

PID-ABN-413  
91864

# **BASICS**

## **Annual Report** **October 1, 1993–September 30, 1994**

USAID Contract numbers: HRN-6006-C-00-3031-00  
and HRN-6006-Q-00-3032-00



***BASICS is a USAID-funded Project Administered by  
the Partnership for Child Health Care, Inc.:***

**Academy for Educational Development (AED)  
John Snow, Inc., (JSI)**

**Management Sciences for Health (MSH)  
1600 Wilson Blvd., Suite 300, Arlington, VA 22209**

# Contents

<b>Executive Summary</b> .....	1
Country Programs .....	1
Technical Quality Assurance .....	2
Finance and Administration .....	2
Monitoring and Evaluation .....	3
Information Dissemination .....	3
<b>Country Programs</b> .....	4
Long-term and Periodic Programs .....	4
USAID Bilateral Project Planning .....	5
Short-term Technical Assistance - Other Countries .....	5
Country Reports .....	6
<b>Anglophone Africa</b> .....	7
Regional Overview .....	7
Country Programs .....	7
Eritrea .....	7
Ethiopia .....	8
Madagascar .....	9
Malawi .....	11
Mozambique .....	11
Nigeria .....	11
Zambia .....	12
REDSO Child Survival Advisor .....	13
REDSO Health Network Coordination .....	13
<b>Francophone Africa</b> .....	14
ORANA .....	15
Country Programs .....	15
Mali .....	16
Niger .....	16
Senegal .....	18
<b>Asia/Near East Region</b> .....	20
Regional Overview .....	20
Country Programs .....	20
Bangladesh .....	20
India .....	21
Indonesia .....	22
Other Activities in the Region .....	22
<b>Latin America and the Caribbean</b> .....	23
Regional Overview .....	23
Latin American Regional Office .....	24
Country Programs .....	25
Bolivia .....	25
Guatemala .....	28

<b>Newly Independent States of the Former Soviet Union .....</b>	<b>30</b>
Regional Overview .....	30
Program Highlights .....	31
Country Programs .....	31
Kazakhstan .....	31
Kyrgyz Republic .....	32
Moldova .....	32
Tajikistan .....	32
Trans-Caucasus .....	32
Uzbekistan .....	33
<b>Technical Activities .....</b>	<b>33</b>
Management .....	33
Strategy Papers .....	35
Technical Symposia .....	35
Re-formed Working Groups / Technical Identity .....	36
<b>Information Dissemination .....</b>	<b>36</b>
Publication Management .....	37
Information Management .....	37
Project Publicity .....	38
Central Files .....	38
International Conferences .....	38
<b>Evaluation and Management Information Systems (MIS) .....</b>	<b>39</b>
The Monitoring and Evaluation Strategy .....	39
Goal .....	39
Indicators and Methods .....	39
Approach .....	40
The Management Information System (MIS) .....	40
The Management Information Report (MIR) .....	41
Purpose and Design of the Management Information Report .....	41
Contents of the MIR for PY1 .....	42
Highlights of the PY1 Report .....	43
BASICS Financial and LOE Summary .....	43
<b>Finance and Administration .....</b>	<b>45</b>
Accounting and Financial Reporting .....	45
Contract Administration .....	45
Field Office Administration and Accounting .....	46
Human Resources .....	46
<b>Appendices</b>	
BASICS Country Activities—October 1, 1993–September 30, 1994	
Country Activities by Type	
Status of Country Activity Plans (CAP)	
Country Projects by Priority Technical Areas	
Consultant Database	
Status of Country Activities	
Country Clusters and Working Groups	
Requests to USAID Office of Procurement	
Management Information Report (MIR)	

# List of Acronyms

AED	Academy for Educational Development
AIDS	Acquired Immune Deficiency Syndrome
APPROPOP	Appui au Programme de Population
ARI	Acute Respiratory Infection
BASICS	Basic Support for Institutionalizing Child Survival
BRAN	Bureau Régional de l'Alimentation et de la Nutrition
CAP	Country Activity Plan
CDC	Centers for Disease Control and Prevention
CDD	Control of Diarrheal Disease
CDR	Control of Diarrhea and Respiratory Diseases
CD-ROM	Compact Disk-Read Only Memory
CHPS	Community Health and Population Services
CO	Contracting Officer
CTO	Cognizant Technical Officer
DHS	Demographic Health Survey
DO	Delivery Order
DTU	Diarrhea Training Unit
EPI	Expanded Program on Immunization
ESHE	Essential Services for Health in Ethiopia
FHS	Family Health Services
F&A	BASICS' Finance and Administration Division
FP	Family Planning
HCF	Health Care Financing
HEALTHCOM	Communications and Marketing for Child Survival
HIS	Health Information System
HIV	Human Immunodeficiency Virus
HHRAA	Health and Human Resources Analysis for Africa
HNC	Health Network Coordinator
IEC	Information, Education and Communication
IMR	Infant Mortality Rate
INCAP	Institute of Nutrition for Central America and Panama
JSI	John Snow, Inc.
JV	Joint Venture
LAC	Latin America and the Caribbean
LAN	Local Area Network
LGA	Local Government Area
LID	Local Immunization Day
LOE	Level of Effort
MCH	Maternal and Child Health
MIR	Management Information Report
MIS	Management Information Systems
MOH	Ministry of Health
MSH	Management Sciences for Health
NCIH	National Council for International Health
NGO	Nongovernmental Organization

NID	National Immunization Day
NIS	Newly Independent States
ORANA	Organisme de Recherche sur l'Alimentation et la Nutrition Africaine
ORS	Oral Rehydration Salts
ORT	Oral Rehydration Therapy
PAHO	Pan American Health Organization
PATH	Program for Appropriate Technologies in Health
PHN	Population, Health, and Nutrition
PID	Project Implementation Document
PP	Project Paper
PRITECH	Technologies for Primary Health Care
PVO	Private Voluntary Organization
PVOH II	Private Voluntary Organizations for Health II
PY1	Project Year One
REACH	Resources for Child Health
REDSO/ESA	Regional Economic Development Support Office/East and Southern Africa
SANAS	Services de l'Alimentation et de la Nutrition Appliquée au Sénégal
SOH	Secretariat of Health
TDY	Temporary Duty
TOT	Training of Trainers
UNDP	United Nations Development Programme
UNHCR	United Nations High Commission on Refugees
UNICEF	United Nations Children's Emergency Fund
USAID	United States Agency for International Development
WHO	World Health Organization
WHO/CDR	WHO/Control of Diarrhea and Respiratory Diseases
WINS	Women and Infant Nutrition Support
WVF	War Victims Fund

# Executive Summary

During project year one (PY1), the technical, programmatic, operational, and administrative groundwork for the Basic Support for Institutionalizing Child Survival (BASICS) project was put in place, and the rapid initiation of country and technical programs begun. BASICS accomplished the following:

- assembled a technical, administrative, and managerial staff both at headquarters and in the field to carry out one of USAID's largest and most complex contracts;
- developed technical and programmatic strategies in all major areas of BASICS activity, including specific health interventions (acute respiratory infections (ARI), diarrheal diseases, immunization programs, and malaria) and delivery service and support systems (such as decentralization, integration of services, training, and drug management);
- initiated long-term and periodic country programs in 22 countries;
- provided short-term technical assistance to another 18 countries and USAID missions, principally in the development of their own child survival projects and programs;
- initiated a full range of collaboration with other major donors and sources of technical expertise, particularly the World Health Organization (WHO), UNICEF, the Centers for Disease Control and Prevention (CDC), and other USAID-funded projects through joint seminars and conferences;
- established a monitoring and evaluation system for country programs and financial and management information systems for project operations; and
- developed the internal management mechanisms so that the staff of the three partner companies and six subcontractors worked as an integrated and efficient team to accomplish the objectives of the contract.

These accomplishments are discussed in greater detail below.

## Country Programs

Rapid growth in the number and scope of BASICS' country and regional programs characterized PY1. This growth can be attributed to the transfer of activities from the predecessor projects, the promotional efforts of the USAID Office of Health, and the increasing demand for child survival assistance from USAID Missions, particularly in Africa. At the end of the first year, BASICS had eleven long-term country programs, two long-term regional programs, and eleven periodic country programs either underway or in the start-up phase.

Through country planning exercises, BASICS expanded the scope of the long-term projects inherited from the PRITECH and REACH projects and developed new country programs that are more comprehensive in disease and system-strengthening focus than past programs. Twelve BASICS country and regional programs address immunization, eleven support control of diarrheal disease (CDD) programs, six have nutritional components, and eight address ARI. An additional five programs address more than one of the disease-specific interventions and have the potential to move toward integrated case management of the sick child.

In addition to disease-specific interventions, all of BASICS' country programs are strengthening the cross-cutting systems that support primary health care programs, such as health worker training, health information systems, and communications. Similarly, all of BASICS' country programs are strengthening the monitoring and evaluation capabilities at the national level. In two additional countries, BASICS is assisting with the development of national health policies.

Another important contribution for BASICS this year was short-term technical assistance in support of USAID bilateral project development. Over the course of the year, the project provided critical analyses, project documents, or health sector assessments in six countries. BASICS also responded to requests for short-term technical assistance from 16 countries during PY1. One of the most significant requests arose from the emergency in Rwanda. At the request of USAID and the Office of Foreign Disaster Assistance, BASICS and the CDC provided critical technical guidance to the UN High Commissioners on Refugees and the many nongovernmental organizations (NGOs) struggling to meet the needs of the refugees facing the threat of epidemic cholera and dysentery in the refugee camps in Goma, Zaire.

## **Technical Quality Assurance**

The Technical Division's first major task was development of a conceptual framework for its program interventions. This "Pathway to Survival" was developed in collaboration with staff of CDC and USAID. This document presents the strategy that BASICS and its partners will use to promote the integrated management of childhood illness. It is designed to assist BASICS and other implementing agencies to focus their program development, research, selection, and evaluation of intervention strategies and to strengthen institutional capacity. Simultaneously, the division produced eleven strategies that guide activities in the following technical areas: control of ARI; CDD; immunization programs; control of malaria; reaching high-risk populations; linkages to maternal health, family planning, and HIV/AIDS; improving pharmaceutical management; communications; information dissemination; decentralization; and operations research and small grants. These strategies will help the project select the activities that will have the most impact in reducing infant morbidity and mortality.

As part of the BASICS effort to highlight state-of-the-art approaches to child survival, the Technical Division held several technical meetings and symposia during the year. Symposia included: "Nutrition Interventions: Their Role in Child Survival Programs," "Integrated Management of Childhood Illness: A Discussion of the Pathway to Survival," "The Preceding Birth Technique for Measuring Infant Mortality," and "Issues Surrounding Health Care Financing and Equity in the Context of Cost Recovery." The symposia promoted interagency and cooperating project collaboration as well as informing participants about new approaches to child survival programs.

To allow staff to work more effectively, the Technical Division established four working groups: prevention, home and community, improving services for child health, and policy and national programs. The working groups established relationships with their counterparts in the WHO and undertook various activities designed to support country programs and advance the state of the art. Toward the end of the year, the division reorganized the working groups to conform to BASICS' areas of technical emphasis as follows: public/private partnerships, integrated case management, monitoring and evaluation, behavior change, and sustainability of immunization programs.

Technical officers also visited numerous countries to participate in country activity plans (CAPs), USAID bilateral project planning, and provision of technical assistance.

## **Finance and Administration**

During the project's first year, the Finance and Administration (F&A) Division developed policies and procedures to delineate responsibilities and provide flexibility for the project. F&A developed these policies by adapting and refining existing processes from the predecessor projects. To date, F&A has completed a project accounting procedures manual, field accounting system, subcontracts and consultants administration, purchasing procedures, delivery order proposal process, monthly financial report, performance evaluation, and hiring procedures.

In addition, F&A executed subcontracts with the six team subcontractors: Clark Atlanta University, Emory University, the Johns Hopkins University, the Kingsbury Group, Porter/Novelli, and Program for Appropriate Technology in Health. Fourteen new delivery order actions and fourteen amendments were negotiated with the USAID Contracting Officer during this year. BASICS currently has 15 active delivery orders.

## **Monitoring and Evaluation**

During the first project year, the Management Information Systems (MIS) and Evaluation Division accomplished the difficult task of integrating staff and technology. In May 1994, when the project moved into new offices, BASICS moved from stand-alone computing to a local area network (LAN). The division established communication with the three parent companies and USAID through an MCI mail gateway. In addition, the transition from MS-DOS to Microsoft Windows was completed. These changes have contributed to improved communication among the staff.

The division also began producing the management information report (MIR) on a quarterly basis. The MIR tracks program progress in three ways: program budgets by source of funding; actual expenditures by source of funding, and outputs as specified per activity and as related to objectives. For the project's first year of operation, the MIR shows that (1) BASICS quickly developed field activities in support of BASICS country programs and bilateral project development; (2) a major share of headquarters' effort was devoted to the development of technical and program strategies; (3) a balance was achieved between technical interventions and system-strengthening activities. Expenditures during PY1 totaled \$8,223,295.

## **Information Dissemination**

Early in the project year, the staff established a child survival information center, which provides BASICS staff, USAID missions and bureaus, NGOs, and USAID contractors with state-of-the-art information on child survival topics. The collection now consists of some 7,500 documents on a wide range of public health issues. The Information Center acquired communications software, a modem, and a CD-ROM reader that allow staff to access many electronic databases, networks, and CD-ROMs. During PY1, Information Center staff responded to nearly 800 requests for information from BASICS staff, USAID missions and bureaus, developing country program managers, PVOs, and other USAID contractors.

In addition, the staff completed a BASICS identity package, consisting of a logo, letterhead stationery, pocket folders, and business cards; mounted an exhibit at the National Council for International Health Conference; disseminated a monthly current awareness bulletin to BASICS staff, as well as an electronic bulletin that highlights foreign aid stories in the press; and established central files for the project. The staff also developed procedures for writing, tracking, editing, and disseminating trip reports in a timely manner. About 65 trip reports were disseminated during the first year.

In March 1994, BASICS held its first international conference, "Celebrating 25 Years of Oral Rehydration Therapy," in Washington, DC. Sponsored in collaboration with UNICEF, PAHO, WHO, UNDP, the World Bank, and the Society for International Development, the conference addressed a number of global challenges, including strategies for increasing the effective use of ORT and complementary strategies in prevention.

# Country Programs

Rapid growth in the number and the types of country and regional programs of the Basic Support for Institutionalizing Child Survival (BASICS) project was a key feature of project year 1 (PY1). The promotional efforts of our cognizant technical officers (CTOs), the transfer of activities from our predecessor projects (PRITECH and REACH), and the increasing demand for child survival assistance from USAID missions, particularly in Africa, have all contributed to this growth.

## Long-term and Periodic Programs

- A total of 11 long-term country projects, two long-term regional interventions (with resident advisors), and 11 periodic country programs were either underway or funded and in the start-up phase of activity.

BASICS inherited PRITECH's on-going country programs in **Senegal (CDD)**, **Niger (CDD)**, **Bolivia (CDD)**, and **Madagascar (CDD)** on November 1, 1993, one month after the signing of the project contract. At the same time, BASICS received delivery orders (DO) for work in **Guatemala (ARI)** and **Mali** (general child survival), and for regional cholera and institutional development with INCAP in Central America. In April 1994, two REACH projects—a regional immunization initiative in six countries of the **Newly Independent States (NIS)** of the former Soviet Union and an urban immunization project in **Lagos, Nigeria**—were assumed by BASICS. And then in early summer, two other projects that had earlier been assisted by REACH were added to BASICS' portfolio—a large urban immunization project in **Bangladesh** and immunization and ARI control projects in **Haiti**.

Totally new country efforts were also developed in **Ethiopia, Eritrea, Zambia, India, Indonesia, and Honduras** during the first project year. Furthermore, two new REDSO/Eastern and Southern Africa (REDSO/ESA) regional positions were planned and funded—placement of a Regional Child Survival Advisor and a Regional Health Network Coordinator.

- BASICS project planning missions had been conducted or were in progress in 21 countries and country activity plans (CAP), detailed workplans, or strategic plans were in draft form, covering 12 of BASICS' 22 long-term and periodic countries. (See attached Table)

At the end of PY1, CAP missions had been completed for long-term projects in Madagascar, Niger, Bangladesh, and Bolivia; field missions had also been scheduled for the first two quarters of PY2 in Senegal, Mali, Haiti, Nigeria, Honduras, and Indonesia. Moreover, country planning had been carried out in all six of the NIS periodic countries, but incorporated to a regional strategic plan which was approved by USAID. Ethiopia and Eritrea, examples of countries where BASICS is helping to implement large bilateral projects, had already enjoyed extensive planning missions as part of bilateral project development. Since BASICS was being asked to assist with the implementation of those bilateral projects, a detailed workplan was developed in each case; a full CAP, with situation analysis and long-term strategic vision, is not considered necessary at this time. The Guatemala ARI program, which is based on an earlier in-depth assessment carried out by REACH, was not considered broad enough in scope or long enough in time frame to warrant another country assessment. As the year ended, however, the USAID/Guatemala mission indicated that it would welcome BASICS' participation in the planning for its next bilateral child health project. This is planned for PY2.

- BASICS has been able, through country planning exercises, to expand the scope of the long-term projects inherited from PRITECH and REACH, and to develop new country projects that are more comprehensive in disease and system strengthening focus than in the past.

As the table, "BASICS Country Projects by Priority Technical Area," (see Appendix) demonstrates, 12 BASICS country and regional projects are currently addressing some aspect of immunization and 11 support

CDD programs at national or regional levels. At the same time, six have nutritional components, eight are addressing ARI, and in five of those that are addressing more than one of the case management interventions, BASICS intends to move towards integrated case management of the sick child.

To date, malaria has been the most difficult of the disease-specific interventions to incorporate at the country level; however, we expect the number of countries with malaria program support to increase once USAID's malaria strategy for Africa has been approved and disseminated. Only one country project, and the REDSO/EPA health networking project, are currently addressing malaria, although at least five other country projects have the need and the potential to do so.

As for the cross-cutting systems interventions called for in the BASICS contract, all of BASICS long-term projects are dealing with some aspect of health worker training, health information systems, and communications or social marketing. Likewise, all are strengthening monitoring and evaluation capabilities at the country level by supporting baseline data collection and periodic studies and program reviews intended to measure project and country-level achievements. In several cases (e.g., Eritrea and Ethiopia) advisors will play major roles in the development of national health policies, including health financing and drug policy, and in the design of national information systems.

## **USAID Bilateral Project Planning**

- Short-term technical assistance in support of USAID bilateral project development (versus BASICS project development) was provided to six countries over the course of PY1—Ethiopia, Eritrea, Zambia, Niger, Mozambique, and Guinea.

This became an important, and largely unexpected, area of work for BASICS in PY1. As USAID missions, particularly those in Africa, hurried to develop an exciting new "crop" of child survival and/or health projects in the middle of 1994, BASICS teams were called upon to produce critical analyses and project documents in Zambia, Ethiopia, Niger, and Eritrea. At the request of USAID missions in Guinea and Mozambique, BASICS also conducted health sector assessments or provided single members of larger health sector assessment teams.

## **Short-term Technical Assistance - Other Countries**

- Besides providing technical assistance to our own long-term and periodic country projects and to USAID missions for the development of their bilateral projects, BASICS also responded to requests for short-term technical assistance from 16 additional countries during the year.

Consultancies ranged from the evaluation of USAID's War Victim's Fund activities in Asia and Africa, to the design of ORS packaging in Malawi, to the development of a training plan for the control of epidemic diarrhea/dysentery in Burundi. In each case, BASICS made every effort to meet USAID missions' requests for technical assistance within the time frame stipulated by each mission.

One of the most timely and potentially beneficial interventions carried out by BASICS during the year was in response to the emergency in Rwanda. At the request of USAID/OFDA, BASICS and CDC provided critical technical guidance to the UN High Commission for Refugees (UNHCR) and the many NGOs struggling to meet the needs of the hundred of thousands of refugees facing the threat of cholera and epidemic dysentery in the crowded camps in Zaire. Although not established to provide assistance in emergency situations of this magnitude, BASICS was able to play an important role.

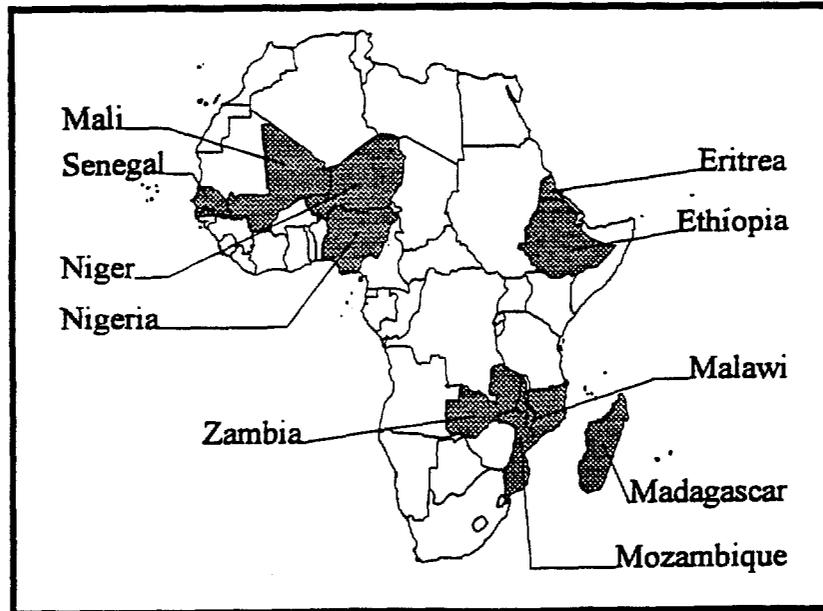
(See attached chart "BASICS Country Activities by Type" for a complete list of the countries where BASICS has worked during PY1 and a classification of the types of assistance provided to each.)

