

## Data Sheet

<b>USAID Mission:</b>	Africa Regional
<b>Program Title:</b>	Family Planning Promotion
<b>Pillar:</b>	Global Health
<b>Strategic Objective:</b>	698-020
<b>Proposed FY 2004 Obligation:</b>	\$1,927,000 CSH
<b>Prior Year Unobligated:</b>	\$100,000 CSH
<b>Proposed FY 2005 Obligation:</b>	\$2,000,000 CSH
<b>Year of Initial Obligation:</b>	FY 1999
<b>Year of Final Obligation:</b>	FY 2004

**Summary:** USAID's program to promote family planning and reproductive health (FP/RH) services provides strategic leadership to improve advocacy and mobilize donor resources for stronger FP/RH policies. Strategies include dissemination of best practices in FP/RH service delivery; strategic support for new approaches to preventing unwanted pregnancy and sexually transmitted infections (STIs) among high-risk groups; strategies for empowering women through FP/RH services and the eradication of harmful traditional practices such as female genital cutting (FGC); and capacity building to strengthen African ability to plan, conduct and evaluate FP/RH programs.

### Inputs, Outputs, Activities:

#### FY 2004 Program:

Disseminating Best Practices (\$1,250,000 CSH; \$100,000 prior year CSH): Building on USAID's previous advocacy efforts, key tools and products that highlight lessons learned will be disseminated through regional institutions and intergovernmental agencies so that tools and products can be adopted at the national and sub-national level. This will include working with regional technical institutions that have provided leadership in FP/RH in Africa, as well as building networks and coalitions of non-governmental organizations (NGOs) and civil society groups which can advocate for adopting best practices to improve FP/RH in Africa. Special emphasis will be given to improving management of contraceptive supplies and promoting technical exchanges among African partners across countries. USAID will continue to build strategic alliances with cooperating agencies and institutions serving U.S. minorities, beginning with historically black U.S. colleges and universities (HBCUs). These alliances will focus on creating and enhancing partnerships to work with African governments and regional institutions in order to increase commitment and advocacy for FP in the region. Principal contractors and grantees: World Health Organization/Africa Regional Office (WHO/AFRO); Public Health Institute (PHI); Academy for Educational Development (AED); Minority Health Professions Foundation (MHPF); JHPIEGO Corporation; and the Futures Group.

Reaching Youth and Men (\$202,000 CSH): USAID will develop and identify promising new ways of working with youth and men on key RH issues. These include expanding work with civil society youth networks, which sponsor youth-focused events at the country and regional level, and increasing the number of programs addressing adolescents and men. Principal contractors and grantees: Family Health International (FHI).

FGC Mobilization and Advocacy (\$300,000 CSH): USAID's continuing support for promoting women's empowerment through advocacy and research has led to increased attention to FGC. USAID's inputs will continue to influence programs and efforts to curtail FGC in Senegal, Burkina Faso, Sierra Leone, Ghana, Tanzania and Liberia. USAID will also expand distribution of the USAID-supported booklet "Abandoning Female Genital Cutting," with its successful strategies for eliminating FGC, to more African policy- and decision-makers. Principal contractors and grantees: Population Reference Bureau (PRB), the Population Council/ Frontiers, and Population Leaders Program/Public Health Institute (PLP/PHI).

Mobilizing Journalists for FP/RH (\$175,000 CSH): USAID capitalizes on Africa's emerging democratic institutions and the growing free press to spread information about FP/RH. USAID will continue to work with the Pop'Mediafrique program to enable dozens of newspaper and radio journalists in West, East, and Southern Africa to convey fact-based, timely information on FP/RH to a wide audience. Principal contractors and grantees: PRB.

A follow-on strategic objective will begin in FY 2004 and will be notified separately upon approval.

**FY 2005 Program:**

Disseminating Best Practices (\$1,300,000 CSH): USAID resources will be used to identify emerging topics and disseminate promising new practices to African partners and regional institutions; share new tools and materials with USAID missions, ministries of health, NGOs and regional institutions in order to strengthen their ability to implement FP/RH programs; and advocate for improved funding of FP/RH programs among African leaders and donor partners. USAID plans to continue support to selected HBCUs and their faculty members to facilitate research and technical assistance to improve African FP/RH programs. Principal contractors and grantees: Same as above.

Reaching Men and Youth: (\$200,000 CSH) AFR will continue to work with Youth Net and Africa Alive to mobilize and motivate youth to adopt better RH practices and become change agents. Principal contractors and grantees: Same as above.

FGC Mobilization and Advocacy (\$325,000 CSH): USAID will continue to focus attention on restricting and reducing the practice of FGC in Africa. Principal contractors and grantees: Same as above.

Mobilizing Journalists for FP/RH (\$175,000 CSH): The media remains a powerful means of communicating FP/RH information to a wide array of audiences. USAID will continue to work with journalists to ensure that high-quality information is accessible to African citizens. Principal contractors and grantees: Same as above.

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

**Performance and Results:** During FY 2003 USAID made significant strides in helping increase the availability and use of sustainable, quality FP/RH services in sub-Saharan Africa. To reach the underserved population, Forum for Women Educationists in Africa (FAWE) trained 48 trainers from 10 countries to train local teachers in adolescent reproductive health (ARH) and life skills education. Following the training, its Zambia chapter leveraged funds for an in-country training of trainers in ARH, creation of SAFE clubs for youth, and training of peer educators to teach ARH skills to in-school and out-of-school youth. In collaboration with other donors, USAID supported two operations research studies in Senegal and Burkina Faso to test the feasibility and effectiveness of the Village Empowerment Program (VEP) to reduce the practice of FGC. The Senegalese Parliament has now adopted a resolution of zero tolerance for FGC, and 1,200 villages in Senegal have declared an end to FGC practices. In Burkina Faso, a well-attended public meeting declared the abandonment of the practice. The development and application of a maternal health advocacy monitoring tool resulted in Uganda's ministry of health making a commitment to revitalize maternal health efforts to improve the status of women and newborns in Uganda. USAID leveraged about \$100,000 from the World Bank to reduce maternal and neonatal morbidity and mortality in Ethiopia, Malawi and Uganda. Reproductive health coverage by the media increased significantly due to USAID-supported training of 26 West African newspapers, radio editors and journalists.

## US Financing in Thousands of Dollars

Africa Regional

	CSH	DA
698-020 Family Planning Promotion		
<b>Through September 30, 2002</b>		
Obligations	2,700	2,891
Expenditures	1,115	2,160
Unliquidated	1,585	731
<b>Fiscal Year 2003</b>		
Obligations	1,900	0
Expenditures	985	533
<b>Through September 30, 2003</b>		
Obligations	4,600	2,891
Expenditures	2,100	2,693
Unliquidated	2,500	198
<b>Prior Year Unobligated Funds</b>		
Obligations	100	0
<b>Planned Fiscal Year 2004 NOA</b>		
Obligations	1,927	0
<b>Total Planned Fiscal Year 2004</b>		
Obligations	2,027	0
<b>Proposed Fiscal Year 2005 NOA</b>		
Obligations	2,000	0
Future Obligations	0	0
Est. Total Cost	8,627	2,891