PD-AAS-991

Annual Budget Submission

FY 1987

BUREAU FOR SCIENCE AND TECHNOLOGY

OFFICE OF HEALTH

JUNE 1985

Agency for International Development
Washington, D.C. 20523

UNCLASSIFIED

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SCIENCE AND TECHNOLOGY BUREAU
TABLE III - PROJECT OBLIGATIONS BY APPROPRIATION ACCOUNT
FY 1985 TO FY 1987

ST/HEA

PROJECT#	PROJECT TITLE	FY 85 OYB ($ WHOLE)	FY 1986 (CP) ($ 000)	FY 1987 PROPOSED ($ 000)	Page #	
	CS _ CHILD SURVIVAL FUND					
936_5951.	JOHN HOPKINS INTL HEALTH	$1,000,000	$0	$0		1477
	* * TOTALS FOR CS	$1,000,000	$0	$0		
	HE _ HEALTH					
931_0453.	MALARIA IMMUNITY AND VACCINATION-TOTAL	$10,000,000	$7,500,000	$7,500,000	6	956
931_1018.50	MASS MEDIA HEALTH PRACTICES	$0	$500,000	$1,000,000	7	1374
931_1126.	TROPICAL DISEASE RESEARCH	$3,200,000	$1,500,000	$1,500,000	8	259
936_3023.50	FAMILY HEALTH AND DEMOGRAPHIC SURVEYS	$200,000	$400,000	$400,000	9	1317
936_5901.	HEALTH DEVELOPMENT MANAGEMENT	$1,000,000	$0	$0		483
936_5920.	OPERATIONS RESEARCH - HEALTH	$2,000,000	$2,500,000	$1,000,000	10	870
936_5927.	TECHNOLOGY FOR PHC - PRITECH	$6,200,000	$1,850,000	$4,400,000	11	1296
936_5928.	DIARRHEAL DISEASE RESEARCH PROGRAM	$3,400,000	$2,400,000	$2,400,000	12	1118
936_5929.	HHS RESOURCE SUPPORT	$200,000	$200,000	$200,000	13	1116
936_5932.	MEDEX SUPPORT	$575,000	$0	$500,000	14	1242
936_5935.	DIAGNOSTIC TECHNOLOGY DEVELOPMENT	$1,100,000	$725,000	$1,550,000	15	1249
936_5939.	ORT HELP	$2,500,000	$875,000	$1,000,000	16	1313
936_5940.	PEDIATRIC CHRONIC DIARRHEA DIS RSCH	$1,000,000	$0	$0		1314
936_5942.	WATER AND SANITATION FOR HEALTH II	$2,931,000	$2,500,000	$2,500,000	17	1387
936_5947.	VACCINE DEVELOPMENT AND HEALTH RESEARCH	$3,800,000	$0	$0	18	1418
936_5948.	VECTOR BIOLOGY AND CONTROL	$1,350,000	$1,500,000	$1,550,000	19	1428

SCIENCE AND TECHNOLOGY BUREAU
TABLE III - PROJECT OBLIGATIONS BY APPROPRIATION ACCOUNT
FY 1985 TO FY 1987

ST/HEA

PROJECT#	PROJECT TITLE	FY 85 OYB ($ WHOLE)	FY 1986 (CP) ($ 000)	FY 1987 PROPOSED ($ 000)	Page #	
936_5950.	ASIA/PACIFIC PUBLIC HEALTH MGT PROGRAM	$2,200,000	$0	$0		1475
936_5952.	APPLIED DIARREAL RESEARCH	$575,000	$550,000	$1,500,000	20	1476
936_5953.	HEALTH COMMODITIES	$2,000,000	$0	$0		1479
936_5954.	MOREHOUSE SCHOOL OF MEDICINE	$897,000	$0	$0		1480
936_5957.	AMERICARES	$800,000	$0	$0		1494
	* * TOTALS FOR HE	$45,928,000	$23,000,000	$27,000,000		
* * TOTAL FOR: ST/HEA		$46,928,000	$23,000,000	$27,000,000		

042 - HEALTH

FY 1987 ANNUAL BUDGET SUBMISSION
TABLE IV - PROJECT BUDGET DATA

BUREAU FOR SCIENCE AND TECHNOLOGY

PROJECT NUMBER AND TITLE	G L	OBLIG DATE INIT	OBLIG DATE FIN	-TOTAL COST- AUTH	-TOTAL COST- PLAN	OBLIG THRU FY 84	FY 84 PIPE-LINE	ESTIMATED U.S. DOLLAR COST ($000) FY 1985 OBLIG-ATIONS	FY 1985 EXPEND-ITURES	FY 1986 OBLIG-ATION	FY 1986 EXPEND-ITURES	FY 87 AAPL	SUB CAT	% PVO	PEACE CORPS	ITEM NO
HEALTH																
9310453 MALARIA IMMUNITY & VACCINATION RESEARCH	G	75	89	75112	75112	36894	9517	10000	11500	7500	14000	7500	HECR	0		8215
9311018.50 MASS MEDIA AND HEALTH PRACTICES	G	78	90	---	11700	---	---	---	---	500	100	1000	HEEH	0		12133
9311126 TROPICAL DISEASE RESEARCH	G	78	90	20300	40300	20300	---	3200	3200	1500	1500	1500	HECR	0		8217
9311176 WATER SUPPLY AND SANITATION FOR HEALTH	G	80	84	17000	12658	12632	508	---	508	---	---	---	HEWS	9		8219
9311179 COMPREHENSIVE METHODS OF VECTOR CONTROL	G	82	84	636	636	636	29	---	29	---	---	---	HECR	0		11391
9320632.01 FERTILITY IMPACT-DIFFERENT FP PRGS (POP)	G	72	84	2769	2769	2769	252	---	252	---	---	---		0		11587
9363023 DEMOGRAPHIC AND HEALTH SURVEYS	G	84	88	5250	2625	400	400	200	400	400	600	400	HEPP	0		11607
9365901 HEALTH DEVELOPMENT PLANNING	G	81	85	5241	4821	3821	834	1000	1184	---	400	---	HEPP	15		8221
9365920 OPERATIONS RESEARCH-HEALTH	G	81	89	9200	19180	7180	2528	2000	2000	2500	3700	1000	HEPP	25		8218
9365927 TECHNOLOGY FOR PHC - PRITECH	G	83	89	25000	25000	4265	1894	6200	4500	1850	2400	4400	HEDH	20		8220
9365928 DIARRHEAL DISEASE RESEARCH	G	84	89	14500	16000	975	950	3400	2975	2400	3700	2400	HECR	5		8216

PROJECT NUMBER AND TITLE	OBLIG DATE INIT	FIN	-TOTAL COST- AUTH	PLAN	OBLIG THRU FY 84	FY 84 PIPE-LINE	ESTIMATED U.S. DOLLAR COST ($000) FY 1985 OBLIG-ATIONS	FY 1985 EXPEND-ITURES	FY 1986 OBLIG-ATION	FY 1986 EXPEND-ITURES	FY 87 AAPL	SUB CAT	% PVO	PEACE CORPS	ITEM NO
9365929 HHS RESOURCE SUPPORT	G 84	C	---	---	100	95	200	250	200	220	200	HEPP	0		8223
9365932 MEDEX SUPPORT	G 83	89	4600	4600	1907	1338	575	840	---	1000	500	HEEH	15		8226
9365935 DIAGNOSTIC TECHNOLOGY DEVELOPMENT	G 85	91	10000	10000	---	---	1100	---	725	800	1550	HECR	0		8222
9365939 ORT-HELP	G 84	88	4800	7300	1204	960	2500	3000	875	1000	1000	HEPP		PC	11588
9365940 PEDIATRIC CHRONIC DIARRHEAL DISEASE	G 84	86	3000	3000	998	968	1000	800	---	800	---	HECR	0		11589
9365942 WATER AND SANITATION FOR HEALTH II	G 84	89	19700	19700	1000	1000	2931	3500	2500	2650	2500	HEWS	7		12134
9365947 VACCINE DEVELOPMENT AND HEALTH RESEARCH	G 84	88	6000	6000	430	430	3800	1200	---	1100	---	HECR			13876
9365948 VECTOR BIOLOGY AND CONTROL	G 85	94	19800	19800	---	---	1350	175	1500	1700	1550	HEPP	5		13877
9365950 ASIA/PACIFIC PUB HEALTH MGMT PROG	G 85	85	---	2200	---	---	2200	500	---	1000	---	HEPP			14184
9365952 APPLIES DIARRHEAL DISEASE RESEARCH	G 85	90	---	7500	---	---	575	100	550	800	1500	HECR			14183
9365953 HEALTH COMMODITIES	G 85	85	---	2000	---	---	2000	1000	---	1000	---	HEDH			14185
9365954 MOREHOUSE SCHOOL OF MEDICINE															

042 - HEALTH

FY 1987 ANNUAL BUDGET SUBMISSION
TABLE IV - PROJECT BUDGET DATA

BUREAU FOR SCIENCE AND TECHNOLOGY

PROJECT NUMBER AND TITLE	OBLIG DATE G L INIT FIN	-TOTAL COST- AUTH	PLAN	OBLIG THRU FY 84	FY 84 PIPE-LINE	ESTIMATED U.S. DOLLAR COST ($000) FY 1985 OBLIG-ATIONS	FY 1985 EXPEND-ITURES	FY 1986 OBLIG-ATION	FY 1986 EXPEND-ITURES	FY 87 AAPL	SUB CAT	% PVO	PEACE CORPS	ITEM NO
	G 85 85	---	897	---	---	897	100	---	200	---	HEPP			14196
9365957 AMERICARES	G 85 85	---	800	---	---	800	50	---	250	---	HECR	100		14736
APPROPRIATION														
TOTAL		242908	294598	95511	21703	45928	38063	23000	38920	27000				
GRANT		242908	294598	95511	21703	45928	38063	23000	38920	27000				
LOAN		---	---	---	---	---	---	---	---	---				
CHILD SURVIVAL FUND														
9365951 JOHNS HOPKINS INTL HEALTH CTR	G 85 85	1000	---	---	---	1000	100	---	900	---				14202
APPROPRIATION														
TOTAL		1000	---	---	---	1000	100	---	900	---				
GRANT		1000	---	---	---	1000	100	---	900	---				
LOAN		---	---	---	---	---	---	---	---	---				
FUNCTIONAL ACCOUNT														
TOTAL		243908	294598	95511	21703	46928	38163	23000	39320	27000				
GRANT		243908	294598	95511	21703	46928	38163	23000	39320	27000				
LOAN		---	---	---	---	---	---	---	---	---				
COUNTRY TOTAL														
TOTAL		243908	294598	95511	21703	46928	38163	23000	39320	27000				
GRANT		243908	294598	95511	21703	46928	38163	23000	39320	27000				
LOAN		---	---	---	---	---	---	---	---	---				

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PROGRAM: Centrally Funded

ACTIVITY DATA SHEET

PROJECT MANAGER: Erickson

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)	
Malaria Immunity and Vaccine Research	Health	FY 87 7,500	LIFE OF PROJECT 75,112

NUMBER 931-0453 GRANT ☒ LOAN ☐	NEW ☐ CONTINUING ☒	PRIOR REFERENCE	INITIAL OBLIGATION	ESTIMATED FINAL OBLIGATION	ESTIMATED COMPLETION DATE OF PROJECT
		FY 85 C.P., Annex V, p. 88	FY 75	FY 89	FY 90

Purpose: To develop and test a practical vaccine for use in the field against the various forms of human malaria.