Keeping up with the increasing number and expanding focus of country and regional programs, while also assembling BASICS' country and headquarters team, developing the project's technical agenda, and adapting and creating new administrative systems to support our operations has been a major challenge. We have worked hard to meet this challenge and believe that, as we approach PY2, the project is in a good position to take advantage of the opportunities that have been created at country and regional levels during our first full year of implementation.

## **Country Reports**

The following sections describe country-by-country the significant achievements of PY1.

## BASICS in the Africa Region



## Anglophone Africa

### Regional Overview

BASICS conducted activities in eight countries in this loosely-defined region. Of these countries, Madagascar and Nigeria had long-term advisors in place for most of the year, while the other countries (Eritrea, Ethiopia, Malawi, Mozambique, and Zambia) as well as REDSO/ESA were recipients of extensive short-term technical assistance. BASICS negotiated delivery orders totaling over \$4.6 million for work in PY2 in Ethiopia, Madagascar, Nigeria, and REDSO/ESA (2), and for a study-intervention in Kenya on the topic of female genital mutilation. Additional buy-ins are anticipated in PY2 for Eritrea and Ethiopia.

Clusters were formed for all countries except Malawi and Mozambique. It is the view of the Operations division that additional headquarters resources will be needed in PY2 in order to provide adequate program leadership and management oversight to the expanding portfolio.

### Country Programs

#### Eritrea

BASICS provided a four-person team in May and June at USAID/Asmara's request to conduct a health sector assessment in preparation for the mission project design effort. The team provided detailed technical and institutional analyses, a social/gender analysis, and an economic analysis. The materials were used by the

project paper (PP) design team as resource information and were included as annexes to the PP. The PP was reviewed and approved by REDSO/ESA in August.

A two-person BASICS team visited Eritrea in September and October 1994 to follow up on issues raised by the PP, and to develop a proposal for BASICS activities in Eritrea. The consultants worked with the Ministry of Health (MOH), USAID/Asmara, and other donors to develop a draft workplan which included a four- to six-month period of bridging activities followed by a two-year project. The major activities to be carried out include technical assistance to conduct assessments for health information systems/management information systems (HIS/MIS), training, and costing studies. Assistance will also be provided to the MOH for planning and policy formulation. The activities for the long-term project include long-term resident advisors, support for development of accounting and financial control systems, assistance to formulate a national drug policy, short-term experts to strengthen existing training schools, and commodity support.

## **Ethiopia**

In January, BASICS provided a nutrition consultant to work with USAID/Addis Ababa to identify possible intervention areas under the future Essential Services for Health in Ethiopia (ESHE) project. The mission developed a project identification document (PID) for ESHE, with input from REDSO/ESA and USAID/Washington, that was approved mid-year.

BASICS negotiated a DO in September with USAID/Addis Ababa for a 12-month period, during which time it is anticipated that a larger agreement will be developed with BASICS for long-term technical assistance. The activities to be carried out under the current DO include: data collection and analysis, a community demand study, assistance for the MOH to prepare National Service Delivery guidelines and organize and facilitate a workshop to discuss the draft guidelines, and arrangement of study tours and short courses (regional and abroad) for Ethiopians. BASICS has recruited a medium-term (six-month) resident advisor who will be responsible for carrying out the data collection and community demand study. The advisor will also assist in MIS/HIS development for the region, facilitate and coordinate BASICS short-term technical assistance visits, and guide the preparation activities related to the national workshop.

The purpose of these initial bridging activities is to provide USAID/Addis Ababa and the Government of Ethiopia with information and analysis needed for the design and implementation of the ESHE project. The activities to be carried out under the delivery order represent a springboard to a larger long-term project.

At the request of the USAID mission, BASICS fielded a consultant in August to carry out a social and gender analysis which provided background for the PP design. The consultant conducted field interviews, focused group discussion, and reviewed extensive materials in the preparation of her report.

A four-person BASICS team (Freund, Heise, Pond, and Steinglass) and the BASICS CTO (Bartlett) visited Ethiopia from September 18–October 8 to assist the mission in developing technical strategies and interventions for the ESHE project and to write a proposal outline for BASICS activities in anticipation of a long-term project. It is expected that the long-term project (ESHE) will begin in the second quarter of 1995. BASICS will provide five full-time long-term resident advisors and open two offices (one in Addis Ababa and a regional office in Awassa) with local-hire support staff. This will be a large and complex project involving support in the form of long- and short-term technical assistance, training (in-service, pre-service, and participant), curriculum development, development and distribution of information, education, and communication (IEC) materials, and community-based activities. The high activity level of this project will necessitate a large management effort on the part of BASICS headquarters.

USAID/Addis Ababa anticipates that the PP will be completed by November or December 1994 and that authorization will be received by early 1995. Project activities may begin as early as April or May 1995.

Significant support was provided to Ethiopia in the area of health care finance through a collaborative arrangement between BASICS and REDSO/ESA. This agreement calls for the establishment of networks and partnerships to share expertise and experience across the region. BASICS supported short-term technical assistance and training for the Ethiopians charged with developing a health care finance strategy document.

## **Madagascar**

In 1992, funds from the USAID APPROPOP bilateral project were used to buy into the PRITECH project to improve the management of dehydration resulting from diarrheal diseases and thereby reduce child morbidity and mortality. With the end of PRITECH, an additional buy-in was negotiated with the BASICS project covering the period from February to September 1994. During this period a country planning exercise took place that provided the framework for a more comprehensive, longer-term buy-in to the BASICS project.

Both PRITECH and BASICS have concentrated on strengthening the public sector response to diarrheal disease. Working with counterparts in the national Control of Diarrheal Disease (CDD) program, BASICS provided both short- and long-term technical assistance and operating cost support to develop institutional capacity, improve case management skills, develop IEC strategies and materials, and to increase the availability and use of ORS.

### **Country Highlights**

**CDD Program Implementation.** BASICS placed a resident advisor in Madagascar from January to September 1994, to work with the national CDD program. The advisor, Karen Blyth, had as one of her many responsibilities the development of national capacity to plan and implement coherent CDD programs. Blyth worked on a daily basis with her counterpart and MOH colleagues to improve the CDD program's performance. Key accomplishments include:

- Revision, approval, and printing of a national CDD policy document.
- Official submission to the MOH of recommendations to re-institute the national ARI program. A program coordinator was named in September 1994.
- Development and reproduction of a revised and simplified CDD health facility reporting format to be distributed October–December 1994 to MOH health facilities with a diarrhea training unit/oral rehydration therapy (DTU/ORT) corner.
- Sponsoring a Management Skills Workshop in June 1994, facilitated by BASICS consultant Bula Bula Lielie for 15 participants from the national CDD/ARI programs and the MOH IEC/training division. The workshop addressed management problems and solutions in the national CDD program.
- Funding of provincial CDD case management training for 20 physicians and paramedical staff per province from the public and private sectors. Supervision of ORT corners was carried out between May and August 1994 by the CDD provincial supervisor with funds from BASICS. DTUs which were noted to be weak in case management from the 1993 PRITECH Supervision Report improved their patient flow and case management skills through closer provincial supervision.
- Support for the training of health workers in the correct use of IEC/CDD print materials developed under the PRITECH project. The training was carried out by MOH/IEC and provincial CDD staff.
- Initial contacts with NGOs and parastatal were made by the BASICS CAP team in May 1994. The BASICS country advisor conducted follow-up meetings with a large number of these NGOs, many of which could become future partners to BASICS in its efforts to support child survival more broadly.
- The BASICS CAP was carried out in May 1994 by a five-person BASICS team led by Ken Heise and included Dr. Ron Waldman, Dr. Jean-Jacques Frère, Camille Saadé, and Karen Blyth. Based on the results of the CAP, the USAID/Madagascar Mission proposed to re-orient and broaden their efforts in child survival to include CDD, ARI, and nutrition and breastfeeding, and to undertake major initiatives with the private and NGO sector.

**CDD Case Management.** BASICS organized national and provincial level training for health workers to improve their case management skills. In April 1994, BASICS consultant Dr. Ekoe Tetanye conducted a technical update course in CDD and ARI for national and regional physicians, including the directors of the country's DTUs. The regional teams developed small proposals for funding under BASICS to carry out CDD training and supervision activities. DTU documentation centers and equipment were financed by BASICS on a case-by-case basis.

The MOH provincial CDD teams from Tulear, Diego, Tamatave, and Antananarivo carried out supervisory visits to the majority of ORT corners in their provinces, and submitted reports to BASICS that were shared with UNICEF. UNICEF was the main provider of equipment for the DTUs from 1988–1992. A great deal more effort must go towards making the ORT corners functional.

Efforts to establish a CDD Medical/Nursing School Task Force to develop updated CDD curricula for schools of medicine and nursing were not successful. After several meetings with the Chairman of the Pediatrics Department (Medical School, University of Antananarivo), BASICS was advised that the curriculum revision task was not achievable in such a limited timeframe.

**Information, education, and communication.** The BASICS advisor uncovered many problems with the distribution of PRITECH CDD/IEC print materials. To address these problems, the advisor had an additional 2,000 copies of the ODIVA ORS promotional materials reproduced and distributed by the ODIVA Production Unit Manager. Highlights of BASICS efforts in this area include:

- Distribution of ORS promotional materials in both the public and private sectors.
- A workshop in February 1994 to train health workers in Fianarantsoa how to convey correct messages to caretakers.
- In July-August 1994, the IEC/MOH specialist and team carried out an evaluation of the use of the CDD/IEC print materials in the provinces of Fianarantsoa and Antananarivo. They noted the importance of training health workers in the use of the materials prior to distribution.

**Local production and distribution of ORS.** PRITECH, and later BASICS, devoted considerable energy to the issue of generating demand for ORS, ensuring a steady supply of raw materials and developing a marketing strategy for the locally produced ODIVA ORS product. The strategy pursued was one of creating a large enough demand for ORS that producers in the private sector would be interested in entering the market. At present, only the parastatal ODIVA production unit produces ORS in Madagascar.

Upon learning that UNICEF would no longer provide ORS raw materials to the ODIVA unit, BASICS staff and consultants began discussions with the MOH, USAID, WHO, and Cooperation Suisse to seek alternative means of ensuring a steady supply of materials. BASICS Technical Officer Camille Saadé provided technical assistance to the MOH, Cooperation Suisse, and the private pharmaceutical sector during the May 1994 BASICS CAP visit. Cooperation Suisse agreed to procure raw materials (approximately \$20,000) for the local production of one million ORS sachets, on an emergency basis only. An emergency supply was air-freighted in June 1994 and the remaining materials arrived by sea in September 1994. Continuing dialogue with two companies, OFAFA and FARMAD, suggests that one or both may choose to enter the ORS market in the near future.

#### **Other Accomplishments**

As a result of steady, effective lobbying by the BASICS country representative, the MOH has agreed to name a much stronger individual to lead the national CDD program. In addition, policy dialogue was successful in convincing the MOH to name a well-regarded physician to head up the ARI program. Neither change would likely have occurred without timely encouragement from the BASICS advisor.

## **Program Issues**

BASICS has negotiated a new, multi-year DO with USAID. The following factors will be critical to the ultimate success of this project:

- Timely recruitment of a long-term country advisor;
- Effective implementation of a small grants program;
- Forging of successful public/private partnerships;
- Managing the technical agenda.

## **Malawi**

At the request of the USAID/Lilongwe Mission, BASICS provided a consultant for three weeks in November to assess the CDD program and exclusive breastfeeding promotion activities. The consultant also helped the MOH to organize and facilitate a USAID-funded workshop on cholera and bloody diarrhea.

BASICS fielded a two-person team from July 17 to August 5 to assist the MOH, Pharmanova, Ltd. (a local private-sector ORS producer), and other participating organizations in developing an ORS social marketing strategy, a new ORS package design, and health education materials for ORS and ORT. The consultants succeeded in developing a package design that will be refined and eventually used by Pharmanova and the MOH CDD program. The consultants also investigated the potential for future BASICS involvement in Malawi child survival activities.

## **Mozambique**

The USAID Mission in Mozambique is preparing proposals for a revised program over the next five years that shifts attention from emergency relief assistance to longer-term development. As part of that effort the Mission requested that BASICS help develop an overall USAID strategy in health and family planning for the next five years. A five-person team spent three weeks in April/May 1994 developing proposals which included the following:

- Short-term technical assistance in major areas of policy reform;
- Primary health care interventions in three selected provinces based largely on NGOs and community groups, with regional health authorities facilitating overall coordination and ensuring quality of services;
- Continued support for contraceptives and basic drugs on a declining scale;
- Support for selective IEC efforts directed specifically at AIDS, family planning, and specific practices in the home related to diarrheal disease, ARI, and nutrition.

The BASICS team wrote a report and submitted it to USAID/Maputo.

## **Nigeria**

Nigeria began the year as a REACH project country focusing on urban expanded program of immunization (EPI) service delivery through the public sector. Nigeria ended the year as a BASICS country struggling to find a niche in urban EPI service delivery through the private and NGO sectors. This radical turn of events was occasioned by the State Department's decision to decertify Nigeria for public sector funding as a result of its failure to halt drug trafficking and the slow speed of implementing democratic reforms. USAID has directed all its cooperating agencies to develop strategies and plans to work exclusively with the private sector.

During the year, several planning and implementation activities took place. In December 1993, a three-person team from REACH/BASICS traveled to Lagos to participate in a launch of IEC materials and to facilitate a

planning workshop for local government areas (LGAs). The team developed a proposal for future activity calling for continued support for urban EPI with a phased expansion into other geographic and technical intervention areas.

Three short-term technical assistance assignments took place during this year: intensive support for organizing local immunization days (LID) in Lagos State LGAs; a review of the IEC strategy and materials with an emphasis on IEC mobilization in support of the LID strategy; and a monitoring visit by the BASICS technical officer for Nigeria. None of these TDYs was funded by BASICS, although all of them contributed to the development and strengthening of the BASICS program.

BASICS spent several months negotiating a DO with USAID/Lagos for continued support of urban EPI through the private sector. The DO calls for short- and medium-term technical assistance and the design of a CAP to guide BASICS' efforts. Likely areas of BASICS involvement, as called for in the DO, include: identifying private sector collaborators; creating interest among them for greater involvement in EPI; training for service providers; conducting studies to learn more about the barriers to greater involvement of the private sector; developing special disease control activities in neo-natal tetanus and measles; and assisting with program planning and evaluation.

The details of BASICS' involvement will be determined through the development of a CAP, tentatively scheduled for November 1994. A meeting of cooperating agencies is now slated for mid-October, and a technical staff member from BASICS is planning to attend.

The decertification process, political turmoil, strikes, and economic disruptions have all contributed to an environment in which BASICS' ability to plan and implement a program of activities has been severely compromised. A major effort will be needed in PY2 to work out clear lines of communication with USAID/Lagos and to assess realistically the prospects for impact of proposed activities in Nigeria.

## **Zambia**

A number of project development activities took place in PY1. In response to the USAID Mission in Zambia, BASICS fielded a two-person team in November and December to identify targets of opportunity and to provide background information for a PID. The consultants produced a document which provided an overview of the Zambian health care system focusing on the current health reforms and decentralization efforts. The document also included details on donor activities, and a consideration of the potential for non-project assistance, and presented a draft objective tree and logframe.

The pre-PID visit was followed by a five-person BASICS team in February and March to develop the PID. The PID proposed a project that will focus on (a) strengthening district-level health services for child survival (diarrhea, malaria, and ARI) through the development of health management systems and training of health workers; (b) targeting caretakers and communities with IEC activities to improve current practices for prevention and home management of diarrhea, malaria, and ARI; and (c) providing national policy and central program support through technical assistance, commodities, and operational research.

The project in Zambia will probably be geographically focused in one or two provinces and two or three districts within these provinces. Project support activities will address systems strengthening at the district level, some central-level support, and technical interventions for CDD, ARI, malaria, and EPI. The MOH has recently developed a strategic plan with the assistance of the World Bank and has requested that other donors support the MOH's reform agenda.

The PID also suggested categories of consultants and level of effort (LOE) needed to develop the PP. An important PID team recommendation was the need for a full-time population, health, and nutrition (PHN)

officer given the management burden imposed by three large projects (AIDS, family planning, and child survival). The PID was approved in July and an PHN officer was recruited and posted in September.

At the request of USAID/Washington, Africa Bureau, BASICS provided a staff member from April 11-23 to participate in a review of the EPI as part of the \$6 million grant by USAID to UNICEF for supporting EPI in seven African countries, including Zambia. As originally conceived, BASICS was to be joined by representatives from UNICEF and the USAID/Washington Africa Bureau, though in the end they were unable to attend. The assignment's objectives were changed to a review of only the technical content of EPI. Because the visit coincided with a high-level Government of Zambia/donor meeting, the consultant took advantage of the opportunity to participate and follow up key PID issues related to the development of a strategic health plan by the Government of Zambia.

A meeting was held with the new PHN Officer Paul Hartenberger on September 1 to brief him on issues raised by the PID and to discuss timing for the PP. The PHN officer expressed a desire to begin the PP in late October. In response, BASICS assembled an eight-person team to undertake the PP effort, and scheduled a two-day team building session in October as preparation for the assignment. The PP was then postponed by the HPN officer and is now tentatively scheduled for January 1995.

### **REDSO Child Survival Advisor**

As part of continuing efforts to promote child health, many USAID missions in the east and south Africa (ESA) region are starting to think about incorporating child survival projects or components into their HPN sector portfolios. This focus on child survival has led to the need for technical input and support to child survival programs in the region. As the REDSO/ESA Office has not, at present, dedicated technical support solely for child survival, it was agreed that BASICS will provide a Regional Child Survival Advisor who will work as an integral part of the REDSO Office in the support of child health activities in the region. Over a two-year period, the advisor will assist missions in design, implementation, and assessment of effective and up-to-date approaches to child survival, including the technical, delivery system, behavioral, and policy/planning aspects of child survival.

In September, BASICS received a DO from REDSO/ESA to fund the first 15 months of the child survival advisor's time and activities. Recruitment for the advisor began during the summer of 1994, and continues at present. BASICS hopes to hire and field the child survival advisor by January 1995.

### **REDSO Health Network Coordination**

The idea of collaborating with REDSO in the development of health networks and partnerships grew out of a series of conversations and meetings between the health staff of REDSO and Operations staff of BASICS. The central idea is to find ways of sharing experiences, lessons learned, and expertise in the health sector among the countries of the region.

One means of improving the exchange of experience is to create and support facilitative networks or partnerships among country leaders and decision-makers, project implementers, health care institutions, and donors across the region. REDSO's regional focus, and the presence of USAID missions in specific countries, offer a unique opportunity to develop these health partnerships and networks to collectively meet the health challenges of the region.

These networks can be developed around technical health intervention areas such as child survival, integration of services for MCH/family planning and HIV/AIDS, as well as health policy or systems support issues, such as health care financing, rational drug use, or decentralization. REDSO has already sent questionnaires to PHN officers and representatives of cooperating agencies within the region to determine their sense of

priority areas around which networks could be built. Once developed, these networks would not only increase REDSO's ability to serve the region but would also enable the countries of the region to help themselves more effectively.

In March, Heise and Bartlett met with REDSO to brainstorm various elements of the network approach and to reach agreement on how to move forward with the idea. REDSO then developed a scope of work for a proposed DO which was ultimately signed with BASICS in September. Over a four-year period, the DO will fund a full-time health network coordinator (HNC) based in Nairobi, provide approximately 19 person-months of short-term technical assistance, and support the costs of numerous workshops, conferences, study tours, and information dissemination activities. The HNC will have an office at REDSO and work with the REDSO health unit on a day-to-day basis. A candidate was selected and presented to the Partnership, and it is anticipated that an offer will be made in November 1994.

During PY1 the focus of network activities was on health care finance because of the interest expressed within the region and the presence in Kenya of a successful health care finance project whose staff and counterparts expressed interest in sharing their approach and experience with neighboring countries. The Kenya-based team visited Ethiopia in August to work with their Ethiopian counterparts to develop their national health care finance strategy. Future activities will include support for key Ethiopians to attend an MSH Health Care Finance (HCF) Course in Nairobi (October 1994), technical review of the draft HCF strategy, and support for a series of workshops in Ethiopia to build consensus around the strategy document. Two Eritreans also attended the October workshop, supported with DO funds. As BASICS' involvement in Eritrea grows, additional short-term technical assistance in health care finance may be provided through this DO.

These activities, and others to be developed during the four-year life of this initiative, will contribute to broader objectives of REDSO and USAID in information sharing and networking. The experiences and issues identified through these networks are anticipated to serve as input to the regional analytic activities of the USAID Health and Human Resources Analysis for Africa (HHRAA) project. In addition, these same experiences and issues will be brought to the USAID PHN officers in the region through REDSO's contemplated program of annual regional PHN officers meetings. Finally, these experiences can be shared more widely (extra-regionally) through the information dissemination capability of the BASICS project.

