

Data Sheet

USAID Mission:	Pakistan
Program Title:	Basic Health
Pillar:	Global Health
Strategic Objective:	391-007
Status:	Continuing
Planned FY 2006 Obligation:	\$23,110,000 CSH; \$22,554,000 ESF
Prior Year Unobligated:	\$0
Proposed FY 2007 Obligation:	\$21,700,000 CSH; \$9,160,000 ESF
Year of Initial Obligation:	2003
Estimated Year of Final Obligation:	2007

Summary: Pakistan continues to face major challenges meeting the health needs of its people. Eighty percent of women deliver their babies at home but only 5% of home deliveries are cared for by a skilled birth attendant. This contributes to high levels of mother and newborn deaths. Spacing births by three to five years could reduce deaths, but one-third of families who have reached their desired family size or wish to space births lack access to contraception. Pakistan ranks sixth in the world in its burden of tuberculosis (TB), has a concentrated HIV epidemic that could spin out of control, and a few children still contract polio. USAID's health programs are designed to address all these problems. P.L. 480 resources will be used in FYs 2006 and 2007 to support and complement health and humanitarian activities in response to the Pakistan earthquake. All family planning assistance agreements incorporate clauses that implement the President's directive restoring the Mexico City policy.

Inputs, Outputs, Activities:

FY 2006 Program:

Improve Child Survival, Health, and Nutrition (\$753,000 CSH; \$2,746,533 ESF). USAID is supporting a three-year child health program in the Federally Administered Tribal Areas (FATA). This program trains community health workers to treat children with acute respiratory infections and diarrhea and educate families on appropriate home-based health care and when to seek skilled health care. Community activities are being implemented in three of the seven FATA areas. Principal Implementer: John Snow International (JSI) and others To Be Determined (TBD).

Improve Maternal Health and Nutrition (\$5,135,000 CSH; \$11,827,467 ESF). In 10 districts, pregnant women and newborns are gaining access to safer, higher quality care in better equipped hospitals and rural health centers. USAID is training more than 3,000 health staff and renovating and equipping an estimated 40 hospitals and other health facilities. A national Demographic Health Survey is being initiated. The current agreement with the United Kingdom Department for International Development for health systems strengthening will be terminated March 31, 2006, and a replacement activity will be designed and awarded. Principal Implementers: JSI, Technical Assistance Management Agency, and Macro International.

Prevent and Control Infectious Diseases of Major Importance (\$3,465,000 CSH; \$7,980,000 ESF). USAID is continuing to fund National Immunization Days and community information campaigns on the importance of protecting children from polio, concentrating on districts with new polio cases. Personnel of public and private TB treatment centers are receiving further training to achieve better patient compliance with treatment and more accurate reporting of results. Attention is shifting to improve TB case management in private health facilities. USAID is funding a three-year safe drinking water activity to train local governments, non-governmental organizations (NGOs), and communities to manage government-provided water treatment units and to educate the community in safe transport and home storage of drinking water. Work is commencing in 13 districts/agencies in year one. USAID is establishing a field epidemiology training program to train district-level epidemiologists to investigate and respond to infectious disease outbreaks. Principal Implementers: World Health Organization (WHO), United Nations Children's Fund (UNICEF), and Centers for Disease Control and Prevention (CDC).

Reduce Transmission and Impact Of HIV/AIDS (\$1,330,000 CSH). A new three-year program is expanding HIV/AIDS efforts to two additional provinces -- the North-West Frontier Province and Balochistan; funding local NGOs to raise awareness among high-risk groups about how to prevent HIV infection; extending home-based care to additional people living with HIV/AIDS (PLWHA); and forming a network of PLWHA groups to advocate for better treatment options and reduce stigma. Principal Implementers: Research Triangle Institute (RTI).

Support Family Planning (\$12,427,000 CSH). An estimated 2.6 million couples who seek to space the births of their children will receive full information from well-trained health staff and have increased access subsidized family planning products. Principal Implementers: The Futures Group and Greenstar Social Marketing.

FY 2007 Program:

Improve Child Survival, Health and Nutrition (\$3,894,361 CSH). USAID's child health program will extend community activities to the remaining four FATA areas. Principal Implementer: TBD.

Improve Maternal Health and Nutrition (\$3,650,000 CSH; \$1,371,963 ESF). USAID will increase access for pregnant women and newborns to safer, higher quality care in better equipped hospitals and rural health centers. An additional 3,000 health staff will be trained, and an estimated 30 hospitals and other health facilities will be renovated and equipped. The national Demographic Health Survey will be completed. The new health systems strengthening program will be launched. Principal Implementers: JSI, Macro International, and others TBD.

Prevent and Control Infectious Diseases of Major Importance (\$3,405,639 CSH; \$7,478,037 ESF). If polio is eliminated, emphasis may shift to strengthening the overall immunization program. For TB control, public facilities will be monitored to determine where quality of diagnosis and treatment must be enhanced and improved. USAID's safe drinking water activity is expected to expand to 10 additional districts. Additional epidemiologists will be trained to manage infectious disease outbreaks. Principal Implementers: WHO, UNICEF, and CDC.

Reduce Transmission and Impact Of HIV/AIDS (\$900,000 CSH). USAID will continue strengthening local NGOs to raise awareness about HIV prevention and provide care to PLWHA. Principal Implementer: RTI.

Support Family Planning (\$9,850,000 CSH; \$310,000 ESF). An estimated three million couples will be able to space the births of their children through the purchase of subsidized family planning products. Principal Implementers: The Futures Group and Greenstar Social Marketing.

Performance and Results: Polio eradication efforts reduced polio cases by 60% from 2004 -- with 19 cases in 2005. Pakistan extended improved TB case management to 100% of government facilities in all districts but has yet to achieve the global target of at least 85% of patients completing their course of medication. To contain an HIV epidemic concentrated among high-risk groups, local NGOs delivered preventive messages to 120,000 people at risk for contracting HIV and supported 72 HIV-positive individuals and their 1,300 family members to obtain care. USAID provided information and family planning methods to nearly 1.8 million couples to help them space the births of their children. Strategies to reach poorer couples in rural and underserved areas are being implemented. Master trainers are being prepared to teach nursing and medical staff to respond better to pregnancy emergencies and to provide higher quality basic prenatal and newborn care. Pregnant women and newborns are obtaining greater access to care as ambulance service is commencing in seven districts, and authorities have agreed to initiate round-the-clock emergency obstetric care in 34 hospitals and rural health centers to cover ten districts. A national demographic health study is being planned to determine how many Pakistani women die during pregnancy and childbirth.

US Financing in Thousands of Dollars

Pakistan

	CSH	ESF
391-007 Basic Health		
Through September 30, 2004		
Obligations	45,823	0
Expenditures	30,573	0
Unliquidated	15,250	0
Fiscal Year 2005		
Obligations	21,000	29,700
Expenditures	3,015	0
Through September 30, 2005		
Obligations	66,823	29,700
Expenditures	33,588	0
Unliquidated	33,235	29,700
Prior Year Unobligated Funds		
Obligations	0	0
Planned Fiscal Year 2006 NOA		
Obligations	23,110	22,554
Total Planned Fiscal Year 2006		
Obligations	23,110	22,554
Proposed Fiscal Year 2007 NOA		
Obligations	21,700	9,160
Future Obligations	0	0
Est. Total Cost	111,633	61,414