Background and Progress to Date: In recent years, there has been a major resurgence of malaria, particularly in Asia and Central America, mainly due to a buildup of drug resistance in the malaria parasites and insecticide resistance in the mosquito vectors. New alternative approaches are needed to supplement previous control methods. The Agency began to support malaria vaccine research in the late 1960's through a project with the University of Illinois. This original project showed that animals could be immunized against malaria. In 1974, an expert group was assembled to develop a strategy for expediting the development of a malaria vaccine. This resulted in expansion of the program and development of a collaborative network of 12 research laboratories working on various aspects of the problem. Shortly after establishment of the network, researchers at Rockefeller University had a dramatic breakthrough in the development of a system to grow malaria parasites outside of a animal. This continuous culture method is now being utilized in virtually every laboratory engaged in research on malaria immunity and vaccination. Its use has been directly responsible for numerous advances. These include the increase in the percentage of parasites in continuous culture from 10-12% to 60-73% accomplished at three laboratories, successful immunization of monkeys against the most lethal human malaria (Plasmodium falciparum) at two laboratories, a demonstration of the protective potential of continuous culture material at two laboratories, development of a semi-automated system for production of parasites in two laboratories, and progress towards development of a better adjuvant (a substance needed to improve performance of antigens in a vaccine) at two laboratories. Recently, several major breakthroughs have occured in the area of purification and characterization of the antigen through the latest monoclonal antibody and genetic engineering techniques. Information now available will allow the program to move more quickly to use some of the latest scientific achievements in the field of vaccine development, as well as begin collecting baseline data in malarious areas of several developing countries for the eventual conduct of clinical trials of malaria vaccines.

Host Country and Other Donors: None

Beneficiaries: All people in areas where malaria is endemic. Approximately two billion people.

FY 87 Program: To continue the research to develop a vaccine effective against human malaria which can be mass produced on a commercial scale. Activities include testing the immunogenicity of parasites produced in-vitro, purification of antigenic material, increasing the yield of parasite material, culturing different strains and/or species of human malaria in addition to the major killer P. falciparum, and forward planning for required clinical trials of experimentally prepared vaccines will involve conducting epidemiological surveys in several malarious, developing countries.

Major Outputs: The ultimate goal of this research program is a commercialy available vaccine against the several forms of human malaria. Several intermediate outputs include the in-vitro cultivation of malaria parasites, the concentration and synchronization of in-vitro cultures, the development of cell free culture media, the purification and characterization of antigenic material, development of appropriate adjuvants, animal testing of prepared vaccine to determine effectiveness, and the conduct of appropriate experiments and field trials to license the vaccine to determine effectiveness, and the conduct of appropriate experiments and field trials to license the vaccine in the U.S. for production and distribution.

A.I.D. Financed Inputs:	FY 87
Personnel (500 person months)	2,750
Travel	700
Equipment and Supplies	2,050
Other Direct Costs	2,000
TOTAL	7,500

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	36,894	27,377	9,517		American Institute of Biological Sciences New York University University of Hawaii
Estimated Fiscal Year 1985	10,000	11,500		thru 7/31/86	
Estimated through September 30, 1985	46,894	38,877	8,017		
Proposed FY 1986	7,500	14,000		thru 7/31/87	
Estimated through Fiscal Year 1986	54,394	52,877	1,517		
Proposed FY 1987	7,500	Future Year Obligations	Estimated Total Cost	thru 7/31/88	
		13,218	75,112		

PROGRAM: Centrally Funded

ACTIVITY DATA SHEET

PROJECT MANAGER: Clay

TITLE	FUNDS	PROPOSED OBLIGATION (in thousands of dollars)	
Mass Media and Health Practices	Education and Human Resources; Health, Agr., Rural Development and Nutrition	FY 87 1,000	LIFE OF PROJECT 9,160

NUMBER		PRIOR REFERENCE	INITIAL OBLIGATION	ESTIMATED FINAL OBLIGATION	ESTIMATED COMPLETION DATE OF PROJECT
931-1018 GRANT ☒ LOAN ☐	NEW ☐ CONTINUING ☒	Advice of Program Change: Sept. 9, 1983	FY 78	FY 90	FY 90

Purpose: To develop and demonstrate more effective means of using mass media to change health practices in rural areas of less developed countries (LDCs).

Background and Progress To Date: This project is developing and applying a communications methodology for reaching rural mothers to treat and prevent infant diarrhea, a leading cause of mortality in LDCs. Instruction in the administration of Oral Rehydration Therapy (ORT) and related child survival practices are the major health education objectives. The mass media of radio and simple print materials are used in coordination with village-level health workers. Content is developed with the involvement of rural communities and guided from appropriate medical, anthropological, psychological and communications perspectives. The health education methodology is being institutionalized in the participating host country institutions.

A successful core methodology has been developed. In Honduras and The Gambia, over 60% of households report using ORT to treat diarrhea; correct knowledge of treatment is higher; and a 40% drop in infant mortality attibuted to infant diarrhea has occurred in the Health Region I of Honduras.

The methodology is being diffused to five additional sites: Ecuador, Peru, Swaziland, Lesotho, and Indonesia. World Health Organization, UNICEF, and the World Bank have based their health education strategies for ORT in part on the findings of this project.

In this new phase of the project five additional sites will be selected to carry out additional objectives in child health. The project will:

- o apply the methodology to a broader range of child survival objectives including immunizations, breastfeeding and infant feeding, and improved personal hygiene,
- o learn how to reduce the cost and time it takes to institutionalize the project methodology in host country institutions, and
- o apply the methodology in different institutional contexts (such as the predominant reliance on private sector institutions in Haiti or the absence of an adequate health service infrastructure in the Sahel.)

Research findings from all sites will be directly applied worldwide in other projects relating to child health care.

Host Country and Other Donors: In-kind support for host-country operations.

Beneficiaries: Infants and small children along with their parents and siblings in Honduras, The Gambia and ten additional sites worldwide will benefit from the improved practice of child survival methods. Over 100 million people are estimated to be directly involved in the interventions. The spread effect should benefit a much larger population.

FY 87 Program: Partial funding will be provided for six of the sites.

Major Outputs:	All Years
Major R&D Interventions and Evaluations	2
Diffusion/Action Research Sites and Evaluations	10
Short-term Technical Assistance Missions/Seminars	20

A.I.D. Financed Inputs:	FY 87
Professional and Technical Personnel	750
Travel and Transportation	100
Equipment and Supplies	150
TOTAL	1,000

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984					Academy for Educational Development Stanford University
Estimated Fiscal Year 1985					
Estimated through September 30, 1985					
Proposed FY 1986	500*	100			
Estimated through Fiscal Year 1986	500	100	400		A new contractor
Proposed FY 1987	1,000*	Future Year Obligations 7,660	Estimated Total Cost 9,160	10/1/86 - 9/30/87	

*Under S&T/H OYB

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Buck

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)		
Tropical Disease Research (TDR)	Health	FY 87 1,500		LIFE OF PROJECT 40,300
NUMBER 931-1126 GRANT ☒ LOAN ☐ / NEW ☐ CONTINUING ☒	PRIOR REFERENCE FY 1985 C.P. Annex V, p. 88	INITIAL OBLIGATION FY 78	ESTIMATED FINAL OBLIGATION FY 90	ESTIMATED COMPLETION DATE OF PROJECT FY 91

Purpose: To support the World Health Organization (WHO)/UNDP/World Bank Special Program for Research and Training in Tropical Diseases (TDR).

Background and Progress to Date: The TDR is a multidonor effort designed to: (a) find better, more economical methods than those presently available for diagnosis, treatment, prevention, and control of seven diseases which are major problems in tropical areas: filarial infections (including onchocerciasis); schistosomiasis, malaria, Chagas disease, trypanosomiasis, leprosy, and leishmaniasis; (b) create a global network of scientific institutions in both developed and developing countries; and (c) provide substantial support to such institutions through financing of research and training. Funding is available to institutions in both developed and developing countries, but emphasis is placed on strengthening LDC capacities. Parallel efforts on the same diseases are made in epidemiology, study of socio-economic factors and vector biology and control.

A recent progress review of TDR by the Joint Coordinating Board noted that rapid and excellent scientific progress had been made since 1981. TDR has supported 1,180 projects, and over 2,000 scientists from 110 WHO member states have participated. Concern was expressed about the growing problems of resistance to insecticides and of drug resistance of malaria parasites. The major achievements included the following: In malaria research, the discovery that the Chinese herb remedy Qinhaosu contains a chemically active anti-malaria compound of high efficacy which is chemically completely different from all of the other known anti-malarials; in sleeping sickness new tse-tse fly traps and diagnostic field tests have been developed; in filariasis, the build up of an international network of laboratories with different animal models for rapid screening and pre-clinical testing of new promising drugs; in vector control, discovery of new agents (B. thuringensis) for biological vector controls; in schistosomiasis, the successful field testing and use of new and effective and safe drugs applicable to mass treatment; and in leprosy where resistance to the standard drugs has become a problem, considerable progress has been made towards development of a new vaccine based on the growth of leprosy bacilli in the nine-banded armadillo. In field research, epidemiologic and applied laboratory research has been carried out in Zambia, Gambia, Thailand, Papua New Guinea, Philippines, the OCP area of West Africa, and others.

Host Countries and Other Donors:

The total TDR budget for 1984-85 biennium was $66 million. Other donors are: African Development Bank, Australia, Austria, Bahamas, Belgium, Canada, China, Cuba, Cyprus, Denmark, Finland, France, Germany (FRG), India, IDRC (Canada), International Federation of Antileprosy Association, Iraq, Japan Shipbuilding Industry Foundation, Japan (JICA), Leprosy Trust Board, Netherlands, Niger, Nigeria, Norway, Romania, Sweden, Switzerland, U.K., Cameroon, Wellcome Trust, UNDP, World Bank, and WHO.

Beneficiaries: All people in countries or areas where these seven diseases are endemic.

FY 87 Program: A.I.D.'s FY 1987 contribution will be split among two categories: 1) management costs, 2) support for targeted research activities as determined by the Scientific Technical Advisory Committee.

Major Outputs (and A.I.D. unit costs): The U.S. contribution, about 11% of the total TDR budget, is co-mingled with other donor funds. Outputs can not be specified and attributed to U.S. funds.

