

Data Sheet

USAID Mission:	Guinea
Program Title:	Family Planning and Health (FPH)
Pillar:	Global Health
Strategic Objective:	675-002
Status:	Continuing
Planned FY 2005 Obligation:	\$6,950,000 CSH
Prior Year Unobligated:	\$0
Proposed FY 2006 Obligation:	\$6,650,000 CSH
Year of Initial Obligation:	1998
Estimated Year of Final Obligation:	2006

Summary: USAID's health program in Guinea seeks to prevent the transmission of HIV/AIDS, increase the use of products, services and practices that promote voluntary family planning, and improve maternal and child health. Key activities funded through this program include training public sector health care providers, strengthening the public health care logistics system, encouraging behavior change, and the promotion and sale of health and family planning products.

Inputs, Outputs, Activities:

FY 2005 Program: Reduce Transmission and Impact of HIV/AIDS (\$2,200,000 CSH). As part of an abstinence, be faithful, condom promotion (ABC) approach, USAID will support behavior change interventions through the media and other channels in high prevalence areas of the country and among high risk populations; market and sell 10,000,000 condoms; establish four voluntary counseling and testing sites; develop a national HIV/AIDS surveillance system; and implement advocacy and awareness activities for community, government and religious leaders. USAID will ensure that services for treating sexually transmitted infections (STIs) are available in all the health centers in its intervention zone. USAID will also provide technical guidance to enable the Ministry of Health (MOH) to procure and manage the supply of anti-retroviral (ARV) drugs. Principal contractors and grantees: Family Health International (FHI), Population Services International (PSI), Management Sciences for Health (MSH), Winrock International, Cooperative League of United States of America (CLUSA), Education Development Center (EDC), and World Education (primes); and John Hopkins University (JHU/CCP) (sub).

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$2,000,000 CSH). Nationwide promotion and sales of contraceptives will remain the cornerstone of USAID's voluntary family planning program in Guinea. In addition, more providers will be trained to offer long-term and permanent contraceptive services at additional sites. USAID will train community-based distributors (CBDs) in the provision of family planning services. USAID will also ensure the long-term sustainability of Guinea's contraceptive logistics system by strengthening the accounting, procurement, and distribution systems at the MOH. In addition, USAID will support the analysis of data collected through the 2004/2005 Demographic and Health Survey (DHS). Principal contractors and grantees: MSH, Macro International, Engender Health, JHPIEGO, and Helen Keller International (HKI) (primes).

Improve Child Survival, Health and Nutrition: (\$1,978,000 CSH). USAID will continue to improve health services by training health providers, community-based agents, and health center supervisors. USAID will provide technical assistance and training to strengthen the Integrated Management of Childhood Illnesses system (a comprehensive strategy for child health care) and to the national pharmaceutical logistics system to address the problem of inadequate supplies and frequent stock-outs of essential drugs. Over 4 million oral re-hydration salt packets and 370,000 insecticide treated bed nets (ITNs) will be sold. In addition, P.L. 480 resources will provide training and technical assistance to improve maternal and child health, with the goal of bringing approximately 1,000 moderately malnourished children back to health. Principal grantees: MSH, PSI, HKI, and Africare (primes); and JHU/CCP (sub).

Improve Maternal Health and Nutrition (\$772,000 CSH). USAID will continue to promote prenatal care

and Vitamin A supplementation for women of reproductive age. USAID will expand and strengthen the traditional birth attendant (TBA) network and will train health center staff to supervise TBAs. Through this training and technical assistance, the quality of health center maternity services will be improved which will contribute to the reduction in maternal morbidity and mortality. To strengthen essential maternal and neonatal care, USAID will update the reproductive health service delivery guidelines, conduct a needs assessment of current practices, and train health providers in infection prevention. Principal grantees and agencies: MSH, HKI, and JHPIEGO (primes); and the MOH.

FY 2006 Program: Reduce Transmission and Impact of HIV/AIDS (\$2,200,000 CSH). USAID plans to use its HIV/AIDS resources to continue behavior change interventions (BCC) interventions, strengthen sentinel surveillance and the national laboratory, and expand its program. In-service training of MOH staff will continue to assure quality STI/HIV services. USAID will explore the possibility of incorporating care and support for people living with HIV/AIDS into its program. Principal contractors and grantees: PSI (prime); and others to be determined.

Reduce Unintended Pregnancy and Improve Healthy Reproductive Behavior (\$2,000,000 CSH). Promotion and sale of contraceptives will be maintained. Community-based reproductive health activities through the training of CBDs will be strengthened and expanded and health center-based reproductive health activities will continue. Principal contractors and grantees: PSI (prime); and others to be determined.

Improve Child Survival, Health and Nutrition (\$1,450,000 CSH). USAID plans to increase access to and use of immunization services and support Vitamin A distribution; ensure adherence to MOH norms and procedures for Integrated Management of Childhood Illnesses; and to improve home-based management and care for fever, diarrhea, and acute respiratory infections (ARIs) at the community level. USAID will continue promoting ITN sales in the pilot regions. Lessons learned will be assessed to determine the next steps for national expansion of the ITN program. It is expected that P.L. 480 assistance to improve the nutritional status of women and children under five will continue at the same level. Principal contractors and grantees: PSI and HKI (primes); and others to be determined.

Improve Maternal Health and Nutrition (\$1,000,000 CSH). USAID resources will continue to support the expansion of the TBA network and postpartum vitamin A distribution. Other activities such as the promotion of prenatal care and emergency obstetrical and neonatal care will continue to be funded. USAID will also continue to provide in-service training to health center staff to ensure quality of care. Principal contractors and grantees: to be determined.

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

Performance and Results: USAID/Guinea continues to make steady progress toward achieving its objective to increase the use of essential health services, products and practices. A FY 2004 national survey showed an increase in the contraceptive prevalence rate. A national policy allowing the distribution of oral contraceptives by community-based agents has made contraceptives more accessible to rural families. Measles vaccination coverage for upper Guinea has exceeded the target level. Sale of oral re-hydration salts has also exceeded planned targets and is expected to continue on an upward trend. Four HIV/AIDS voluntary counseling and testing (VCT) centers are being renovated.

By the end of this program, USAID expects to meet its health objectives. By FY 2006, Guineans in regions where HIV prevalence is high will have access to quality VCT services, contraceptive prevalence rates will continue to increase in USAID's target zone, and close to 80% of children in Upper Guinea will have been fully vaccinated during their first year of life.

US Financing in Thousands of Dollars

Guinea

675-002 Family Planning and Health (FPH)	CSH	DA	DFA
Through September 30, 2003			
Obligations	28,512	14,080	10,974
Expenditures	17,924	13,927	10,974
Unliquidated	10,588	153	0
Fiscal Year 2004			
Obligations	6,350	0	0
Expenditures	7,528	102	0
Through September 30, 2004			
Obligations	34,862	14,080	10,974
Expenditures	25,452	14,029	10,974
Unliquidated	9,410	51	0
Prior Year Unobligated Funds			
Obligations	0	0	0
Planned Fiscal Year 2005 NOA			
Obligations	6,950	0	0
Total Planned Fiscal Year 2005			
Obligations	6,950	0	0
Proposed Fiscal Year 2006 NOA			
Obligations	6,650	0	0
Future Obligations	0	0	0
Est. Total Cost	48,462	14,080	10,974