Data Sheet

USAID Mission:

Program Title:

Basic Health
Clabel Health

Pillar:Global HealthStrategic Objective:391-007Status:Continuing

Planned FY 2005 Obligation: \$21,000,000 CSH; \$29,700,000 ESF

Prior Year Unobligated: \$21,000,000 CSH; \$29,700,000 ESF

Proposed FY 2006 Obligation:\$20,500,000 CSH; \$29,700,000 ESFYear of Initial Obligation:2003

Estimated Year of Final Obligation: 2007

Summary: Pakistan lags behind its South Asia neighbors in almost all key health areas: maternal and infant mortality, meeting family needs for safe, affordable family planning methods, and control of infectious diseases such as polio, tuberculosis, hepatitis, including a concentrated HIV/AIDS epidemic in some high-risk groups. In response to overwhelming need and weak public institutions, USAID is working with government and the private sector to increase the quality and availability of basic and reproductive healthcare services and to promote appropriate health behaviors and use of health services. In FY 2004, USAID began programs that will improve health system capacity to manage human and financial resources at the provincial, district and community level, reduce the spread and impact of major infectious diseases, and improve maternal, newborn and child health.

Inputs, Outputs, Activities:

FY 2005 Program: Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$11,000,000 CSH). USAID will promote social marketing of family planning and other family health services and products. Under the Social marketing program, thousands of pharmacists, physicians, nurse/mid-wives, and other health care providers will be trained in up-to-date procedures and safety precautions, and communication experts will prepare and disseminate radio, television, and cassettes for public education. Principal grantees: Key Social Marketing and GreenStar.

Build Health Systems Capacity (\$3,800,000 CSH). Technical assistance and training will build capacity of district health teams to manage health programs. This initiative directly supports devolution, national objectives to improve health sector performance, and will be used for program support and monitoring and evaluation. With these funds, USAID plans to also commission a national Demographic and Health Survey for Pakistan. Principal Grantee: Technical Assistance Management Agency.

Improve Child Survival, Health, and Nutrition (\$1,800,000 CSH; \$15,700,000 ESF). Technical training and assistance, facility renovation, and service upgrades to improve mother and child birth outcomes and increase child survival. The Maternal and Newborn Health Initiative (MNHI) will focus on hospital and community activities in four districts, and prepare the way for extending the program to other districts in FY 2006 and beyond. Principal Contractor: John Snow International.

Prevent and Control Infectious Diseases of Major Importance (\$4,400,000 CSH; \$14,000,000 ESF). The concentrated outbreak of HIV/AIDS revealed in a groundbreaking study released in late FY 2004, highlights the importance of an immediate strategic response. CSH funds of \$0.9 million are programmed for prevention of HIV/AIDS among high-risk groups and for care and treatment of persons living with AIDS. Also, the campaign to eradicate polio has requested \$2.0 million CSH for national immunization days and continued surveillance. CSH funds of \$1.5 million will be dedicated to fight TB through the extension of DOTS (Directly Observed Treatment Strategy) to the remaining districts of the country. A new program to increase surveillance and response for infectious diseases (e.g. hepatitis, tuberculosis) is planned for startup in FY 2005, as is a new water and sanitation activity to provide safe drinking water through community-run systems in thousands of villages throughout the country. Principal Grantee and Contractor: Family Health International, UN World Health Organization and a grantee to be selected.

FY 2006 Program: Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$9,900,000 CSH). USAID will continue to promote social marketing of family planning and other family health services and products. In FY 2006, this program will extend social marketing into new target areas and continue the transition toward making available a wider array of health services for the family. Principal grantees: Key Social Marketing and GreenStar.

Build Health Systems Capacity (\$4,300,000 CSH). Technical assistance and training will continue to strengthen management of health programs in district and provincial health departments. USAID will also fund program support, monitoring, and evaluation and a national health survey to help monitor program progress and results. Principal Grantee: Technical Assistance Management Agency.

Improve Child Survival, Health, and Nutrition (\$2,100,000 CSH; \$15,400,000 ESF). Technical assistance, training, medical equipment, facility upgrades, and health education will improve mother and newborn care as well as family planning and child health services in additional districts in Pakistan. Principal contractor: John Snow International.

Prevent and Control Infectious Diseases of Major Importance (\$4,200,000 CSH; \$14,300,000 ESF). Technical assistance and training for local NGOs will enable them to extend HIV/AIDS awareness and create behavior change in reducing HIV transmission in the high-risk target group. USAID will continue the infectious disease control initiative which, in FY2006, will focus on cost-effective interventions to reduce disease transmission in health clinics, hospitals, and laboratories. USAID will continue its initiative to provide safe drinking water in thousands of villages. Principal Contractor/grantee: To be selected.

Performance and Results: Social marketing sales of contraceptives and health products accelerated in FY2004, surpassing performance targets. Couple-years of protection sold by USAID-funded organizations grew to 2.2 million, up from 1.9 million a year earlier. Today, nearly one in three couples using family planning are served by the Social Marketing Organizations supported largely by USAID. Progress was also made toward the eradication of polio and in extending improved tuberculosis case management throughout the country. Polio and TB surveillance systems were strengthened and the performance indicators showed steady improvement.

As the evidence accumulated during FY 2004 to show that a concentrated HIV epidemic is emerging, USAID and its partners refocused the HIV/AIDS program to focus on most at-risk groups (e.g., injecting drug users), and six local NGOs launched HIV/AIDS prevention activities with USAID support. A new, multi-donor supported intervention began this past year to provide technical assistance aimed at improving district and provincial management of health programs: the contractor deployed more than 68 consultants to tackle key management and technical shortcomings in ten target districts. Ten district hospitals, representing all four provinces, were also selected for intensive health care service and facilities upgrades for mothers, newborns and infants.

US Financing in Thousands of Dollars

Pakistan

391-007 Basic Health	сѕн	ESF
Through September 30, 2003		
Obligations	20,223	0
Expenditures	931	0
Unliquidated	19,292	0
Fiscal Year 2004		
Obligations	25,600	0
Expenditures	9,709	0
Through September 30, 2004		
Obligations	45,823	0
Expenditures	10,640	0
Unliquidated	35,183	0
Prior Year Unobligated Funds		
Obligations	0	C
Planned Fiscal Year 2005 NOA		
Obligations	21,000	29,700
Total Planned Fiscal Year 2005		
Obligations	21,000	29,700
Proposed Fiscal Year 2006 NOA		
Obligations	20,500	29,700
Future Obligations	0	0
Est. Total Cost	87,323	59,400