A.I.D. Financed Inputs:	FY 87
Grant contribution	1,500

U.S. FINANCING (In thousands of dollars)

	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	20,300	20,300			World Health Organization
Estimated Fiscal Year 1985	3,200	3,200		thru 7/31/86	
Estimated through September 30, 1985	23,500	23,500			
Proposed FY 1986	1,500	1,500		" 7/31/87	
Estimated through Fiscal Year 1986	25,000	25,000			
Proposed FY 1987	1,500	Future Year Obligations	Estimated Total Cost	" 7/31/88	
		13,800	40,300		

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Cornelius

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)		
Family Health and Demographic Surveys	Population and Health	FY 87 2,375 POP, 400 HEA		LIFE OF PROJECT 22,050 POP, 2,625 HEA
NUMBER 936-3023 GRANT ☒ LOAN ☐ / NEW ☐ CONTINUING ☒	PRIOR REFERENCE FY 1985 C.P., Annex V, p. 88	INITIAL OBLIGATION FY 84	ESTIMATED FINAL OBLIGATION FY 88	ESTIMATED COMPLETION DATE OF PROJECT FY 89

Purpose: To improve the information base for economic and social planning and population/health program management in developing countries through implementation of scientifically designed sample surveys of demographic and family health trends.

Background and Progress to Date: Support for demographic and family planning survey data collection activities has formed an integral part of A.I.D.'s population assistance program for more than a decade. The two largest such activities have been the World Fertility Survey (WFS) and the Contraceptive Prevalence Studies (CPS). Both of these projects ended in FY 1984.

These data collection efforts have played a critical role in population policy decision making and in population program management and evaluation in many participating countries. They have also resulted in a much clearer picture of fertility and family planning levels, trends, and determinants in more than 50 LDCs.

There continues to be a critical need for basic data in the 1980's as more and more countries seek to improve the design and management of their programs in population and health.

The project will support the development of an improved database for policy decisions and program management in 20-25 developing countries. New methodologies for collecting, processing, and analyzing demographic and family health data will be developed and tested, and approximately 35 surveys will be conducted during the five-year life of the project. The main findings for each survey will be disseminated to policymakers through special pre-publication tabulations, publication of a final analysis report, and an in-country seminar to discuss findings and plan further analysis. The project will also maintain an active data archive to promote further analysis using survey data tapes. Health funds will be used for project activities devoted to family health trends in mortality and maternal/child health.

A.I.D.'s basic population strategy is to provide individual couples in developing countries with the information and means to freely and voluntarily decide upon and achieve their desired family size. This project will play an important role in helping LDC governments and other service providers make decisions and develop programs which are responsive to their populations' wishes and needs. It also will make an important contribution to the effective management and evaluation of population and health programs through the development of information on births, deaths, and contraceptive knowledge, availability, and use.

FY 87 Program: Continue the design and testing of survey methodology in close consultation with A.I.D. Coordinate correspondence and/or site visits to prospective participating countries. Begin sample surveys in approximately ten LDCs. Complete surveys begun in previous years.

Major Outputs:	All Years
Survey Methodology	1
Family Health and Demographic Surveys	35
Survey Reports	35 (x 1000 copies)
In-Country Summary	35
Further Analysis Studies	20

A.I.D. Financed Inputs (Health)	FY 87
Personnel/Consultants	100
Survey/Analysis Subagreements	200
Other Costs (travel, publications, computer costs, other)	100
TOTAL	400

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	400	0	400		Westinghouse
Estimated Fiscal Year 1985	200	400		thru 7/31/86	
Estimated through September 30, 1985	600	400	200		
Proposed FY 1986	400	600		thru 7/31/87	
Estimated through Fiscal Year 1986	1,000	1,000	0		
Proposed FY 1987	400	Future Year Obligations 1,225	Estimated Total Cost 2,625	thru 7/31/88	

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Heiby

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)	
Operations Research-Health (PRICOR)	Health	FY 87 1,000	LIFE OF PROJECT 19,180
NUMBER 936-5920 GRANT ☒ LOAN ☐ / NEW ☒ CONTINUING ☐	PRIOR REFERENCE Advice of Program Change Submitted June 1981	INITIAL OBLIGATION FY 81 / ESTIMATED FINAL OBLIGATION FY 90	ESTIMATED COMPLETION DATE OF PROJECT FY 91

Purpose: To improve the effectiveness of health programming and allocation of health resources by donors and LDCs for health delivery systems.

Background and Progress to Date: Concern of donor agencies and LDC governments about problems in the delivery of health services to unserved or underserved LDC populations has been increasing. A variety of new projects have been launched in many countries in attempts to address this problem. These projects have introduced new delivery mechanisms and new types of health workers into a diversity of social, political, and institutional milieus. Evaluation of various approaches and the responses of target populations to these efforts have not been systematically developed to learn from the number of national experiments underway. Policy makers are confronted by choices in the health area which become increasingly critical as budget constraints tighten. They are seeking answers about alternative financing mechanisms, the cost-effectiveness of alternative delivery mechanisms, management procedures, and referral structures. This project is designed to produce information and analysis on which policy and programmatic decisions can be made. This project will support selected studies which address A.I.D. identified policy and programmatic questions and investigate relevant health care delivery issues.

Project operations began in September 1981 when a contract was signed with the Center for Human Services (CHS) for overall project management. The contractor and A.I.D. established primary health care research priorities for the first year of operation and literature was distributed to a wide variety of U.S. and LDC organizations inviting proposals for research in the three priority areas of: 1) Community financing of PHC services; 2) the role of the community health worker; 3) Community organization of health services. A fourth research priority community based commodity distribution, was added in the second year. Proposals received are reviewed by an outside panel of experts selected with A.I.D. concurrence, and the best proposals are selected for funding. One of the highest priorities of the project is to ensure utilization of its research results. A variety of methods will be used to disseminate findings widely. As of April 1985, a total of $8.2 million has been committed to fund 45 country studies. Methodological studies on cost-effectiveness, community financing, community health workers, and operations research methods have been completed to guide researchers on the use of appropriate operational research technologies. As the result of a midterm evaluation in 1984, S&T/Health decided to continue the project beyond the original final obligation date of FY 1986. A PP amendment is being prepared and an amended authorization will follow. A new contract, or cooperative agreement, will be let in time for new activities to begin in FY 86. The existing contract with the Center for Human Services will be extended through February 1987.

Host Countries and Other Donors: Host countries contribute towards training, local salary costs, facilities, provision of data, and additional in-kind assistance. Other donors, where there are interests, may provide funding for related research activities

Beneficiaries: Host country officials will benefit by having new and better information about the effects of alternative programs to improve the delivery of health services and/or improve the health of people via non-health interventions. LDC research and evaluation capability will be strengthened. The ultimate beneficiaries will be the recipients of improved health services throughout the LDCs.

FY 87 Program Activity: Ongoing country studies will be monitored through expanded site visits by staff and consultants. As results become available, the staff will summarize and disseminate the most important findings.

Major Outputs:

Methodological Studies	6
Country Studies	45

A.I.D. Financed Inputs:	FY 87
Personnel: technical and support staff and consultants	150
Travel and other costs associated with technical assistance	150
Support for studies	700
TOTAL	1,000

U.S. FINANCING (In thousands of dollars)

	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	7,180	4,652	2,528		Center for Human Serivces New Contract t.b.d.
Estimated Fiscal Year 1985	2,000	2,000		thru 7/31/86	
Estimated through September 30, 1985	9,180	6,652	2,528		
Proposed FY 1986	2,500	3,700		thru 7/31/87	
Estimated through Fiscal Year 1986	11,680	10,352	1,328		
Proposed FY 1987	1,000	Future Year Obligations 6,470	Estimated Total Cost 19,180	thru 7/31/88	

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Randlov

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)		
Technology for Primary Health Care	Health	FY 87 4,400		LIFE OF PROJECT 25,000
NUMBER 936-5927 GRANT XX LOAN ☐ / NEW ☐ CONTINUING XX	PRIOR REFERENCE Advice of Program Change, Submitted Dec. 1982	INITIAL OBLIGATION FY 83	ESTIMATED FINAL OBLIGATION FY 89	ESTIMATED COMPLETION DATE OF PROJECT FY 90

Purpose: To strengthen primary health care (PHC) programs of developing countries by accelerating the transfer of improved techniques and products for the delivery of health services, management of health systems, training of health personnel, and control of disease.

Background and Progress to Date: In many developing countries, 15 percent or more of all infants die before reaching age one, up to 30 percent die before age five. The major causes are diarrheal disease, respiratory infections, tetanus, and childhood infectious diseases such as diphtheria, measles, and whooping cough. Worldwide experience in PHC has shown that oral rehydration therapy (ORT) and immunization are relatively simple and cost-effective technologies which can greatly reduce mortality and morbidity among infants and children under five. However, there is a substantial gap between the scientifically demonstrated potential of immunizations and ORT, and the services that are actually available in most countries. In Africa, for example, ORT is not yet included in most programs, and in many countries is not endorsed by the medical community. Immunizations currently reach only a small proportion of the vulnerable populations of developing countries. In addition, the effectiveness of these available disease control technologies is dependent on appropriately trained and supported PHC workers and a well-managed delivery system. At present, many developing countries do not have adequate training and management capabilities. This project provides technical assistance and limited commodity support to foster the incorporation of ORT and immunization into PHC systems, including technical assistance in selected areas of management and training. In addition, the project provides general rapid-response technical assistance and information services to A.I.D. missions and host countries to assist them in strengthening health service delivery capabilities.

Host Country and Other Donors: Project activities are being coordinated with those of numerous private organizations, development banks, and international agencies currently supporting PHC efforts in developing countries.

Beneficiaries: The ultimate beneficiaries will be the people for whom health services will be improved in the approximately 40 countries to be served by the project. Immediate beneficiaries will be public and private host country institutions, strengthened by project activities.

FY 87 Program: In FY 87, the project will continue to provide technical assistance and commodities to missions and host countries for the incorporation of ORT and/or immunization into PHC systems. It will also provide general technical assistance for the design, implementation, and evaluation of health programs. The project will answer requests from the field for information about specific PHC technologies. One technical conference will be held to keep LDC and U.S. health personnel responsible for designing and implementing PHC programs up-to-date on current PHC technologies, management, and training methodologies. Special attention will be given to issues of health care financing and the problems of recurring costs.

