

Data Sheet

USAID Mission:	Philippines
Program Title:	Family Planning and Health
Pillar:	Global Health
Strategic Objective:	492-003
Status:	Continuing
Planned FY 2005 Obligation:	\$26,800,000 CSH
Prior Year Unobligated:	\$0
Proposed FY 2006 Obligation:	\$21,400,000 CSH
Year of Initial Obligation:	1994
Estimated Year of Final Obligation:	2009

Summary: USAID's family planning and health objective aims to improve health and nutritional status, particularly of women and children, and help Filipino parents achieve their desired family size. Activities will fund technical assistance to improve the capacity of local government units (LGUs) to deliver family planning services, expand tuberculosis (TB) diagnosis and treatment, and improve other vital health services, particularly for the poor. This will be done by mobilizing business support and involvement in TB prevention and treatment, food fortification, and family planning, including encouraging the commercial sector to significantly increase its share of the overall contraceptive market. To increase the social acceptability of family planning in the Philippines, the program will mobilize "champions" who will inform the public about the value of family planning and conduct communication campaigns that will promote the use of modern contraceptives. The program also has specialized activities to improve the dramatically poor health indicators in the conflict-affected areas of Mindanao and other marginalized areas of the country.

Inputs, Outputs, Activities:

FY 2005 Program: Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$15,500,000 CSH). USAID will provide technical assistance and training to local government health practitioners and service providers in as many as 537 cities and municipalities. USAID will assist nationally recognized businesses and private sector organizations to advocate for improved policies for private sector provision of contraceptives. USAID will also work with private providers and pharmaceutical organizations to increase the availability of affordable commercial family planning commodities. USAID will continue to use the Development Credit Authority credit guarantee mechanism to improve and/or expand existing midwife clinics and facilitate the generation of commercial financing for the establishment of new midwife clinics. USAID will conduct multi-media communication campaigns to promote the use of modern contraceptives; develop and train family planning champions and networks for family planning communications; work with medical, nursing, midwifery, and pharmacy school associations to enhance the teaching of voluntary family planning concepts; and engage with the various board examiners to promote the inclusion of family planning questions in the licensure examinations. Principal contractors and grantees include Management Sciences for Health (MSH), Chemonics International, and the Academy for Educational Development.

Improve Child Survival, Health and Nutrition (\$3,220,000 CSH). USAID will implement Vitamin A supplementation activities and immunization campaigns in the conflict-affected areas of Mindanao. The principal grantee is Helen Keller International. In addition, USAID will provide technical assistance to increase the number of micronutrient fortified foods and their consumption.

Prevent and Control Infectious Diseases of Major Importance (\$3,415,000 CSH). To increase the availability of TB diagnosis and treatment by the public sector, USAID will provide technical assistance and training to local government health practitioners and service providers in as many as 537 cities and municipalities. USAID will also provide technical assistance and information to private providers to improve diagnosis and treatment of TB. Principal contractors are MSH and Chemonics International.

Reduce Transmission and Impact of HIV/AIDS (\$1,080,000 CSH). USAID will enhance behavior change

efforts focused on the groups most at risk for HIV/AIDS and continue to provide technical assistance to maintain the world class surveillance system established under the program. The principal contractor is MSH.

Build Health Systems Capacity (\$3,585,000 CSH). USAID will continue to provide technical assistance to help implement the National Health Insurance Program's new and improved benefit package developed in FY 2003. The package now includes family planning and TB treatment as a health insurance benefit; revision of national policies to allow greater access to family planning, particularly for the poor; and educating insurance plan holders on new and underutilized benefits related to family planning. USAID will assist local groups to support changes in government policies that promote self reliance in contraceptives. The principal contractor is MSH.

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

FY 2006 Program: Reduce Unintended Pregnancy and Improve Health Reproductive Behavior (\$11,265,000 CSH). USAID will expand program activities to include an additional 215 LGUs nationwide and will continue to improve the policy environment for the provision of family planning and health services. USAID will increase marketing efforts and technical assistance to help the private sector increase its sales of contraceptives and support the nationwide expansion of an accreditation service for private providers of contraceptives that will build consumer confidence in these services and keep them competitive. USAID will continue to support communications activities, including national and local campaigns, and will identify and promote additional family planning champions. Implementers are the same as above.

Improve Child Survival, Health, and Nutrition (\$3,420,000 CSH). USAID will provide technical assistance to further increase the number of micronutrient fortified foods and their consumption as well as to ensure enforcement of the law on food fortification. Implementers are the same as above

Prevent and Control Infectious Diseases of Major Importance (\$2,575,000 CSH). USAID will increase technical assistance to help the private sector expand TB services to 25 cities. Implementers are the same as above. Implementers are the same as above.

Reduce Transmission and Impact of HIV/AIDS (\$1,565,000 CSH). USAID will facilitate planning for LGUs to support HIV/AIDS prevention education and other services using local funds. USAID will help strengthen NGO capacity to reduce the threat of HIV/AIDS among at-risk groups and support policy, financing, and delivery of prevention activities. Implementers are the same as above.

Build Health Systems Capacity (\$2,575,000 CSH). USAID will continue to provide technical assistance to expand implementation of the improved benefits package under the National Health Insurance Program to cover additional LGUs and beneficiaries. USAID will continue to assist local groups to support changes in government policies that promote self-reliance in contraceptives. Implementers are the same as above.

Performance and Results: Program outputs are on track and are contributing to expected outcomes. Significant milestones have been achieved in public and private sector delivery of family planning and TB services. There is increased awareness and acceptance of family planning and an intensified popular debate on the virtues of a strong population management program, which is championed by the business community, academics, and politicians. According to the 2003 National Demographic and Health Survey, the contraceptive prevalence rate has increased by 1.5% (from 33.4% to 34.9%) in the past year. Maternal health and child survival program activities have contributed to the significant reduction in under-five mortality, and the government has pledged to ensure the enforcement of the law on food fortification. Efforts to move the country towards contraceptive self-reliance are well in place and health systems and health outcomes are improving in the conflict-affected areas of Mindanao.

US Financing in Thousands of Dollars

Philippines

492-003 Family Planning and Health	CSH	DA	DCA	ESF	MAI
Through September 30, 2003					
Obligations	52,281	155,602	7	4,000	1,800
Expenditures	19,923	150,929	0	1,187	1,581
Unliquidated	32,358	4,673	7	2,813	219
Fiscal Year 2004					
Obligations	28,850	0	0	0	0
Expenditures	14,550	3,100	0	2,227	117
Through September 30, 2004					
Obligations	81,131	155,602	7	4,000	1,800
Expenditures	34,473	154,029	0	3,414	1,698
Unliquidated	46,658	1,573	7	586	102
Prior Year Unobligated Funds					
Obligations	0	0	0	0	0
Planned Fiscal Year 2005 NOA					
Obligations	26,800	0	0	0	0
Total Planned Fiscal Year 2005					
Obligations	26,800	0	0	0	0
Proposed Fiscal Year 2006 NOA					
Obligations	21,400	0	0	0	0
Future Obligations	75,000	0	0	0	0
Est. Total Cost	204,331	155,602	7	4,000	1,800