## Francophone Africa

During PY1, BASICS provided technical assistance and oversight to three country programs (Mali, Senegal, and Niger), and discussed providing short-term assistance at the request of USAID REDSO/West Africa, where USAID recently closed some country missions. In Senegal and Niger, BASICS had long-term advisors in place throughout the year, whereas start-up plans for BASICS Mali were delayed, awaiting MOH approval of the BASICS DO. During PY1, BASICS negotiated DOs as follows:

<i>Country</i>	<i>Effective Date</i>	<i>Est. Completion Date</i>	<i>Amount</i>
Mali	09/30/93	09/30/98	\$500,000
Niger	05/10/94	06/14/95	\$243,918
Senegal	08/01/94	09/30/98	\$1,390,218
<b>Total</b>			<b>\$2,134,136</b>

In addition, BASICS responded to a technical assistance request from USAID/Conakry to perform a two-week information gathering and analysis exercise on Guinean national pharmaceuticals management.

Activities in the region were managed by Dr. Adama Koné, the BASICS Regional Director based in Dakar, Senegal. These activities included expansion of the regional office and the addition of two staff positions: an IEC specialist and an immunization specialist. Successful planning and recruitment in PY1 for these two important positions led to the identification of two highly skilled technicians who will join BASICS Francophone Africa Regional Office in the first quarter of PY2.

Headquarters management experienced significant staff turnover when the Operations Officer, Bob Weierbach, and Operations Coordinator, Lori Dandridge, left the project in July 1994. Pat Taylor, Deputy Director/Operations provided headquarters oversight in the absence of an operations officer (July-September) in collaboration with the new Operations Coordinator, John Durgavich and the Program Assistant, José Molina. The newly-appointed Operations Officer, Karen Blyth, joined the project at the end of PY1 in September 1994. Significant staff turnover in PY1 at headquarters and the expansion of the regional office will require a review of current headquarters staff patterns to provide adequate program leadership and management oversight to the expanding portfolio.

## **ORANA**

Early in the project year, BASICS entered into negotiations to continue the collaboration with ORANA, a child survival information center in Senegal, begun under the PRITECH project. Information center activities included distributing an acquisitions list to a mailing list of 850 decision makers; responding to information requests; translating key child survival documents; and disseminating the French versions of *Dialogue on Diarrhoea* and *ARI News*. Funding was provided for a six-month period—from January through June 1994—to continue disseminating information in francophone Africa and to permit an evaluation of the potential for ORANA to expand its current operations.

In March, a consultant visited ORANA to determine the information services and products that the information center could reasonably offer using the funding available from BASICS. The consultant analyzed ORANA's information requests to date, the mailing list of decision makers in francophone Africa, and the origin of documents in the information center's collection. The results of the analysis indicated that ORANA's services were being used by health service personnel at the central and provincial levels in nearly equal proportions; the mailing list exhibited an even distribution between the central and provincial levels; and ORANA's collection of materials was very well balanced between those issued or published in Africa and those that are published outside the continent.

The report recommended that ORANA continue its established operations and services and take on the following activities:

- expansion of the subject scope of the collection to include immunization and malaria;
- conversion from the manual processing of documents to a computerized database;
- adoption of new information technologies to support the operations and services of the information center such as electronic communications and CD-ROM;
- publication of a new product that would expand information exchange and support a horizontal flow of information in the region.

In late spring, however, two audits and BASICS' review of ORANA's financial procedures prevented BASICS from continuing to fund ORANA directly after July 1994. To preserve the important work that has been done by the information center, a number of actions were taken. BASICS notified ORANA that funding would be discontinued until and unless standard accounting procedures were adopted and full financial disclosure assured. The project arranged to fund the activities of the information center directly through the BASICS regional office and notified the MOH, Organisation de Coordination et de Cooperation pour le Lutte contre les Grandes Endemies, and French Cooperation of this decision and the precondition to future funding

for ORANA. BASICS would be interested in continuing and expanding support to ORANA for regional nutrition and information center activities should the financial and management issues be resolved.

## **Country Programs**

### **Mali**

The Mali BASICS DO requests that BASICS help the USAID Mission achieve a transition from previous child survival projects by identifying updated approaches and strategies for improving child health and nutritional status and providing the basis for an anticipated greater role of USAID/Bamako in child survival activities under the Community Health and Population Services (CHPS) project. This assistance is to be provided in the context of a collaborative effort with assistance from the World Bank, WHO, UNICEF, and other bilateral donors. The specific objectives of this technical assistance and support outlined in the delivery order are:

- To increase access to and quality of child health services, in the context of expanded and community-based integrated approaches to primary health care delivery;
- To increase demand for and use of appropriate preventive and therapeutic child survival interventions through effective IEC and behavior change approaches;
- To maximize the effective integration of child survival services with other essential health and family planning services.

### **Country Highlights**

BASICS was regrettably unable to respond to this request in PY1, as MOH approval of the BASICS DO was not received by USAID/Mali until October 1994.

Plans were made and subsequently cancelled during PY1 to use core funds from the BASICS project to carry out an assessment of the existing situation in relation to child survival and child health service delivery in Mali. Accomplishments included further discussions concerning plans for the CAP by Dr. Adama Koné, BASICS' Regional Director, the MOH, and the USAID/Mali Mission.

Due to the delay of the start up of the BASICS Mali country program, BASICS was not able to recruit and field a country advisor nor establish a field office. No additional regional or headquarter technical assistance was carried out above and beyond Dr. Koné's routine visits.

### **Program Issues**

BASICS' commitment and enthusiasm has not been dampened in spite of the long delays in receiving DO approval by the MOH. The following factors will be critical to the ultimate success of this project:

- Timely recruitment and hiring of a long-term country advisor;
- Establishment of a fully-equipped BASICS office, and hiring, and training of administrative/support staff;
- Successful implementation of a CAP scheduled for January 1995 carried out by a multidisciplinary team;
- Revision and strengthening of the BASICS PY2 workplan.

### **Niger**

The goal of the BASICS Niger country program during PY1 was to improve the MOH's capacity to reduce the morbidity and mortality of diarrheal diseases, and to begin transition steps towards a more integrated case management approach with the national CDD and ARI programs. During this period, the BASICS Niger country program was financed by a combination of core funds and USAID/Niamey funding. The BASICS Country Advisor, Dr. Colette Geslin, assumed her position in October 1993.

During PY1, the BASICS country program consisted largely of CDD activities originally established under the PRITECH project, and to a lesser extent, of ARI activities. During this period, BASICS carried out a CAP, a country project planning exercise that provided the programmatic framework for the future BASICS project in Niger. BASICS also provided both short- and long-term technical assistance and operating cost support to develop MOH institutional capacity, to train CDD coordinators at the regional level in conducting integrated supervision of diarrheal disease management and MCH service delivery, and to monitor program performance.

Dr. Geslin provided significant leadership to the CDD, ARI and malaria program managers on planning steps for the integration of case management of childhood illnesses. The MOH views the BASICS country advisor as the catalyst for progress made to date per the integration of the national CDD/ARI/malaria programs.

Ultimately, the intent in Niger is to introduce the WHO algorithm on the "Integrated Management of the Sick Child." However, discussions with WHO/CDR-Geneva have indicated that it is unlikely that the final revised training module will be available in French by the end of BASICS' 18-month program in Niger. Together, BASICS and WHO-Niger/Brazzaville have helped the MOH begin strategic planning for the integration of CDD, ARI, and malaria activities on the district level. During PY1, the MOH, WHO, and BASICS began to develop and test approaches for the integrated case management of childhood illnesses piloted in two districts in Niger.

### **Country Highlights**

During PY1, Dr. Geslin made great strides in one of the most difficult tasks of the BASICS project: helping to create a unified team composed of the CDD/ARI/malaria program managers, who are committed to the integration of program functions and services. BASICS has helped the MOH begin to make a transition from centrally-managed, vertical child survival programs, to a more decentralized, integrated approach. A variety of instruments have been jointly developed during this period by the national coordinators, including an integrated supervisory checklist, norms and standards for all programs, program monitoring indicators, and plans for integrated training and supervisory activities.

Dr. Geslin also succeeded in convincing the MOH to develop a national ARI program and to appoint a national program manager. During this period, she helped develop national capacity to plan and implement coherent CDD and ARI programs.

In addition, BASICS financed the participation of the national CDD and ARI managers in September 1994 who attended the WHO CDD/ARI Program Managers Course in Dakar with Dr. Geslin. BASICS also financed the participation of four Nigeriens who attended the CDD WHO Medical Education Conference in Yaoundé, Cameroon.

In July, Dr. Geslin collaborated with URC/MOH in the development of an integrated MCH/FP supervisory tool during the MCH/FP Integrated Supervision Workshop. In September, she established an MOH technical advisory committee which will routinely address issues pertaining to the integration of case management and program management. Dr. Geslin helped the committee develop a scope of work and define roles and responsibilities. Also drafted was a working guide on key issues and activities which need to be addressed to further develop the integration of child survival services at the regional, district, and peripheral levels.

Key accomplishments achieved include the following:

- Development of a program evaluation format for the MOH CDD 1994 Evaluation and Regional Planning Meeting and assistance in developing the CDD/ARI 1994 action plan;
- Participation in and facilitation of the MOH/USAID Consensus Building Workshop, June 1-3, 1994;

- Development of an integrated supervisory checklist (CDD/ARI/malaria) for regional and district supervisors in collaboration with the MOH; piloted in 3 regions, August 1994;
- Development of select indicators for monitoring and evaluation for national CDD, ARI, and malaria programs in collaboration with the MOH;
- BASICS CAP carried out in June 1994 in collaboration with the MOH.

### **Program Issues**

The following factors will be critical to the success of this project:

- Increased headquarter/regional support needs to be given to the country advisor to carry out the BASICS Niger Country Program;
- Increased communication with the newly appointed USAID PHN chief;
- Continued collaboration with WHO/Niger, Brazzaville, and Geneva to extract lessons for the MOH from this pilot project on integrated case management;
- Continue joint planning meetings so that all partners (USAID, MOH, WHO, and UNICEF) are involved in the effort to develop and test approaches for the integrated case management of childhood diseases;
- Clearly present lessons learned to USAID/Niger from this experience, in the hopes that BASICS can continue to play a role in USAID/Niger's 1995-1998 strategic plans to help the government achieve a healthier population.

### **Senegal**

The primary goal of the BASICS Senegal country program is to reduce child mortality due to diarrhea/dehydration in the four assisted USAID regions: Fatick, Kaolack, Louga, and Ziguinchor. The program therefore consists largely of CDD activities originally established by the PRITECH project. USAID/Senegal has asked BASICS to increase its involvement in the area of nutrition in collaboration with SANAS/MOH and Wellstart, which includes the hiring of a nutritionist in PY2. IEC and CDD-specific aspects of the national information system are also to receive high priority. Since BASICS' counterpart is SANAS, nutrition interventions are logical add-ons to BASICS work. However, involvement with other vertical programs, such as ARI, EPI, and malaria, will require establishing new relationships with other divisions of the MOH.

The BASICS Senegal country advisor is Mr. Mamadou Sène, who has been in his current position since October 1993, and also serves as the BASICS counterpart to SANAS/MOH staff. In PY1, the Senegal BASICS country program was financed by a combination of core funds and USAID/Dakar funding through the August 1, 1994-September 30, 1998 DO. USAID/Dakar provided a buy-in early in PY1 to support the Senegal CDD program. However, action by the Office of Procurement delayed the signing of the DO.

During this period, the country program received approval from the USAID mission to carry out the BASICS CAP, entered into preliminary discussions with USAID and the MOH for an additional buy-in in the area of nutrition, conducted a CDD health facility survey in collaboration with WHO/MOH, and provided technical assistance on supervision, training, and strategic planning to SANAS/MOH for the CDD program.

In summary, BASICS provided both short- and long-term technical assistance and operating cost support to help develop institutional capacity in the national CDD program, improve CDD case management skills, review CDD IEC and training strategies and materials, and improve the accessibility and distribution of ORS in the four USAID assisted regions. BASICS also began discussions with USAID, SANAS/MOH, and Wellstart about the Mission buy-in for nutrition.

### **Country Highlights**

**Case management at health facilities.** The most significant BASICS accomplishment in this area was the successful completion of the health facility survey on Diarrhea Case Management in collaboration with WHO/MOH. Key accomplishments include:

- Development of a detailed plan of action for the health facility survey and the successful recruitment of local and international researchers to lead the study team in the four USAID-assisted regions;
- Analysis of the health facility survey for PY2 distribution to all levels of MOH, in collaboration with WHO. The survey found that 43 percent of health workers had been trained in CDD case management with ORS available the day of the survey;
- Assistance to SANAS in in-country CDD case management training in the four USAID-assisted regions.

**CDD household management.** USAID/Dakar requested that BASICS expand its work with SANAS in the area of nutrition with an emphasis on IEC activities for both the CDD and nutrition programs. Key accomplishments include:

- Work with SANAS on feeding during diarrhea, growth monitoring, and breastfeeding promotion in relationship to the national CDD program;
- Development of proposals for work under the Wellstart and WINS projects in collaboration with SANAS/MOH;
- Development of plans to evaluate existing IEC/CDD materials with the assistance in PY2 of the regional IEC advisor.

**Regional/district management.** Mamadou Sène developed national capacity to plan and implement CDD programs in the four USAID-assisted regions. Key accomplishments include:

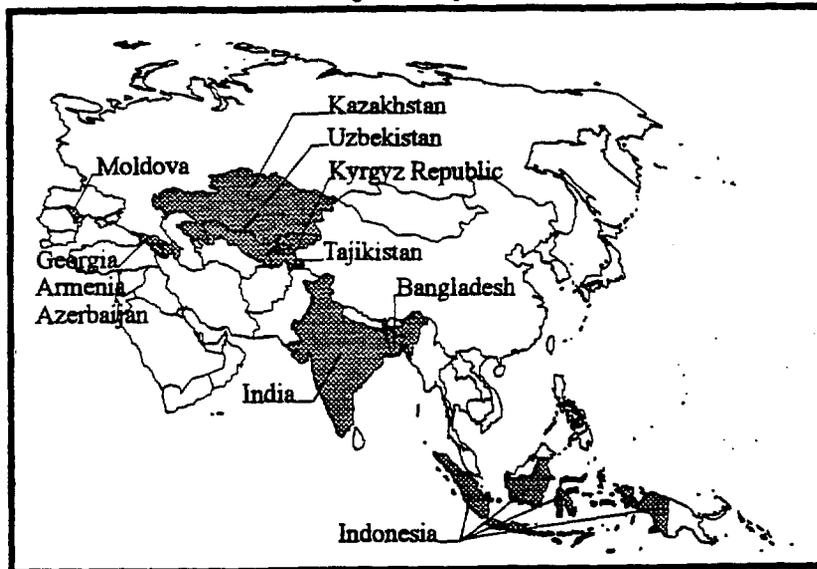
- Provided support and guidance to the CDD and nutrition programs in collaboration with SANAS/MOH, MSH, Wellstart, and other collaborating donors in the four targeted USAID Regions;
- Finalized plans for the PY2 BASICS CAP to be carried out in February 1995;
- Participated with MSH team in Senegal Child Survival and Family Planning Project planning and pre-implementation meetings;
- Assisted SANAS/BRAN in carrying out annual strategic planning exercises for CDD in Fatick, Kaolack, Louga, and Ziguinchor.

### **Program Issues**

In August 1994, a new multi-year DO was signed with USAID/Senegal, with an additional buy-in for an increased effort in the area of nutrition. The following issues need attention in the next year:

- Of paramount importance for the future direction of the BASICS Senegal country program will be the successful carrying out of the CAP scheduled for February 1995 which will include an analysis of child survival and a strategic plan for long-term BASICS support;
- Careful design of a programmatic response to the nutrition buy-in;
- Timely recruitment of a nutrition advisor to work effectively with SANAS/MOH and Wellstart;
- Forging of successful public/private sector partnerships;
- Presentation of the health facility data in simple graphic format, accompanied by planning tools that require managers to use the data in their plans;
- Development of evaluation and monitoring plans with SANAS/MOH as part of annual and quarterly strategic planning;
- Evaluation and revision of CDD IEC materials and training strategies;
- Increased attention to the medical/nursing school curriculum to follow up on the foundation developed under the PRITECH project.

## **BASICS in the Asia Region and the Newly Independent States**



## **Asia/Near East Region**

### **Regional Overview**

During PY1, BASICS concentrated on development of long-term country programs in Asia. By the end of the year, two country programs were underway: Bangladesh and India. Although a CAP had not been prepared, the Bangladesh program was clearly intended to be a long-term country program. CAPs were scheduled for Bangladesh and Indonesia during PY2. Among the requests from USAID for short-term technical assistance, the War Victims Fund required country assessments, as well as an overall assessment of all programs and USAID management.

### **Country Programs**

#### **Bangladesh**

At the very end of the third quarter, BASICS was informed that the Office of Health and the USAID Mission had agreed that BASICS would take responsibility for the urban EPI project. A DO had been sent to the Contract Office committing funds to BASICS. The Office of Health agreed to provide interim funding from July 1, 1994 until the contract amendment was executed, and to pay for preparation of a CAP. BASICS responded on an urgent basis, sending a three-person team to Dhaka to ensure smooth continuation of project activities. Bob Simpson, Connie Church, and Mark Hufen arrived at the beginning of July to arrange employment of the staff by BASICS and to set up capability for financial transactions. All the project staff were

continued on the BASICS project. At the request of the Mission, BASICS agreed to prepare a Memorandum of Understanding to define authorities, working relationships, and communications guidelines for BASICS/ Headquarters, BASICS/Dhaka, the USAID Mission, and the Global Bureau/Office of Health. Early in July, Dr. Diana Silimperi joined the group in Dhaka to begin preparing for a CAP team visit in late September and October.

During the balance of the quarter, BASICS opened bank accounts, completed employment of staff, and reviewed workplans. Silimperi completed preparations for the CAP team, which arrived in Dhaka towards the end of September. Meanwhile, BASICS developed a response to the DO. An important issue emerged: procurement of the vehicles budgeted for the Dhaka office and urban operations officers. The funding had been set aside within the previous contract; however, procurement by the contractor had not occurred. To accommodate these additional costs within the contract amendment, the time for implementation with available Mission funds was restricted to twenty-five months.

## **India**

At the request of USAID/New Delhi, BASICS developed a periodic country program to assist with the implementation of a bilateral project, Private Voluntary Organizations for Health (PVOH) II. The purpose is to provide more technical assistance to Indian NGOs supported by the bilateral project. PVOH II provides grant funds to forty Indian NGOs: thirty grants are for delivery of health services at the community level in ten states, and ten grants are to umbrella NGOs, such as the Christian Medical College of Vellore, which provide sub-grants and technical assistance to community level NGOs. PVOH II has established a program of assistance from the Indian government to Indian NGOs; however, cumbersome administrative procedures have slowed implementation, and low compensation rates have hindered hiring Indian technical assistance experts to assist the NGOs.

BASICS assistance will help organize assessments of each of the NGO grant projects, will document the program activities, and provide short-term experts to provide technical assistance and to draw lessons from the program. Through a sub-contract with Population Services International/India, BASICS is arranging a series of workshops for the NGOs with the technical experts who would carry out the assessments of NGO grant projects. There will be a brief preparatory workshop for the experts, followed by workshops with the NGOs to identify their technical assistance needs. After these workshops, one-week assessments will be scheduled for each NGO grant project, to be carried out by two experts (one primary health care, one management), a representative from another NGO, and an outside expert from USAID or BASICS. After the assessments, workshops will again bring the NGOs together to consider common lessons. A coordinator at Population Services International for PVOH II activities will prepare the descriptive statements of all NGO grant projects for use by USAID.

BASICS will provide short-term experts as requested by the Mission Project Officer for PVOH II. On a continuing, periodic basis, we have agreed with the Mission that Dr. Robert Northrup would provide technical assistance, for example participating in most of the workshops with the NGOs. At the request of the Mission, BASICS will coordinate its technical assistance with the Mothercare Project, which will also be providing expertise for PVOH II. After the identification of technical assistance needs at the workshops, other requests for BASICS experts may emerge.

To draw lessons from the PVOH II program, BASICS is providing the part-time services of an expert resident in New Delhi, Dr. Isabelle de Zoysa, previously head of the research program at WHO/CDR. Dr. de Zoysa will prepare a case study to be used at the first workshop with the NGOs. In consultation with the USAID Mission and BASICS, she is developing a roster of programmatic issues which can be better understood through operations research.

Early in PY2, BASICS will determine whether the Mission has interest in BASICS preparing a CAP, particularly looking at the broad range of interactions between the state governments and private health services systems, and prospects for private practitioners meeting more child survival health care needs.

## **Indonesia**

The USAID health strategy for Indonesia proposes carefully targeted programs over the next five years to “maximize the impact of limited funding.” The strategy emphasizes policy development, especially to “increase the private and public efficiencies in the health sector as well as in other service sectors.” For example, increasing “the quality and coverage of maternal and child health programs, particularly for preventive health interventions like tetanus vaccination, and supplementation with iron and vitamin A.” Although infant mortality rates (IMRs) have dropped dramatically within the last generation, the current IMR has ceased its rapid fall and seems to be associated with causes during the first month of life: poor nutrition and respiratory infections.

At the present time, the Mission has no bilateral project on which to collaborate with other donors in maternal/child health programs. Other donors, however, lack the depth of experience offered by USAID’s experts. WHO and UNICEF urge USAID to rejoin their efforts to sustain gains in child survival. The World Bank is investing heavily in decentralization of planning and management of primary health services (\$40 to \$60 million per year) to the provinces, a strategy pioneered by USAID in the early eighties. The Japanese Ministry of Foreign Affairs is discussing with the Global Bureau’s Office of Health investment opportunities for immunization programs in Indonesia. None of these donors is staffed to organize the kinds of development programs that Indonesia utilizes best: the institution-building efforts that combine technical leadership, particularly from the universities, with more effective use of resources through training and improved management. Indonesia has pioneered integration of health services and family planning at the rural community level. Public sector health services have been expanded very substantially; however, there are still large population pockets, for example, in the thriving provinces of Central and East Java where IMRs remain high.

