Data Sheet

USAID Mission: Program Title: Pillar: Strategic Objective: Status: Planned FY 2005 Obligation: Prior Year Unobligated: Proposed FY 2006 Obligation: Year of Initial Obligation: Estimated Year of Final Obligation: West African Regional Program (WARP) Regional Health Program Global Health 624-005 Continuing \$19,550,000 CSH \$0 \$18,880,000 CSH 2001 2007

Summary: USAID's Action for West Africa Region (AWARE) health program reinforces national programs to 1) implement best health practices, 2) strengthen regional institutions, 3) create an enabling regional policy environment, and 4) enhance the efficiency of national health systems.

Inputs, Outputs, Activities:

FY 2005 Program: Reduce Transmission and Impact of HIV/AIDS (\$8,371,375 CSH). USAID's program seeks to reduce, through conformance with the Agency's ABC (Abstinence, Be Faithful, or Use Condoms) policy, the regional spread and impact of HIV/AIDS by increasing interventions in the four areas listed above and by establishing two additional technical task forces, for a total of seven. The technical task forces help identify, document, and disseminate, promising and best practices, including lessons learned from the Presidential Emergency Plan for AIDS Relief countries of Cote d'Ivoire and Nigeria. USAID is also increasing the number of cross-border HIV/AIDS prevention sites by four, for a total of 34. Through the Ambassadors' Fund Program, USAID is supporting U.S. Embassies in nine countries to deal with HIV/AIDS by providing 34 grants to non-governmental organizations (NGOs). Finally, USAID will provide technical assistance to seven regional organizations and NGO networks aimed at strengthening their capacity to manage their institutions and implement their programs. Principal grantee: Family Health International (FHI) (prime).

Prevent and Control Infectious Diseases of Major Importance (\$1,483,825 CSH) USAID promotes the expanded use of insecticide-treated materials and more effective treatment guidelines for the control of malaria in pregnancy via the nine-country Network for the Prevention and Treatment of Malaria during Pregnancy. USAID will train 40 participants from the region in the use of a malaria resource package and in the development of policies to be adopted by six countries. Principal contractors and grantees: EngenderHealth (prime); and Malaria Action Coalition, and JHPIEGO/ACCESS (subs).

Improve Child Survival, Health and Nutrition (\$721,800 CSH). Priority child survival interventions include support for the social marketing of oral re-hydration salts (ORS) to combat diarrheal disease, community integrated management of childhood illness, micronutrient fortification of foods, and support for multi-donor regional immunization strategies for children in response to the current resurgence of polio in West Africa. USAID is working with five countries to develop national implementation and monitoring plans on infant and child feeding. Principal grantee: EngenderHealth (prime).

Improve Maternal Health and Nutrition (\$768,169 CSH). USAID will support the improved management of postpartum hemorrhage, assist communities to prepare for birth and potential related complications, and provide antenatal care. Best practices in prenatal care will be replicated in three countries. USAID will also disseminate information on two model programs to improve results for emergency obstetric care and will implement a strategy to address obstetric fistula. Principal grantee: EngenderHealth (prime).

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$6,249,831CSH). USAID promotes 10 priority family planning best practices in five countries. These include the social marketing of health commodities (selectively supported with project-financed products), community-based distribution of non-prescription contraceptives, and integrated clinic-based methods. USAID will organize two

conferences to develop short and medium-term regional strategies to address the severe funding decline in reproductive health programs in West Africa. Principal grantee: EngenderHealth (prime).

Build Health Systems Capacity (\$1,955,000 CSH). USAID supports organizations that share best practices and provide "South-to-South" technical assistance, including the Young Professionals' Internship Program (YPIP), which is training a new bilingual cadre of public health managers. USAID support to the West Africa Health Organization (WAHO) enables it to provide research grants to five institutions to address key regional health challenges. USAID also works to strengthen the technical and management systems of 15 organizations in 10 countries. Principal contractors and grantees: EngenderHealth and FHI (primes); and WAHO (sub).

FY 2006 Program: Reduce Transmission and Impact of HIV/AIDS (\$8,365,440 CSH). USAID will focus on: 1) support for best practices in the prevention, care, treatment and support of people affected by the AIDS epidemic; 2) improving the policy environment for effective HIV/AIDS programming; 3) cross-border HIV/AIDS monitoring and prevention in vulnerable mobile populations; and 4) strengthening the technical and management capacity of regional institutions. Same implementers as FY 2005.

Prevent and Control Infectious Diseases of Major Importance (\$695,040 CSH). USAID will continue to support best health practices through regional organizations and networks that support malaria prevention and treatment. Same implementers as FY 2005.

Improve Child Survival, Health, and Nutrition (\$905,600 CSH). USAID will leverage other donor funds to support community-based programs focusing on nutrition, diarrhea, and fever management. USAID will also fund immunization and polio eradication activities, and support the social marketing of ORS and fortification of foods with micronutrients. Same implementers as FY 2005.

Improve Maternal Health and Nutrition (\$1,621,366 CSH). USAID will improve community preparedness to handle birth complications and improve management of postpartum hemorrhage. A maternal nutrition component may be added to this program. Same implementers as FY 2005.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$5,404,554 CSH). USAID commodities will support best practices in family planning and continued advocacy will secure more funding for reproductive health commodities. USAID will also support clinic- and community-based over-the-counter contraceptive methods. Same implementers as FY 2005.

Build Health Systems Capacity (\$1,888,000 CSH). USAID's capacity building efforts will emphasize the use of regional and national organizations to provide technical assistance. Efforts will continue to develop stronger middle level managers through the YPIP and to improve the ability of key partners to award and manage grants. 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: USAID's Family Health and AIDS Prevention project worked intensively in four countries from 2001-2003, and improved reproductive health, child survival and HIV/AIDS services. The project left a strong base in the identification and replication of best practices in health services that are being built upon by USAID's new AWARE health project. In FY 2004, USAID developed operational and monitoring frameworks for the new project and initiated key regional partnerships. USAID also strengthened its cross-border HIV/AIDS prevention programs on 11 international transportation routes, serving vulnerable populations at 30 sites in five countries, and identified 22 areas for policy improvement to better focus regional efforts to combat HIV/AIDS. USAID also disseminated 40 best health practices. USAID's health program will improve health conditions for vulnerable populations in the region and help West Africans to meet the health goals set by the international community.

US Financing in Thousands of Dollars

| | West African Regional Program (WARP) | | |
|---------------------------------|--------------------------------------|-----|-----|
| 624-005 Regional Health Program | СЅН | DA | ESF |
| Through September 30, 2003 | | | |
| Obligations | 38,785 | 735 | C |
| Expenditures | 18,444 | 735 | C |
| Unliquidated | 20,341 | 0 | C |
| Fiscal Year 2004 | | | |
| Obligations | 17,858 | 0 | 500 |
| Expenditures | 11,947 | 0 | C |
| Through September 30, 2004 | | | |
| Obligations | 56,643 | 735 | 500 |
| Expenditures | 30,391 | 735 | C |
| Unliquidated | 26,252 | 0 | 500 |
| Prior Year Unobligated Funds | | | |
| Obligations | 0 | 0 | (|
| Planned Fiscal Year 2005 NOA | | | |
| Obligations | 19,550 | 0 | (|
| Total Planned Fiscal Year 2005 | | | |
| Obligations | 19,550 | 0 | (|
| Proposed Fiscal Year 2006 NOA | | | |
| Obligations | 18,880 | 0 | C |
| Future Obligations | 50,000 | 0 | C |
| Est. Total Cost | 145,073 | 735 | 500 |