Data Sheet

USAID Mission: Nigeria **Program Title:** HIV/AIDS and Tuberculosis Global Health Pillar: Strategic Objective: 620-014 Status: New in FY 2004 Planned FY 2005 Obligation: \$1,600,000 CSH **Prior Year Unobligated:** \$399,000 CSH Proposed FY 2006 Obligation: \$1,600,000 CSH Year of Initial Obligation: 2004

2008

Summary: USAID activities will help to prevent and control tuberculosis (TB).

Inputs, Outputs, Activities:

Estimated Year of Final Obligation:

FY 2005 Program: Reduce Transmission and Impact of HIV/AIDS (\$399,000 prior-year CSH). USAID will prevent new HIV infections by developing and disseminating behavior change messages, including abstinence, aimed at reducing HIV transmission in the general public and at-risk population. USAID will also strengthen referral systems to ensure that people living with AIDS have access to adequate support and medical services. Principal grantee: to be determined.

See the State Department Congressional Budget Justification, Global HIV/AIDS Initiative section, for further discussion of this program.

Prevent and Control Infectious Diseases of Major Importance (\$1,600,000 CSH). USAID will strengthen the National TB Directly Observable Treatments program in an effort to reduce death and disability in the general population, as well as in the especially vulnerable co-infected HIV/AIDS population. USAID will also improve case-finding and treatment of both TB and HIV/AIDS by strengthening the referral systems between existing treatment programs. Principal grantee: World Health Organization (prime).

FY 2006 Program: 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.

Prevent and Control Infectious Diseases of Major Importance (\$1,600,000 CSH). USAID will continue to strengthen the National TB Directly Observable Treatments program, and improve case-finding and treatment. Principal grantee: World Health Organization (prime).

Performance and Results: In FY 2004, 3,297 health workers were trained in the treatment of TB. Tuberculosis control services were extended to 471 Local Government Areas (LGAs) nationwide, thus reaching a population of 55 million, and 1,700 hospitals, clinics and other health facilities participated in the program. The case detection rate of new positive smears rose from 16% to 23%, and 80% of smear positive patients were treated successfully. By the end of FY 2009, 5,040 health workers will have been trained. The population covered by USAID's TB control program will have been expanded to 100 million people in 720 LGAs, covering 4,200 health facilities, and the cure rate will increase to 85%.

US Financing in Thousands of Dollars

Nigeria

620-014 HIV/AIDS and Tuberculosis	СЅН	ESF
Through September 30, 2003		
Obligations	0	0
Expenditures	0	0
Unliquidated	0	0
Fiscal Year 2004		
Obligations	20,774	500
Expenditures	1,845	0
Through September 30, 2004		
Obligations	20,774	500
Expenditures	1,845	0
Unliquidated	18,929	500
Prior Year Unobligated Funds		
Obligations	399	0
Planned Fiscal Year 2005 NOA		
Obligations	1,600	0
Total Planned Fiscal Year 2005		
Obligations	1,999	0
Proposed Fiscal Year 2006 NOA		
Obligations	1,600	0
Future Obligations	3,696	0
Est. Total Cost	28,069	500