The Mission has requested BASICS to complete a CAP; however, because of President Clinton’s planned visit during November 1994, the CAP team has been delayed until January 1995. In the meantime, Dr. Jean-Jacques Frère has been requested by the World Bank to participate during September in a pre-appraisal mission for the next round of health sector loans.

BASICS sees in Indonesia the opportunity to demonstrate the effectiveness of working simultaneously with the public and private sectors to utilize all available resources to achieve public health objectives. BASICS’ working relationships—with the Indonesian Medical Association which is setting quality of care standards, pharmaceutical firms who detail to medical practitioners, NGOs with broad access to communities, the advertising industry which has successfully promoted ORT and breastfeeding, and medical schools and schools of public health, especially Gajah Mada University in Central Java—provide a rare opportunity to link USAID experts with MOH commitment to improving health services and with major donor assistance to provincial primary health care.

## **Other Activities in the Region**

The War Victims Fund (WVF) requested consultants through BASICS to plan and evaluate programs. BASICS was also asked to carry out an evaluation of the entire WVF program. Country evaluations were carried out in four countries: Mozambique, Laos, Sri Lanka, and Vietnam. A questionnaire was solicited from USAID staff and consultants for other country programs. A workshop of experts was convened to develop recommendations for USAID’s future management of the program, and a draft report was submitted to USAID.

## **BASICS in the Latin America and Caribbean Region**



## **Latin America and the Caribbean**

### **Regional Overview**

This first year of BASICS has generated a variety of positive experiences in Latin America. BASICS has been provided with opportunities to demonstrate not only technical competence, but innovation. In a region in which USAID's role seems to be changing, both these attributes will be essential to continued success.

In **Bolivia** BASICS' involvement began with a request for assistance to the Secretariat of Health on their cholera campaign, and has expanded to encompass a broad range of interventions designed to strengthen institutional capabilities, improve case management and communication, and facilitate the redefinition of sectoral roles in health care delivery.

In **Guatemala** BASICS was able to provide technical support to the MOH and USAID's bilateral program in improving ARI standard case management through the development of evaluation instruments, operations research, and a state-of-the-art conference. This will be followed in PY2 with ethnographically-based message development and an analysis of the availability in the private sector of drugs for treatment of ARI. The success of BASICS in this first year has resulted in expressed interest by the Guatemalan Mission for an expanded role to include integrated care, early childhood nutrition, and alternative approaches to health care for indigenous populations.

In **Haiti** BASICS has responded to a Mission request to develop strategies which build upon the accomplishments of an ongoing EPI and ARI effort. Beginning November 1, 1994 BASICS will be assisting the Mission in expanding the scope of this project to include CDD and other relevant technical areas, and to move from an NGO to a national focus.

In **Honduras** BASICS has assisted the MOH and the USAID Mission as they redefine the role of technical assistance. BASICS will build upon the institutional strength developed within the MOH, through previous USAID assistance, to monitor and evaluate a variety of innovative experiments on increasing the role of the community in the prevention and treatment of childhood diseases.

As part of the work done by BASICS in coordination with the Latin America and Caribbean (LAC) Bureau, a variety of both proactive and responsive activities have been carried out related to cholera. These have ranged from evaluations and strengthening of institutional capacity, to efforts with the private sector to increase the availability of ORS. BASICS' overall cholera strategy outlines increased activity for PY2 in ways which define these interventions within larger technical strategies.

In response to a USAID/Regional Office for Central America and Panama request, BASICS' regional technical advisor assisted the Nutrition Institute of Central America and Panama (INCAP) in strengthening its strategies for technology transfer within Central America, and facilitated a series of meetings with USAID Missions in the region to identify areas of mutual concern.

During this first year in LAC, BASICS was able to build upon the recognized technical strengths of previous projects and current staff, and convert specific technical assistance requests into a broader dialogue with Missions on the upcoming technical needs in the region.

The LAC region will provide BASICS with both challenges and opportunities. The extent of human and physical infrastructure makes this a logical region for activities that push beyond existing approaches to child health, and should present an interesting arena for BASICS technical strategies. At the same time, as those countries in the region that have historically had the poorest morbidity and mortality struggle to redefine their health care delivery systems, BASICS should be prepared to respond with specialized technical assistance that might not presently be available within the project.

Another challenge for BASICS in the region will be to develop creative approaches to working with existing bilateral programs charged with both technical and implementation roles. Though this marriage has its logic in financial and administrative terms, questions of technical direction and ownership will naturally arise, and procedures for conflict resolution are far from clear.

## **Latin American Regional Office**

The Latin American Regional Office was established during PY1 and provides support to BASICS project activities in the LAC Region. The office staff consists of a regional technical advisor and an executive secretary/administrative assistant.

The regional technical advisor visited Peru, Bolivia, Guatemala, Honduras, Nicaragua, and El Salvador during PY1. The region received and began execution of three buy-ins during the year. One was from Bolivia, one from Guatemala, and the third from the Central American regional area through INCAP.

The regional technical advisor visited Bolivia twice. In the final visit he helped analyze the process of decentralization and regionalization as an input into the CAP. In Peru he assisted in the analysis of the results of the Diarrheal Disease Health Facility Survey carried out there.

The regional office helped in the design and implementation of the ARI activities funded under a buy-in from USAID/Guatemala and continued to provide, in collaboration with BASICS/Washington, oversight to those activities. In Honduras, the regional office assisted the Ministry of Health in the development of the technical assistance plan for support from the USAID Mission in the area of child health.

Visits to El Salvador, Nicaragua, and Honduras with INCAP personnel assisted in the strengthening of relationships between Missions and INCAP teams in each of the countries. Areas of potential follow on were identified.

## Country Programs

### Bolivia

The initiation of BASICS activities in Bolivia in 1993 in many ways represents a continuation of collaboration begun under the PRITECH and REACH projects with the MOH to strengthen respectively, the CDD and ARI programs. In addition, both projects have histories of collaboration with the private sector, particularly with the PROCOSI NGOs. The initiation of BASICS activities coincided with the establishment of a new government, which consolidated into the new Ministry of Human Development seven former ministries or secretariats, including those for health and education. The new Secretariat of Health (SOH) has been restructured, and is currently attempting to conform to new national policies which decentralize many traditional central level functions for health planning, service delivery, management, and financing to the municipalities created by decentralization laws.

The nature of BASICS activities in PY1 was primarily responsive, as the project was asked by USAID/Bolivia to collaborate with the SOH in a cholera campaign organized as an introductory phase of the new health administration. Notified of this request less than three weeks prior to the campaign launch, BASICS collaborated with other public and private institutions to prepare for the campaign. Support to the national ARI program was also provided by BASICS during the reporting period. A series of visits were made to Bolivia in response to Mission requests and to explore potential long-term areas for technical assistance which form the basis of the CAP for Bolivia.

Financial support for PY1 activities was provided by the LAC Cholera buy-in to BASICS and by core funds.

The BASICS Bolivia project is directed by Country Advisor Dr. Ana María Aguilar, with the technical support of Dr. Dilberth Cordero, who has primary responsibility for the ARI activities. Cordero joined BASICS Bolivia on a full-time basis in the spring of 1994. In the next project year, BASICS anticipates hiring a full-time administrator/bookkeeper and messenger/clerk, and a half-time communications advisor. Additional in-country support may be needed to manage the activities proposed for PY2. Technical and managerial support to the program from BASICS/Washington was provided by the Bolivia cluster. The absence of an IEC technical officer on the cluster since July 1994 has posed serious difficulties for program planning. Otherwise, the cluster has met regularly and appears to be functioning smoothly in meeting the needs of the Bolivia program.

### Country Highlights

#### *Technical Assistance to the SOH*

**Cholera/Diarrhea Campaign:** BASICS provided technical assistance to the six-month cholera campaign and to follow-up activities. Launched in late November 1993, the campaign carried messages to all 12 health regions promoting good case management of cholera and diarrheal diseases in both health centers and households, including promotion of ORS. With UNICEF supporting IEC aspects of the campaign and PAHO contributing materials and transportation and per diem costs, BASICS provided technical assistance for the

development of education and training materials, the design of training courses, and the training of 12 regional training-of-trainer (TOT) teams.

As part of the campaign, two household surveys were carried out in El Alto, in December 1993 and April 1994 by the SOH, PAHO, UNICEF, and BASICS to evaluate the effects of the campaign on caretakers' case management in the home.

**Support to National ARI Program:** In addition to exploring potential long-term assistance in ARI as part of the CAP development, BASICS Technical Officer Dr. René Salgado spent three weeks in Bolivia working with the national ARI program manager to revise the ARI program plan. Dr. Cordero has provided continuous technical assistance to existing ARI training centers, which are a priority for the national ARI program. Work with the training centers is described below.

**Additional TA to the SOH:** Working with the MCH division of the SOH, BASICS provided technical assistance to the development of the Government of Bolivia's health plan for the country, called Plan Vida.

#### *Exploring Private Sector Opportunities to Expand ORS in Bolivia*

During the reporting period, technical assistance was provided by BASICS Technical Officer Camille Saadé to promote private sector commercialization of ORS. For over ten years, UNICEF and USAID have donated the majority of ORS available in Bolivia, which has helped discourage local production of ORS. While use of ORS for treatment of diarrheal disease has been encouraged by the SOH for both the household and health facility levels and use has improved, it is less than optimal. Access to ORS remains a problem, and the new administration and cooperating agencies have revitalized efforts to address this problem.

In April 1994, Mr. Saadé developed a methodology to assess private sector capabilities for producing and distributing ORS. After completing a market assessment, potential partners were identified and approached. A letter of intent was drawn up between the company identified, INTI, the SOH, and cooperating agencies. Negotiations for reducing the price of producing ORS were underway at the end of the reporting period. In addition to continuing these negotiations, the immediate next step is to investigate appropriate companies to develop an ORS promotional strategy.

#### *ARI/CDD Clinical Training Centers*

One of the priorities of the SOH has been the revitalization of clinical training centers across the country located in different teaching or third-level hospitals. In the case of ARI in particular, Bolivia lacks a solid base of trained health professionals. While studies have revealed that physicians do not always practice ARI or CDD standard case management even when they have been trained to do so, training remains an important method for increasing knowledge and skills. Additional research into why compliance with standard case management appears problematic is anticipated by BASICS in PY2.

Based on the Baby Friendly Hospitals initiative, the SOH has set up a system whereby hospitals would qualify for selection as a clinical teaching unit for ARI and CDD by meeting the following criteria: demonstrated quality case management of ARI/CDD, suitable facilities, a team of qualified teachers and teaching programs, and a completed proposal identifying costs of teaching students. To date, two hospitals have received accreditation from the SOH according to the above criteria, and five-day training courses were initiated. To encourage self-sufficiency, hospitals are charging a fee of \$30/student for the course.

BASICS provided technical assistance to the organization of one of these centers, in the Hospital del Niño in La Paz, taking part in the committee which revised curricula and developed model training programs and indicators for evaluation. Based on research which identified initial barriers to compliance, in revising the

curricula, BASICS has incorporated new areas, such as communication with mothers, which have not always been addressed in traditional ARI and CDD training.

In anticipation of the SOH's expansion of the number of training centers across the country, 84 physicians and nurses representing nine of the 12 health regions (42 percent from rural areas; 58 percent from urban areas) were brought to La Paz for the five-day training course at the Hospital del Niño training center. Seventy-three percent of attendees were employed with the SOH, and 27 percent with NGOs.

During the training, BASICS observed changes in the behavior of physicians in particular, who demonstrated strong interest in following the norms of the SOH for standard case management, conducting bibliographic searches for relevant information, and improving methods for communication with mothers and other caretakers.

Next steps include organizing a workshop for training center administrators and coordinators, strengthening health staff/caretaker interpersonal communication, and follow up of indicators and training methodology.

#### *Medical School Education for CDD*

Teaching of diarrheal disease standard case management at the pre-service level is minimal in Bolivia. In order to support the development of a cadre of high-level medical providers to improve the quality of diarrheal disease management, BASICS will support a USAID/PAHO Medical School Education workshop in December 1994 for promoting the incorporation of revised CDD curricula into medical school teaching.

During the reporting period, BASICS collaborated with the SOH, deans of medical faculties, PAHO, and UNICEF, to edit and translate seven WHO/PAHO manuals for diarrheal disease teaching and make other arrangements for bringing six participants from each of three public medical schools to the workshop. Dr. Aguilar was successful in supporting the formation of a committee of deans of the medical school faculty for this purpose. It is anticipated that this committee will remain active following the workshop, and that additional workshops will be held, and follow-up evaluations of medical school teaching of standard case management conducted.

#### *Bibliographic Search of Investigations/Studies in Bolivia*

Working toward the goal of developing a compendium of ARI/CDD information to be distributed to the private and public sector health community in Bolivia, an initial bibliographic search on CDD investigations and studies was conducted. A complete ARI/CDD compendium will be compiled, printed, and distributed in PY2, with updates anticipated every two years.

#### **Other Accomplishments**

Other accomplishments include:

- Collaboration with PAHO and COTALMA in support of breastfeeding;
- Participation in a SOH working group to address health sector reform;
- Attendance by Dr. Cordero in a WHO CDR briefing to gain an update on ARI and his subsequent facilitation of a PAHO-sponsored interregional ARI update course in Santiago, Chile.

#### **Program Issues**

Two principal follow-up activities to the cholera campaign could not be undertaken in their entirety during PY1: an evaluation of cholera campaign educational materials and follow-up to the training in CDD/cholera standard case management at the regional and district levels. Dr. Aguilar reports that these delays were due

primarily to changes in priority of the SOH, which chose to focus on a succession of nationwide campaigns and which has experienced significant disruption overall as a result of the GOB's combining several ministries and secretariats into one.

## **Guatemala**

The Guatemala BASICS program fits into the context of the USAID Mission's large bilateral child survival project focusing on immunization, ORT, and ARI. The BASICS efforts in Guatemala also flow from an earlier REACH effort which helped the Mission define its ARI program. BASICS has concentrated on supporting the MOH in close coordination with Clapp & Mayne, the institutional contractor responsible for the implementation of the USAID bi-lateral project. BASICS activities have concentrated on ARI in five well-defined activities. In addition, BASICS has conducted activities related to CDD/cholera, described in the next section.

The first of these activities was the development of an evaluation/assessment instrument. The ostensible purpose of this instrument was to assist in the identification of training needs in the area of ARI. During the process, however, the need for the instrument to serve as an on-going monitoring instrument was also identified. The second area of BASICS assistance was to be in providing several presenters for the national ARI "state-of-the-art" conference to be held in October 1994. The third area was to assist the MOH in utilizing the results of the ARI ethnographic studies being conducted by INCAP for the development of educational messages designed to improve the household and community management of ARI. The fourth area was to investigate physician behavior to try to understand why there is a discrepancy between knowledge and practice in the use of ARI standard case management. The fifth, and final, area was in the community availability of ARI drugs.

### **Country Highlights**

**ARI:** Of the five areas of BASICS ARI activity, four were initiated during the year. Two are largely completed and two others will be completed within the first quarter of FY 1995.

Drs. René Salgado and Barry Smith assisted MOH, Clapp & Mayne, and INCAP in the development of an instrument for monitoring the application of standard case management of ARI. The instrument was based on case observation and a test of health worker knowledge and was adapted from the WHO Health Facility Survey. The knowledge instrument was subsequently utilized in the health worker training program as a pretest and post-test and the observation instrument during training as an evaluation of learning. Although the instrument was not designed as a training tool, it appears that when the same instrument is used for training, monitoring, and providing feedback to health workers, these activities become effectively mutually reinforcing. This may be a very important, serendipitous discovery. The instrument was field tested and found to be very consistent with the Health Facility Survey in regards to the calculation of indicators.

Dr. John Elder, professor of health education at San Diego State University, conducted an investigation of physician attitudes towards standard case management and factors which motivated them to accept or reject such practice. The study showed that actions such as more scientific information about SCM, training of auxiliary staff in how to educate mothers about ARI home management, audio cassettes and video cassettes for educating mothers in clinics and hospital, and follow-up training with monitoring, reinforcement, and "booster" training would influence physicians to adopt standard case management practice.

The two activities which have been initiated and which will be completed before the end of the first quarter of FY 95 are the communication and "state-of-the-art" conference activities. Dr. Patricio Barriga, BASICS consultant and author of one of the first ARI ethnographic studies, assisted INCAP and Clapp & Mayne in revising the ethnographic survey instruments to assure that the survey would provide the information needed

for the development of a communication strategy and messages. For the "state-of-the-art" conference BASICS will provide three presenters, Dr. Antonio Pio, WHO ARI Program Director, Dr. Salgado, BASICS ARI Coordinator, and Dr. Elder, author of the physician behavior study.

**CDD/Cholera:** The principal activities undertaken during the reporting period responded to requests from PAHO and the MOH. BASICS Operations Officer David McCarthy and Technical Officer Dr. David Sack traveled to Guatemala in April 1994 to continue development of a cholera assessment instrument in collaboration with PAHO and the WASH project. In June 1994, McCarthy and Sack returned to Guatemala with members of the WASH project to assess the national cholera strategy, using the assessment tool. BASICS Technical Officer Bart Burkhalter and McCarthy also worked with INCAP in June to revise an evaluation instrument for an anticipated distance education activity in Guatemala. Finally, BASICS/Washington prepared an agreement with INCAP for the design and conduct of a baseline survey on CDD/cholera in Escuintla and Suchitepequez in PY2.

### **Specific Accomplishments**

A useful, user-friendly, and reliable multi-functional instrument has been developed for evaluating training and practice of ARI standard case management in health facilities. The instrument has been field tested and validated in both its training and monitoring functions.

An evaluation of physician attitudes regarding ARI standard case management was completed. The results will be used to modify training programs to assure that the best conditions possible exist to induce physicians and other health practitioners to adopt standard case management.

Three very competent, knowledgeable, and credible professionals have been identified to participate in the ARI "state-of-the-art" conference scheduled for the first week of October 1994.

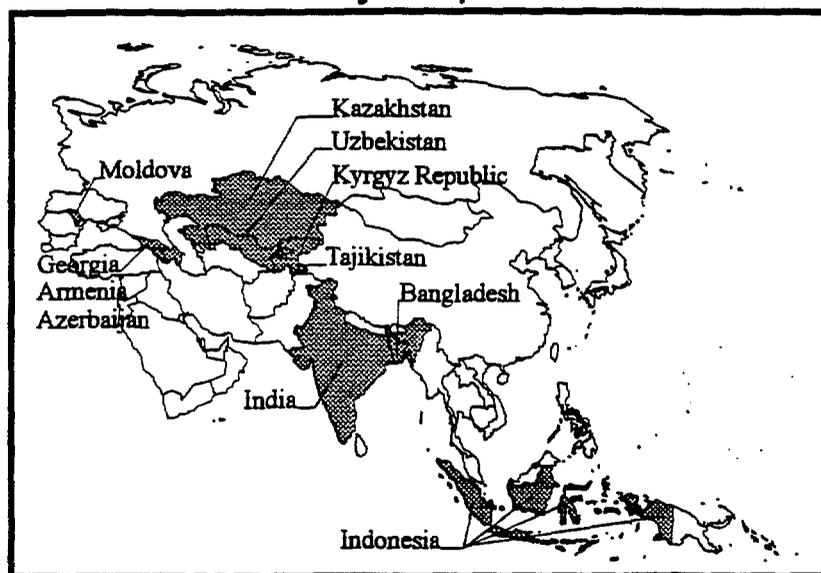
BASICS has played a significant role in the design of an ethnographic survey which will be very closely linked to the development of an ARI communication plan.

### **Program Issues**

The chief issues relate to BASICS involvement in the further development of the ARI program. Initial BASICS involvement was under a buy-in for very focussed and circumscribed activities in support of a Mission child survival program being implemented by Clapp & Mayne through a bi-lateral project. BASICS will want to provide follow up to some of these activities which have potential for broader application. We will want to monitor use of the evaluation instrument to assure that it is practical and useful enough to be widely adopted. We will be very interested in following the process of translating ethnographic information into a program of health education and then observing the impact on behavior. We will want to see how the physician attitudes study is used in modifying training programs. These things, however, may not be of vital interest to the USAID Mission and therefore funds may not be available for them.

The other principal issue is that related to new areas into which BASICS will expand in the coming years. The Mission has already identified early childhood nutrition, integrated child health care and indigenous health care as areas of interest.

## BASICS in the Asia Region and the Newly Independent States



## Newly Independent States of the Former Soviet Union

### Regional Overview

Since April 1, 1994 BASICS has been responsible for continuing the work of the REACH II project which provided short-term technical assistance in immunization to six republics of the former Soviet Union: Moldova, Georgia, Kyrgyz Republic, Tajikistan, Turkmenistan and Uzbekistan. In consultation with republican MOHs and USAID, a number of essential follow-on activities were identified and scheduled in the BASICS workplan to be carried out in the last half of this fiscal year.

Most of these activities were contingent upon funding from the newly independent states (NIS) task force, specifically allocated for work in the region. In July, BASICS had to freeze all technical assistance to the NIS due to insufficient funding. In September, funds became available, allowing technical assistance activities to resume. The cost of these delays was substantial, both in terms of diminished program momentum and credibility within the affected republics, and in the reduced availability of consultants previously active in the region under REACH, who were obliged to commit their time elsewhere. Some short-term technical assistance was provided during the second quarter, and other work carried out by headquarters staff, using BASICS' existing core funds. In September, funding was allocated by the NIS Task Force and USAID/ Washington which allowed the NIS team to resume the temporary duty schedule, specifically to respond to a request from the CDC to provide assistance during a series of national immunization days (NIDs) for polio in Uzbekistan.