Major Outputs:

- Technical conferences, 1/year	5
- Issues of technical report, 1/year	5
- Response to information requests	250
- ORT/Immunization Incorporated into PHC program in country	15 countries
- Management and training assistance to country PHC programs	25 countries

A.I.D. Financed Inputs:	FY 87
Contractor Core Costs	1,700
Technical Consultants	1,850
Commodities (ORT packets, vaccines)	400
Information Services	450
TOTAL	4,400

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	4,265	2,371	1,894		CDC Atlanta
Estimated Fiscal Year 1985	6,200	4,500		thru 7/31/86	Management Sciences for Health (MSH)
Estimated through September 30, 1985	10,465	6,871	3,594		Other t.b.d.
Proposed FY 1986	1,850	2,400		thru 7/31/87	
Estimated through Fiscal Year 1986	12,315	9,271	3,044		
Proposed FY 1987	4,400	Future Year Obligations	Estimated Total Cost	thru 7/31/88	
		8,285	25,000		

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Kendall

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)	
Diarrheal Disease Research Program	Health	FY87 2,400	LIFE OF PROJECT 14,500

NUMBER 936-5928 GRANT ☒ LOAN ☐	NEW ☐ CONTINUING ☒	PRIOR REFERENCE	INITIAL OBLIGATION FY 84	ESTIMATED FINAL OBLIGATION FY 89	ESTIMATED COMPLETION DATE OF PROJECT FY 90
		FY 1985 C.P. Annex V, p. 89			

Purpose: To support research and training on diarrheal diseases and dissemination of information on the control to LDCs.

Background and Progress to Date: Diarrheal diseases have been recognized as the principal causes of high infant mortality and morbidity, particularly in the LDC's where the level of malnutrition has been high. In recent years, two major intensified efforts have been mounted to attack the problem through research and application of research findings for improved control and treatment, particularly for infants and children under five.

The ICDDR/B was established in June 1979 on the institutional foundation of the Cholera Research Laboratory which had operated in Bangladesh for 18 years. The ICDDR/B is chartered as an independent, international, non-profit institution under the Laws of Bangladesh modeled on the international agricultural research centers. It is governed by an international Board of Trustees which has a majority of members from the LDCs, and represents a high level of scientific expertise. U.S. support for the center has been a major factor in its establishment. The objectives of the Center are to undertake and promote study, research, and dissemination of knowledge about diarrheal diseases, and directly related subjects of nutrition and fertility, and to provide training in the Center's areas of competence. A.I.D. conducted a full evaluation of the ICDDR/B in December 1982.

The second major effort is the World Health Organization's (WHO) Diarrheal Disease Program (CDD). This program was launched in 1978 as part of WHO's commitment to primary health care. It has two major components, i.e., health services (or control) and research. The former emphasizes promotion and implementation of national CDD programs as an integral part of primary health care, the latter is concerned with basic, clinical, and epidemiologic research of diarrhea and of its control and prevention.

The objectives of CDD include the following: reduction of mortality through early treatment with ORS and appropriate feeding of children; reduction of mortality through improvements of maternal and child care practices, environmental health, and early detection and control of epidemics. Research priorities fall in three major areas: i.e., bacterial enteric infections, viral diarrheas, and drug development for acute diarrheas. The overall technical guidance of CDD is under a Technical Advisory Group of international experts. An independent management Review Committee composed of representatives from developing countries, contributors and participating agencies review the general progress and plans annually.

Host Country and Other Donors: In 1987 the U.S. will support about 15% of the total ICDDR/B budget of $10 million. The remainder will be contributed by more than 15 other donors. The U.S. contribution will represent about 10% to 12% of the CDD annual budget which will be supported by more than 15 other donors.

Beneficiaries: Rural and urban poor in the LDCs who are particularly susceptible to diarrheal disease.

FY 87 Program: It is contemplated that the U.S. will support the ICDDR/B at a level of $1.4 million in FY 87. U.S. support to the WHO/CDD will be $400,000 in FY 87 which is compatible with that of other donors. Future contributions to each program will be determined annually and will depend, among other factors on the amount of support from other donors.

Major Outputs:
Functioning, self sustaining international research facilities with trained personnel from both developed and developing countries.
Both long and short-term training programs for LDC scientists and health workers at all levels.
Improved Diarrheal Disease control programs, worldwide.

A.I.D. Financed Inputs: Grant support for ICDDR/B, the WHO/CDD Programs. Management costs and support for targeted research will total $2.4 million in FY 87.

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	975	25	950		International Center for Diarrheal Diseases Research/ Bangladesh (ICDDR,B) World Health Organization Diarrheal Program (WHO/CDD)
Estimated Fiscal Year 1985	3,400	2,975		thru 8/31/86	
Estimated through September 30, 1985	4,375	3,000	1,375		
Proposed FY 1986	2,400	3,700		thru 8/31/87	
Estimated through Fiscal Year 1986	6,775	6,700	75		
Proposed FY 1987	2,400	Future Year Obligations	Estimated Total Cost	thru 8/31/88	
		5,325	14,500		

PROGRAM: Centrally Funded

ACTIVITY DATA SHEET

PROJECT MANAGER: Ice

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)		
HHS Resource Support	Health	FY 87 200		LIFE OF PROJECT Continuing
NUMBER 936-5929 GRANT ☒ LOAN ☐ / NEW ☐ CONTINUING ☒	PRIOR REFERENCE FY 1985 C.P. Annex V, p. 89	INITIAL OBLIGATION FY 84	ESTIMATED FINAL OBLIGATION FY Continuing	ESTIMATED COMPLETION DATE OF PROJECT FY Continuing

Purpose: To provide technical capability to A.I.D for the conduct of special studies and operation research, and to assist LDC governments in program and project development and evaluation by providing short-term expert advisory services from the U.S. Department of Health and Human Services (HHS).

Background and Progress to Date: A.I.D. has maintained a Support Service Agreement (RSSA) with the Office of International Health (OIH) of HHS for about 30 years. The current RSSA provides technical assistance in developing health sector studies and health planning activities as well as short-term advisory services from personnel throughout HHS. There continues to be a great demand for these services, particularly from the Centers for Disease Control. It is anticipated that the need for the OIH/RSSA will increase over the next few years due to the expanding health program. This project continues funding for a new RSSA which will provide a quick response mechanism to meet field and AID/W demand for these services.

Host Country and Other Donors: None

Beneficiaries: LDC institutions world-wide which receive expert technical assistance.

FY 87 Program: Provision of technical assistance to meet requests from AID/W and field missions.

Major Outputs:

Technical Assistance Assignments	20/yr

A.I.D. Financed Inputs:	FY 87
Personnel	50
Travel and Transportation	120
Administration	30
	200

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	100	5	95		Department of Health and Human Services
Estimated Fiscal Year 1985	200	250		thru 12/31/85	
Estimated through September 30, 1985	300	255	45		
Proposed FY 1986	200	220		thru 12/31/86	
Estimated through Fiscal Year 1986	500	475	25		
Proposed FY 1987	200	Future Year Obligations	Estimated Total Cost	thru 12/31/87	
		Continuing	Continuing		

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Kendlov

TITLE	FUNDS	PROPOSED OBLIGATION (in thousands of dollars)		
MEDEX Support	Health	FY 87 500		LIFE OF PROJECT 4,600
NUMBER 936-5932 GRANT XX LOAN ☐ / NEW ☐ CONTINUING XX	PRIOR REFERENCE Advice of Program Change Submitted May 1983	INITIAL OBLIGATION FY 83	ESTIMATED FINAL OBLIGATION FY 89	ESTIMATED COMPLETION DATE OF PROJECT FY 90

Purpose: To strengthen primary health care (PHC) programs in developing countries by applying, where appropriate, the MEDEX technology for manpower training and management.

Background and Progress to Date: The MEDEX technology was developed and field tested by the University of Hawaii under previous A.I.D. contracts. It consists of a series of prototype training modules which can be adapted and used to train village level, middle level health workers, and program managers in the curative, preventive, and management skills needed to deliver primary health care services. The technology also includes manuals on how to adapt and apply the training materials.

The project is designed to ensure that the technology developed and field tested under previous contracts is made known and available to a wide range of potential users who are operating PHC programs in less developed countries. Potential users include ministries of health, private voluntary organizations, private health care organizations, and professional groups such as nurses associations. During the five years of this grant, the MEDEX staff will identify potential users, assist them by providing technical assistance in identifying programs or parts of programs which could benefit from the MEDEX technology, provide the prototype training materials and assistance in adapting the training materials to specific needs, assist in organizing and conducting the initial training courses for each group, and conducting the initial training courses for each group, and provide follow-up advice and assistance as necessary after the country program is underway. The MEDEX group at the University of Hawaii will also facilitate the exchange of information and mutual assistance among the users of the MEDEX system worldwide, and particularly within regions where problems and programs are particularly within regions where problems and programs are similar. A.I.D.'s health sector strategy stresses assistance to primary health care programs which reflect community needs and resources and which can achieve broad coverage of developing country populations with well managed, low cost, basic health services. It also emphasizes the use of appropriate, proven technologies. This project provides for widespread application of a training and management technology which was developed specifically for health systems based on client referral which can reach out to the community level.

Host Country and Other Donors: Most of the activities in this project will be undertaken in coordination with health projects which are partially funded by host governments and other donors.

FY 87 Program: In FY 1987, the project will continue to provide technical assistance and training related to the incorporation of the MEDEX training modules into the training and supervisory systems of health care systems. Efforts will focus on both national government supported delivery systems and on PVOs. As the project draws closer to completion, the system of exchange of information and assistance among users of the MEDEX training approach will become more active.

Beneficiaries: The ultimate beneficiaries will be the people for whom health services will be improved in the countries served by the project. Immediate beneficiaries will be the public and private host country institutions strengthened by project activities.

Major Outputs:	All Years
Seminars and Presentations	15
Initial Training Workshops	20
Articles published in Professional Journals	8
Assistance Provided in Identification and Adaptation of Materials	70 person months
Technical Assistance for Training and Management	85 person months

A.I.D. Financed Inputs:	FY 87
Technical assistance	250
Training seminars	250
TOTAL	500

U.S. FINANCING (in thousands of dollars)

	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	1,907	569	1,338		University of Hawaii
Estimated Fiscal Year 1985	575	840		thru 12/1/85	
Estimated through September 30, 1985	2,482	1,409	1,073		
Proposed FY 1986	0	1,000		thru 12/1/86	
Estimated through Fiscal Year 1986	2,482	2,409	73		
Proposed FY 1987	500	Future Year Obligations	Estimated Total Cost	thru 12/1/87	
		1,618	4,600		

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Erickson

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)		
Diagnostic Technology Development	Health	FY 87 1,550	LIFE OF PROJECT 10,000	
NUMBER 936-5935 GRANT ☑ LOAN ☐ / NEW ☒ CONTINUING ☐	PRIOR REFERENCE None	INITIAL OBLIGATION FY 85	ESTIMATED FINAL OBLIGATION FY 91	ESTIMATED COMPLETION DATE OF PROJECT FY 92

Purpose: To develop and adapt medical laboratory technology for simple, economic, community diagnosis and epidemiologic assessment of major local diseases that can be dealt with through primary health care (PHC) programs in tropical settings.

Background and Progress to Date: Incorrect diagnosis of a community's health problems can lead to inappropriate and unproductive health care programs in which health workers are improperly trained, the wrong drugs are supplied and major disease problems are not addressed. Improper diagnosis of an individual's condition can lead to ineffective or even harmful treatment. Logistic and staffing problems in most less developed countries (LDCs) make it impossible to imitate the diagnostic methods of developed countries which are based on sophisticated, well equipped, and often specialized laboratories. Research by the World Health Organization (WHO) and others, including the private sector, has led to simpler diagnostic tests for many major diseases in LDCs.

