

Data Sheet

USAID Mission:	Uganda
Program Title:	Human Capacity
Pillar:	Global Health
Strategic Objective:	617-008
Status:	Continuing
Planned FY 2005 Obligation:	\$11,960,000 CSH; \$6,185,000 DA
Prior Year Unobligated:	\$0
Proposed FY 2006 Obligation:	\$11,160,000 CSH; \$5,597,000 DA
Year of Initial Obligation:	2002
Estimated Year of Final Obligation:	2007

Summary: USAID supports Uganda's goal to reduce mass poverty through investments in health, HIV/AIDS and primary education including the provision of essential commodities, training, human resources, and technical assistance. The program objectives are to facilitate the effective use of quality health, HIV/AIDS and primary education services among low income Ugandans; to increase Uganda's capacity to sustain the delivery of quality health, HIV/AIDS and education services; and to strengthen the policy environment and social support for the delivery and use of effective services.

Inputs, Outputs, Activities:

FY 2005 Program: Improve the Quality of Basic Education (\$6,185,000 DA). USAID is improving the quality of basic education through funding for in-service and pre-service teacher training (through support from the Africa Education Initiative), supportive supervision, technical assistance for curriculum and materials development, and the provision of supplies and equipment to support teacher training. USAID will also strengthen school management in order to improve the quality of education through training and funding to school management committees, support for monitoring the quality of education services and management training for head teachers. USAID will support special programs in early childhood education through the Ministry of Education and through the Madrasa network of Muslim schools. USAID will also provide scholarships to support secondary education for girls in war-affected northern Uganda. Principal contractors/grantees: Creative Associates; Academy for Educational Development; Aga Khan Foundation; Save the Children; the Education Development Centre; and John Snow, Inc. (all prime).

Prevent and control infectious diseases of major importance (\$4,900,000 CSH). USAID will provide technical support, training and funding for supervision to extend access to tuberculosis (TB) treatment through community outreach workers linked to health clinics. In addition, USAID will provide training and technical assistance to strengthen the national TB reference laboratory and district-level laboratory facilities. USAID also will support the Ministry of Health to implement its national malaria program including home-based treatment of malaria by community outreach workers; intermittent preventive treatment of malaria for pregnant women in antenatal care service sites; and the promotion, sale and distribution of insecticide treated mosquito nets (ITNs) through the commercial sector. Principal contractors: John Snow, Inc.; Management Sciences for Health; Population Services International; Johns Hopkins University; and Academy for Educational Development (all prime).

Improve Child Survival, Health and Nutrition (\$2,260,000 CSH). USAID will support the Ministry of Health both at the national and district level to implement critical child survival interventions including immunizations, early treatment of childhood diseases, the implementation of community-based nutrition interventions and the provision of vitamins to children through food fortification and supplements. Support will go to district-level health departments and non-governmental organizations for training, supervision and commodity support to carry out child health days in the community and also to implement the critical child health interventions mentioned above through community outreach and health clinics. In addition, support will be provided for health insurance schemes, cost studies and policy development to improve the efficiency of the delivery of these child health services. Principal contractors include John Snow, Inc.; Africare; Abt Associates; and the International Science and Technology Institute (all prime).

Reduce transmission and impact of HIV/AIDS. See State Department Congressional Budget Justification (CBJ), Global AIDS Initiative section, for an HIV/AIDS program discussion.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$4,800,000 CSH). USAID will support programs that focus on the policy environment and social support for family planning. In addition, USAID programs will improve the quality of and access to family planning services through the provision of contraceptives and support for their distribution to both government health clinics and by social marketing through commercial outlets. USAID will also support training and the development and distribution of job aids for health workers, as well as mass communication through radio and print media to educate the public about family planning and reproductive health. Principal contractors: Population Services International; Engender Health; and the Futures Group (all prime).

FY 2006 Program: Improve the Quality of Basic Education (\$5,597,000 DA). If there is peace in northern Uganda, USAID would expand this program to support teacher training, recruitment and placement of additional teachers, and classroom construction in the post conflict districts. Otherwise activities will be the same as above. Implementers to be determined.

Prevent and control infectious diseases of major importance (\$3,800,000 CSH). See the State Department CBJ, Global AIDS Initiative section, for a discussion of HIV/AIDS programs. USAID will continue to support the scale-up of malaria and TB services in Uganda to increase coverage and use of ITNs and home-based treatment of malaria and TB. Same implementers as above.

Improve Child Survival, Health and Nutrition (\$2,560,000 CSH). If there is a peace settlement in Northern Uganda, this program would seek additional resources to expand access to immunization services and treatment of childhood illnesses to the post-conflict districts in Northern Uganda. Otherwise activities remain the same as above, as do the implementers.

Reduce transmission and impact of HIV/AIDS. See State Department Congressional Budget Justification (CBJ), Global AIDS Initiative section, for an HIV/AIDS program discussion.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behaviors (\$4,800,000 CSH). The activities and implementing partners may be reduced. All family planning assistance agreements will incorporate clauses that implement the President's directive restoring the Mexico City policy.

Performance and Results: USAID reached 22,613 people with anti-retroviral (ARV) therapy, and supported 268,607 people who received voluntary counseling and testing services. The number of insecticide treated mosquito nets (ITNs) sold or distributed in Uganda in 2004 more than doubled to over 400,000, greatly increasing the proportion of rural households utilizing at least one net. Treatment of young children with malaria within 24 hours greatly increased in targeted districts implementing the home-based malaria treatment program, resulting in a reduction by over 50% of severe anemia in children caused by malaria. Through USAID support, 18,000 primary school teachers were trained in FY 2004, and there was a drop in the student to teacher ratio from 56 in 2003 to 54 in 2004 in government schools assisted by USAID. In addition, the social marketing program reported that condom sales increased 200% from 2003 to 2004, and that sales of hormonal contraceptives have grown by 76%. Despite limited resources for malaria treatment, tremendous progress is being made through leveraging the private sector for the distribution of ITNs and utilizing low-cost, effective approaches to treat rural communities.

By the end of the current USAID program, there will be decreased school drop-out rates, improved quality of education as indicated by lower student to teacher ratios and better test performance. There will be marked improvement in the use of health prevention services such as immunization and family planning; increased births attended by skilled personnel; increased numbers of individuals requesting an HIV test and receiving timely results; increased utilization of services for the prevention of mother to child transmission and ARV therapy; increased numbers of youth adopting practices protective of their sexual and reproductive health; and increased participation of communities, NGOs, faith-based organizations and the private sector in the delivery and management of social services.

US Financing in Thousands of Dollars

Uganda

617-008 Human Capacity	CSH	DA	ESF
Through September 30, 2003			
Obligations	69,999	16,611	0
Expenditures	21,785	5,372	0
Unliquidated	48,214	11,239	0
Fiscal Year 2004			
Obligations	34,855	7,483	750
Expenditures	34,303	5,880	0
Through September 30, 2004			
Obligations	104,854	24,094	750
Expenditures	56,088	11,252	0
Unliquidated	48,766	12,842	750
Prior Year Unobligated Funds			
Obligations	0	0	0
Planned Fiscal Year 2005 NOA			
Obligations	11,960	6,185	0
Total Planned Fiscal Year 2005			
Obligations	11,960	6,185	0
Proposed Fiscal Year 2006 NOA			
Obligations	11,160	5,597	0
Future Obligations	34,294	4,446	0
Est. Total Cost	162,268	40,322	750