

Data Sheet

USAID Mission:	Albania
Program Title:	Improving Primary Health Care (PHC) in Albania
Pillar:	Global Health
Strategic Objective:	182-0320
Status:	Continuing
Planned FY 2006 Obligation:	\$2,250,000 AEEB
Prior Year Unobligated:	\$862,000 AEEB
Proposed FY 2007 Obligation:	\$1,818,000 AEEB
Year of Initial Obligation:	1992
Estimated Year of Final Obligation:	2007

Summary: USAID's health program is improving access, use, and quality of primary and preventive health care (PHC) services in communities. The program assists the Government of Albania (GOA) in devising and testing service delivery models for child and maternal health services, family planning, and prevention of HIV/AIDS, tuberculosis, and other priority chronic and non-communicable diseases. Enhanced PHC service delivery, coupled with finance and information system reforms, aim to increase cost-effectiveness of local and national resource allocations. Health promotion is encouraging public awareness of community capabilities to improve health.

Inputs, Outputs, Activities:

FY 2006 Program:

Address Other Health Vulnerabilities (\$800,000 AEEB, \$266,000 AEEB carryover). Better local management of chronic diseases and disabilities will become part of PHC system reforms in 2006. USAID will continue support for GOA health financing reforms to consolidate public funds for PHC into a "single source payer" and to introduce managerial autonomy and performance-based contracting for PHC providers. Operational tests will begin region-wide in Berat and sites in Lezha district. In 2006, a new health management information system (HMIS) will be modified and extended nationally to monitor resource flows and provider performance, with the goals of supporting insurance reforms and improving supervision of the Ministry of Health (MOH). Principal contractors/grantees: University Research Corporation (URC)(prime), Bearing Point (sub) and World Council of Hellenes (prime).

Improve Child Survival, Health and Nutrition (\$500,000 AEEB, \$200,000 AEEB carryover). USAID will continue supporting better identification of local PHC needs and the integration of essential peri-natal, infant, and child health services into PHC. Integration aims to increase access to higher quality services by bringing them closer to consumers, promoting "one-stop shopping" for basic PHC services, increasing continuity of care, improving provider performance, reducing missed opportunities, and increasing public demand for PHC while reducing reliance on more costly specialist care. PHC centers with the improved package of services should increase from 571 in 2005 to 900 in 2006. Principal contractor: URC (prime).

Improve Maternal Health and Nutrition (\$450,000 AEEB). USAID will continue to support the integration of key maternal health services into the national PHC system. The percent of service providers trained or refreshed in PHC's Continuing Medical Education (CME) will increase from four percent of all nurses and midwives at the national level to just over 1,000 nurses and midwives, or about 12%. Training in quality improvement for general practitioners will begin during 2006. Principal contractor: URC (prime).

Prevent and Control Infectious Diseases Of Major Importance (\$100,000 AEEB). USAID will continue support for surveillance and control of tuberculosis (TB). During 2006, more than 550 general practitioners and 1,000 nurses will be trained in TB early detection and proper DOTS (Directly-Observed Therapy, Short Course) case management. TB will be included as an element in the new USAID-supported PHC's Continuing Medical Education program. Groups will be trained and equipped with TB educational materials in 40 communes. Principal contractor: URC (prime)

Reduce Transmission and Impact of HIV/AIDS (\$100,000 AEEB, \$396,000 AEEB carryover). USAID will continue support for the government's National AIDS Program (NAP) monitoring and evaluation. Based on 2005 baseline findings from a sample of 1,640 people at highest risk of HIV and sexually transmitted infections (STI) in the capital city, HIV/STD surveillance will be extended outside the capital during 2006 and the research will be used for policy and behavior change actions. HIV prevention will be integrated into PHC services. USAID will continue collaboration with Albanian partners to implement the grant from the Global Fund for HIV/AIDS, TB, and Malaria, which includes technology transfer for HIV prevention and control to the Albanian Ministry of Health and the Albanian Institute of Public Health. Principal contractor: URC (prime).

