

## Data Sheet

<b>USAID Mission:</b>	Guinea
<b>Program Title:</b>	Family Planning and Health (FPH)
<b>Pillar:</b>	Global Health
<b>Strategic Objective:</b>	675-002
<b>Proposed FY 2004 Obligation:</b>	\$6,600,000 CSH
<b>Prior Year Unobligated:</b>	\$0
<b>Proposed FY 2005 Obligation:</b>	\$6,202,000 CSH
<b>Year of Initial Obligation:</b>	FY 1997
<b>Year of Final Obligation:</b>	FY 2005

**Summary:** USAID's health program in Guinea works to increase the use of products, services and practices that promote better family planning, improve maternal and child health, and prevent the transmission of HIV/AIDS. Key activities funded through this program include training of public sector health care providers, promotion and sale of health and family planning products, and community-level interventions designed to change behavior.

### Inputs, Outputs, Activities:

#### FY 2004 Program:

Improve Child Health (\$2,000,000 CSH). With CSH resources, USAID will continue to improve management capacities within the Ministry of Health (MOH) at the central, regional and local health center levels. As a result, measles and DPT3 (diphtheria, pertussis, tetanus) immunization coverage will improve, Vitamin A supplementation will increase, and the quality of care will be enhanced for hundreds of thousands of sick children in Upper Guinea, USAID's main intervention zone. Emphasis will be placed on training health providers and community-based agents and improved supervision of health centers. Promotion of health products will contribute to the reduction of child mortality through the sale of over four million oral rehydration salt packets and 370,000 insecticide-treated bed nets. Also under this program, P.L. 480-funded grantees will help reach over 1,000 moderately malnourished children through innovative nutrition interventions. Principal contractors and grantees: Management Sciences for Health (MSH) (prime), John Hopkins University Center for Communication Programs (JHU/CCP) (sub), Population Services International (PSI) (prime), and Helen Keller International (HKI) (sub).

Prevent the Spread of HIV/AIDS (\$2,200,000 CSH). USAID/Guinea's HIV/AIDS funding will be used to support behavior change communication (BCC) interventions in high-prevalence areas of the country and among populations engaging in high-risk behavior. The ABC approach (abstinence, be faithful, use of condoms) emphasized through advocacy and awareness-raising activities among targeted populations and community, government and religious leaders will increase adoption of safe behaviors such as abstinence, delayed sexual debut and correct and consistent condom use. USAID will continue to market and sell condoms and ensure the functioning of at least two voluntary counseling and testing sites and a national HIV/AIDS surveillance system. Treatment of sexually transmitted illnesses will be made available in all health centers in the USAID intervention zone. USAID will work to reduce the stigma of people living with HIV/AIDS and improve coordination among donors and Government of Guinea agencies. Principal contractors and grantees: Family Health International (FHI) (prime), PSI (prime), MSH (prime), JHU/CCP, Winrock, Cooperative League of the USA (CLUSA), Education Development Corporation (EDC), and World Education (subs).

Improve Reproductive Health Services (\$1,800,000 CSH). Nationwide promotion and sales of contraceptives will remain the cornerstone of USAID/Guinea's family planning program. These efforts will contribute to increasing the contraceptive prevalence rate. USAID will support the long-term sustainability of Guinea's contraceptive logistics system by improving the logistics and accounting systems, and strengthening management of procurement and distribution at the MOH. USAID will fund the training of

traditional birth attendants so that 75% of all districts in three target prefectures will have at least one USAID-trained traditional birth attendant, and at least 62% of all pregnant women will benefit from three or more pre-natal consultations. Principal contractors and grantees: MSH (prime), EngenderHealth (sub), JHPIEGO (prime) and HKI (sub).

Demographic and Health Survey (\$600,000 CSH). USAID/Guinea will support the analysis of data collected through the 2004 Demographic and Health Survey (DHS), the most important and reliable source of health and demographic statistics in Guinea. The Government of Guinea and many development partners rely on this periodic survey to measure progress, identify needs and plan programs. Results of this and other assessments will help develop the health component of USAID/Guinea's Country Strategic Plan. Principal contractor: Macro (prime).

**FY 2005 Program:**

Improve Child Health (\$2,002,000 CSH). Child survival resources will be used to reach immunization coverage and Vitamin A distribution rate targets of 80%, ensuring adherence to MOH norms and procedures for integrated management of childhood illnesses (IMCI), and to improve care-seeking behaviors in the community and at home. Principal contractors and grantees: PSI (prime) and others to be determined.

Prevent the Spread of HIV/AIDS (\$2,200,000 CSH). USAID will use its HIV/AIDS resources to continue BCC interventions, strengthen sentinel surveillance, and expand its voluntary counseling and testing (VCT) program. USAID may incorporate care and support for people living with HIV/AIDS into its program and will seek partnerships with local community organizations, including faith-based organizations. Principal contractors and grantees: PSI (prime) and others to be determined.

Improve Reproductive Health (\$2,000,000 CSH). Promotion and sale of contraceptives will be maintained. Community and health center-based reproductive health activities, including emergency obstetrical and neo-natal care, will also continue. Principal contractors and grantees: PSI (prime) and others 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 of increasing use of essential health services, products and practices. According to a recent household survey in USAID's intervention zone, contraceptive prevalence rose from 2.9% in 1999 to 6.9% in 2003, with some areas of the region reaching 20%. Immunization rates for two key USAID/Guinea indicators--measles and DPT3--surpassed expectations. In 2003, measles immunization coverage was 72.1% compared to a target of 60%, while DPT3 coverage was 64.9%, exceeding its 2003 target by nearly 10 percentage points. Expectations were met and continue to improve for sales of commercially-marketed contraceptive products through the public health sector in Upper Guinea.

By FY 2005 Guineans in two areas of the country with the highest HIV prevalence rates will have access to high quality VCT services as well as accurate information about how to protect themselves against infection. Contraceptive prevalence will continue to increase, and close to 75% of children in USAID's targeted zone will have been fully vaccinated in their first year of life.

## US Financing in Thousands of Dollars

Guinea

675-002 Family Planning and Health (FPH)	CSH	DA	DFA
<b>Through September 30, 2002</b>			
Obligations	21,902	14,080	10,974
Expenditures	14,293	13,324	10,974
Unliquidated	7,609	756	0
<b>Fiscal Year 2003</b>			
Obligations	6,610	0	0
Expenditures	3,631	603	0
<b>Through September 30, 2003</b>			
Obligations	28,512	14,080	10,974
Expenditures	17,924	13,927	10,974
Unliquidated	10,588	153	0
<b>Prior Year Unobligated Funds</b>			
Obligations	0	0	0
<b>Planned Fiscal Year 2004 NOA</b>			
Obligations	6,600	0	0
<b>Total Planned Fiscal Year 2004</b>			
Obligations	6,600	0	0
<b>Proposed Fiscal Year 2005 NOA</b>			
Obligations	6,202	0	0
Future Obligations	0	0	0
Est. Total Cost	41,314	14,080	10,974