

## Data Sheet

<b>USAID Mission:</b>	Paraguay
<b>Program Title:</b>	Reproductive Health
<b>Pillar:</b>	Global Health
<b>Strategic Objective:</b>	526-006
<b>Status:</b>	Continuing
<b>Planned FY 2006 Obligation:</b>	\$2,884,000 CSH
<b>Prior Year Unobligated:</b>	\$0
<b>Proposed FY 2007 Obligation:</b>	\$0
<b>Year of Initial Obligation:</b>	2001
<b>Estimated Year of Final Obligation:</b>	2006

**Summary:** The Reproductive Health program provides technical assistance and training to improve the provision of decentralized, community-based health care and to expand access to quality reproductive and maternal health services.

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

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

#### **FY 2006 Program:**

Improve Maternal Health and Nutrition (\$1,102,000 CSH). USAID provides technical assistance to strengthen the central, regional and local Ministry of Health (MOH) in the implementation of norms and protocols for maternal mortality surveillance, including support to improve the current public health information system. Principal contractor and grantees: to be determined.

Support Democratic Local Government and Decentralization (\$450,000 CSH). Local government control in the provision of health services is being strengthened through technical assistance to regional and local authorities and through greater community participation in the design, evaluation and financing of health care. USAID's technical assistance continues to help the MOH identify ways it can decentralize authorities and functions including supporting the extension of the community pharmacy concept into new areas by increasing awareness and providing support to two departmental governments and local health councils. USAID is also strengthening the already successful grassroots insurance schemes in three municipalities and disseminating information about the success to other municipalities and departments as well as to the MOH and other donors. Tools developed under this initiative are being transferred to the central MOH in order to implement the experiences at new sites. Discussion is underway to determine if USAID assistance will be provided to help Paraguay address threats caused by the avian flu pandemic. Principal grantee: Center for Information and Development Resources.

Support Family Planning (\$1,332,000 CSH). USAID continues to coordinate with the United Nations Fund for Population Activities in supporting the establishment of a sustainable mechanism for the purchase and distribution of contraceptives. USAID is strengthening the Government of Paraguay's contraceptive distribution system including its capacity for forecasting, financing, and procurement. USAID provides support for family planning services at low cost clinics located in economically depressed areas in the capital and other large cities. In coordination with other donors, USAID is updating and disseminating family planning norms in order to give users informed choices. Principal contractor and grantees: Paraguayan Center for Population Studies and John Snow, Inc.

#### **FY 2007 Program:**

No obligations are planned in FY 2007.

**Performance and Results:** In FY 2005, the community pharmacy program was successfully expanded and now includes a total of over 160 pharmacies. Prices are kept low through bulk purchases and low operating costs. In areas where the pharmacies operate, pregnant women now have access to low cost medicines and supplies necessary during birth. The social pharmacy system distributed medicines to approximately 250,000 people during the year. Alternatives to health coverage, such as low cost health insurance, were offered in one new municipality during the year to help finance basic health care costs. The MOH has requested assistance to replicate the model in the northern part of the country, a region with a high level of poverty and difficulties in accessing health care. The system is being revised to expand the number of services offered to the public. This model was selected by the Organization of American States as one of the most successful decentralization efforts in Latin America.

Quality health services were improved during the year by strengthening the capacity of health facilities. Approximately 75% of the 19 facilities where USAID is providing support have reached the capacity to provide basic essential obstetric care. Health centers are staffed by trained health providers and offer counseling to clients on family planning methods and alternatives.

A high level of community participation is occurring through local health councils to improve preventive health measures and promote reproductive health. During FY 2005, the number of communities offering basic health services increased by two during FY 2005, for a total of 15. The system includes trained promoters that raise awareness of services, undertake surveys to increase knowledge of the local health situation, and help identify health services for children and women. USAID continued to support a non governmental organization that operates a system of clinics to provide family planning and other reproductive health services at affordable prices. The clinic has achieved the expected target of 80% of cost recovery and has purchased a new clinic in with their own revenues. During the year, 31 agreements were implemented between the MOH, local health councils and local governments to decentralize some health functions and authorities. USAID provided support to implement 12 of these agreements. In those health facilities where assistance has been provided, the number of users has increased dramatically and new services and personnel were incorporated as a result of the availability of resources. In addition, technical assistance was provided to regionalize the five year Reproductive Health Plan in five departments.

Finally, the results of the Reproductive Health Survey are widely available. Paraguay has seen a steady improvement in reproductive health. The total fertility rate has decreased from 4.3 children per woman measured during the period from 1995 to 1998 to 2.9 children per woman measured from 2001 to 2004. Contraceptive prevalence increased from 47.7% of women aged 14 to 44 years in 1998 to 60.5% in 2004. The survey serves as a snapshot of the maternal and reproductive health situation in the country and provides baseline information for the National Reproductive Health Plan.

Continued progress will result in a reduction in Paraguay's fertility, maternal, and infant mortality rates. Family planning services will have been expanded to marginalized populations. Local participation will have ensured that the services demanded are actually provided and that the concerns of local customers are addressed.

## US Financing in Thousands of Dollars

Paraguay

526-006 Reproductive Health	CSH	DA
<b>Through September 30, 2004</b>		
Obligations	6,269	2,445
Expenditures	2,886	2,070
Unliquidated	3,383	375
<b>Fiscal Year 2005</b>		
Obligations	1,980	0
Expenditures	3,385	0
<b>Through September 30, 2005</b>		
Obligations	8,249	2,445
Expenditures	6,271	2,070
Unliquidated	1,978	375
<b>Prior Year Unobligated Funds</b>		
Obligations	0	0
<b>Planned Fiscal Year 2006 NOA</b>		
Obligations	2,884	0
<b>Total Planned Fiscal Year 2006</b>		
Obligations	2,884	0
<b>Proposed Fiscal Year 2007 NOA</b>		
Obligations	0	0
Future Obligations	0	0
Est. Total Cost	11,133	2,445