

## Data Sheet

<b>USAID Mission:</b>	Senegal
<b>Program Title:</b>	Decentralized Quality Health Services
<b>Pillar:</b>	Global Health
<b>Strategic Objective:</b>	685-003
<b>Status:</b>	Continuing
<b>Planned FY 2005 Obligation:</b>	\$14,775,000 CSH
<b>Prior Year Unobligated:</b>	\$0
<b>Proposed FY 2006 Obligation:</b>	\$14,075,000 CSH
<b>Year of Initial Obligation:</b>	1998
<b>Estimated Year of Final Obligation:</b>	2006

**Summary:** USAID's health program seeks to decrease child and maternal mortality and limit the spread of HIV through increased access to and use of quality health services for approximately 60% of Senegal's population. The HIV/AIDS component encourages abstinence, fidelity, and condom use, as appropriate, while supporting a full range of services to treat sexually transmitted infections (STIs), prevent mother-to-child transmission, and care for persons living with HIV/AIDS. Children's health is improved by preventing illnesses and by more effectively treating the illnesses that cause the majority of child deaths. Providing the means for families to better space pregnancies and improving the care women receive during their pregnancy reduces the number of women who die from pregnancy. Finally, USAID builds the capacity of local governments and civil society to plan, finance, and evaluate local health activities.

### **Inputs, Outputs, Activities:**

**FY 2005 Program:** Reduce Transmission and Impact of HIV/AIDS (\$4,114,000 CSH). USAID will expand comprehensive and balanced information, education, and communication activities, including use of the ABC (Abstinence, Be Faithful, or Use Condoms) approach, targeting youth and other at-risk groups to 22 sites in six regions; open three additional voluntary counseling and testing (VCT) centers; reinforce STI case management in 21 health districts; and extend services to prevent mother-to-child transmission of HIV. In collaboration with its P.L. 480 Food for Peace program, USAID will provide nutritional and psychosocial services to 6,881 persons affected by HIV/AIDS. With the education program, USAID will launch activities to address the impact of HIV on youth and the national education system. Principal grantees: Family Health International, Center for Population and Development Activities, Agency for the Development of Social Marketing (ADEMAS) (primes); several Senegalese organizations (subs).

Prevent and Control Infectious Diseases of Major Importance (\$3,300,000 CSH). USAID will expand the availability of insecticide treated nets through the commercial sector and provide them to pregnant women and children at subsidized prices. USAID will support the Ministry of Health in implementing national policies to prevent malaria in pregnancy and treat malaria in children in 21 health districts. USAID will also continue support for the National Tuberculosis Program through technical and financial assistance to strengthen facility-level services. USAID provides grants to nongovernmental organizations' programs to better inform the population about tuberculosis and malaria prevention and treatment. Principal grantees: Africare, Christian Children's Fund, and Plan International (primes).

Improve Child Survival, Health and Nutrition (\$1,694,000 CSH). USAID will provide financial and technical assistance in 21 health districts to prevent and more effectively treat childhood illnesses. In addition to support for immunization and nutrition activities, emphasis will be placed on improving the community management of pneumonia and malaria as well as applying a recently adopted policy for newborn care. Principal contractors and grantees: Partnership for Child Health Care, Inc. (prime); and the Manoff Group, Program for Appropriate Technology in Health, Save the Children and Tina Sanghvi Ltd. (subs).

Improve Maternal Health and Nutrition (\$682,000 CSH). USAID will help decrease the number of women dying in pregnancy by promoting a program for birth preparedness, strengthening the capacity of facilities to provide emergency obstetric care, and administering a product to reduce post delivery hemorrhage. Principal contractors and grantees: Management Sciences for Health (MSH), and ADEMAs (primes);

Futures Group and Development Associates, Inc. (subs).

