

Data Sheet

USAID Mission:	Indonesia
Program Title:	Basic Human Services
Pillar:	Global Health
Strategic Objective:	497-019
Status:	New in FY 2005
Planned FY 2005 Obligation:	\$37,100,000 CSH; \$3,848,000 DA
Prior Year Unobligated:	\$0
Proposed FY 2006 Obligation:	\$27,540,000 CSH; \$11,511,000 DA
Year of Initial Obligation:	2005
Estimated Year of Final Obligation:	2008

Summary: USAID/Indonesia's Basic Human Services objective integrates health, nutrition, and the environment. The program will fund training to advocate for improved local government services including health and hygiene of vulnerable women and children; nutrition; increased access to clean water; family planning/reproductive health; health systems; infectious disease; HIV/AIDS among at-risk populations; and malaria, tuberculosis, and polio surveillance capabilities.

Inputs, Outputs, Activities:

FY 2005 Program: Improve Child Survival, Health and Nutrition (\$3,200,000 CSH). The program will provide technical assistance to reduce infant/child mortality; promote breastfeeding; improve health-seeking behavior; and improve hygiene to combat diarrheal diseases.

Improve Maternal Health and Nutrition (\$4,500,000 CSH). The program will train village midwives resulting in improved delivery skills and neonatal health practices.

Build Health Systems' Capacity (\$2,000,000 CSH). The program will promote system-wide improvements in the health sector. Principal contractors or grantees for the above components will be determined upon award of a new five-year cooperative agreement.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$7,500,000 CSH). In anticipation of graduation, family planning activities will continue to be phased out. By year-end 2006, 70% of districts are expected to commit to supporting family planning as part of their health budgets. All family planning agreements will incorporate clauses that implement the President's directive restoring the Mexico City Policy. Principal contractors or grantees include: JHPIEGO Corporation - John Hopkins Program Providing Reproductive Health (prime), Johns Hopkins University (prime), Indonesian Midwives Association (sub); Society of Obstetricians/Gynecologists (sub).

Reduce Transmission and Impact of HIV/AIDS (\$10,400,000 CSH). The program will scale-up HIV/AIDS prevention, care, and support interventions; expand HIV/AIDS diagnosis and treatment capacity; develop voluntary counseling and testing sites; and strengthen surveillance systems in 10 priority provinces. Principal contractors or grantees are to be determined.

Prevent and Control Infectious Diseases of Major Importance (\$4,700,000 CSH). The program will expand TB and malaria controls; strengthen implementation of the Directly Observed Treatment Short-Course strategy in cooperation with the Global Fund's efforts and investments by other donors; provide technical assistance in surveillance and training to eradicate polio. Principal contractors or grantees (all primes) include: Royal Netherlands Tuberculosis Association, World Health Organization, and an organization to be determined.

Improve Access to Clean Water and Sanitation: (\$3,300,000 CSH, \$1,424,000 DA). USAID will stabilize watersheds through reforestation; provide reliable, quality water to urban populations; build capacity to improve service to the poor through training in operations, financial management, and infrastructure development. A Development Credit Authority (DCA) loan guarantee for production and marketing of home chlorination kits, will provide affordable, safe drinking water for low-income families, reducing diarrhea, especially in children under five, in support of the Presidential Initiative, "Water for the Poor."

Implementing partners are Development Alternatives, Inc, International Resources Group, U.S. Department of the Interior, Nature Conservancy, and Worldwide Fund for Nature, and others.

Increase Food Security of Vulnerable Populations: (\$1,500,000 CSH, \$2,424,000 DA). The program will improve maternal and child survival by addressing causes of malnutrition. CSH and DA resources will complement the P.L. 480 Title II resources to support maternal-child feeding and food-for-work activities. These efforts will increase unserved and underserved communities' access to and utilization of key basic human services (health, water, nutrition). Principal grantees are Mercy Corps, World Vision, Catholic Relief Services, CARE and Save the Children.

FY 2006 Program: Improve Child Survival, Health and Nutrition (\$5,100,000 CSH). USAID will invest in improving local government, non-governmental organizations, and private sector capacity to deliver quality health services.

Improve Maternal Health and Nutrition (\$5,000,000 CSH). USAID will continue this program.

Build Health Systems' Capacity (\$900,000 CSH). Efforts in building sustainable district level capacity will expand in scope.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$4,940,000 CSH). USAID plans to integrate its reproductive health program, while promoting quality of care.

Reduce Transmission and Impact of HIV/AIDS (\$9,000,000 CSH). USAID will continue investing in behavior change and surveillance activities.

Prevent and Control Infectious Diseases of Major Importance (\$2,600,000 CSH). USAID plans to improve malaria control, TB diagnosis, and treatment programs.

Improve Access to Clean Water and Sanitation: (\$7,451,000 DA). USAID will expand technical assistance and training to encourage additional investment through the DCA.

Increase Food Security of Vulnerable Populations: (\$4,060,000 DA). Food-for-work and training activities will cover additional communities. All implementing partners for all components are the same as above.

Performance and Results: USAID contributed to the following results. Essential minimum health service standards were established and are being used by district health officers to plan, manage, budget, and improve service quality. Quality of care has improved, e.g. infection prevention (19.6% compliance in 2002 to 65.1% in 2004); number of births attended by a trained midwife increased to 48% of births from 31% in 1997; 1,500,000 hectares of forest concessions are under third-party verification of reduced-impact logging and legal logging practices. The Orangutan Habitat Protection program protected an additional 305,000 hectares of prime orangutan habitat in Berau, East Kalimantan. In Jakarta, nearly 1,000 small business groups grew from food-for-training programs, providing sustainable income generation opportunities to nearly 20,000 program graduates, primarily women. Successful HIV/AIDS behavior change interventions were organized for all major at-risk groups, reaching almost 600,000 people. More than 10 million person-days of employment and training to unemployed or underemployed persons were provided. As a result, low income families were able to feed themselves, pay off debt, and learn new job skills. USAID was one of the first responders after the Australian Embassy bombing in September, providing \$100,000 to international and local organizations to aid survivors.

US Financing in Thousands of Dollars

Indonesia

	CSH	DA
497-019 Basic Human Services		
Through September 30, 2003		
Obligations	0	0
Expenditures	0	0
Unliquidated	0	0
Fiscal Year 2004		
Obligations	0	0
Expenditures	0	0
Through September 30, 2004		
Obligations	0	0
Expenditures	0	0
Unliquidated	0	0
Prior Year Unobligated Funds		
Obligations	0	0
Planned Fiscal Year 2005 NOA		
Obligations	37,100	3,848
Total Planned Fiscal Year 2005		
Obligations	37,100	3,848
Proposed Fiscal Year 2006 NOA		
Obligations	27,540	11,511
Future Obligations	102,200	12,927
Est. Total Cost	166,840	28,286