## **Program Highlights**

On April 6, BASICS EPI Coordinator Robert Steinglass provided a briefing on previous REACH and anticipated BASICS work in the NIS for colleagues at CDC in Atlanta. After the briefing, discussions and individual meetings were held to consider ways in which BASICS and CDC could collaborate and support each other more effectively in our on-going work in the NIS.

Consultant Gordon Larsen spent the week of May 23 in Washington participating in the TECHNET conference, an annual meeting of EPI logistics and technical officers. He presented relevant aspects of the REACH/NIS experience and, along with Steinglass, participated in round-table discussions regarding future development work in the NIS. Larsen also met with Steinglass, Lyndon Brown, Alix Alferieff, and Michael McGunnigle to discuss future work in the NIS, particularly in the Central Asian Republics.

A total of 17 reports of technical assistance and other work completed during the last few months of the REACH project were produced and distributed during the April-June period.

A discussion paper, "Calculating Annual Vaccine Needs in NIS Countries and Proposed Guidelines for Vaccine Procurement," was prepared by Steinglass. This paper provided donors with the basis for subsequent estimation of vaccine needs for all NIS republics except Russia and the Baltic States. These figures, combined with updated summaries of cold-chain and other equipment needs, were provided to USAID in support of preparation for discussions on donor coordination, and the Kyoto NIS Donors' Meeting in July.

Six million dollars were allocated by the NIS Task Force as core funding for the support of BASICS activities in the NIS region. Murray Trostle returned from Kyoto, Japan, on August 1 from a Donor Coordination meeting on the topic of "Donor Support for Childhood Immunization and Disease Control Activities in the Newly Independent States." The donors at the meeting resolved to work together toward the goals of "controlling or eradicating vaccine-preventable diseases and achieving vaccine self-sufficiency in each country." As a result, BASICS anticipates receiving an request for proposal for work in the five Central Asian Republics plus Moldova to include approximately 100 activities over three years.

Funding for future BASICS work in the NIS was estimated to be \$3 million in designated core funds for technical assistance in the five Central Asian Republics and Moldova. On September 23, the USAID Contracts Office approved a modification to the BASICS contract to provide a total of \$6 million in core and designated core funding for future BASICS activities in the NIS. The activities were projected to take place over a two-year period, and are expected to include the placement of a BASICS Regional Advisor in Almaty, Kazakhstan.

## **Country Programs**

### **Kazakhstan**

Larsen traveled to Almaty on June 24, in preparation for anticipated work in Kazakhstan in a second US-Japan joint immunization initiative in the Central Asian Republics. He provided a preliminary assessment of cold-chain management and vaccine handling operations and reviewed vaccine stock position to determine size, nature, and timing of further emergency vaccine requirements. He also prepared for future work in the international tender and bid process. This visit was timely in providing needed information for the Kyoto donors' meeting, and in laying groundwork for further involvement in Kazakhstan. Preliminary work by the NIS team towards a proposal for the above-mentioned joint US-Japanese support for immunization and disease control in the Central Asian Republics and Moldova was begun.

## **Kyrgyz Republic**

BASICS Technical Officer Robert Steinglass spent three weeks in Kyrgyz, April 23 through May 13, advising on and promoting the establishment of a Republican Center for Immunoprophylaxis, as mandated in the plan for a national immunization program, developed with USAID/REACH, UNICEF, and WHO assistance in December 1993. Significant progress was made during his visit: the organizational structure and functions of the center were defined, job descriptions developed, and sources of funding identified. Further support for the plan and the center was generated within the Kyrgyz government and the local development community. Results included a decree signed by the Prime Minister which formally established the national immunization program, followed by the creation of the center by the Minister of Health, and the formation of an Inter-Agency Coordinating Committee which is committed to foster more effective cooperation with the MOH and among development agencies involved in immunization. The MOH identified two areas in which technical assistance from BASICS was required at an early stage: IEC to promote demand for immunization, and design of information systems to improve routine monitoring of immunization coverage.

The BASICS/NIS team began laying the groundwork for an IEC intervention.

## **Moldova**

Consultant Dian Woodle visited Moldova in April to assess the readiness of the republic to begin a process of tender and bid for the procurement of vaccines on the international market as an early step toward vaccine self-sufficiency. She found that Moldova has a reasonably good potential for vaccine self-sufficiency provided obstacles related to finance and currency conversion can be overcome. Follow up is needed.

Consultants Anthony Battersby and Sergiu Nedelcu were to travel to Moldova to advise and support the MOH in the implementation of the National Plan of Operations for Immunization Services, which they helped to draft in late 1993 under REACH. Consultant Rachel Feilden was also scheduled to design and carry out a baseline cost analysis study of immunization services in Moldova during August. This study was intended to provide data on the present cost and quality of these services in order to improve their efficiency and cost-effectiveness. Such data has been lacking until now throughout the NIS. However, due to lack of funding, these exercises had to be cancelled.

## **Tajikistan**

BASICS Operations Officer Lyndon Brown traveled to Tajikistan where, in collaboration with consultants from UNICEF and WHO, he assisted the MOH in conducting a three-week immunization planning exercise. With the active leadership of First Deputy Minister Kupyltsov, and the participation of 16 health officials, representing all parts of the country, a national immunization plan was drafted and presented to the Minister, Alamkhon Akhmedov, on May 31. The Minister pledged its prompt adoption. The status of cold-chain equipment donated in 1992 under REACH II was reviewed, and estimation of remaining vaccine and equipment needs for 1994-95 was undertaken. Needs for further training and technical assistance in immunization, as well as other aspects of child survival and disease control—and the potential role of BASICS—were discussed with the Ministry, the U.S. Embassy, and visiting officials from USAID/Almaty. Follow-up support for implementation of the national immunization plan is required in the near future, but due to lack of funding was not possible during this project year.

## **Trans-Caucasus**

Bob Pond was in Georgia, Armenia, and Azerbaijan from July 13 to August 4 as a member of a three-person USAID project planning team which assessed and prioritized the needs of women and children in those republics. BASICS' role in providing technical assistance under a buy-in from the NIS task force was anticipated; however, it was made clear during the visit that there was no intention of supporting child survival programs at this time.

## Uzbekistan

Uzbekistan recently experienced a large poliomyelitis outbreak, mainly due to vaccine shortages. In response to a request by USAID and CDC, BASICS Consultant Alasdair Wylie, a cold-chain/logistics specialist, traveled to Uzbekistan September 12–October 8, to provide assistance during a series of NIDs which took place in late September. In conjunction with WHO representative Sergie Deshevoi, Wylie assisted the MOH and republican sanitary and epidemiology station in preparing and implementing an operational plan for logistic and cold-chain support for the NIDs, as well as transport, storage, and distribution of oral polio vaccine, and formulation of emergency preparedness plans in case of cold-chain failure. Wylie and Deshevoi designed a simple observation-based field instrument to detect problems which can be corrected in time for the next round of NIDs and documented lessons learned regarding planning, logistics, and social mobilization.

## Technical Activities

### Management

During the early stages of PY1 the Technical division of BASICS was devoted to building the technical team and management structure. By January 1994, the divisional staffing picture had become clear. The division is staffed with 17 senior technical officers, three support staff, and a five-person state-of-the-art information dissemination staff, all managed by the deputy director. The division is equipped with an experienced professional staff with expertise in disease-related technical areas including: EPI, ARI, CDD, and malaria control. There is also a very strong emphasis in the cross-cutting areas affecting these traditional vertical programs represented by staff with capability in training, operations research, health policy, behavior change, supervision, drug management, urban and high-risk populations, and the role of the private sector in health services provision and financing.

Initially, in response to the original organization chart, the Technical division established four working groups to organize and reflect clearly the diverse functions of the division and to promote the integration of the different strategies. Each member of the division participates in two of these groups. Consequently, these groups do not deal with mutually exclusive subjects. Rather they can be seen as part of an overall integrated package aimed at the health system as a whole. A brief summary of activities undertaken by each group during the year follows below.

**Prevention.** The purpose of the Prevention Group has been to develop preventive interventions aimed at the reduction of major causes of child morbidity and mortality. An analysis of the five major areas relevant to child survival (EPI, ARI, CDD, malaria, and malnutrition) was begun, focusing on illnesses or conditions, identifying their causes and possible preventive interventions, and ranking by priority the interventions and their target audiences. In addition, the group created a reading file on prevention.

During this period the working group on prevention began to develop a list of priority interventions and areas of focus in which the BASICS project could maximize its resources. Potential collaborators such as the Environmental Health Project and MotherCare were identified as contributors to the yet undefined prevention side of the Pathway to Survival model.

**Home and Community.** The purpose of the Home and Community Group has been to examine home and community behaviors related to managing illness, keeping in mind recuperation and long-term wellness behaviors. The group defined approaches necessary for its success: demand creation, education (about what to do at home and when to seek care outside the home), and motivation.

The group met with the chair of the WHO/CDR division's Home Care Management working group and discussed areas of collaboration. The working groups of both WHO and BASICS considered conducting a literature review of what is known about caretaker behaviors in order to assist in the development of a model that looks at recognition, labeling, home treatment, care-seeking outside the home, reinterpretation, and follow up. In addition, the literature review may serve as a guide to country-specific interventions. The group also addressed the issue of ranking desired caretaker behaviors by importance.

The working group identified a similar path to develop its own priorities and the priorities in which collaboration would be necessary. This group identified priorities among desired caretaker behaviors vis-a-vis the relevant vertical interventions (CDD, ARI, immunizations, and malaria). The group discussed draft "tools" for guiding the examination of caretaker behaviors relating to the above disease-specific interventions. In the spirit of collaboration, the working group has been working closely with Dr. Gretel Pelto of WHO/CDR to develop a framework model for understanding caretaker behaviors. Subsequent discussion led the group to sponsor an expert meeting in October to develop such a framework which will guide BASICS' behavioral interventions work. As a precursor, BASICS contracted an anthropologist to conduct a literature review that identifies categories of behavior determinants.

***Improving Services for Child Health.*** The group developed a collaborative relationship with its functional correspondent in WHO/CDR and began to address specific areas for joint technical work. Initial activities included the development of a quality assurance and indicator guide for ARI and CDD (initial application in Guatemala), and collaboration with WHO/CDR on case management training for the care of the sick child (including drug management module and clinical training skills module). Other areas of potential collaboration were identified, particularly antibiotic resistance surveillance, application of ethnographic studies in advice to mothers, and IEC message development. The working group also developed an activity matrix with products and timelines.

The group focused primarily on improving the integrated delivery of quality health services. The group worked on several key activities during this period: development of an integrated ARI/CDD instrument in Guatemala; review of the WHO "Sick Child" clinical skill training modules; review of lessons learned regarding supervision of primary health care workers; development of curriculum and training approaches for teaching peripheral health staff in pharmaceutical management/logistics; proposal review to establish surveillance for antibiotic resistance to pneumonia and possibly shigellosis; and a review of urban measles epidemiology. The working group continues to focus on these key areas both in-house as well as in collaboration with WHO, ACT International, and the CDC.

***Policy and National Programs.*** The group defined the private sector's role as "those services not provided and/or funded by the governmental health structure," that is, the private commercial sector as well as NGOs both local and international, PVOs, private practitioners, missionaries, traditional healers, and so forth. The next steps were to identify private sector activities underway or contemplated by BASICS and to further develop ways in which BASICS can influence how public-private partnerships are managed by host country ministries.

In order to do this the group reviewed the current CAP guidelines regarding the private sector and made further recommendations for the upcoming CAP visits on how to take into account the role and potential collaborative nature of the private sector. A wide array of possibilities was identified in all regions in which BASICS is operating. Due to an increase in the amount of travel towards the end of the year, the working group was not able to further develop potential areas of research and development. However, two activities were identified for PY2: five case studies of private and public sector approaches to targeting poor populations and the creation of exemption mechanisms to achieve equity; and a workshop for the PHN officers and ORS producers in Latin America to increase the partnership in producing and marketing socially responsible products.

## Strategy Papers

As part of the overall development of the BASICS strategy and subsequent technical identity, a collaborative group consisting of staff from BASICS, USAID, and CDC developed what has become known as "The Pathway to Survival." This document, and annexed graphic model, presents the strategy that BASICS and its collaborating partners in the child survival community will use to promote the integrated management of childhood illness. It is designed to assist BASICS and other players in the field of child survival to focus their program development, research, selection, and evaluation of intervention strategies, and to strengthen institutional capacity.

In conjunction with the development of the Pathway to Survival, the first major activity undertaken by the division was the development of the BASICS technical strategy papers. These strategies represent the menu from which we may more effectively select the activities which will have the most sustainable impact in reducing infant mortality and morbidity in the developing world. The strategies are as follows:

- "BASICS Strategy for Development of CDD Programs"
- "The BASICS EPI Strategy"
- "The BASICS ARI Strategy"
- "BASICS Malaria Strategy"
- "The BASICS Strategy for Linkages of Child Health with Maternal Health, Family Planning and HIV/AIDS"
- "BASICS Strategy for Improving Pharmaceutical Management for Child Survival"
- "Delivering Child Survival Services to High-Risk Populations"
- "BASICS Information Dissemination Strategy"
- "BASICS Communication Strategy"
- "BASICS Decentralization Strategy"
- "BASICS Strategy for Operations Research and Small Grants Programs"

## Technical Symposia

As part of the BASICS effort to highlight state-of-the-art approaches to child survival programs and new areas of BASICS interventions, and to promote interagency and cooperating project collaboration, the technical division has put together several technical meetings and symposia during each quarter. Symposia included this year were as follows:

*"Nutrition Interventions: Their Role in Child Survival Programs"* —an effort to bring nutrition interventions into the purview of child survival programs. Presentations by Marcia Griffiths (Manoff Group), Margaret Parlato (Nutrition Communication/AED), David Pelletier (Cornell University), Shea Rutstein (DHS Surveys), Claudia Fishman (AED), Sandra Huffman (Nurture), Suzanne Prysor-Jones (SARA/AED), Elizabeth Herman (CDC), and Serigne Diene (Cornell University).

*"Integrated Management of Childhood Illness: A Discussion of The Pathway to Survival"* —presenting the strategy behind the Pathway to Survival and its implications for BASICS programs. Presentations by Ron Waldman (BASICS), Al Bartlett (USAID/PHN/HN/CS), and Kent Campbell (CDC).

*"The Preceding Birth Technique for Measuring Infant Mortality"* —a discussion of this technique and its potential role in some BASICS country programs. Presentations by Alan Hill (Harvard School of Public Health) and Sarah MacFarlane (Liverpool School of Hygiene and Tropical Medicine).

*"Issues Surrounding Health Care Financing and Equity in the Context of Cost Recovery"* —a discussion of financing and provision of health services by public and private providers and their impact on equity. Presentations by William Newbrander (MSH), David Collins (MSH), Charles Stover (MSH), and Eckhard Kleinau (BASICS).

These symposia are organized around topics that BASICS will likely coordinate or play a significant future role in. They also represent an attempt to collaborate with other projects and programs on activities where BASICS may or may not be the primary implementor.

## **Re-formed Working Groups / Technical Identity**

Towards the end of the fiscal year several aspects of the technical identity were raised in regard to the existing working groups and their ability to forge a coherent and focused technical strategy. Two key questions were addressed in reforming the working groups: 1) at the end of the project, what will BASICS have contributed from a technical standpoint to the field of child survival? and 2) in what specific activities does BASICS want to invest its core funding in order to advance the field of child survival?

In response to these issues, BASICS has reformed its working groups as follows:

***Public / Private Partnerships***—BASICS will help forge a new relationship between public and private sectors in the area of child health care services in developing countries.

***Integrated Case Management***—BASICS will contribute to a measurable and significant improvement in the quality of care offered throughout national health systems for the management of principal childhood illnesses and will develop means to improve the efficiency with which they are delivered.

***Monitoring and Evaluation***—BASICS will make substantial contributions to the ability of donors and of national program managers to plan, monitor, and evaluate their activities in terms of their costs, processes, and outcomes.

***Behavior Change***—BASICS will work with appropriate counterparts to identify key behaviors of the three primary target audiences: policymakers, health care providers, and consumers, which need to be changed to advance the successful implementation of child survival policies and interventions. In addition, BASICS will develop, execute, and evaluate strategies and activities for effecting those behavior changes.

***Sustainability of Immunization Programs***—BASICS will work with countries, especially in the Africa region, to develop increasingly independent and fully sustainable programs for the control of vaccine-preventable diseases and will assist these countries to attain the highest levels of vaccination coverage and reductions in morbidity and mortality where appropriate, including eradication of poliomyelitis.

## **Information Dissemination**

The role of information dissemination during the life of the project is (1) to provide technical leadership in the global child survival field; (2) to maintain a state-of-the-art child survival collection as a technical resource to BASICS, USAID, and others; and (3) to keep the international health community informed of the progress of the BASICS project. During the project's first year, the information dissemination staff established a child survival information center, developed an identity package for BASICS, and began disseminating *Child Survival Abstracts* and the project's trip reports.

Information dissemination consists of five major activities: publication management, information management, project publicity, central files, and international conferences. Progress in these five areas is detailed below.

## Publication Management

One of the most important goals of the project is to provide technical information to child survival policymakers and to document BASICS' experience in child survival. During the project's first year, the staff contributed to this goal by developing a prototype for the quarterly technical bulletin, a quarterly publication which will be aimed at policymakers and program managers in donor agencies and developing country ministries. Each issue of the technical bulletin will be devoted to a cross-cutting issue, such as integrated case management, behavior change, or urban health. The project expects to produce the first issue of the quarterly notes during PY2.

The unit also developed procedures for writing, tracking, editing, and disseminating trip reports. These reports provide the source material for project publications and provide a permanent record for USAID missions of technical assistance rendered. A trip report coordinator who tracks, copy-edits, and disseminates the reports was designated. Centralization of the trip report process has allowed reports to be produced in a consistent and timely manner.

## Information Management

Early in the project year, the staff established a child survival information center, consisting of a collection of some 6,500 documents from the former REACH, PRITECH, and HEALTHCOM projects. Since that time, the collection—which consists of both published and unpublished materials—has grown by about 150 documents per month. The Information Center has acquired documents through subscriptions to numerous journals and newsletters, a subscription to the Institute for Scientific Information's *Research Alert*, and exchange agreements with other international health projects and agencies.

To alert BASICS staff members to new documents, the Information Center began sending out a monthly current awareness bulletin, *Child Survival Abstracts*, a comprehensive list of all incoming materials. Response to the bulletin has been enthusiastic. The Center has also provided numerous database searches for the staff and others on POPLINE, MEDLINE, and CD-DIS. Over the course of the year, the staff has responded to nearly 800 requests for information, mostly from BASICS staff, USAID missions and bureaus, and other USAID contractors.

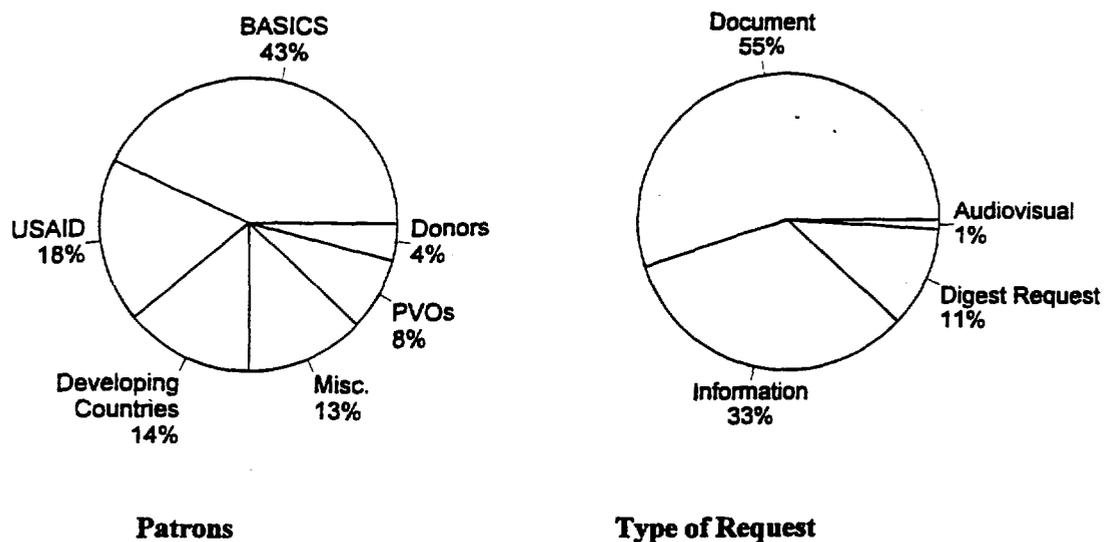
After the move to the project's new offices, the Information Center acquired communications software and a modem. These tools allow staff to access a range of electronic databases and networks including the National Library of Medicine's bibliographic databases, the University of Maryland's online catalog and journal indexes, and the Library of Congress's database. The Information Center also installed a compact disk (CD) reader. The Center has three CD-ROMs available now: CD-DIS (which includes USAID documents), USAID Directives Resource (which contains the complete USAID handbook series), and POPLINE.

In June, Ms. Gail Kostinko revised the thesaurus that the Information Center uses. Revision of the thesaurus aided in information storage and retrieval and provided a framework for external database searches. It will also be useful to child survival information centers overseas. The staff will continue to add new terms as new technologies and concepts develop.

