and Sanitation (\$2,000,000 CSH; \$4,212,000 DA). USAID will expand technical assistance and training to 30 local governments and continue to promote integration of health, water, and sanitation activities. Principal Implementers: DAI, JHU, and CARE International.

Improve Child Survival, Health and Nutrition (\$4,191,000 CSH). USAID will expand assistance from 13 to a total of 30 districts. Principal Implementers: JSI and JHU.

Improve Maternal Health and Nutrition (\$4,000,000 CSH). Through the continued use of technical assistance and training to health care providers, USAID will scale up an integrated package of interventions within each project site to expand results. Principal Implementer: JSI.

Prevent and Control Infectious Diseases of Major Importance (\$5,500,000 CSH). USAID will continue to support avian influenza control, malaria control, TB diagnosis, and polio eradication activities. Principal Implementer: AED, WHO, JSI, and Royal Netherlands Tuberculosis.

Protect and Increase Food Security of Vulnerable Populations (\$2,000,000 CSH; \$1,000,000 DA). USAID will expand technical assistance and training to 30 local governments and promote integration of health, water, and sanitation activities. Principal Implementers: Save the Children, World Vision, CARE International, and MCI.

Reduce Transmission and Impact of HIV/AIDS (\$8,316,000 CSH). USAID will continue to provide targeted technical assistance and training to health workers and community members to reduce high-risk behavior, expand quality services, and improve surveillance activities. Principal Implementers: FHI and PCI.

Support Family Planning (\$1,500,000 CSH). USAID will integrate quality reproductive health services at district level sites and ensure availability of contraceptives especially for the poor and most vulnerable. Principal Implementer: JSI.

Performance and Results: A total of 56,400 people in previously unserved areas received access to clean water, and 15,275 people in previously unserved areas received access to sanitation services. USAID's HIV/AIDS program reached over 1,300,000 people last year. These results have led to an increase in condom use, reductions in sexual partners (faithfulness), and increased use of clinic services. The national TB Case Detection Rate increased from 52% in 2004 to 60% in 2005; over 4,000 medical professionals have been trained to better diagnose and treat TB. Advocacy initiatives included eight water for life and handwashing outreach campaigns resulting in over 114 media stories, as well as the establishment of eight multistakeholder water forums which mobilized local governments, community organizations, and the private sector to advocate for higher quality services. Ninety-eight thousand vulnerable people received non-emergency Title II food assistance in four provinces. Over \$38 million in government, donor, and private resources was leveraged to advance program objectives in HIV/AIDS prevention, water and sanitation services delivery, and watershed rehabilitation.

US Financing in Thousands of Dollars

Indonesia

497-019 Basic Human Services	CSH	DA	DCA
Through September 30, 2004			
Obligations	25,318	8,226	0
Expenditures	16,568	3,248	0
Unliquidated	8,750	4,978	0
Fiscal Year 2005			
Obligations	37,100	6,461	0
Expenditures	3,767	746	0
Through September 30, 2005			
Obligations	62,418	14,687	0
Expenditures	20,335	3,994	0
Unliquidated	42,083	10,693	0
Prior Year Unobligated Funds			
Obligations	0	0	220
Planned Fiscal Year 2006 NOA			
Obligations	28,017	5,354	0
Total Planned Fiscal Year 2006			
Obligations	28,017	5,354	220
Proposed Fiscal Year 2007 NOA			
Obligations	27,507	5,212	0
Future Obligations	34,099	5,031	0
Est. Total Cost	152,041	30,284	220