## **Data Sheet**

**USAID Mission:** Haiti **Program Title:** Health Systems Pillar: Global Health Strategic Objective: 521-003 Status: Continuing Planned FY 2005 Obligation: \$20,000,000 CSH **Prior Year Unobligated:** Proposed FY 2006 Obligation: \$19,320,000 CSH Year of Initial Obligation: 1995 **Estimated Year of Final Obligation:** 2006

**Summary:** USAID's health program in Haiti delivers a minimum health package composed of the following services: child immunization; respiratory infection detection and treatment; immunizations for pregnant women; nutrition, food supplementation, and growth monitoring; family planning (natural and modern); maternal health care; prevention and treatment of HIV/AIDS (including mother-to-child transmission prevention) and other sexually transmitted diseases; tuberculosis detection and treatment; reinforcement of policy norms and procedures; health information systems; and advocacy. Beginning this year, USAID will also strengthen the management and governance capacity of the public health system, with emphasis on decentralized capacity to manage a coordinated program with public and private partners. Proactive coordination with other funding and technical resources, particularly the Haitian Diaspora and the U.S. military, to broker matches with health sector needs will be a central theme in FY 2005. USAID has been a leader in this area and will increase its coordination role.

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

## Inputs, Outputs, Activities:

FY 2005 Program: Improve Child Survival, Health and Nutrition (\$9,920,000 CSH). USAID will continue to fund technical assistance and operational support for 28 local nongovernmental organizations (NGOs) for provision of a package of child survival and related primary care services. In addition, comprehensive child health services will be strengthened throughout Haiti's Central Plateau. USAID-funded technical assistance to the Ministry of Health (MOH) will strengthen its management and program monitoring capacity at both the central and departmental levels. Its emphasis on decentralized planning and coordination to leverage results from other donors. More than one third of the Haitian population (three million people) will benefit from these interventions. USAID will increase support to the MOH micronutrient supplement program, and increase vitamin A supplement coverage for children under the age of five to 80% coverage. Funds for vulnerable children will improve services and policies for child protection, including alternatives to orphanages. Principal contractors are Management Sciences for Health (MSH), Partners in Health, and the International Science & Technology Institute.

The P.L. 480 Title II program will focus on increasing the quality of maternal child health and nutrition services at both community rally posts and health facilities by providing training sessions for traditional birth attendants, management of childhood illnesses, breastfeeding, and complementary feeding programs for malnourished children. Mobile clinics will provide prenatal services in remote areas. Grantees include CARE, World Vision International, Catholic Relief Services, and Save the Children.

Support Family Planning Programs (\$6,700,000 CSH). USAID will reinforce the capacity of institutions nationwide to deliver clinical family planning methods, including effective logistics

systems, technical leadership, and improved quality of care in public institutions. Natural family planning counseling will be emphasized in the USAID-supported network of 28 partner NGOs and the public sector. As a result, USAID will increase access to and use of modern and natural family planning services and related maternal health care and strengthen the quality of essential maternal and neonatal care. Reproductive health services will be closely integrated with HIV-related activities under the President's Emergency Plan for HIV/AIDS Relief (PEPFAR). Principal contractors are Johns Hopkins Program for International Education in Gynecology and Obstetrics, the Futures Group, MSH, and Population Services International.

Prevent and Control Infectious Diseases of Major Importance (\$3,380,000 CSH). USAID-funded technical assistance to Haiti's national tuberculosis (TB) program will reinforce case finding, screening, and quality of care, with emphasis on integrating TB with HIV screening, and referral for related services. This program is closely coordinated with HIV-TB integration activities funded under the PEPFAR and by the Global Fund for AIDS, Tuberculosis, and Malaria (GFATM). USAID will increase its technical leadership role in Haiti's national malaria control program, beginning with a critical assessment of the disease burden and program effectiveness. Faith-based organizations will continue to be major partners in infectious disease prevention and treatment efforts nationwide. USAID will continue to fund health surveillance activities including demographic health surveys and evaluations. Principal contractors and grantees are the Tuberculosis Coalition for Technical Assistance, MSH, CARE, and Partners in Health.

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.

**FY 2006 Program:** USAID will strengthen public-private partnerships and improve the coordination capacity of the MOH to ensure improved health results in the 10 geographic departments. This decentralized technical and financial support will be increasingly performance based to empower public sector leadership and build accountability with civil society.

Improve Child Survival, Health and Nutrition (\$10,161,000 CSH). USAID expects to expand its current strategy and increase support for clean water initiatives. USAID plans to assist the MOH and other partners to improve services and coverage in more parts of the country. Improved integration of P.L. 480 Title II food activities with pre-natal and other health interventions will compound benefits and improve efficiency of USAID resources. P.L. 480 food security and nutrition activities will continue at the same level. Implementers will be the same as above.

Support Family Planning Programs (\$7,159,000 CSH). USAID plans to expand its current activities and strengthen systems for contraceptive supply management, quality of services, and natural family planning counseling. Implementers are be the same as above.

Prevent and Control Infectious Diseases of Major Importance (\$2,000,000 CSH). USAID plans to focus on service quality improvements in TB treatment, more active case finding, and integration with HIV-related services in collaboration with the GFATM. Assessments from FY 2005 will inform decisions for a potential larger-scale USAID malaria intervention in FY 2006. Implementers will be the same as above.

**Performance and Results:** All public institutions were disrupted in Haiti during the turbulent months of 2004; however, basic health services were maintained, a major accomplishment. USAID reprogrammed resources to re-energize critical public health services throughout Haiti, and supported emergency flood relief efforts in the southeast region. USAID increased immunization coverage in target areas to 90%, significantly higher than the national average of 34%, or the estimated 7% coverage in non-USAID zones. Nearly half (47%) of the pregnant women in the USAID program area received at least three pre-natal visits this year. USAID also provided emergency vaccine stocks to the national immunization program when other support unexpectedly ended early in the year. Use of family planning was maintained at 30% in target areas. During FY 2004, approximately 50,000 children under the age of five received P.L. 480

Title II food supplements and nutrition education. Under the Mother to Child HIV/AIDS Transmission Prevention initiative, more than 2,500 traditional birth attendants were trained in improved maternity care and over 28,000 expectant mothers were tested at voluntary HIV counseling and testing centers. By program completion in FY 2007, USAID expects to see improvements in the health and wellbeing of women and children, reductions in malnutrition rates, and a slowing of the spread of tuberculosis, HIV/AIDS and other infectious or sexually transmitted diseases. Also, the country's public health system will be better managed.

## **US Financing in Thousands of Dollars**

Haiti

521-003 Health Systems	сѕн	DA	ESF
Through September 30, 2003			
Obligations	25,404	6,335	122,663
Expenditures	16,701	6,335	100,507
Unliquidated	8,703	0	22,156
Fiscal Year 2004			
Obligations	20,395	0	0
Expenditures	12,251	0	21,481
Through September 30, 2004			
Obligations	45,799	6,335	122,663
Expenditures	28,952	6,335	121,988
Unliquidated	16,847	0	675
Prior Year Unobligated Funds			
Obligations	0	0	0
Planned Fiscal Year 2005 NOA			
Obligations	20,000	0	0
Total Planned Fiscal Year 2005			
Obligations	20,000	0	0
Proposed Fiscal Year 2006 NOA			
Obligations	19,320	0	0
Future Obligations	0	0	0
Est. Total Cost	85,119	6,335	122,663