

Data Sheet

USAID Mission:	Nigeria
Program Title:	Basic Education and Health Care
Pillar:	Global Health
Strategic Objective:	620-013
Proposed FY 2004 Obligation:	\$22,000,000 CSH; \$4,750,000 DA
Prior Year Unobligated:	\$0
Proposed FY 2005 Obligation:	\$23,174,000 CSH; \$5,171,000 DA
Year of Initial Obligation:	FY 2004
Year of Final Obligation:	FY 2009

Summary: USAID/Nigeria's new social sector program integrates activities and approaches in basic education, child survival, and family planning/reproductive health at the community level to achieve synergistic impact. The program will improve the quality of social sector services by developing standards based on best practices and training teachers and health care providers to meet these standards. It will also improve the enabling environment for service provision and use by fostering community-based partnerships, mobilizing resources, and advocating use of these resources for health and education. The planned activities plan to expand demand for improved social sector services through scaling-up of successful models of community mobilization and increase access to services, commodities and materials through strengthened behavior change programs and social marketing, development of supplemental teaching and learning materials, and targeted initiatives for special groups. This SO also programs resources from the Africa Education Initiative (AEI) for teacher training and girls' education.

Inputs, Outputs, Activities:

FY 2004 Program:

Quality social sector services (\$2,940,000 CSH, \$733,000 DA): USAID will support pre-service and in-service training for primary-level school teachers and training of health workers to internationally recognized standards of practice. In FY 2004 an estimated 5,000 teachers and 3,000 health personnel in five target states will be directly reached through these training activities. The program will also improve supervisory skills by engaging relevant local and state government officials, associations and NGOs to implement supportive mentoring for both newly-trained and previously-trained teachers and health care providers. Principal contractors and grantees: to be determined.

Demand for improved social sector services (\$6,225,000 CSH, \$1,221,000 DA): Technical assistance will be focused on communities to raise awareness and increase demand for health and education services, and also to increase community-level capacity (particularly in community-based organizations such as PTAs and women's groups) to advocate for their health and education priorities. USAID will work at the local level with entities such as faith-based organizations (FBOs) and community groups to create demand for behavior change, and for services to increase knowledge of disease prevention and treatment options in the community, as well as the importance of investing in girls' education. Principal contractors and grantees: Population Services International (PSI), Academy for Educational Development (AED), others to be determined.

Access to services (\$7,105,000 CSH, \$1,221,000 DA): USAID will increase the availability of health and education services and products by working with the public, private and NGO sectors. Social marketing will focus on behavior change messages, contraceptives, insecticide-treated bed nets, and pre-packaged drugs for malaria treatment. Wider availability of these and other commodities such as Vitamin A, essential medical supplies and instruction materials will also be promoted through commercial and public sector channels. Activities directed at improving primary school retention and completion will be expanded, especially for girls in northern Nigeria. USAID will foster the development of public-private

partnerships to increase the availability of health and education services. Principal contractors and grantees: Population Services International (PSI), AED, others to be determined.

Enabling environment (\$5,730,000 CSH, \$1,575,000 DA): USAID will work with the relevant ministries at the national level, as well as state and local counterparts, to strengthen policy development and implementation by creating an environment for dialogue, debate and action that will result in policy change. Strengthened data collection capacity will improve decision making and facilitate performance monitoring and impact assessment in the education and health sectors. The program will engage community groups and leaders - PTAs, NGOs and community and faith-based organizations - to create an enabling environment for policy implementation at the local level, especially targeting schools, clinics and local government entities. Building public-private partnerships will also be an important tool for improving the enabling environment for service provision. Principal contractors and grantees: to be determined.

FY 2005 Program:

Quality social sector services (\$3,519,000 CSH, \$960,400 DA): USAID plans to improve the quality of basic education and health services by enhancing the ability of the public and private sectors and NGOs to deliver services more effectively and efficiently. USAID will ensure performance improvement and use of state-of-the-art standards of practice in health and education. Same implementers as FY 2004.

Demand for improved social sector services (\$4,895,000 CSH, \$1,655,600 DA): USAID will continue to work at the state and local levels to raise awareness and increase demand for health and basic education services. Mass media campaigns promoting effective malaria treatment and use of insecticide-treated bed nets will be conducted. Same implementers as FY 2004.

Access to services (\$7,975,000 CSH, \$1,390,600 DA): Efforts will continue to focus on improving the availability of key health and basic education services and products. CSH resources will be used to further expand and strengthen behavior change and social marketing of insecticide-treated bednets and prepackaged malaria treatments, and both CSH and DA funds will be used to strengthen public-private partnerships to achieve results. Same implementers as FY 2004.

Enabling environment (\$6,785,000 CSH, \$1,164,400 DA): USAID will continue to work with institutions at the national, state and local levels to strengthen policy development and implementation for health and basic education. Resources will also be used to provide technical assistance to support advocacy networks that promote the involvement of civil society organizations in health and education sector decision-making. Same implementers as FY 2004.

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

Performance and Results: FY 2004 is the first year of implementation for USAID's new social sector program. By 2009, principal outcomes of USAID's social sector service delivery program in target states and local government areas will include an increase in the use of modern contraceptives from eight percent to 10%, DPT3 (diphtheria, pertussis, tetanus) coverage increased from 20% to 60%, and a five percent increase in girl's retention rates and a 10% improvement in literacy and numeracy scores in targeted primary schools.

US Financing in Thousands of Dollars

Nigeria

	CSH	DA
620-013 Basic Education and Health Care		
Through September 30, 2002		
Obligations	0	0
Expenditures	0	0
Unliquidated	0	0
Fiscal Year 2003		
Obligations	0	0
Expenditures	0	0
Through September 30, 2003		
Obligations	0	0
Expenditures	0	0
Unliquidated	0	0
Prior Year Unobligated Funds		
Obligations	0	0
Planned Fiscal Year 2004 NOA		
Obligations	22,000	4,750
Total Planned Fiscal Year 2004		
Obligations	22,000	4,750
Proposed Fiscal Year 2005 NOA		
Obligations	23,174	5,171
Future Obligations	0	0
Est. Total Cost	45,174	9,921