This project will draw on current research to identify, adapt, and field test diagnostic methods which are technologically appropriate to LDC environments. These diagnostic techniques can be used for epidemiologic surveys to identify more precisely the major health problems with which the health delivery system must deal. Improving the definition of the problem will allow planners to design more efficient and effective delivery systems through more appropriate training of health workers and better selection of pharmaceuticals to be supplied. Test sites will be selected in Africa, Asia, and Latin America so that diagnostic methods can be tested in ecologically diverse settings.

FY 87 Program: The FY 1987 program will give special emphasis on activities relating to the diagnosis of malaria and diarrheal in small children.

Beneficiaries: The poor throughout the less developed world will benefit most from this project by receiving more appropriate preventive and curative health care.

Host Country and Other Donors: This project will use prior research done under WHO programs. To the extent possible, field testing will involve epidemiologic surveys and programs being carried out by LDCs and other donors.

Major Outputs: The project will field test diagnostic procedures for the major diseases of public health importance in PHC programs. We estimate that at least ten simple diagnostic techniques will be tested and made available for general use worldwide.

A.I.D. Financed Inputs:	FY 1987
Applied research activities	800
Training and promotion materials	75
Technical assistance	175
Core Staff	500
TOTAL	1,550

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	-0-	-0-	-0-		To be determined
Estimated Fiscal Year 1985	1,100	-0-		thru 7/31/86	
Estimated through September 30, 1985	1,100	-0-	1,100		
Proposed FY 1986	725	800		thru 7/31/87	
Estimated through Fiscal Year 1986	1,825	800	1,025		
Proposed FY 1987	1,550	Future Year Obligations 6,625	Estimated Total Cost 10,000	thru 7/31/88	

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Clay

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)	
Oral Rehydration Therapy-Health Education and Long-Term Planning (ORT-HELP)	Health	FY87 1,000	LIFE OF PROJECT 7,300
NUMBER 936-5939 GRANT XX LOAN ☐ / NEW ☐ CONTINUING XX	PRIOR REFERENCE None	INITIAL OBLIGATION FY 84 / ESTIMATED FINAL OBLIGATION FY 88	ESTIMATED COMPLETION DATE OF PROJECT FY 89

Purpose: To provide LDC leaders and health providers with the information they need to make decisions on the incorporation of ORT, and other Child Survival interventions in their national health policies and programs.

Background and Progress to Date: Each year in developing countries, 12 to 15 million children die. More than 5 million die from dehydration due to diarrhea. Millions more die from other preventable diseases. This despite the fact that simple, proven technologies exist which, if they were available and used correctly, could have a dramatic impact on infant and child mortality and morbidity. The Agency for International Development has actively promoted ORT and other Child Survival Interventions. In 1983, the Agency hosted the successful International Conference on Oral Rehydration Therapy. In 1985, these efforts were expanded with the launching of the Child Survival Action Program (CSAP). CSAP promotes the use in developing countries of those technologies which have been proven effective in saving children's lives, expanding: Agency efforts to promote ORT; immunization programs targetted at pregnant women, infants, and young children; nutrition education to promote correct infant feeding and breastfeeding, and to carry out growth monitoring; other cost-effective technologies with a demonstrable effort on child survival.

The Agency is now planning to make information on ORT and other Child Survival interventions more broadly available through a three-year initiative to support an information exchange and long-term planning effort among developing country leaders and health providers. The Oral Rehydration Therapy Project (ORT-HELP) will have these major components. First, there will be publication and dissemination of technical material such as a quarterly newsletter on diarrheal diseases and worldwide information material on child survival, including ORT. Second there will be a PASA agreement with the Peace Corps to develop in target countries community-level material, training, and technical assistance. Third, the project will support a series of regional conferences and meetings to provide information on ORT and child survival-related activities. Finally technical assistance will be provided for policy, program evaluation, and information exchange related to ORT and other child survival interventions.

Beneficiaries: The millions of LDC children whose lives will be saved by proven, simple technologies.

Host Country and Other Donors: Host countries will be involved in both the Peace Corps PASA and technical assistance. WHO and UNICEF are expected to supplement A.I.D. resources by providing funds for technical material and publications.

FY 87 Program: The FY 87 program will highlight technical material, publications, and activities in child survival and ORT training with the Peace Corps.

Major Outputs:

- Technical assistance, specialized information and training available at the community level in up to 12 countries through Peace Corps Volunteers;
- Information on child survival interventions, including ORT available through technical publications and other specialized materials;
- Information on LDC policy options and program design exchanged at regional conferences and workshops by LDC policymakers and health providers;
- Assistance in policy development, program design and evaluation received by up to 12 countries.

A.I.D.-Financed Inputs:	FY 87
Peace Corps PASA	375
Technical Material and Publication	200
Meetings and Conferences	150
Technical Assistance	175
TOTAL	1,000

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	1,204	244	960		Peace Corps CDC Atlanta
Estimated Fiscal Year 1985	2,500	3,000		thru 3/31/86	
Estimated through September 30, 1985	3,704	3,244	460		
Proposed FY 1986	875	1,000		thru 3/31/87	
Estimated through Fiscal Year 1986	4,579	4,244	335		
Proposed FY 1987	1,000	Future Year Obligations	Estimated Total Cost	thru 3/31/88	
		1,721	7,300		

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Austin

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)		
Water and Sanitation for Health (WASH) II	Health	FY87 2,500	LIFE OF PROJECT 19,700	
NUMBER 936-5942 GRANT ☒ LOAN ☐ NEW ☐ CONTINUING ☒	PRIOR REFERENCE None	INITIAL OBLIGATION FY84	ESTIMATED FINAL OBLIGATION FY 89	ESTIMATED COMPLETION DATE OF PROJECT FY 90

Purpose: To develop and provide technical resources to support programs for the improvement of household water supplies and sanitary facilities for the poor people living in less developed countries.

Background: This project continues the work of WASH I (931-1176). Diseases related to contaminated water and poor sanitation practices are among the major causes of illness and death in the LDCs. About two-thirds of the LDC population do not have adequate access to safe water for domestic use or adequate means for excreta disposal. A large, coordinated infusion of resources from bilateral and multilateral donors and LDC governments will be required to overcome this problem. To assure the best possible utilization of these resources, A.I.D., other donors, and the LDCs will need to call on a wide variety of technical experts in areas ranging from water supply technology to social science. Qualified assistance will have to be readily available to assess problems, design appropriate projects, solve any technical problems which arise during project implementation, and evaluate project results. Qualified people will be needed to design training programs for LDC personnel to plan, install, operate, and maintain water and sanitation facilities. The latest and best information on state-of-the-art for low-cost water and sanitation systems is being continuously updated, assembled, and disseminated. This project provides the means to tap the large resources of technical knowledge and skill available in the U.S. private sector and the international community to support water and sanitation initiatives of LDCs.

Host Country and Other Donors: The contractor under this project is in continuous contact with other multilateral and bilateral donor agencies to exchange information and coordinate activities.

Beneficiaries: Poor people throughout the developing world, especially those in rural and urban fringe areas who now face health hazards because of inadequate water supplies and sanitation, will benefit.

FY 87 Program: This project will develop methods and guidelines for more effective design, implementation, and evaluation of projects; identify and adapt existing technology or develop new technology where needed; provide for coordinated collection and dissemination of information; develop trained manpower; support studies on the relationship between water supplies and health; and provide expert technical assistance to trouble shoot and support country projects.

Major Outputs:

Person Months (PM) of technical assistance for design, implementation, and evaluation of country projects	482
PM of technical assistance for training and curriculum development	74
PM of technical assistance for adaptation, testing, and transfer of appropriate technology devices	147
Appropriate technology devices purchased or manufactured in LDCs and installed for demonstration and testing	8,200
Special studies on key problem areas	12
Collection, synthesis, and dissemination of information on water supply and sanitation (responses to requests)	2,600

A.I.D. Financed Inputs	FY 87
Personnel	1,900
Travel	100
Equipment and Supplies	130
Other Direct Costs	370
TOTAL	2,500

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	1,000	0	1,000		Camp, Dresser and McKee
Estimated Fiscal Year 1985	2,931	3,500		thru 9/30/86	
Estimated through September 30, 1985	3,931	3,500	431		
Proposed FY 1986	2,500	2,650		thru 9/30/87	
Estimated through Fiscal Year 1986	6,431	6,150	281		
Proposed FY 1987	2,500	Future Year Obligations	Estimated Total Cost	thru 9/30/88	
		10,769	19,700		

PROGRAM: CENTRALLY FUNDED

ACTIVITY DATA SHEET

PROJECT MANAGER: Erickson

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)	
Vaccine Development and Health Research	Health	FY 87 -0-	LIFE OF PROJECT 6,000
NUMBER 936-5947 GRANT ☒ LOAN ☐ / NEW ☐ CONTINUING ☒	PRIOR REFERENCE None	INITIAL OBLIGATION FY 84 / ESTIMATED FINAL OBLIGATION FY 88	ESTIMATED COMPLETION DATE OF PROJECT FY 89

Purpose: To develop new and improved vaccines which will reduce the incidence of preventable diseases in developing countries.

Background and Progress to Date: One of A.I.D.'s top priorities is to help developing countries lower the health barriers to social and economic development. To this end, A.I.D. has adopted a primary health care (PHC) strategy to reduce child mortality and control disease among the labor force and women of reproductive age. The development of new or improved vaccines is a critical part of any primary health care strategy.

Some vaccines, such as tetanus toxoid, are today fully applicable in developing country situations and are among the most cost-effective methods of any PHC strategy. Other vaccines such as measles are useful but inadequate in their present form. Although the application of modern bio-technology holds considerable promise, presently there are no vaccines available to prevent many of the major causes of childhood illness and death. To produce and then apply vaccines through primary health care programs, health officials in developing countries will require access to new technology that will be emerging from research programs in the United States. This project establishes the necessary links to assure the success of this process.

The Office of Health in the Bureau for Science and Technology, A.I.D. will coordinate funding of several vaccine development efforts through agreements with branches of the U.S. Public Health Service. In addition to vaccine development, this project will use up to ten percent of authorized funds for operational/biomedical research related to immunization but not specifically identified with a particular vaccine. This research will nevertheless support the overall vaccine development effort.

The first two A.I.D. sponsored activities have been with the National Institute of Allergy and Infectious Diseases and with the Centers for Disease Control to cover rotavirus and measles vaccine testing respectively. Other specific activities will be identified during the life of the project using outside technical advisory committees. The staff of the U.S. Public Health Service agencies will facilitate coordination between the vaccine development activities in the U.S. and the health care programs in developing countries. The U.S. Public Health Service will keep A.I.D. informed of progress in vaccine research and will work with developing country health officials to identify opportunities for application.