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$1,473,000 CSH). USAID will provide contraceptives and family planning information to families nationwide through public and private sector clinics, pharmacies, and community-based networks. An injectable contraceptive will be added to the social marketing program. Community-based distribution will be undertaken by many of the 125 health promotion associations that USAID and its local partners will create. Principal contractors and grantees: MSH and ADEMAs (primes); and Futures Group and Development Associates, Inc. (subs).

Build Health Systems Capacity (\$3,512,000 CSH). USAID will continue to strengthen district-level health activities. USAID has provided matching funds to 149 communities who developed a local health plan and contributed local financing. USAID will continue to build local capacity in health planning and finance in these districts, and will establish health management committees in an additional 42 local communities. Support will go to regional institutions to identify local health priorities, and to successful community health programs to make services more affordable. In addition, USAID will help establish 25 private rural associations to provide critical health-promotion activities and make them more sustainable. Principal contractors and grantees: Development Associates, Inc. (prime); and the Umbrella Support Unit (sub).

**FY 2006 Program:** Reduce Transmission and Impact of HIV/AIDS (\$4,024,000 CSH). USAID will provide nutritional support to 15% more AIDS-affected persons than in 2005, open four additional VCT centers, and expand services to prevent mother-to-child transmission. Same implementers as FY 2005.

Prevent and Control Infectious Diseases of Major Importance (\$2,900,000 CSH). USAID will increase availability of mosquito bednets, anti-malarial drugs, and information on tuberculosis control and treatment. Same implementers as FY 2005.

Improve Child Survival, Health and Nutrition (\$1,594,000 CSH). USAID will help Senegal to extend newborn care services and community treatment of child pneumonia. Same implementers as FY 2005.

Improve Maternal Health and Nutrition (\$725,000 CSH). USAID will continue to strengthen birth preparedness and emergency obstetric care in 21 districts. Same implementers as FY 2005.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$1,383,000 CSH). USAID will continue to make family planning services and information available nationwide. Same implementers as FY 2005.

Build Health Systems Capacity (\$3,449,000 CSH). USAID will continue to work with local stakeholders and providers to create or strengthen sustainable local health institutions, such as health promoter associations and community health insurance programs. Same implementers as FY 2005.

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

**Performance and Results:** The use of quality health services is improving in USAID target areas. Community insurance organizations provided insurance to 44,922 beneficiaries in 2004, up from 31,988 in 2003. Immunization coverage improved and reached 70% in 2004, up from 42% in 1999. Due to a 20% increase in the treatment of childhood pneumonia in four test districts, the Senegalese Government has agreed to allow community health workers to treat pneumonia nationwide. The Ministry of Health is implementing a new policy that will significantly improve the prevention and treatment of malaria in pregnant women and children. The voluntary use of modern contraceptives, as measured by couple-years-of-protection, increased by 6% in 2004. The National Tuberculosis Program identified 6,587 new tuberculosis cases in 2003, up by 14% from 2002 and 60% of these cases were cured. A total of 6,910 persons used voluntary counseling and testing services in 2004, 72% more than in 2003.

## US Financing in Thousands of Dollars

**Senegal**

	<b>CSH</b>	<b>DA</b>
685-003 Decentralized Quality Health Services		
<b>Through September 30, 2003</b>		
Obligations	45,569	4,473
Expenditures	31,030	4,459
Unliquidated	14,539	14
<b>Fiscal Year 2004</b>		
Obligations	13,675	0
Expenditures	14,678	6
<b>Through September 30, 2004</b>		
Obligations	59,244	4,473
Expenditures	45,708	4,465
Unliquidated	13,536	8
<b>Prior Year Unobligated Funds</b>		
Obligations	0	0
<b>Planned Fiscal Year 2005 NOA</b>		
Obligations	14,775	0
<b>Total Planned Fiscal Year 2005</b>		
Obligations	14,775	0
<b>Proposed Fiscal Year 2006 NOA</b>		
Obligations	14,075	0
Future Obligations	22,433	0
Est. Total Cost	110,527	4,473