USAID'S CHILD SURVIVAL AND HEALTH GRANTS PROGRAM ANNOUNCES SEVEN NEW FY2012 AWARDS

Photo Credit: Nazo Kureshy

The Child Survival and Health Grants Program (CSHGP) is a highly effective, dynamic partnership between USAID and international non-governmental organizations (NGOs) to leverage "what works" in community oriented programming to sustainably improve maternal, newborn, and child health outcomes. The CSHGP supports and leverages the **entrepreneurship, technical expertise, and capacity of international NGOs to extend programs into vulnerable communities by working with local partners to support the leadership of national governments** in implementation of policies and strategies that improve newborn, child, and maternal health. The program's focus on operations research enables **international NGOs to form new partnerships with research institutions and Ministry of Health program managers** to build evidence for locally prioritized innovative solutions, in a realistic implementation context, that advance national and global priorities and strategies.

The USAID Bureau for Global Health's Office of Health, Infectious Diseases, and Nutrition (HIDN) is pleased to announce **seven new awards made to international NGOs** through the CSHGP FY 2012 Request for Applications (RFA). Through these awards, **international NGOs are collaborating with governments, research institutions, local NGOs, and other local and national partners to introduce and test innovative solutions to implementation challenges through operations research and to build the capacity of local health and community systems** to deliver for vulnerable women and children**.**

HealthRight International, Kenya (2012-2016)

Partners: Marakwet District Health Management Teams, Sobon Support Group, Partner health facilities

> HealthRight will support and evaluate task shifting of a Ministry of Health approved package of selected maternal, newborn, and child health (MNCH) services to community health workers in rural areas to improve service acceptability, availability, quality, and utilization.

Concern Worldwide, Kenya (2012-2016)
Partners: District Health Management Teams of Marsabit Central and Moyale Districts, Pastoralist Integrated Support Program (PISP), Johns Hopkins University Bloomberg School of Public Health

> Concern Worldwide will use Maternity Waiting Homes as a strategy to improve access to skilled birth attendants and key MNCH services in a pastoralist region.

Save the Children, India (2012-2015)
Partners: Government of Uttar Pradesh (Gonda District), International Clinical Epidemiology Network (INCLEN), Medical College of Aligarh Muslim University, National Neonatology Forum, PATH

In order to prevent newborn deaths due to asphyxia, Save the Children will implement a focused package for scalable quality improvement and evaluate the improvements in quality of newborn resuscitation in primary health care settings in urban and rural areas of Uttar Pradesh.

Mercy Corps, Pakistan (2012-2016)
Partners: Balochistan Department of Health, Health Services Academy, Tameer Microfinance Bank, Easypaisa

Mercy Corps will improve access to skilled care in urban and rural areas of underserved Balochistan by deploying private community midwives with a package of community and health system support and monitoring strategies (e.g. microfinance linked to mobile money/mHealth, effective linkages with Lady Health Workers, etc.).

The International Rescue Committee, Liberia (2012-2015)
Partners: Planned Parenthood Association of Liberia (PPAL), Liberia Ministry of Health and Social Welfare, Columbia University Mailman School of Public Health

The International Rescue Committee aims to increase access to family planning information and contraceptives through integration of family planning counseling into post partum care and the routine immunization system platform, introducing youth and adolescent reproductive health approaches, and task shifting the provision of injectable contraception to community health workers (CHWs).

Catholic Relief Services, Benin (2012-2016)
Partners: Benin National Malaria Control Program, Local Community Based Organizations (CBOs), Regional Public Health Institute (IRSP)

Catholic Relief Services will create and test culturally tailored behavior change strategies to promote the use of rapid diagnostic tests (RDTs) at the community level.

Medical Care Development International, Benin (2012-2017)
Partners: Benin National Malaria Control Program, Centre Recherche Entomologique de Contonou (CREC), private enterprises and government authorities in Seme-Kpodji commune

Medical Care Development International will enhance the operational life of long lasting insecticide treated nets (LLINs) by working with communities to identify and disseminate community-based, context specific and locally owned solutions.