FY 87 Program: In FY 87 the program will focus on the single dose administration of measles vaccine in LDC settings, operational research to test rotavirus vaccine in explanded programs of immunization, and the basic research needed to bring three additional vaccines into the testing stage for LDC conditions.

Beneficiaries: The ultimate beneficiaries of this project will be those millions of less developed country (LDC) citizens who will be free of vaccine preventable diseases.

Host Country and Other Donors: None

Major Outputs:	All Years
Vaccines developed	6
Vaccine application training programs	12
Field studies	10

FY 87 A.I.D.-Financed Inputs: None

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	430	-0-	430		
Estimated Fiscal Year 1985	3,800	1,200		thru 12/31/88	U.S. Public Health Service
Estimated through September 30, 1985	4,230	1,200	3,030		
Proposed FY 1986	-0-	1,100		thru 12/31/88	
Estimated through Fiscal Year 1986	4,230	2,300	1,930		
Proposed FY 1987	-0-	Future Year Obligations	Estimated Total Cost	thru 12/31/88	
		1,770	6,000		

PROGRAM: Centrally Funded

ACTIVITY DATA SHEET

PROJECT MANAGER: Barbiero

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)	
Vector Biology and Control	Health	FY 87 1,550	LIFE OF PROJECT 19,880
NUMBER 936-5948 GRANT ☒ LOAN ☐ / NEW ☒ CONTINUING ☐	PRIOR REFERENCE None	INITIAL OBLIGATION FY 85 / ESTIMATED FINAL OBLIGATION FY 94	ESTIMATED COMPLETION DATE OF PROJECT FY 95

Purpose: To create more effective and cost efficient vector-borne disease control programs in less developed countries (LDCs).

Background and Progress To Date: Vector borne diseases are caused by parasites that require another organism to develop to a stage which is infective to humans. These intermediate organisms can be mosquitos, flies, other insects, snails, or small crustaceans, and they can transmit the parasites actively or passively. Vector-borne diseases include malaria, river blindness, sleeping sickness, snail fever, and guinea worm among others. They account for significant mortality and illness throughout the developing world, particularly among infants and children. Traditional vector control methods are usually very costly in terms of commodities and manpower and have occasionally prompted the development of resistant vectors. New approaches are required to improve the efficiency of vector control programs. New tools, technologies, and operational protocols need to be evaluated in the field and applied effectively to reduce the burden of vector-borne diseases in less developed country (LDC) populations.

This worldwide project will help LDCs address vector-borne diseases from an ecological perspective and use ecologically oriented approaches to vector control as a means of improving cost effectiveness and efficiency.

The project will consist of technical assistance provided to individual countries to improve the design, implementation, and/or evaluation of vector control programs. The project will assist in the design of new strategies, training of LDC professionals and staff, identification of appropriate new control tools and agents, strengthening regional training centers and research institutions, and dissemination of pertinent informational materials to host govenments. It is anticipated the project will: induce positive changes in strategy leading to more effective control programs; promote more environmentally sound utilization of commodities; increase the number of LDC personnel skilled in state-of-the-art control techniques; and identify more operationally effective methods. It is anticipated that the empirically- based, integrated vector control pursued by this project will contribute to the reduction of acute and chronic vector-borne disease morbidity and mortality and improve the health status of exposed populations throughout the LOP.

FY 87 Program: The FY 87 program will focus on technical assistance activities for project design for vector control activities in Africa and Latin America.

Beneficiaries: The project will benefit millions of people in developing countries who will have greatly reduced risks of contracting vector-borne diseases. Infants and small children will be among the first to benefit.

Host Country and Other Donors: None

Major Outputs:	All Years
Control projects in LDCs	40
Technicians trained	200
New control technologies developed	15

A.I.D. Financed Inputs:	FY 87
Technical services	1,300
Commodities	100
Training/workshops	150
TOTAL	$ 1,550

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	-0-	-0-	-0-		
Estimated Fiscal Year 1985	1,350	175		thru 7/31/86	
Estimated through September 30, 1985	1,350	175	1,175		t.b.d.
Proposed FY 1986	1,500	1,700		thru 7/31/87	
Estimated through Fiscal Year 1986	2,850	1,875	975		
Proposed FY 1987	1,550	Future Year Obligations	Estimated Total Cost	thru 7/31/88	
		15,480	19,880		

PROGRAM:

ACTIVITY DATA SHEET

PROJECT MANAGER: Carl Kendall

TITLE	FUNDS	PROPOSED OBLIGATION (In thousands of dollars)		
Applied Diarrheal Disease Research	Health	FY 87 575	LIFE OF PROJECT	9,500
NUMBER 936-5952 GRANT ☒ LOAN ☐ NEW ☒ CONTINUING ☐	PRIOR REFERENCE None	INITIAL OBLIGATION FY 85	ESTIMATED FINAL OBLIGATION FY 90	ESTIMATED COMPLETION DATE OF PROJECT FY 91

Purpose: To adapt new and improved technologies for the control and prevention of diarrheal diseases to specific country settings through support for country specific applied research.

Background and Progress to Date: Diarrheal disease constitutes a major threat to the health of children throughout the world. Diarrhea, and subsequent dehydration, leads to an estimated five million deaths and one billion episodes of diarrhea every year. Oral rehydration therapy (ORT), a treatment that is safe and effective for use by mothers in the home and which has been heavily supported by A.I.D., has already made significant inroads in preventing deaths due to acute dehydrating diarrhea.

New knowledge of what causes diarrheal disease and how it is transmitted and advances in immunology and vaccine development have provided an opportunity to prevent many more episodes of diarrheal disease and bring about a further drastic reduction in illness and mortality. Possibilities for further innovation include improved oral rehydration solutions; micro-nutrients such as vitamin A; active breastfeeding during diarrheal episodes; and further study of the relationship between measles and diarrhea. Much of this new information has come from A.I.D. supported basic research carried out through the International Center for Diarrheal Disease Research in Bangldesh and through the research programs of the World Health Organization.

This project will provide technical assistance, research advisory services, and training for applied diarrheal disease research activities in specific countries. The new findings from basic research will be tested and modified through applied research carried out in less developed country (LDC) institutions. Project activities will include technical assistance for needs assessments, project design, and project evaluation; competitive research grants in LDCs; and institutional support (equipment and operating expenses) for LDC researchers.

Host Country and Other Donors: To be determined as research grants, institutional support, and training activities are undertaken.

Beneficiaries: The prime beneficiaries will be infants and small children throughout the developing world who risk debilitation caused by diarrhea.

FY 87 Program: The FY 87 program will focus on the design and selection of small research grants in Africa and Asia and on technical assistance for the field testing of new approaches to diarrheal disease control.

Major Outputs:	All Years
New technologies field tested	6
Host country control programs incorporating technologies found useful under this project	12

A.I.D. Financed Inputs	FY 87
Research grants	650
Technical assistance	250
Institutional support	200
Administration & evaluation	400
	1,500

U.S. FINANCING (In thousands of dollars)	Obligations	Expenditures	Unliquidated	Funding Period	Principal Contractors or Agencies
Through September 30, 1984	-0-	-0-	-0-		To be determined
Estimated Fiscal Year 1985	575	100		thru 7/31/86	
Estimated through September 30, 1985	575	100	475		
Proposed FY 1986	550	800		thru 9/31/87	
Estimated through Fiscal Year 1986	1,125	900	225		
Proposed FY 1987	1,500	Future Year Obligations	Estimated Total Cost	" 7/31/88	
		6,875	9,500		

COUNTRY ACTIVITY REPORT

BY GEOGRAPHIC AREA - FY 85 THRU 87

NEAR EAST

LAST UPDATE: 10 MAY 85

COUNTRY: EGYPT

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.		B	0	0	0	0	B	75	0	0	0	B	75	0	0	0
OPERATIONS RESEARCH - HEALTH 936-5920.		B	0	0	0	0	B	50	0	2	0	B	0	0	0	0
COUNTRY TOTAL:			0	0	0	0		125	0	2	0		75	0	2	0

COUNTRY: LEBANON

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
WATER AND SANITATION FOR HEALTH II 936-5942.		B	15	0	6	0	B	0	0	0	0	B	19	0	2	0
COUNTRY TOTAL:			15	0	6	0		0	0	0	0		19	0	2	0

COUNTRY: TURKEY

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
WATER AND SANITATION FOR HEALTH II 936-5942.		B	0	0	0	0	B	6	0	2	0	B	20	0	3	0
COUNTRY TOTAL:			0	0	0	0		6	0	2	0		20	0	3	0
TOTAL FOR REGION:			15	0	6	0		131	0	4	0		114	0	5	0

A - ACTIVE B - PENDING MISSION APPROVAL

SOUTH ASIA LAST UPDATE: 16 MAY 85

COUNTRY: NEPAL

PROJECT TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.	B	0	0	0	0	B	20	0	0	0	B	100	0	0	0
COUNTRY TOTAL:		0	0	0	0		20	0	0	0		100	0	0	0

COUNTRY: SRI LANKA

PROJECT TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.	B	0	0	0	0	B	70	0	0	0	B	50	0	0	0
VECTOR BIOLOGY AND CONTROL 936-5948.	B	0	0	0	0	B	75	0	4	2	B	0	0	0	0
COUNTRY TOTAL:		0	0	0	0		145	0	4	2		50	0	0	0

COUNTRY: INDIA

PROJECT TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.	B	0	0	0	0	B	100	0	0	0	B	50	0	0	0
TECHNOLOGY FOR PHC - PRITECH 936-5927.	B	0	0	0	0	B	150	0	8	0	B	200	0	12	0
DIARRHEAL DISEASE RESEARCH PROGRAM 936-5928.	B	0	0	0	0	B	0	0	0	0	B	250	0	5	2
MELEX SUPPORT 936-5932.	A	0	0	0	0	A	0	0	0	0	A	0	0	0	0
936-5932.	B	0	0	0	0	B	60	0	2	2	B	0	0	0	0

A - ACTIVE B - PENDING MISSION APPROVAL

SOUTH ASIA

LAST UPDATE: 16 MAY 85

COUNTRY TOTAL:		0	0	0	0		310	0	10	3		500	0	16	2

COUNTRY: BANGLADESH

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
	TROPICAL DISEASE RESEARCH															
931-1126.		B	0	0	0	0	B	50	0	0	0	B	100	0	0	0
	OPERATIONS RESEARCH - HEALTH															
936-5920.		A	100	0	6	1	A	0	0	0	0	A	0	0	0	0
936-5920.		B	0	0	0	0	B	70	0	4	2	B	85	0	3	2
	DIARRHEAL DISEASE RESEARCH PROGRAM															
936-5928.		B	2200	0	1	0	B	400	0	3	2	B	300	0	3	0
	WATER AND SANITATION FOR HEALTH II															
936-5942.		B	45	0	12	0	B	0	0	0	0	B	10	0	2	0
COUNTRY TOTAL:			2345	0	19	1		520	0	7	4		495	0	8	2