Support Family Planning (\$300,000 AEEB). USAID will continue support to increase use of modern methods of contraception for delaying first births, improving spacing, and reducing unwanted pregnancies. By the end of 2006 100% of the districts of Albania will have the capacity to provide family planning services at PHC sites; the number of service delivery points will increase from 300 in 2005 to 466. The number of providers trained by Ministry of Health (MOH) master trainers will increase from 100 to 178 general practitioners and from 204 to 375 nurses and midwives. Combinations of mass media, print materials, and community mobilization will increase awareness of access to family planning methods and services and promote demand; campaigns in 2006 are expected to reach 80% of all married couples. Technical assistance will support logistics management and the MOH-led Contraceptive Security Commission, which aims to achieve uninterrupted supplies of contraception at the national level. Principal contractor: URC (prime).

FY 2007 Program:

Address Other Health Vulnerabilities (\$700,000 AEEB). Technical assistance will continue for improvement of PHC services for priority non-communicable diseases, national roll-out of the HMIS system, and health system finance reforms. Contractors and grantees: to be determined (TBD).

Improve Child Survival, Health and Nutrition (\$618,000 AEEB). Support will continue for a national roll-out of integrated, essential PHC services for infant and child health and maternal health. Contractors and grantees: TBD.

Prevent and Control Infectious Diseases Of Major Importance (\$100,000 AEEB). USAID will support national TB surveillance, technology transfer, and assessments of prevention and treatment actions. Contractors and grantees: TBD.

Reduce Transmission and Impact Of HIV/AIDS (\$100,000 AEEB). USAID will continue support to the GOA National AIDS Program for monitoring HIV and STI among high-risk people and for analyses of the effectiveness of prevention activities. Contractors and grantees: TBD.

Support Family Planning (\$300,000 AEEB). Support will continue to attain nearly 100% of married couples nation-wide having access to modern methods of contraception. Contractors and grantees: TBD.

Performance and Results: During 2005, PHC centers with one or more project-improved features increased from 18 to 528 and use of services in these areas increased. Sites with FP services increased from 96 to 170, and knowledge of modern methods of contraception has increased. PHC centers using newly standardized HMIS increased from five to 50. The new HMIS, designed to support health financing system reforms, was adopted by the MOH and prepared for national roll-out. Health promotion in 30 communities prompted significant increases in demand for PHC services. A biological & behavioral surveillance survey was completed in a sample of 1,640 people at risk of HIV/AIDS and STIs, including detection and treatment and technology transfer for bio-behavioral research, 'rapid' testing, and disease surveillance. USAID assisted the GOA's successful re-application to the Global Fund for HIV/AIDS and TB. By program completion, USAID's health assistance in Albania will have contributed to measured, nation-wide increases in use of a well-defined set of priority, quality primary health care services, operating in a more supportive national health policy environment, with more empowered PHC providers and clients and better managed facilities. Albania's health indicators will more closely resemble those of its neighbors.

US Financing in Thousands of Dollars

Albania

182-0320 Improving Primary Health Care (PHC) in Albania	AEEB	CSH
Through September 30, 2004		
Obligations	23,396	1,000
Expenditures	20,265	0
Unliquidated	3,131	1,000
Fiscal Year 2005		
Obligations	2,429	0
Expenditures	3,190	483
Through September 30, 2005		
Obligations	25,825	1,000
Expenditures	23,455	483
Unliquidated	2,370	517
Prior Year Unobligated Funds		
Obligations	862	0
Planned Fiscal Year 2006 NOA		
Obligations	2,250	0
Total Planned Fiscal Year 2006		
Obligations	3,112	0
Proposed Fiscal Year 2007 NOA		
Obligations	1,818	0
Future Obligations	0	0
Est. Total Cost	30,755	1,000