In September, the information and publications manager met with the staff of SatelLife, a nonprofit organization that runs an electronic mail network in sub-Saharan Africa called HealthNet. The purpose of the meeting was to discuss whether BASICS could launch its quarterly technical notes and other publications via HealthNet and to describe the ORANA child survival information center in terms of its participation in future HealthNet activities in Senegal. SatelLife agreed to disseminate BASICS publications through HealthNet as soon as they are available. They also agreed that ORANA would sit on the users' council of a future HealthNet established in Senegal.

## Statistics from Request Log

N=781



## Project Publicity

In June, the staff completed work on the BASICS identity package, consisting of business cards, letterhead stationery, and pocket folders with the new logo on them. In addition, the staff developed an exhibit for BASICS, which was displayed at the National Council for International Health (NCIH) Conference in June. Work has begun on the BASICS brochure, which should be printed during the next quarter in four languages.

## Central Files

The information dissemination unit also serves as the institutional memory of BASICS. In this capacity, the staff has established procedures for routing and distributing mail and telefacsimiles and has established central files. Well organized central files facilitate documentation of the project, make referral to project documents easy, and provide the data for financial audits. Establishment of the project's central files took place early in the first project year. The files are divided into five sections: (1) project-wide files, including all contract deliverables; (2) country files, including technical directives that pertain to a particular country; (3) technical files; (4) information on and correspondence with other organizations; and (5) evaluation.

## International Conferences

BASICS managed the USAID-sponsored conference, "Celebrating 25 Years of Oral Rehydration Therapy," which was held March 2-3 in Washington, DC. The conference, sponsored in collaboration with the Society for International Development, UNICEF, WHO, PAHO, UNDP, and the World Bank, addressed a number of global challenges, including strategies for increasing the effective use of ORT and complementary strategies in prevention.

Among the most notable speakers were more than twenty developing country ministers of health who described the progress made by their national CDD programs. Several speakers added to the picture of worldwide progress by describing the role that ORT is playing in the US health system. In addition, representatives

from international NGOs, commercial companies, USAID projects, and the media discussed lessons learned in implementing ORT programs. The conference was well attended by nearly three hundred members of the international health community.

The Kingsbury Group, a BASICS subcontractor, assisted BASICS in the overall planning and coordination of the event. BASICS also provided a timeline, which marks significant events in the development and implementation of ORT; a press release on diarrheal disease research; and a short video commemorating the contribution that ORT has made toward saving children's lives. In addition, BASICS funded the participation of several speakers at the conference.

## **Evaluation and Management Information Systems (MIS)**

During PY1 BASICS has made progress in monitoring, evaluation, and systems development:

- A monitoring and evaluation strategy has been developed and will be tested during PY2. Indicators have been identified that measure outputs and outcomes in all country programs as specified by activities and objectives in life of project and annual planning documents.
- BASICS' needs for an integrated MIS have been assessed, and the plan for hardware components and computer software has been approved by the client. A new local area network (LAN) has been implemented, and BASICS staff has been trained in standard computer applications.
- A comprehensive management information report (MIR) has been designed between October 1993 and April 1994. This report combines program budgets, actual expenditures, and outputs as well as outcomes to track program progress on an on-going basis. MIRs were produced for the third quarter and for the entire first project year.

## **The Monitoring and Evaluation Strategy**

### **Goal**

The goal of the monitoring and evaluation strategy is that at the end of the project, BASICS will have made substantial contributions towards increasing the capacity of national program managers and donors to plan, monitor, and evaluate child survival activities in terms of their relevance, quality, effectiveness, efficiency, outcomes (impact), and sustainability. The project will, in collaboration with other organizations, accomplish these goals by developing evaluation and monitoring strategies that are appropriate, feasible, and cost-effective. These strategies are based on the elements of the program management matrix (LogFrame) and use key indicators to measure progress towards project purpose, objectives, outputs, and quality. The monitoring and evaluation activities outlined in the strategy paper enable the project to assess the situation at different stages of the Pathway to Survival.

### **Indicators and Methods**

Appropriate indicators are identified to effectively monitor and evaluate child survival activities. In addition to indicators that are identical to those used by WHO and UNICEF programs, new measurements have been developed to assess BASICS specific activities. These will be refined in the future to meet the need of BASICS' field programs. The CAP outlines procedures to collect baseline data for problem identification; additional tools such as the WHO health facility survey have been applied in Senegal and are scheduled for implementation in other countries during PY2. Other tools will be evaluated and tested, such as a mortality survey in Bolivia and the preceding birth technique to estimate early childhood mortality in Senegal and a few other countries.

## **Approach**

There are three principal components of the BASICS monitoring and evaluation plan: evaluation of child survival programs, monitoring and evaluation of country level activities, and monitoring and evaluation of BASICS project activities. To respond to a result-oriented approach to project implementation, the indicators and data sources selected allow the project to measure progress and performance on a timely basis. BASICS evaluates progress at selected points during the life of a project and compares actual results with standards set for benchmark indicators and stop points. Evaluation results are used to formulate or redesign project strategies and objectives.

BASICS will promote the evaluation of host country programs rather than limiting itself to components that are supported by donor funded projects. However, project evaluation and review is an integral part of overall program evaluation to demonstrate sustained benefits from USAID's sponsored interventions. To institutionalize child survival activities in countries and to achieve sustainability, the project will provide monitoring tools and methods that are adapted to the skill level and resources available in these countries. They will be used to assist personnel to make management decisions and to solve problems locally.

## **The Management Information System (MIS)**

BASICS' aim is to implement a MIS that enables program managers to track financial data, outputs realized by program activities, and various approval processes. The MIS provides program managers with the information necessary to direct program implementation and take corrective action when key parameters deviate from an acceptable range.

Consultants from John Snow, Inc. carried out a needs assessment for BASICS financial accounting and administrative processes related to planning, implementing, and monitoring project activities. Following the consultants' recommendations the project will evaluate several computer-based accounting packages and proceed with installation and data conversion during the next quarter. Other recommendations include a timeline for a thorough systems and process analysis as a precursor to the implementation of a distributed database management system. The purpose of the system is to increase efficiency at the workplace in planning, managing, and monitoring project activities, and Lotus Notes appears to be the best tool available to realize this goal. This system will also automate the production of standard reports, such as the MIR and financial reports.

To address immediate needs the MIS division implemented an electronic tracking system for technical directives and started the development of other database applications. We also made progress to automate the comparison of expenditure data from the VAX-based accounting system with budget data from Lotus 123-based budget tables. These individual developments will be integrated into the new larger BASICS MIS.

During the last quarter of PY1, USAID's Office for Information Resource Management approved the request for network and computer equipment for BASICS. The procurement itself is planned for the following quarter. The transition from MS-DOS to Microsoft Windows was completed. All staff members at headquarters received training in Windows and Windows-based applications like WordPerfect and Lotus 123. The project's field staff will be oriented during the staff retreat in October 1994. The size of BASICS computer operations has made it necessary to hire a halftime LAN manager who assures hardware and operating system stability. It is anticipated that the vacant position of an MIS specialist will be filled within the next few months.

# The Management Information Report (MIR)

## Purpose and Design of the Management Information Report

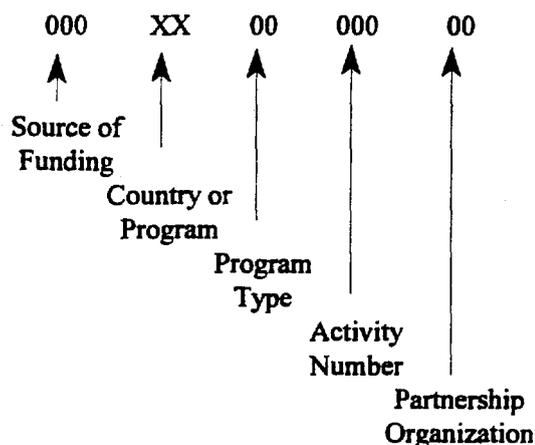
The MIR combines the following information to track program progress on an on-going basis:

- Program budgets by source of funding;
- Actual expenditures by source of funding;
- Outputs as specified per activity and outcomes as related to objectives.

Budget information is obtained from the annual workplan as well as the CAP for life-of-project estimates. Expenditure data are generated by the BASICS accounting system. Outputs come from the annual workplan with timeline, and outcomes are related to the program objectives specified in the CAP.

The report is generated quarterly in a standard format, but can be produced more frequently as needed and may include customized information. For example, a report consists of cross tabulations of countries by specific types of child survival interventions and compares the costs of similar activities with the outputs realized during a reporting period. Standard tables compare estimated budgets and planned outputs with the actual level of program implementation in each country and region. The variance is shown on a quarterly or annual basis as well as cumulative since program inception. All financial information is shown by source of funding, core, designated core, and delivery order. Two elements that are key to the MIR have been developed during PY1: activity codes and activity designators, and templates that show the various cross tabulations.

Each activity is identified by a unique code that allows managers to compare budgets, expenditures, and outputs consistently for each major activity. The **activity code** has the following format:



Source of funding	=	Core, designated core, delivery order
Country or program	=	A two-letter code for the country, region, or division at headquarters
Program type	=	Long-term, periodic, short-term technical assistance
Activity number	=	Sequential number for each activity
Partnership organization	=	The Partnership for Child Health, AED, JSI, or MSH

Each activity is further characterized by five **activity designators** (listed on the first page of the MIR) as follows:

- **Type of BASICS activity:**  
Describes the nature of an activity as it is carried out by BASICS.

- **Child survival program or disease intervention:**  
Describes the categorical program or disease specific intervention addressed by an activity.
- **System strengthening focus:**  
Describes the element of the host country system, agency health system, USAID system, or BASICS system that is strengthened by an activity.
- **Counterpart or client organization:**  
Describes what type of organization will benefit from an activity or be affected directly.
- **Special at-risk group:**  
Describes whether a specific population segment that is at risk is targeted *exclusively* by an activity. This requires that individuals who do not fit a criterion of "at risk" can be excluded from services which is not the case for most country programs.

Each activity designator may have up to 26 categories, and up to three specific categories per designator can be assigned to each activity. If more than three categories apply, a separate code is assigned. This code for "more than three categories" is the same for all designators. They also share codes for the categories: "As yet unknown," "Other," "All of the categories," and "Not applicable,"

A set of **templates** has been developed that tabulates activities by country or program and by each activity designator. These templates contain the following information:

- Summary of the BASICS project by source of funding and PIOT for costs and level of effort.
- Summary by subcontractor and partner.
- Summary by program type, child survival intervention, and region.
- Summary by country and region.
- Comparison of activity costs with outputs and outcomes.

The information in the MIR is used directly for the *USAID Health and Child Survival Questionnaire*. The indicators in this questionnaire form a subset of the indicators represented by the activity designators.

## **Contents of the MIR for PY1**

The previous section describes the design of the MIR that will be realized as the BASICS project develops. The PY1 MIR and previous versions contain only part of the information outlined for two reasons. First, output and outcome information is currently not available because most field programs either just started during the last quarter or will become operational during PY2. Moreover, no comparison period exists prior to PY1. Second, the data needed for the MIR come from sources that have a very different data format, and BASICS will have to make substantial efforts during the coming project year to develop the components of an integrated information system that link these sources and that produce meaningful information in an automated process.

Given these constraints the current MIR for PY1 represents cumulative data for the entire year. The level of detail is restricted to seven major project components and a summary by geographic region. Expenditures by country are shown in the September financial report (shown in Appendix).

1. Country programs by region
2. Technical quality assurance
3. Information dissemination
4. Conferences and workshops
5. Evaluation and MIS

6. Program management
7. Start-up costs

The tables of the MIR produced for this report (shown in Appendix) compare expenditures with the budget for the entire project year. Dollar amounts as well as level of effort (LOE) are shown for each source of funding: core, designated core, and delivery order. In the BASICS financial summary table, these two variables are aggregated by each of the seven major program components. The following five sets of tables (one shows dollars and one shows LOE) summarize amounts by each of the five activity designators: type of activity, child survival program or disease intervention, system strengthening focus, counterpart or client organization, and special at-risk group. Each category within an activity designator is further divided by major project component.

## Highlights of the PY1 Report

This MIR highlights several factors related to the first year of operations of the project:

- Field activities were initiated rapidly both in the development of long-term BASICS country programs and through the provision of assistance to USAID Missions in carrying out their own bilateral programs;
- A major share of the headquarters' effort in this initial period of the project was devoted to the development of technical and programmatic strategies which will guide the project in its future years;
- A program balance was developed between technical interventions and system strengthening activities which will set the foundation of the project during its remaining years;
- As in all projects, the expenditure of funds and effort for setting up the logistics for sustained operations—renting office space, purchase of computers and office equipment, hiring staff, etc.—is significantly greater in the first year as a percentage of overall expenditures than in future years when country and programmatic activities are fully developed.

The following notes relate to each MIR table and summarize the most important information (i.e. that with the highest expenditures). Percentages do not add up to 100%, because only the top 2 to 5 categories are shown. Designator categories with low expenditures (less than 2%) are not included in this summary. The bullets follow the table headers.

## BASICS Financial and LOE Summary

- Actual expenditures during PY1 totaled \$8,223,295 or 58% of the \$14,148,950 projected in the BASICS contract.
- The initial annual BASICS workplan completed in March 1993 gave illustrative activities totaling \$16,295,639, but since implementation depended on a variety of start-up factors (e.g. receipt and initiation of DOs, concurrence of Mission, etc.), a discount factor of 25% was applied so that a planning total of \$12,393,659 was agreed upon with USAID.
- Overall, 66% of the estimated budget of \$12,393,659 for PY1 has been expended during this period after making adjustments as specified.
- About a 50% balance remains for country and regional activities. Technical quality assurance expended roughly 42% of the amount budgeted, and information dissemination spent 79%. Expenditures for evaluation and MIS of 33% have fallen short of predictions, because the purchase of computer equipment, budgeted at \$750,000, did not take place during the first year. For the categories program management, conferences and workshops, and start-up costs, expenditures were almost identical to budgets.
- In PY1 the largest amount, 36% of total expenditures, was spent for country and regional activities. Of this subtotal 8% was billed against DOs and 34% against designated core, mainly in Africa and in the NIS. DOs constituted a small source of funding, because most were signed during the last quarter of the project year with activities beginning only during PY2.
- Level-of-effort tables show very similar relationships between expenditures and budgets as the correspond-

ing dollar amounts, because expenditures in most program categories consist of salaries, with the exception of program management and start-up costs.

### **Financial and LOE Summary by BASICS Activity**

- The summary by BASICS project activity, the first of five activity designators, shows that 53% of all expenditures occurred at headquarters for activities to support start-up operations in countries or regions.
- 22% were spent on program assessments and project development. Program assessments include activities prior to BASICS field project development or assessment for other USAID projects. Project developments include planning visits to BASICS countries and the preparation of CAP.

### **Financial and LOE Summary by Program/Disease Intervention**

- Expenditures by programmatic area occurred as follows:
  - ARI ..... 3%
  - CDD ..... 12%
  - EPI ..... 5%
  - General child survival ..... 28%
  - More than three program or disease categories ..... 39%
- The last category contains all program management costs.

### **Financial and LOE Summary by System Strengthening Focus**

- When categorized by system strengthening focus, expenditures fell largely into the group that combines more than three foci, 77%.
- 4% were spent on policy and strategy development.
- 7% did not have a system strengthening characteristic as defined for this designator.

### **Financial and LOE Summary by Counterpart/Client Organization(s)**

- Expenditures related to public sector counterpart or client organization were 11%.
- Private sector (commercial and NGO/PVO) expenditures amounted to 2%.
- Expenditures related to other USAID projects were 10%.
- Expenditures for BASICS field projects were 39%.
- Expenditures for more than three partner categories were 30%.

### **Financial and LOE Summary by Special At-risk Groups**

The last designator, expenditures by special at-risk groups, showed the following distribution:

- 4% were spent on programs focussing specifically on the urban poor.
- 87% targeted populations in need of child survival services that do not consist solely of high-risk individuals as defined for this designator. This large proportion is due to the very narrow definition of this designator that requires an exclusive focus on an at-risk population. Most activities are geared toward high-risk groups, but they do not exclude people who do not fit the criterion.

#### *Notes related to MIR tables*

This MIR was generated in an automated procedure from all budgets and expenditures prepared for PY1. It is based on activities at headquarters and in country programs that are described by a unique identifier, the activity code, and activity designators. These codes and designators were developed in the second quarter of the project year and were not available during the start-up phase of BASICS for some budgets. The following notes provide additional information relevant for the interpretation of the MIR tables.

## **Status of Country Activities**

**THE BASICS PROJECT**  
**Summary of Project Consultants**  
**As of September 30, 1994**

**Total Number of Consultants in BASICS Roster: 124**

Technical Experience Grouping	
Area	No.
CMD	30
HIS	55
IEC	46
KDC	46
PMT	83
RES	45
TRG	56
War Victims	16

Geographical Experience				
Area	1	2	3	4
LAC	11	7	13	27
Asia	6	11	12	18
Africa	7	6	19	46
Eastern Europe	3	2	2	3
Near East	7	5	12	8
NIS	4	3	5	1

Language Proficiency		
Lang.	1	2
Arabic	1	6
French	22	38
Port.	7	9
Russian	2	2
Spanish	17	18
Other	16	20

**LEGENDS**

Technical Expertise Grouping

- CMD: Community Development
- HIS: Health Information Systems
- IEC: Information, Education, and Communication
- KDC: Key Disease Control
- PMT: Project Management
- RES: Research
- TRG: Training
- WVF Consultant for War Victims Project

Geographical Experience

- 1: Less than 3 months in region
- 2: Three months to 1 year
- 3: More than 1 year
- 4: Residential Experience

Language Proficiency

- 1: Demonstrated capability of speaking, writing, and working in technical areas
- 2: Fluent or native speaker

**\*Breakdowns**

The breakdowns show only the total number of consultants with experience or proficiency in any one area. Since a consultant may have expertise or experience in more than one breakdown area -- e.g. he or she may have experience in Key Disease Control and Training, or may speak French and Arabic -- the totals within the breakdown groupings will exceed the actual number of consultants in the roster.

COUNTRY: ANGLOPHONE AFRICA  
 PROJECT: AD HOC SHORT-TERM TECHNICAL ASSISTANCE  
 COUNTRY/PROJECT CODE: 000 AA 00  
 BEGIN/END DATES: OCTOBER 1993 TO SEPTEMBER, 1994

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>TECHNICAL ASSISTANCE</b> Provide short-term technical assistance to countries in Africa in response to USAID or other donor requests (8 TDYs, 7.6 person-months total).	Sept.	Heise							X	X	X	X	X	X	Consultant reports for each discrete assignment.	No assignments to date.
	Guinea- member of family planning/child survival project design team.		Kelly						X	X						Health Sector Assessment document.	Health Sector Document completed.
2	<b>LOCAL PROGRAM COSTS</b> Provide operational funding support for local activities as requested by USAID or other donors.	Sept.	Heise							X	X	X	X	X	X	Outputs may include reports, IEC materials, training curriculum, study results.	No assignments to date.
3	<b>HEADQUARTERS SUPPORT</b> Identify, implement, and support short-term technical assistance in Africa.	Sept.	Heise/Freund Tien Ops Coord.			X	X	X	X	X	X	X	X	X	X	Briefings and debriefings, consultant reports, regular reports.	Discussions of potential assistance to Eritrea and Ethiopia.

57

COUNTRY: ANGLOPHONE AFRICA

YEAR: PROJECT YEAR 1

02-Dec-9

PROJECT: REDSO/EA

COUNTRY/PROJECT CODE: 000-AA-00

BEGIN/END DATES: October 1, 1993 - September 30, 1994

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>REDSO PLANNING VISIT</b> Conduct meetings with REDSO/ESA to develop position descriptions for new staff assigned to REDSO office in Nairobi. One person to set up and monitor health networks and information exchange, and other to be regional child survival advisor.	3/11/94	Bartlett/Heise						X							Agreed position descriptions for Network Coordinator and Child Survival Advisor.  Background documentation.	Position descriptions drafted and circulated within BASICS. Revisions made during March trip to REDSO. Agreement reached to move forward with plans to recruit for two positions.  Background documents prepared during March trip
2	<b>RECRUITMENT</b> Recruit, orient, and place HNC and CSA in REDSO/ESA office in order to enhance ability to develop child survival activities in the east and southern Africa region.	01/31/95	Heise/Asam/White						X	X	X	X	X	X	X	Hiring and placement of HNC and CSA.	Delivery orders developed and approved. Recruitment for both positions underway. For HNC: 30 CVs reviewed. Short listed candidate to be interviewed in Nairobi by Heise and REDSO in October 1994. Candidates for Regional Child Survival Advisor to be interviewed in November/December.
3	<b>REDSO OFFICE STARTUP</b> Conduct trips to Nairobi to provide supportive supervision and to plan for PY 5.	01/31/95	Heise/Waldman													Draft workplan for both positions for PY 2.	Office start up delayed pending hire of both positions.
4	<b>HEALTH NETWORK ACTIVITIES</b> Dan Kraushaar and I.M. Hussein of MSH Health Care Finance Project to provide assistance to Health Finance working group in Ethiopia. Focus will be developing a health care finance strategy document for Ethiopia that draws on recent experience in Kenya.	08/31/94	Kraushaar Hussein Heise Sturgis											X	X	Trip report summarizing status of strategy development key issues and next steps.	Report produced and being edited. Plans made to support key Ethiopians to Health Care Finance Course in Nairobi.
5	<b>HEADQUARTERS SUPPORT</b> Provide support of Operations and Technical staff headquarters.	9/30/94	Heise/Tien Ops Coord						X	X	X	X	X	X	X	Quarterly progress reports project year.	Reports prepared on time.

