

## Data Sheet

<b>USAID Mission:</b>	Namibia
<b>Program Title:</b>	Reduced prevalence of HIV/AIDS
<b>Pillar:</b>	Global Health
<b>Strategic Objective:</b>	673-008
<b>Status:</b>	Continuing
<b>Planned FY 2005 Obligation:</b>	\$796,000 CSH
<b>Prior Year Unobligated:</b>	\$0
<b>Proposed FY 2006 Obligation:</b>	\$0
<b>Year of Initial Obligation:</b>	2000
<b>Estimated Year of Final Obligation:</b>	2009

**Summary:** With the highest reported Tuberculosis (TB) case rate in the world, 676 per 100,000 people in 2002, the burden of TB in Namibia is further compounded by a severe dual TB/HIV epidemic, with a 45% HIV prevalence rate in TB patients. TB is the main cause of morbidity and mortality in people living with HIV/AIDS, and HIV/AIDS is the most common complicating disease in TB patients. The USAID TB program works closely with the Ministry of Health National TB Control Program to assist the Government of Namibia to: formulate and disseminate the national TB and HIV/AIDS guidelines; increase the efficiency and quality of HIV/AIDS Voluntary Counseling and Testing for TB patients; provide appropriate health education materials for TB patients who are HIV positive; assist the directly observed treatment TB program; and provide palliative care for HIV/TB patients. This program works in collaboration with the ongoing TB and HIV activities through the President's Emergency Plan for AIDS Relief (PEPFAR).

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

**FY 2005 Program:** Prevent and Control Infectious Diseases of Major Importance (\$796,000 CSH). USAID is expanding existing activities and developing new TB activities in support of the Namibia National TB Control Program, complementing activities funded through the President's Emergency Plan for AIDS Relief. As TB remains the leading cause of death for people living with HIV/AIDS, integration of TB/HIV services into clinics remains an important priority for support. USAID provides technical assistance at the level of national program management in the National TB Control Program to improve support and supervision to the regions and to roll out the TB/HIV components of the first Medium Term Plan for TB control. USAID also assists efforts to provide routine counseling and testing, expand training of health care workers with the new USAID and USG-supported TB/HIV training curriculum, and strengthen TB/HIV surveillance. The Government of Namibia has been a reliable supplier of TB drugs and supplies, and provides health staff and infrastructure for management of patients with HIV/AIDS and TB.

Through PEPFAR, funds were made available to place a TB technical advisor at the Ministry of Health. With these additional funds, USAID is now able to expand the services and the planning ability of the Ministry of Health to scale up the TB control program in relation to the HIV/AIDS epidemic. In addition, USAID can now provide direct assistance to the TB Directly Observed Treatment, Short Course program to expand the quality of services nationwide. The USAID program also assists the Ministry of Health to integrate TB, HIV and other infectious disease services into the Communicable Disease Clinics and public hospital system. Principal Grantee: Family Health International (prime).

**FY 2006 Program:** There are no planned obligations in FY 2006.

**Performance and Results:** No results are reported for this activity, since this is the first year of obligation of TB funds under this strategic objective.

## US Financing in Thousands of Dollars

Namibia

673-008 Reduced prevalence of HIV/AIDS	<b>CSH</b>
<b>Through September 30, 2003</b>	
Obligations	0
Expenditures	0
Unliquidated	0
<b>Fiscal Year 2004</b>	
Obligations	11,776
Expenditures	1,200
<b>Through September 30, 2004</b>	
Obligations	11,776
Expenditures	1,200
Unliquidated	10,576
<b>Prior Year Unobligated Funds</b>	
Obligations	0
<b>Planned Fiscal Year 2005 NOA</b>	
Obligations	796
<b>Total Planned Fiscal Year 2005</b>	
Obligations	796
<b>Proposed Fiscal Year 2006 NOA</b>	
Obligations	0
Future Obligations	0
Est. Total Cost	12,572