COUNTRY: PAKISTAN

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
	VECTOR BIOLOGY AND CONTROL															
936-5948.		B	0	0	0	0	B	50	0	3	2	B	100	0	2	1
COUNTRY TOTAL:			0	0	0	0		50	0	3	2		100	0	2	1
TOTAL FOR REGION:			2345	0	19	1		1045	0	24	11		1245	0	26	5

A - ACTIVE B - PENDING MISSION APPROVAL

EAST ASIA

COUNTRY: BURMA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.		B	0	0	0	0	B	0	0	0	0	B	50	0	0	0
COUNTRY TOTAL:			0	0	0	0		0	0	0	0		50	0	0	0

COUNTRY: MALAYSIA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.		B	70	0	0	0	B	85	0	0	0	B	100	0	0	0
COUNTRY TOTAL:			70	0	0	0		85	0	0	0		100	0	0	0

COUNTRY: KOREA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
OPERATIONS RESEARCH - HEALTH 936-5920.		B	15	0	2	1	B	0	0	0	0	B	0	0	0	0
COUNTRY TOTAL:			15	0	2	1		0	0	0	0		0	0	0	0

COUNTRY: PHILIPPINES

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP

A - ACTIVE B - PENDING MISSION APPROVAL

EAST ASIA

ST/HEA

MALARIA IMMUNITY AND VACCINATION-TOTAL															
931-0453.	B	0	0	0	0	B	0	0	0	0	B	150	0	4	2
TROPICAL DISEASE RESEARCH															
931-1126.	B	100	0	0	0	B	0	0	0	0	B	0	0	0	0
OPERATIONS RESEARCH - HEALTH															
936-5920.	B	0	0	0	0	B	70	0	3	1	B	0	0	0	0
COUNTRY TOTAL:		100	0	0	0		70	0	3	1		150	0	4	2

COUNTRY: THAILAND

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
MALARIA IMMUNITY AND VACCINATION-TOTAL																
931-0453.		A	100	0	1	1	A	500	0	2	2	A	400	0	2	2
TROPICAL DISEASE RESEARCH																
931-1126.		B	0	0	0	0	B	150	0	0	0	B	0	0	0	0
OPERATIONS RESEARCH - HEALTH																
936-5920.		B	0	0	0	0	B	0	0	0	0	B	100	0	3	3
DIAGNOSTIC TECHNOLOGY DEVELOPMENT																
936-5935.		B	0	0	0	0	B	120	0	3	2	B	100	0	4	2
VECTOR BIOLOGY AND CONTROL																
936-5948.		B	0	0	0	0	B	100	0	2	2	B	50	0	3	2
COUNTRY TOTAL:			100	0	1	1		870	0	7	6		650	0	11	9

COUNTRY: INDONESIA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
TROPICAL DISEASE RESEARCH																
931-1126.		B	0	0	0	0	B	0	0	0	0	B	75	0	0	0
HEALTH DEVELOPMENT MANAGEMENT																
936-5901.		A	365	0	10	3	A	0	0	0	0	A	0	0	0	0
TECHNOLOGY FOR PHC - PRITECH																
936-5927.		B	50	0	3	0	B	75	0	4	0	B	50	0	4	0
WATER AND SANITATION FOR HEALTH II																
936-5942.		B	30	0	10	0	B	30	0	9	0	B	0	0	0	0

A - ACTIVE B - PENDING MISSION APPROVAL

BY GEOGRAPHIC AREA - FY 85 THRU 87

LAST UPDATE: 16 MAY 85

EAST ASIA												
COUNTRY TOTAL:	455	0	23	3	125	0	13	3	125	0	4	0
TOTAL FOR REGION:	740	0	26	5	1130	0	23	7	1075	0	19	11

A - ACTIVE B - PENDING MISSION APPROVAL

COUNTRY: BOLIVIA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
OPERATIONS RESEARCH - HEALTH 936-5920.		B	49	0	3	0	B	0	0	0	0	B	75	0	2	1
WATER AND SANITATION FOR HEALTH II 936-5942.		B	10	0	4	0	B	0	0	0	0	B	0	0	0	0
VECTOR BIOLOGY AND CONTROL 936-5948.		B	0	0	0	0	B	0	0	0	0	B	75	0	3	2
COUNTRY TOTAL:			59	0	7	0		0	0	0	0		150	0	5	3

COUNTRY: BRAZIL

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.		B	110	0	0	0	B	0	0	0	0	B	100	0	0	0
OPERATIONS RESEARCH - HEALTH 936-5920.		B	70	0	6	0	B	0	0	0	0	B	95	0	3	1
COUNTRY TOTAL:			180	0	6	0		0	0	0	0		195	0	3	1

COUNTRY: COLOMBIA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
MALARIA IMMUNITY AND VACCINATION-TOTAL 931-0453.		A	500	0	2	1	A	500	0	2	2	A	500	0	4	2
COUNTRY TOTAL:			500	0	2	1		500	0	2	2		500	0	4	2

A - ACTIVE B - PENDING MISSION APPROVAL

COUNTRY: DOMINICAN REPUBLIC

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
OPERATIONS RESEARCH - HEALTH 936-5920.		B	0	0	0	0	B	90	0	5	0	B	0	0	0	0
WATER AND SANITATION FOR HEALTH II 936-5942.		B	0	0	0	0	B	25	0	10	0	B	15	0	2	0
COUNTRY TOTAL:			0	0	0	0		115	0	15	0		15	0	2	0

COUNTRY: ECUADOR

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
OPERATIONS RESEARCH - HEALTH 936-5920.		B	0	0	0	0	B	0	0	0	0	B	110	0	4	3
WATER AND SANITATION FOR HEALTH II 936-5942.		B	12	0	3	0	B	0	0	0	0	B	10	0	1	0
COUNTRY TOTAL:			12	0	3	0		0	0	0	0		120	0	5	3

COUNTRY: EL SALVADOR

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
WATER AND SANITATION FOR HEALTH II 936-5942.		P	0	0	0	0	B	27	0	10	0	B	15	0	2	0
COUNTRY TOTAL:			0	0	0	0		27	0	10	0		15	0	2	0

A - ACTIVE B - PENDING MISSION APPROVAL

LATIN AMERICA

LAST UPDATE: 16 MAY 85

COUNTRY: HAITI

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
MALARIA IMMUNITY AND VACCINATION-TOTAL 931-0453.		B	100	0	1	1	B	100	0	1	1	B	150	0	3	2
OPERATIONS RESEARCH - HEALTH 936-5920.		B	0	0	0	0	B	110	0	8	3	B	100	0	2	4
TECHNOLOGY FOR PHC - PRITECH 936-5927.		A	0	0	0	0	A	90	0	3	0	A	60	0	3	0
WATER AND SANITATION FOR HEALTH II 936-5942.		B	0	0	0	0	B	22	0	7	0	B	13	0	2	0
COUNTRY TOTAL:			100	0	1	1		322	0	19	4		323	0	12	6

COUNTRY: HONDURAS

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
OPERATIONS RESEARCH - HEALTH 936-5920.		B	0	0	0	0	B	60	0	4	0	B	95	0	3	3
DIAGNOSTIC TECHNOLOGY DEVELOPMENT 936-5935.		B	0	0	0	0	B	75	0	3	2	B	120	0	2	1
VECTOR BIOLOGY AND CONTROL 936-5948.		B	0	0	0	0	B	75	0	4	2	B	25	0	1	1
COUNTRY TOTAL:			0	0	0	0		210	0	11	4		240	0	6	5

COUNTRY: PANAMA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
TROPICAL DISEASE RESEARCH 931-1126.		B	0	0	0	0	B	125	0	0	0	B	100	0	0	0
OPERATIONS RESEARCH - HEALTH																

A - ACTIVE B - PENDING MISSION APPROVAL

LATIN AMERICA LAST UPDATE: 16 MAY 85

936-5920.	B	90	0	3	2	B	40	0	3	0	B	60	0	2	0
COUNTRY TOTAL:		90	0	3	2		165	0	3	0		160	0	2	0

COUNTRY: PERU

PROJECT TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.	B	70	0	0	0	B	80	0	0	0	B	90	0	0	0
TECHNOLOGY FOR PHC - PRITECH 936-5927.	A	0	0	0	0	A	80	0	5	0	A	70	0	3	0
DIAGNOSTIC TECHNOLOGY DEVELOPMENT 936-5935.	B	0	0	0	0	B	75	0	3	1	B	75	0	1	2
WATER AND SANITATION FOR HEALTH II 936-5942.	B	13	0	4	0	B	0	0	0	0	B	0	0	0	0
COUNTRY TOTAL:		83	0	4	0		235	0	9	1		235	0	4	2

COUNTRY: VENEZUELA

PROJECT TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.	B	92	0	0	0	B	0	0	0	0	B	90	0	0	0
HEALTH DEVELOPMENT MANAGEMENT 936-5901.	A	100	0	6	6	A	300	0	10	8	A	300	0	10	6
COUNTRY TOTAL:		190	0	6	6		300	0	10	8		390	0	10	6

COUNTRY: JAMAICA

PROJECT TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA															
OPERATIONS RESEARCH - HEALTH															

A - ACTIVE B - PENDING MISSION APPROVAL

LATIN AMERICA															
936-5920.	B	0	0	0	0	B	30	0	3	2	B	65	0	3	2
TECHNOLOGY FOR PHC - PRITECH															
936-5927.	B	30	0	0	0	B	21	0	2	0	B	55	0	2	0
WATER AND SANITATION FOR HEALTH II															
936-5942.	B	0	0	0	0	B	25	0	6	0	B	25	0	3	0
COUNTRY TOTAL:		30	0	0	0		76	0	11	2		145	0	3	2

COUNTRY: BARBADOS

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
HEALTH DEVELOPMENT MANAGEMENT																
936-5901.		A	635	0	12	2	A	0	0	0	0	A	0	0	0	0
TECHNOLOGY FOR PHC - PRITECH																
936-5927.			0	0	0	0		0	0	0	0		60	3	0	2
936-5927.		B	20	0	0	0	B	10	0	1	0	B	0	0	0	0
COUNTRY TOTAL:			655	0	12	2		10	0	1	0		60	3	0	0

COUNTRY: DOMINICA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
OPERATIONS RESEARCH - HEALTH																
936-5920.		A	60	0	6	0	A	0	0	0	0	A	0	0	0	0
936-5920.		B	0	0	0	0	B	0	0	0	0	B	80	0	3	3
MEDEX SUPPORT																
936-5932.		B	0	0	0	0	B	0	0	0	0	B	70	0	2	0
COUNTRY TOTAL:			60	0	6	0		0	0	0	0		150	0	5	3