47

# Consultant Database

## BASICS Country Projects by Priority Technical Areas

Status as of Sept. 30, 1994

	Prevention		Case Management of Sick Children				Private Sector	Behavior Change	Monitor/Eval	Decent. Plan/Mng	Other
	EPI	Nutrition	CDD	ARI	Malaria	ICM					
<b>Africa/Anglophone</b>											
Ethiopia (LT)	X	X	X	X	X	X	X	X	X	X	
Eritrea (LT)	?	?	?	?	?	X	X	X	X	X	Financing
Kenya (FGM) (P)							X	X	X		FGM
Nigeria (LT)	X	?	?		?	?	X(only)	X	X		Urban
REDSO/ESA											
Health Network (LT)	?	?	?	?	?	?	X	?	X	X	Financing,FP,HIV/AIDS
Regional CS Advisor (LT)	X	X	X	X	X	X	X	X	X	X	
Zambia (P)	?	?	?	?	?	?	?	?	X	X	
<b>Africa/Francophone</b>											
Madagascar (LT)		X	X	X			X	X	X	X	
Mali (LT)	X		X	?	?	?	?	X	X	?	
Niger (LT)	?		X	X	?	X		X	X		
Senegal (LT)		X	X	?	?	?		X	X	X	
<b>Asia/Near East</b>											
Bangladesh (LT)	X		?	?			X	X	X	X	Urban
India (P)	?	?	?	?	?	?	X(only)	X	X		
Indonesia (P)	?	?	?	?		?	X	X	X	X	w/World Bank
<b>Latin America and the Caribbean</b>											
Bolivia (LT)		X	X	X		?	X	X	X	X	Urban/rural
Guatemala (P)		?	X	X		?	?	X	X	?	Indigenous
Haiti (LT)	X	?	X	X		?	X	X	X	?	Returntogov
Honduras (P)		X	X	X		X		X	X	?	
Regional Cholera (STTA)			X				X	X	X		

## BASICS Country Projects by Priority Technical Areas

Status as of Sept. 30, 1994

	Prevention		Case Management of Sick Children				Private Sector	Behavior Change	Monitor/Eval	Decent. Plan/Mng	Other
	EPI	Nutrition	CDD	ARI	Malaria	ICM					
<b>Newly Independent States</b>											
Kazakhstan (P)	X							?	X	X	
Kyrgyz Republic (P)	X							X	X	X	
Moldova (P)	X							?	X	X	
Tajikistan (P)	X							?	X	X	
Turkmenistan (P)	X							?	X	X	
Uzbekistan (P)	X							?	X	X	
<b>Total in plans</b>	<b>12</b>	<b>6</b>	<b>11</b>	<b>8</b>	<b>2</b>	<b>5</b>	<b>13</b>	<b>18</b>	<b>25</b>	<b>15</b>	
<b>Total potential</b>	<b>5</b>	<b>8</b>	<b>4</b>	<b>8</b>	<b>8</b>	<b>10</b>	<b>3</b>	<b>5</b>	<b>0</b>	<b>5</b>	

Key: X= Project in which BASICS is working or has been asked to work on this intervention.

?= Project in which the need and the potential exist to work on this intervention and BASICS is exploring this possibility.

**BASICS Country Activities by Type**  
**PY1: October 1, 1993 - September 30, 1994**

<b>Long-term Projects</b>	<b>Periodic Projects</b>	<b>Short-term Activities</b>
<b>Africa/Anglophone</b> <b>Eritrea (1)</b> <b>Ethiopia (1)</b> <b>REDSO/ESA</b> <b>Health Network</b> <b>Regional CS Advisor</b> <b>Nigeria</b>	<b>Kenya (FGM)</b> <i>Zambia (1)</i>	<b>Angola (2)</b> <b>Liberia(2)</b> <b>Malawi</b> <b>Mozambique(1)</b> <b>Namibia</b> <b>South Africa</b>
<b>Africa/Francophone</b> <b>Madagascar</b> <b>Mali</b> <b>Niger (1)</b> <b>Senegal</b>		<b>(Regional Office: Dakar)</b> <b>Burundi</b> <b>Guinea(1)</b> <b>Rwanda/Zaire</b>
<b>Asia/Near East</b> <b>Bangladesh</b> <i>Indonesia (3)</i>	<b>India</b>	<b>Morocco</b> <b>Nepal</b> <b>Laos(2)</b> <b>Sri Lanka (2)</b> <b>Vietnam (2)</b>
<b>Latin America and Caribbean</b> <b>Bolivia (4)</b> <b>Haiti</b>	<b>Guatemala (4)</b> <b>Honduras (4)</b>	<b>(Regional Office: Honduras)</b> <b>Peru</b>
<b>Newly Independent States</b>	<b>Kazakhstan</b> <b>Kyrgyz Republic</b> <b>Moldova</b> <b>Tajikistan</b> <b>Turkmenistan</b> <b>Uzbekistan</b>	<b>(Regional Office: Kazakhstan)</b> <b>Armenia</b> <b>Azerbaijan</b> <b>Georgia</b>
<b>Total w/buy-ins</b>	<b>12</b>	<b>3</b>
<b>Total projects</b>	<b>13</b>	<b>11</b>
		<b>0</b>
		<b>18</b>

Notes: **Bolded countries are those with buy-ins in hand or expected shortly**

*Italicized countries are those we expect to become long-term or periodic countries*

(1) Assistance provided with USAID health sector strategy or project development

(2) War Victims Fund activities

(3) World Bank missions in addition to BASICS activities

(4) LAC Cholera STTA activities are part of country programs

52

## Status of Country Activity Plans (CAP)

	Pre-CAP Mission	CAP Mission Planned	CAP Mission Complete	Draft CAP Complete	CAP Final
<b>Africa/Anglophone</b>					
Ethiopia BASICS plan	None	Workplan 9-10/94	In progress		
Eritrea BASICS plan	Completed various	Workplan 9-10/94	In progress		
Nigeria CAP	Completed 12/93	12/94	Completed	In progress	
REDSO/ESA Health Network Regional CS Advisor Plans for both	Both completed 4/94	Workplan 2/95 2/95			
Zambia	PID completed 6/94/PP planned 1/95/CAP to be determined				
<b>Africa/Francophone</b>					
Madagascar CAP	NA/Advisor in country	5/94	completed	completed	pending
Mali CAP	Completed various	1/95	on schedule		
Niger CAP	Completed	6/94	completed	completed	pending
Senegal CAP	Completed various	2/95	on schedule		
<b>Asia/Near East</b>					
Bangladesh CAP	Completed 7-8/94	9/94	completed	completed	pending
India CAP???	Completed 4/94	Under negotiation			
Indonesia CAP	Several completed '94	1/95	underway		
Yemen CAP	Project not yet awarded				
<b>Latin America and the Caribbean</b>					
Bolivia CAP	Several completed '94	2-8/94 various	completed	in progress	
Guatemala new project CAP	Various 1993-94	Tentative 4/95			
Haiti CAP	JSI team in country 1993-94	1/95	on schedule		
Honduras CAP	Completed 1994	1/95	on schedule		
Regional Cholera Strategy paper	Completed	Completed	Completed	Completed	Pending
<b>Newly Independent States</b>					
Region Regional plan	Completed	Completed	Completed	In process	
All Countries CAP	Completed	country planning process and products yet to be determined			

53

# **BASICS Country Activities by Type**

**Project Year One**

The initial annual BASICS workplan completed in March 1993 gave illustrative activities totaling \$16,295,639, but since implementation depended on a variety of start-up factors (e.g. receipt and initiation of DOs, concurrence of Mission, etc.), a discount factor of 25% was applied so that a planning total of \$12,393,659 was agreed upon with USAID. The estimated budget was adjusted upwards for activities without appropriate codes: \$110,000 for conferences and workshops and \$1,200,000 for start-up costs. The budget proposed for Asia represents an early estimate which has been adjusted downward by \$2,750,000 to reflect costs anticipated during PY1. The amount budgeted for the NIS under DO was reduced by \$2,500,000 to reflect estimated PY1 costs, all under designated core. These adjustments change the total estimated budget for PY1 to \$12,393,659. A difference of about \$750,000 between the estimated budget in the financial summary table and summaries by activity designator is due to activities with designators that fall into categories that had not been defined at this stage of the project.

## **Finance and Administration**

During the first year of the BASICS project, considerable efforts were expended developing and writing policies and procedures to delineate responsibilities and provide flexibility to the project's needs. These policies were developed by adapting and refining existing processes from the predecessor projects. The list of completed documents continues to grow. It currently includes a project accounting procedures manual, field accounting system, subcontracts and consultants administration, purchasing procedures, delivery order proposal process, monthly financial report, performance evaluations, and hiring procedures. These processes are designed to meet financial, accounting, and contractual requirements and to accommodate the workload and complexities in executing activities on the BASICS project. The involvement of technical and operations staff has been very significant in the implementation of these processes.

The Finance and Administration (F&A) division has developed and coordinated each of these project procedures in conjunction with the Joint Venture (JV) Partners to enable the project to directly administer bank accounts, negotiate DOs, and award subcontracts on behalf of the Partnership for Child Health Care, Inc. The BASICS staff has been operational at its new Arlington, VA facilities since May 1994 while serving as headquarters to seven field offices.

Total billings to AID were \$8M in FY1 and the F&A division processed almost \$4M in expenses.

## **Accounting and Financial Reporting**

In coordination with the JV Partners, a separate accounting function was set up at BASICS to enable independent financial operations. An accounting system was initialized for the BASICS project which generates monthly invoices and financial reports. BASICS accounting fiscal year end coincides with the project, and the FY1 audit is scheduled to be conducted at the BASICS headquarters office. It includes an independent financial statement audit in addition to the A133 audit.

A monthly financial report was developed during this first year to track activity-level expenditures in each country by core, designated core, and DO. The F&A division continues to work towards refining and meeting other multi-level reporting requirements.

## **Contract Administration**

Through USAID's new contracting mechanism, the requirements contract, fourteen new DO actions, and twelve new and two additional amendments were proposed and negotiated with the USAID contracting officer (CO) during this year. BASICS currently has 15 active DOs, including three unilateral DOs that were awarded on 9/30/93.

The BASICS core and requirements contracts include numerous USAID CO approval requirements. The BASICS staff has submitted 82 separate requests during this first year. As of this writing, six are still pending CO approval. A copy of the log of contracting officer approval requests is attached. In the spirit of contract reform, meetings have been held with the USAID CO to clarify procedures and to develop streamlined approaches to these contractually required processes. It was agreed that a proposal to the USAID CO would be prepared to present alternatives for modifications to the contract.

Subcontract negotiations were completed and subcontracts were executed with the six team subcontractors: Clark Atlanta University, Emory University, Johns Hopkins University, The Kingsbury Group, Porter/Novelli, and Program for Appropriate Technology in Health (PATH). A work order process was initiated to administer these subcontracts. Two major procurements were completed and approved by the USAID CO this year for telephone and furniture. USAID has also approved the proposed BASICS computer configuration. The purchase is expected to be completed by the second quarter of PY2.

The BASICS consultant database was initiated early in the project and now generates easily accessible consultant information on technical, geographical, and language expertise categorized in eight technical areas. A summary report of the 124 consultants on the BASICS roster is attached. Seventy-two separate consultancies by 53 independent consultants were fielded this year.

## **Field Office Administration and Accounting**

The BASICS project began with four field offices and three more were added by year end. Each field office was set up with a separate bank account. One Write accounting systems are being installed in the field offices. The One Write system is the paper companion to JSI's computerized accounting software that was adapted for BASICS. Training was held in September for F&A and Operations staff. The field accounting system enables the field office to provide timely reports on expenditures that are easily entered into BASICS accounting system and then incorporated into financial tracking reports.

A field office manual is in draft. As field offices are brought on line, the F&A division works closely with the Operations division to develop a plan for smooth transition. For example, a team consisting of the ANE Operations staff and a member of the F&A staff went to the field to train and set up BASICS field office F&A procedures for Bangladesh.

## **Human Resources**

Recruitment and employee relations have been among the highest priorities for BASICS. Three key personnel positions were filled during the first year due to attrition. The initial start-up staff did not include all the non-key personnel positions, but sixteen of them were filled during the first year as the project's workload demands increased. Hiring procedures for new employees were established and coordinated with the JV Partners to meet the high recruitment demands while the project maintained a strong focus on employee relations. A standard BASICS employee evaluation form and process were initiated to make performance appraisals consistent for all JV Partner employees. Continued team-building efforts are constantly reinforced through all BASICS human resources processes.

56

COUNTRY: ERITREA  
 PROGRAM: HEALTH SECTOR ASSESSMENT  
 COUNTRY/PROGRAM CODE: 000 ER 00  
 BEGIN/END DATES: APRIL - September, 1994

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>ERITREA - HEALTH SECTOR REVIEW</b> Provide a team of four experts for up to four weeks each, plus headquarters support.	06/15/94	Freund/ Heise/ Neill/ Legace/ Donaldson									X	X			Health sector review report and recommendations.	Sector review assessments produced which formed technical and institutional annexes to Project Paper. PP completed and approved by REDSO/ Nairobi August 1994.
2	<b>BASICS FOLLOW-UP VISIT</b> Draft workplan for bridging activities for pre-project implementation.	10/18/94	Neill/P.Taylor												X	Workplan of proposed activities to be developed in collaboration with donors, MOH/Eritrea, and USAID/ Asmara.	Draft workplan produced. Meeting with USAID director and debriefing of consultant scheduled for November 1994.

59

COUNTRY: ETHIOPIA  
 PROJECT: SHORT-TERM TA  
 COUNTRY/PROJECT CODE: 000-ET-00  
 BEGIN/END DATES: January 1, 1994 - September 30, 1994

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>NUTRITION PAPER</b> Develop a nutrition component for USAID Project Paper (12 person-days).	2/94	Pelletier/ Heise				X									Report written containing nutrition component for PP.	Consultant report received, reviewed by Operations and Technical, and forwarded to USAID/Addis.
2	<b>PROJECT DEV. FACILITATION</b> Assistance to USAID in moving from PID to PP preparation phase (3 person-weeks).	9/30/94	Heise/ Consultant								X	X				Consultant report.	USAID/Addis determined this consultation was not necessary.
3	<b>BASICS TEAM VISIT</b> Team to visit Addis and SEPR to develop proposal for BASICS involvement in ESHF project. Team will meet key regional and central authorities, donors, NGOs to help determine appropriate role for BASICS.	Sept/ Oct. '94	Heise Freund Ponde Steinglass Bartlett												X	Develop proposal for BASICS activities at central and regional level.	Proposal developed, draft with USAID/Addis.
4	<b>SOCIAL GENDER ANALYSIS</b> STTA to identify key social and gender issues that ESHE project will need to be aware of. Consultant will write report based on document review, focus graph, and field visit.	July/Aug 9	Freund/ Oldham										X	X		Consultant report.	Draft report produced. Waiting for comments by USAID/Ethiopia/REDSO. Report will be annexed to Project Paper.
5	<b>DELIVERY ORDER BRIDGING ACTIVITIES</b> Preparation of BASICS response to delivery order SOW. Activities to be carried out include:  6-month medium-term resident advisor. Data collection, community demand study, study tours, prepare for Ethiopia national service delivery guidelines, and workshop.	Sept. 94	Heise Freund Taylor Cluster										X	X	X	Approved delivery order for bridging activities.	Delivery order signed by contracts September 1994

58

COUNTRY: MADAGASCAR  
 PROJECT: LONG-TERM SUPPORT FOR CHILD SURVIVAL  
 COUNTRY/PROJECT CODE: 000 MG 0 and 00 MG 01  
 BEGIN/END DATES: October 1 to September 30, 1995

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>RESIDENT ADVISOR</b> Provide management to the National Control of Diarrheal Disease Program and coordinate the provision of technical assistance. Make field trips to the provinces, assist with supervision and planning, and provide on-the-job training to national counterparts.	09/15/94	Blyth			X	X	X	X	X	X	X	X	X	X	Monthly and quarterly reports.	Delivery order signed effective February 28. Karen Blyth took up residence in January 1994 and stayed in Madagascar through mid-September 1994. Regular and final reports received. Delivery order extended through September 30, 1994.
2	<b>TANA OFFICE</b> Establish an office for BASICS in the MOH. This will include establishing a BASICS bank account, hiring a driver, providing logistical support for activities, and regular communication with BASICS, AID, local donors, counterparts.	09/15/94	Blyth				X	X	X	X	X	X	X	X	X	Field office expense reports.	Office fully established, local bank account opened. Project vehicle damaged in aftermath of hurricane and engine was replaced. Project vehicle now in good running condition.
3	<b>CAP</b> Work with host counterparts and the BASICS advisor to develop a multi-year plan (CAP) for support of child survival in Madagascar. Team will be in-country for 3 weeks.	9/15/94	Heise, Frere Saade, Blyth Waldman								X	X				Completed CAP meeting. BASICS and AID approval.	CAP team visited in May 1994 and developed draft document (later finalized). New delivery order with BASICS incorporated CAP thinking.
4	<b>CDD/ARI WORKSHOP</b> Provide NCDDP national staff and provincial DTU directors with a technical update on CDD and nutrition with a CDD workshop. Dr. Tetanye will be in Madagascar for two weeks.	4/20/94	Tetanye							X						Course successfully conducted for approximately 25 participants.	Course successfully delivered in Antananarivo.
5	<b>ORS COMMERCIALIZATION</b> Provide technical assistance in ORS production and marketing during a 2-week TDY.	7/30/94	Saade													Strategy for ORS production by ODIVA and transfer of responsibility to private sector.	ORS issues examined during CAP. USAID and BASICS determined that follow-up TDY not required at this juncture.
6	<b>LOCAL PROGRAM COSTS</b> Support the following local activities:	8/30/94									X	X	X			20 providers trained per province.	Funding provided to each province for training. All provinces trained approximately 20 providers.
	Provide provincial DTU-based CDD training.		Blyth/NCDDP														
	Print CDD training module.	8/30/94	Blyth/NCDDP						X							Standard training curriculum.	CDD training modules not printed by BASICS due to MOH national training strategy to develop materials regionally.
	Monitor and support provincial DTUs.	8/30/94	Blyth/NCDDP					X	X	X	X	X	X			Supervision reports.	National CDD Program visited 4 provincial DTUs. DTU Directors carried out supervisory visits of ORT corners in 4 out of 6 provinces.
	Establish a task force to revise medical and nursing school curriculum.	8/30/94	Blyth/ John									X	X	X		Plan for curriculum revision developed and adopted.	CDD curriculum in use by medical schools but no task force developed due to lack of consensus on use of curriculum.

54

COUNTRY: MADAGASCAR  
 PROJECT: LONG-TERM SUPPORT FOR CHILD SURVIVAL  
 COUNTRY/PROJECT CODE: 000 MG 0 and 00 MG 01  
 BEGIN/END DATES: October 1 to September 30, 1995

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
	Distribute IEC materials and train health workers.	8/30/94	Blyth/ John	X	X				X							Materials available and used in health facilities.	Materials have been distributed. Supervisory visit to Finarantsoa in March and health workers there trained in use of IEC materials. IEC/CDD print materials re-ordered and distributed to NGO and private sector (pharmacies/drug depots).
	Evaluate IEC materials to determine if materials are used and whether adaptations needed.	8/30/94	Blyth/ John										X			Evaluation report.	Effect of IEC/CDD materials evaluated in Finarantsoa and Antananarivo.
	Print national CDD policy.	7/30/94	Blyth/NCDDP										X			National policy approved, printed, and distributed.	Policy approved, published, and distributed.
7	<b>HEADQUARTERS SUPPORT</b> Support from Headquarters with operations staff and members of the Madagascar cluster.	9/30/94	Cluster	X	X	X	X	X	X	X	X	X	X	X	X	Regular meetings of cluster, annual workplan and regular reports.	Cluster has been formed and meets regularly. Workplan and quarterly reports prepared on time. New delivery order negotiated and awarded for 2 yr

10

COUNTRY: MALAWI  
 PROJECT: SHORT-TERM TECHNICAL ASSISTANCE  
 COUNTRY/PROJECT CODE: 000 ML 00  
 BEGIN/END DATES: OCTOBER 1993 to SEPTEMBER 1994

YEAR: 93-94

PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
0	Review CDD and breastfeeding promotion activities and facilitate USAID supported workshop on cholera and dysentery.  Note: Pritech funding for Oct 18-31 period and BASICS designated core funds for Nov 1-7.	Nov 7	Freund	X	X											Document with suggested recommendations for USAID involvement in CDD/BF activities.	Consultant document finalized and approved by USAID Lilongwe, Malawi.
1	<b>ORS PACKAGE DESIGN</b> Assist UNICEF and Phamanova to develop ORS package design and promotional material.	August 31	Saade, Porter										X	X		ORS package designed and promotional materials produced. Trip report.	Assignment successfully completed. Trip report submitted to USAID.

61

COUNTRY: MOZAMBIQUE

YEAR: PROJECT YEAR 1

02-Dec-94

PROJECT: SHORT TERM TECHNICAL ASSISTANCE

COUNTRY/PROJECT CODE: 000 MZ 00

BEGIN/END DATES: April 25 to May 15, 1994

ACT#	ACTIVITIES	END DATE	KEY PERSONS	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>HEALTH SECTOR ASSESSMENT TEAM</b> USAID/Maputo has requested a team from BASICS assist long-range thinking on USAID support for child survival. BASICS will field a 5-person team.	5/15/94	Patterson Braun McGunnigle Barber-Madden Becker							X	X					Draft report identifying child survival and other health programming options for USAID.	Five-person team from BASICS conducted Health Sector review and produced report for USAID/Maputo.
2	<b>HEADQUARTERS SUPPORT</b> Recruitment of team, team planning meeting, document gathering and report editing.	6/15/94	Heise/ Tien							X	X	X				Successful completion of assignment.	No further activity is planned.

