

Data Sheet

USAID Mission:	South Africa
Program Title:	HIV/AIDS and Primary Health Care
Pillar:	Global Health
Strategic Objective:	674-008
Status:	Continuing
Planned FY 2005 Obligation:	\$5,328,000 CSH
Prior Year Unobligated:	\$0
Proposed FY 2006 Obligation:	\$5,178,000 CSH
Year of Initial Obligation:	1995
Estimated Year of Final Obligation:	2007

Summary: USAID works with South Africa to reduce the impact of HIV/AIDS and improve primary health care services for all. With an estimated 5.6 million HIV positive South Africans, the burden on the public health system and communities looms large. Combining targeted technical assistance with pilot interventions and training, the USAID program assists South Africa to use its own considerable resources more effectively to provide increased and improved health services to its majority population. As HIV prevalence has increased, USAID has modified its program focus. The program has shifted from a primary health care orientation to concentration on HIV/AIDS, with interventions in improving child health, youth and maternal services for family planning, voluntary counseling and testing, ante-natal care, tuberculosis identification and treatment, prevention of mother to child transmission of HIV (PMTCT), and anti-retroviral therapy at the local level.

Inputs, Outputs, Activities:

FY 2005 Program: Improve Child Survival, Health and Nutrition (\$3,328,000 CSH). USAID continues to provide technical assistance to the South African Department of Health at the national, provincial, and district levels to develop and implement improved primary health care management and service delivery and to strengthen HIV/AIDS prevention interventions. In FY 2005, USAID is assisting five districts to implement service-level improvements in primary health care. At the district level, USAID supports 20 youth-oriented facilities and provides technical assistance to 80 public sector facilities to improve the quality of maternal and child health and family planning services. Additional training for 500 nurses and other health support staff in infection prevention, counseling, wellness options, nutrition, and safe birthing practices is improving the availability of quality health care services. USAID technical assistance is resulting in strengthened management, drug logistics, training, and information systems in all nine provinces. All family planning agreements will incorporate clauses that implement the President's directive reinstating the Mexico City policy. Principal contractors and grantees: Management Sciences for Health (prime), and University Research Corporation and Health Systems Trust (subs).

Reduce Transmission and Impact of HIV/AIDS. See the State Department Congressional Budget Justification, Global HIV/AIDS Initiative section, for a discussion of this program.

Prevent and Control Infectious Diseases of Major Importance (\$2,000,000 CSH). South Africa ranks among the world's top ten countries in the number of tuberculosis (TB) cases. USAID is helping South Africa to improve the diagnosis and management of TB using technical assistance, training, and strategic planning, and is integrating best practices into the primary health care delivery system. USAID funds programs for the diagnosis and treatment of TB in at least 20 facilities in 10 districts with high TB rates. To reduce stigma and promote early treatment-seeking behavior, USAID is developing a public education strategy using mass and local media and is working at the provincial level to promote integration of TB and HIV/AIDS services. USAID-funded grants assist five nongovernmental organizations (NGOs) to carry out advocacy and intensive TB service delivery activities in their communities. Additional grants to NGOs in five provinces focus on integrating TB and HIV services. Finally, USAID is initiating three research activities designed to address constraints to TB case detection and treatment adherence. Principal contractors and grantees: Management Sciences for Health (prime) and University Research Corporation, Health Systems Trust, and Tuberculosis Coalition for Technical Assistance (subs).

FY 2006 Program: Improve Child Survival, Health and Nutrition (\$3,328,000 CSH). USAID's efforts to strengthen the primary health care delivery system will continue to focus on integrating all services at the clinic level and on delivering a comprehensive PMTCT package at the district level. USAID also will support at least five mentoring initiatives where stronger districts/facilities will provide technical support to weaker districts. USAID plans to support training of health care and community level workers, and will support 10 district-level facilities that promote integration of youth and adolescent reproductive health services into primary health care. All family planning agreements will incorporate clauses that implement the President's directive reinstating the Mexico City policy. Principal contractors and grantees: Management Sciences for Health (prime), and University Research Corporation and Health Systems Trust (subs).

Reduce Transmission and Impact of HIV/AIDS. See the State Department Congressional Budget Justification, Global HIV/AIDS initiative section, for a discussion of this program.

Prevent and Control Infectious Diseases of Major Importance (\$1,850,000 CSH). USAID will continue to support initiatives to improve the diagnosis and treatment of TB in high prevalence areas, and to increase the capacity of the South African government to manage TB programs. USAID technical assistance activities will expand to a total of 20 districts. In addition, USAID will work closely with universities and research institutions to develop and test innovative models for involving the private sector, including traditional providers and employers, to expand access to TB prevention and control services. USAID also will fund at least five local NGOs in high prevalence areas to promote early detection and treatment of TB. To reduce treatment interruption rates and improve treatment adherence, USAID will continue to strengthen linkages between health centers and community-based directly observed treatment short course (DOTS) supporters. Principal contractors and grantees: Management Sciences for Health (prime) and University Research Corporation, Health Systems Trust, and Tuberculosis Coalition for Technical Assistance (subs).

All family planning assistance agreements will incorporate clauses that implement the President's directive restoring the Mexico City policy.

Performance and Results: USAID has played a crucial role in strengthening the health care system in South Africa, particularly in the Eastern Cape Province, one of South Africa's poorest regions. As a result of USAID assistance in this province, primary health care services are now available in all clinics, more than 600 well functioning hospital and clinic committees have been established, primary health care providers and district managers have guidelines to manage integrated primary health care facilities, and more than half of the Eastern Cape's provincial budget is now devoted to primary health care. Many improvements to the health care system piloted in the Eastern Cape have been adopted at the national level and are being implemented in all nine provinces. In addition, the USAID-funded program has supported the training of 10,000 health care workers in all nine provinces in managing opportunistic infections.

USAID has provided regular care and support to more than 63,000 orphans and vulnerable children in four provinces through a local NGO and a faith-based organization. Support for quality assurance and the training of 3,245 health workers in quality issues have resulted in the development and use of improved assessment tools, job aids, field guides for health care workers, and quality assurance systems in 106 hospitals, 53 community health centers, and 944 clinics in five provinces. Through support to three TB organizations working in eight communities across four provinces, USAID trained 371 DOTS supporters and reached 8,106 people with TB prevention and treatment messages. A total of 461 patients completed their treatment through this program. By 2007, USAID will have helped increase the access and quality of integrated primary health care services for more than 50% of the South African population.

US Financing in Thousands of Dollars

South Africa

674-008 HIV/AIDS and Primary Health Care	CSH	DA	DFA	ESF
Through September 30, 2003				
Obligations	82,180	23,697	8,400	939
Expenditures	47,502	23,506	8,372	0
Unliquidated	34,678	191	28	939
Fiscal Year 2004				
Obligations	33,428	0	0	1,200
Expenditures	16,631	88	1	0
Through September 30, 2004				
Obligations	115,608	23,697	8,400	2,139
Expenditures	64,133	23,594	8,373	0
Unliquidated	51,475	103	27	2,139
Prior Year Unobligated Funds				
Obligations	0	0	0	0
Planned Fiscal Year 2005 NOA				
Obligations	5,328	0	0	0
Total Planned Fiscal Year 2005				
Obligations	5,328	0	0	0
Proposed Fiscal Year 2006 NOA				
Obligations	5,178	0	0	0
Future Obligations	93,144	0	0	0
Est. Total Cost	219,258	23,697	8,400	2,139