COUNTRY: GRENADA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP

A - ACTIVE B - PENDING MISSION APPROVAL

LATIN AMERICA

ST/HEA

OPERATIONS RESEARCH - HEALTH															
936-5920.	A	87	0	0	0	A	0	0	0	0	A	0	0	0	0
936-5920.	B	0	0	0	0	B	30	0	0	0	B	100	0	2	4
MEDEX SUPPORT															
936-5932.	B	0	0	0	0	B	0	0	0	0	B	90	0	3	0
COUNTRY TOTAL:		87	0	0	0		30	0	0	0		190	0	5	4
TOTAL FOR REGION:		2046	0	50	12		1990	0	91	21		2888	3	71	37

A - ACTIVE B - PENDING MISSION APPROVAL

COUNTRY: ZAMBIA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
	MALARIA IMMUNITY AND VACCINATION-TOTAL															
931-0453.		B	100	0	1	1	B	100	0	1	1	B	120	0	1	1
	TROPICAL DISEASE RESEARCH															
931-1126.		B	60	0	0	0	B	0	0	0	0	B	80	0	2	0
	DIAGNOSTIC TECHNOLOGY DEVELOPMENT															
936-5935.		B	0	0	0	0	B	20	0	1	1	B	100	0	3	3
COUNTRY TOTAL:			160	0	1	1		120	0	2	2		300	0	7	4

COUNTRY: MALAWI

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
	OPERATIONS RESEARCH - HEALTH															
936-5920.		B	0	0	0	0	B	95	0	6	0	B	110	0	3	1
	WATER AND SANITATION FOR HEALTH II															
936-5942.		B	38	0	9	0	B	0	0	0	0	B	0	0	0	0
COUNTRY TOTAL:			38	0	9	0		95	0	6	0		110	0	3	1

COUNTRY: KENYA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
	TROPICAL DISEASE RESEARCH															
931-1126.		B	0	0	0	0	B	180	0	0	0	B	100	0	0	0
	DIARRHEAL DISEASE RESEARCH PROGRAM															
936-5928.		B	0	0	0	0	B	0	0	0	0	B	250	0	4	0
	MEDEX SUPPORT															
936-5932.		A	0	0	0	0	A	0	0	0	0	A	0	0	0	0
936-5932.		B	110	0	4	2	B	0	0	0	0	B	30	0	2	0

A - ACTIVE B - PENDING MISSION APPROVAL

AFRICA

COUNTRY TOTAL:		110	0	4	2		180	0	0	0		380	0	6	0

COUNTRY: TANZANIA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
931-0453.	MALARIA IMMUNITY AND VACCINATION-TOTAL	B	20	0	1	0	B	50	0	0	1	B	100	0	2	2
936-5942.	WATER AND SANITATION FOR HEALTH II	B	0	0	0	0	B	18	0	10	0	B	30	0	2	0
COUNTRY TOTAL:			20	0	1	0		68	0	10	1		130	0	4	2

COUNTRY: CAMEROON

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
936-5920.	OPERATIONS RESEARCH - HEALTH	B	0	0	0	0	B	0	0	0	0	B	60	0	1	1
936-5935.	DIAGNOSTIC TECHNOLOGY DEVELOPMENT	B	0	0	0	0	B	30	0	3	1	B	100	0	5	1
COUNTRY TOTAL:			0	0	0	0		30	0	3	1		160	0	6	2

COUNTRY: SIERRA LEONE

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
936-5920.	OPERATIONS RESEARCH - HEALTH	B	0	0	0	0	B	0	0	0	0	B	70	0	2	1
936-5942.	WATER AND SANITATION FOR HEALTH II	B	20	0	6	0	B	0	0	0	0	B	35	0	4	0

A - ACTIVE B - PENDING MISSION APPROVAL

COUNTRY TOTAL:		20	0	8	0		0	0	0	0		105	0	6	1

COUNTRY: GHANA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.		B	0	0	0	0	B	0	0	0	0	B	75	0	0	0
COUNTRY TOTAL:			0	0	0	0		0	0	0	0		75	0	0	0

COUNTRY: SWAZILAND

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
OPERATIONS RESEARCH - HEALTH 936-5920.		B	95	0	3	0	B	0	0	0	0	B	90	0	2	2
WATER AND SANITATION FOR HEALTH II 936-5942.		B	0	0	0	0	B	30	0	8	0	B	0	0	0	0
COUNTRY TOTAL:			95	0	3	0		30	0	8	0		90	0	2	2

COUNTRY: SOMALIA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
OPERATIONS RESEARCH - HEALTH 936-5920.		B	112	0	2	2	B	0	0	0	0	B	130	0	4	4
DIAGNOSTIC TECHNOLOGY DEVELOPMENT 936-5935.		B	0	0	0	0	B	100	0	3	2	B	30	0	2	4
COUNTRY TOTAL:			112	0	2	2		100	0	3	2		160	0	6	8

A - ACTIVE B - PENDING MISSION APPROVAL

AFRICA

COUNTRY: SUDAN

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.		B	0	0	0	0	B	95	0	0	0	B	85	0	0	0
MEDEX SUPPORT 936-5932.		B	0	0	0	0	B	90	0	3	6	B	50	0	2	0
VECTOR BIOLOGY AND CONTROL 936-5948.		B	0	0	0	0	B	100	0	2	3	B	35	0	1	2
COUNTRY TOTAL:			0	0	0	0		285	0	5	9		170	0	3	2

COUNTRY: ZAIRE

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
VACCINE DATA MANAGEMENT - AIBS 931-0453.26		B	0	0	0	0	B	0	0	2	0	B	0	0	0	0
OPERATIONS RESEARCH - HEALTH 936-5920.		B	0	0	0	0	B	100	0	6	3	B	75	0	1	1
WATER AND SANITATION FOR HEALTH II 936-5942.		B	15	0	5	0	B	0	0	0	0	B	20	0	1	0
COUNTRY TOTAL:			15	0	5	0		100	0	8	3		95	0	2	1

COUNTRY: LIBERIA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
OPERATIONS RESEARCH - HEALTH 936-5920.		B	35	0	2	0	B	0	0	0	0	B	0	0	0	0
COUNTRY TOTAL:			35	0	2	0		0	0	0	0		0	0	0	0

A - ACTIVE B - PENDING MISSION APPROVAL

COUNTRY ACTIVITY REPORT

BY GEOGRAPHIC AREA - FY 85 THRU 87

AFRICA

LAST UPDATE: 16 MAY 85

COUNTRY: BENIN

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
OPERATIONS RESEARCH - HEALTH 936-5920.		B	0	0	0	0	B	0	0	0	0	B	50	0	1	1
COUNTRY TOTAL:			0	0	0	0		0	0	0	0		50	0	1	1

COUNTRY: IVORY COAST

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.		B	0	0	0	0	B	85	0	0	0	B	100	0	0	0
OPERATIONS RESEARCH - HEALTH 936-5920.		B	45	0	1	3	B	0	0	0	0	B	0	0	0	0
WATER AND SANITATION FOR HEALTH II 936-5942.		B	0	0	0	0	B	21	0	9	0	B	25	0	2	0
COUNTRY TOTAL:			45	0	1	3		106	0	9	0		125	0	2	0

COUNTRY: NIGER

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HFA															
WATER AND SANITATION FOR HEALTH II 936-5942.			0	0	0	0		0	0	0	0		15	0	1	0
936-5942.		B	0	0	0	0	B	35	0	10	0	B	0	0	2	0
COUNTRY TOTAL:			0	0	0	0		35	0	10	0		15	0	1	0

A - ACTIVE B - PENDING MISSION APPROVAL

AFRICA

LAST UPDATE: 16 MAY 85

COUNTRY: SENEGAL

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
WATER AND SANITATION FOR HEALTH II 936-5942.		B	20	0	7	0	B	0	0	0	0	B	0	0	0	0
COUNTRY TOTAL:			20	0	7	0		0	0	0	0		0	0	0	0

COUNTRY: BURKINA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
MALARIA IMMUNITY AND VACCINATION-TOTAL 931-0453.		B	100	0	1	1	B	100	0	0	0	B	100	0	1	1
COUNTRY TOTAL:			100	0	1	1		100	0	0	0		100	0	1	1

COUNTRY: MALI

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
	ST/HEA															
TROPICAL DISEASE RESEARCH 931-1126.		B	0	0	0	0	B	0	0	0	0	B	75	0	0	0
OPERATIONS RESEARCH - HEALTH 936-5920.		B	0	0	0	0	B	60	0	2	3	B	100	0	4	2
COUNTRY TOTAL:			0	0	0	0		60	0	2	3		175	0	4	2
TOTAL FOR REGION:			770	0	44	9		1309	0	66	21		2240	0	54	27

A - ACTIVE B - PENDING MISSION APPROVAL

PROJECT SERVICES AT MISSION OR BUREAU REQUEST LAST UPDATE: 18 MAY 85

COUNTRY: SERVICES AT MISSION / BUREAU REQUEST

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
936-5920.	OPERATIONS RESEARCH - HEALTH	B	0	0	0	0	B	0	0	0	0	B	0	0	0	0
936-5928.	DIARRHEAL DISEASE RESEARCH PROGRAM	B	0	0	0	0	B	650	0	11	0	B	400	0	7	0
936-5929.	HHS RESOURCE SUPPORT	B	200	0	40	0	B	200	0	40	0	B	200	0	40	0
936-5932.	MEDEX SUPPORT	B	0	0	0	0	B	0	0	0	0	B	100	0	8	0
936-5942.	WATER AND SANITATION FOR HEALTH II	A	0	0	0	0	A	0	0	0	0	A	0	0	0	0
936-5948.	VECTOR BIOLOGY AND CONTROL	B	0	0	0	0	B	0	0	0	0	B	0	0	0	0
COUNTRY TOTAL:			200	0	40	0		850	0	51	0		700	0	55	0
TOTAL FOR REGION:			200	0	40	0		850	0	51	0		700	0	55	0

A - ACTIVE B - PENDING MISSION APPROVAL

BY GEOGRAPHIC AREA - FY 85 THRU 87

05/16/85

OTHER

LAST UPDATE: 16 MAY 85

COUNTRY: PAPUA NEW GUINEA

PROJECT	TITLE	FY 1985 STATUS	FY 1985 AMT ($000)	FY 1985 STAF	FY 1985 #OF TDYS	FY 1985 #OF PTP	FY 1986 STATUS	FY 1986 AMT ($000)	FY 1986 STAF	FY 1986 #OF TDYS	FY 1986 #OF PTP	FY 1987 STATUS	FY 1987 AMT ($000)	FY 1987 STAF	FY 1987 #OF TDYS	FY 1987 #OF PTP
ST/HEA																
TROPICAL DISEASE RESEARCH 931-1126.		B	50	0	0	0	B	0	0	0	0	B	85	0	0	0
COUNTRY TOTAL:			50	0	0	0		0	0	0	0		85	0	0	0
TOTAL FOR REGION:			50	0	0	0		0	0	0	0		85	0	0	0
OVERALL TOTAL:			6166	0	185	27		6155	0	259	60		8347	3	230	80

A - ACTIVE B - PENDING MISSION APPROVAL
ENTER LEGEND