102

COUNTRY: NIGERIA  
 PROJECT: URBAN EPI  
 COUNTRY/PROJECT CODE: 000-NI-01  
 BEGIN/END DATES: APRIL 1 - SEPTEMBER 30, 1994

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
0	<b>PLANNING VISIT</b> Conduct LGA planning workshop, launch IEC materials, and develop concept paper for BASICS support for child survival interventions.	12/93	Taylor/Heise/ Macauley			R										Lagos State LGA workplans, and BASICS concept paper.	Workshop successfully conducted, IEC materials launched, and proposal submitted to USAID.
1	<b>RESIDENT ADVISOR</b> Convert REACH Coordinator in Lagos to BASICS and recruit local technical advisor for EPI in order to enhance technical leadership in Nigeria BASICS office.	6/1/94	Taylor/Heise						R	X	X	X				Employment of pres. staff by BASICS, hiring and placement of EPI technical advisor.	Process completed for existing staff. EPI technical advisor to be recruited in 1995.
2	<b>LAGOS OFFICE</b> Convert office staff from REACH to BASICS and provide continuous administrative, logistical, and financial support for country activities.	6/1/94	Dandridge/ Taylor/Heise						R	X	X	X	X	X	X	Conversion of office staff & systems from REACH to BASICS.	Completed. Will need to be re-examined under new delivery order.
3	<b>EMERGENCY</b> Provide technical assistance to support emergency EPI activities in Lagos State, including local immunization days. 2 TDYs planned for a total of 4 person-weeks.	9/30/94	Hasselblad/ Favin/ Macauley					R	R							Successful local immunization days carried out.	Extensive TA provided through REACH. One LID carried out successfully; political turmoil disrupted plans for subsequent LIDs.
4	<b>LGA TRAINING</b> *Conduct training of trainers in 4 rural LGAs. *Conduct 3 rounds of training in all 15 LGAs. *Evaluate success of LGA trainings to date. 1 TDY planned for a total of 1 person-week.	7/30/94	BASICS/ Lagos							X	X	X	X			*Completion of TOT in 4 LGAs. *3 rounds of trng completed. * Production of eval. report.	The training was not carried out because of civil strikes and the decertification.
5	<b>MONITORING/SUPERVISION</b> Conduct operational support and technical assistance to improve monitoring and supervision of EPI in LGAs. 1 TDY planned for a total of 1 person-week.	7/30/94	BASICS/ Lagos							X	X	X	X			Standard use of monitoring system in LGAs.	Progress has not been made.
6	<b>IEC/COMMUNICATIONS MOBILIZATION</b> Distribute IEC materials, continue production of radio dramas, procure HE equipment, and assess impact of IEC strategy. TDY planned for 3 per.wks.	7/30/94	BASICS/ Lagos			R	R	R	R	X	X	X	X			Standard distribution of materials in clinics. Regular radio spots on EPI.	No evaluation carried out.
7	<b>SPECIAL STUDIES</b> Conduct small-scale studies in LGAs to provide information on high-risk areas for neo-natal tetanus and measles, to learn more about the catchment areas for LGA health facilities, and to help facilities evaluate their immunization coverage. Local consultants will be used.	8/30/94	BASICS/ Lagos					R	R	X	X	X	X	X		Studies conducted and distributed to facilities to increase abilities to monitor coverage.	Local consultant has completed data collection. Report is being finalized.

KEY: R = REACH funded, X = BASICS funded

COUNTRY: ZAMBIA

YEAR: PROJECT YEAR 1

02-Dec-9

PROJECT: SHORT-TERM TECHNICAL ASSISTANCE

COUNT Y/PROJECT CODE: 000 ZA 00

BEGIN/END DATES: NOVEMBER 1993 to SEPTEMBER 1994

ACT #	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
0	Pre-PID to review and identify targets of opportunity for USAID-assess possibility for Non-Project Assistance (TDY: 2 persons x 3 weeks ea.).	12/3/93	Freund Harvey Donaldson			X										Background document with suggested targets of opportunity/objective tree and tentative logframe.	Consultant document produced and forwarded to USAID Lusaka.
1	<b>PID TEAM</b> BASICS to field a team to write a PID for new health project. Project to focus on strengthening district-level capacity and specific child survival activities in selected districts (TDY: 5 persons x 4 weeks each).	3/28/94	Correl Freund Pond Braun Stevens					X	X							PID produced and draft accepted.	PID approved and decision made to go forward with PP design in 1995.
2	<b>REVIEW EPI PROGRAM</b> Provide review of technical content of EPI program in conjunction with AID/W Africa Bureau and UNICEF.	April '94	J. J. Frere							X						Report with joint recommendation.	UNICEF and AID/W were unable to attend. Participated in a Government of Zambia donor meeting to discuss the strategic health plan.
3	<b>PP TEAM</b> Project Paper team visit to develop detailed project (24 person-weeks).	Tentative Jan/Feb 95	7 persons										X	X		Production of Project Paper.	HPN officer in post as of Sept 1994. PP scheduled for November/December postponed. Timing and composition of PP team to be negotiated. Target of Jan/Feb 1995.
4	<b>HEADQUARTERS SUPPORT</b> Headquarters support and management (recruitment of consultants, organization of team-building meetings, editing of reports and writing of quarterly reports).	9/30/94	Freund Heise cluster	X	X	X	X	X	X	X	X	X	X	X	X	Timely provision of effective TA and support, quarterly reports.	Headquarters staff has recruited and fielded consultant teams and reviewed reports. Cluster meets regularly

of

The BASICS core and requirements contracts include numerous USAID CO approval requirements. The BASICS staff has submitted 82 separate requests during this first year. As of this writing, six are still pending CO approval. A copy of the log of contracting officer approval requests is attached. In the spirit of contract reform, meetings have been held with the USAID CO to clarify procedures and to develop streamlined approaches to these contractually required processes. It was agreed that a proposal to the USAID CO would be prepared to present alternatives for modifications to the contract.

Subcontract negotiations were completed and subcontracts were executed with the six team subcontractors: Clark Atlanta University, Emory University, Johns Hopkins University, The Kingsbury Group, Porter/Novelli, and Program for Appropriate Technology in Health (PATH). A work order process was initiated to administer these subcontracts. Two major procurements were completed and approved by the USAID CO this year for telephone and furniture. USAID has also approved the proposed BASICS computer configuration. The purchase is expected to be completed by the second quarter of PY2.

The BASICS consultant database was initiated early in the project and now generates easily accessible consultant information on technical, geographical, and language expertise categorized in eight technical areas. A summary report of the 124 consultants on the BASICS roster is attached. Seventy-two separate consultancies by 53 independent consultants were fielded this year.

## **Field Office Administration and Accounting**

The BASICS project began with four field offices and three more were added by year end. Each field office was set up with a separate bank account. One Write accounting systems are being installed in the field offices. The One Write system is the paper companion to JSI's computerized accounting software that was adapted for BASICS. Training was held in September for F&A and Operations staff. The field accounting system enables the field office to provide timely reports on expenditures that are easily entered into BASICS accounting system and then incorporated into financial tracking reports.

A field office manual is in draft. As field offices are brought on line, the F&A division works closely with the Operations division to develop a plan for smooth transition. For example, a team consisting of the ANE Operations staff and a member of the F&A staff went to the field to train and set up BASICS field office F&A procedures for Bangladesh.

## **Human Resources**

Recruitment and employee relations have been among the highest priorities for BASICS. Three key personnel positions were filled during the first year due to attrition. The initial start-up staff did not include all the non-key personnel positions, but sixteen of them were filled during the first year as the project's workload demands increased. Hiring procedures for new employees were established and coordinated with the JV Partners to meet the high recruitment demands while the project maintained a strong focus on employee relations. A standard BASICS employee evaluation form and process were initiated to make performance appraisals consistent for all JV Partner employees. Continued team-building efforts are constantly reinforced through all BASICS human resources processes.

COUNTRY: Burundi

YEAR: PROJECT YEAR 1

29-Dec-9

PROJECT: CDD/Dysentery

COUNTRY/PROJECT CODE:

BEGIN/END DATES: May 1, 1994 - September 30, 1994

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
8	<b>EVALUATION PLAN</b> Developed August.	TBD	Train Spec Waldman Kabore													Evaluation report.	On hold.
9	<b>HEADQUARTERS SUPPORT</b> Clin Train Spec = CDD Clinical Training Specialist Log. Spec. = Training Logistics Specialist Train Spec = Training Specialist Antoine Kabore is WHO/AFRO CDD Coordinator Ron Waldman is BASICS Deputy Director Technical	Ongoing	Waldman Blyth Durgavich														On hold.

4

COUNTRY: ETHIOPIA  
 PROJECT: SHORT-TERM TA  
 COUNTRY/PROJECT CODE: 000-ET-00  
 BEGIN/END DATES: January 1, 1994 - September 30, 1994

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>NUTRITION PAPER</b> Develop a nutrition component for USAID Project Paper (12 person-days).	2/94	Pelletier/ Heise				X									Report written containing nutrition component for PP.	Consultant report received, reviewed by Operations and Technical, and forwarded to USAID/Addis.
2	<b>PROJECT DEV. FACILITATION</b> Assistance to USAID in moving from PID to PP preparation phase (3 person-weeks).	9/30/94	Heise/ Consultant								X	X				Consultant report.	USAID/Addis determined this consultation was not necessary.
3	<b>BASICS TEAM VISIT</b> Team to visit Addis and SEPR to develop proposal for BASICS involvement in ESHF project. Team will meet key regional and central authorities, donors, NGOs to help determine appropriate role for BASICS.	Sept/ Oct. '94	Heise Freund Ponde Steinglass Bartlett											X		Develop proposal for BASICS activities at central and regional level.	Proposal developed, draft with USAID/Addis.
4	<b>SOCIAL GENDER ANALYSIS</b> STTA to identify key social and gender issues that ESHE project will need to be aware of. Consultant will write report based on document review, focus graph, and field visit.	July/Aug 9	Freund/ Oldham										X	X		Consultant report.	Draft report produced. Waiting for comments by USAID/Ethiopia/REDSO. Report will be annexed to Project Paper.
5	<b>DELIVERY ORDER BRIDGING ACTIVITIES</b> Preparation of BASICS response to delivery order SOW. Activities to be carried out include:  6-month medium-term resident advisor. Data collection, community demand study, study tours, prepare for Ethiopia national service delivery guidelines, and workshop.	Sept. 94	Heise Freund Taylor Cluster										X	X	X	Approved delivery order for bridging activities.	Delivery order signed by contracts September 1994

127

COUNTRY: MALI

YEAR: PROJECT YEAR 1

PROJECT: Child Survival and Integrated MCH/FP

COUNTRY/PROJECT CODE: 001 MA 00 and 000 MA 00

BEGIN/END DATES: NOVEMBER 1, 1993 to SEPTEMBER 30, 1994

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>CAP</b> Develop a country activity plan in Mali to identify future technical assistance and support activities in child survival (TDY: 5 persons x 3 weeks ea.).	7/94	Frere Kone										X			CAP developed.	Awaiting MOH clearance to determine dates. Tentatively to take place in early 1995.
2	<b>REGIONAL ASSISTANCE</b> Conduct regional assistance to Niger, involving 4 TDYs for an average of 5 days each, in order to provide technical assistance to Mali's child survival program.	6/94	Kone		X	X	X							X		Trip reports produced. Participants for WHO MEDE conference ID'd, potential BASICS Country Advisors ID'd.	November, January, and March technical assistance completed. September TDY in progress. Specific short term goals accomplished, but broader program goals cannot be established before the CAP takes place.
3	<b>COUNTRY ADVISOR</b> Recruit and field a country advisor (CDD Specialist) for Bamako. The process would include finalizing a SOW, recruit for the position, field the advisor, and develop a BASICS workplan for Mali.	9/94	Kone OPS Officer Frere						X	X	X	X	X	X		Country Advisor fielded. Country workplan developed.	Candidates to be identified in Mali based on performance criteria.
4	<b>FIELD OFFICE</b> Establish a field office in Bamako, hire local personnel to maintain office, procure equipment for the office, and open local bank accounts. This would involve a TDY from the regional advisor.	9/94	Country Advisor Durgavich													Admin./Sec. and Driver hired. Office space rented, used. Office equipment in country. Office equipment in office.	Postponed.
5	<b>LOCAL PROGRAM COSTS</b> Organize and conduct selected local programs, to be determined by the CAP, in support of improvement of child survival and integrated MCH/FP services; i.e., training, focused studies, workshops, meetings, development of IEC materials, etc. \$33,000 has been budgeted.	6/96	Country Advisor OPS Officer													Workshops held, workers trained, materials developed.	To be determined by CAP.
6	<b>SHORT-TERM TA</b> Conduct short-term technical assistance to support the child survival program in areas of service delivery improvement, IEC/behavioral change, and policy planning. Specific activities to be determined by the CAP, 2 TDYs planned.	6/96	Country Advisor Kone OPS Officer													Short-term TA completed, reports distributed.	To be determined by CAP.
7	<b>HEADQUARTERS MANAGEMENT</b> Support from headquarters with operations staff and members of the Mali cluster group. This would include 1 TDY by the Operations Officer, and 1 TDY by the Operations Coordinator, who would assist in establishing a field office.	6/96	OPS Officer Durgavich Molina			X	X	X	X	X	X	X	X	X		Cluster meetings held, annual workplan and regular reports produced, TDYs conducted, including establishing field accounts.	On-going, but establishment of office depends on MOH approval (still pending) and CAP findings.

88

COUNTRY: MADAGASCAR  
 PROJECT: LONG-TERM SUPPORT FOR CHILD SURVIVAL  
 COUNTRY/PROJECT CODE: 000 MG 0 and 00 MG 01  
 BEGIN/END DATES: October 1 to September 30, 1995

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
	Distribute IEC materials and train health workers.	8/30/94	Blyth/ John	X	X				X							Materials available and used in health facilities.	Materials have been distributed. Supervisory visit to Finarantsoa in March and health workers there trained in use of IEC materials. IEC/CDD print materials re-ordered and distributed to NGO and private sector (pharmacies/drug depots).
	Evaluate IEC materials to determine if materials are used and whether adaptations needed.	8/30/94	Blyth/ John										X			Evaluation report.	Effect of IEC/CDD materials evaluated in Finarantsoa and Antananarivo.
	Print national CDD policy.	7/30/94	Blyth/NCDDP										X			National policy approved, printed, and distributed.	Policy approved, published, and distributed.
7	<b>HEADQUARTERS SUPPORT</b> Support from Headquarters with operations staff and members of the Madagascar cluster.	9/30/94	Cluster	X	X	X	X	X	X	X	X	X	X	X	X	Regular meetings of cluster, annual workplan and regular reports.	Cluster has been formed and meets regularly. Workplan and quarterly reports prepared on time. New delivery order negotiated and awarded for 2 yr.

COUNTRY: SENEGAL

YEAR: PROJECT YEAR 1

PROJECT: SENEGAL COUNTRY PROGRAM

COUNTRY/PROJECT CODE: 000 SE 01

BEGIN/END DATES: NOVEMBER 1, 1993 - SEPTEMBER 30, 1998

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>CAP</b> Develop a country activity plan in Senegal to identify technical assistance and support activities in child survival. Rather than send a 4-person team, a series of visits over PY 1 & 2 are envisioned.	7/1/94	Kelly									X	X	X	X	CAP developed.	Pat Kelly has made three visits to Senegal. Potential areas for BASICS intervention have been identified CDD/ARI, nutrition and malaria interventions in the four USAID regions (PY2), and possible additional activities TBD in the Senegal River Valley Region. CAP team visit scheduled for early 1995.
2	<b>REGIONAL ASSISTANCE</b> Provide regional assistance to the Senegal country program, and to Senegal's child survival program and provide technical oversight to the Senegal Country Advisor.	9/94	Kone	X		X		X		X				X	X	Trip reports completed.	Assistance has been provided for start-up activities. November & December TDYs completed. The Regional Advisor is based in Senegal and provides monthly updates to headquarters and inputs to the country program.
3	<b>COUNTRY ADVISOR</b> Support and provide guidance to the MOH in its child survival program, including overseeing the flow of CDD activities, coordinating with other donors, and managing local SANAS costs for supervision activities, as well as making trips to Fatick, Kaolack, and Lougato to participate in the development of annual plans, and to Ziguinchor to determine needs under BASICS.	9/94	Sene	X	X	X	X	X	X	X	X	X	X	X	X	Quarterly and monthly reports, annual workplans.	Country Advisor provides monthly updates. PY2 activities have been elaborated. Potential long-term interventions have been identified. Regional & district planning workshops held in 3 regions w/SANAS; 1994 plans developed and analyzed; SCS/FP project activities. Meetings with WHO Dakar Afro ARI/CDD Reps.
4	<b>FIELD OFFICE</b> Complete the staffing of the local office by recruiting and hiring a bookkeeper and driver, and by purchasing US and local equipment for the office.	7/94	Sene Dandridge Durgavich Daffe						X	X	X					Hire staff, purchase and ship equipment to Senegal.	Staff has been hired. Approvals obtained for local equipment and phone system purchases. Approvals pending for vehicle and computer equipment. Procurement of local furniture and phone system in progress.
5	<b>TRANS./TESTING OF WHO SURVEY MANUAL</b> Complete translation of WHO Survey manual. Expand survey tool to include questions on fever, nutrition, train Senegalese survey teams.	7/94	Kelly Lucas Sene									X	X	X	X	SHA Manual translated. Teams trained.	The WHO manual has been through a first translation. Survey teams have been trained and the field test is in progress. Edits to translation pending
6	<b>HEALTH FACILITIES SURVEY</b> Perform data collection, initial analysis, detailed analysis, and information dissemination.	7/94	Kelly Sene, Diop Manoncourt											X	X	Data collected and analyzed. Reports prepared. Dissemination conference.	Diop is preparing the input tables for analysis of the data. Data collection is in progress.

62

COUNTRY: MOZAMBIQUE YEAR: PROJECT YEAR 1  
 PROJECT: SHORT TERM TECHNICAL ASSISTANCE  
 COUNTRY/PROJECT CODE: 000 MZ 00  
 BEGIN/END DATES: April 25 to May 15, 1994

ACT#	ACTIVITIES	END DATE	KEY PERSONS	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>HEALTH SECTOR ASSESSMENT TEAM</b> USAID/Maputo has requested a team from BASICS assist long-range thinking on USAID support for child survival. BASICS will field a 5-person team.	5/15/94	Patterson Braun McGunnigle Barber-Madden Becker							X	X					Draft report identifying child survival and other health programming options for USAID.	Five-person team from BASICS conducted Health Sector review and produced report for USAID/Maputo.
2	<b>HEADQUARTERS SUPPORT</b> Recruitment of team, team planning meeting, document gathering and report editing.	6/15/94	Heise/ Tien							X	X	X				Successful completion of assignment.	No further activity is planned.

11

COUNTRY: ASIA REGION  
 PROJECT: PROGRAM DEVELOPMENT  
 COUNTRY/PROJECT CODE: 000-AN-00  
 BEGIN/END DATES: MARCH 1994 - SEPTEMBER 1996

YEAR: PROJECT YEAR 1

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of March 31, 1994	
1	<b>BANGLADESH CAP</b> Develop a country activity plan in Bangladesh to identify future technical assistance and support activities in child survival.	10/14/94	Simpson Fields Silimperi Rasmuson Johnson											X	X	CAP Document.	CAP TDY completed by team; draft CAP complete to be reviewed by BASICS/Dhaka and BASICS/DC in consultation with USAID and GOB.	
2	<b>BANGLADESH TRANSITION TO BASICS</b> Conduct initial evaluation of steps necessary to facilitate administrative and financial transition of country office to the BASICS Project.	7/21/94	Simpson Hufen Church												X	Trip report, staff, and office functioning under BASICS systems.	Staff was trained in BASICS systems and preliminary program planning was completed.	
3	<b>MOROCCO VII ASSESSMENT</b> Assess the successes and limitations of the Vaccine Independence Initiative in Morocco.	7/9/94	Woodle												X	Trip report.	Trip completed, draft trip report completed.	
4	<b>INDIA CAP</b> Develop a country activity plan in India to identify future technical assistance and support activities in child survival.	9/30/94	Simpson												X	X	CAP document.	Awaiting request from USAID.
5	<b>INDIA PLANNING VISIT</b> Develop child survival activities for India; hold discussions with representatives of USAID/ New Delhi regarding possible activities.	5/20/94	Simpson Northrup									X				Program plan.	Trip completed, proposed future work with the PVO II project under discussion with Mission.  Awaiting further details on assignment from the Delhi Mission.	
6	<b>INDONESIA PLANNING VISIT</b> Develop possible child survival activities for Indonesia; hold discussions with representatives of USAID/Jakarta regarding possible activities and implementation strategies.	5/31/94	Simpson Northrup									X				Program plan.	Trip completed and held in conjunction with visit by HealthCom project director Will Shaw. Program plan being drafted in coordination with discussions with USAID/Jakarta and BASICS staff.	
7	<b>HEADQUARTERS SUPPORT</b>	9/96	Simpson McGunnigle Hufen					X	X	X	X	X	X	X	X	Cluster meetings held, workplans/budgets produced.		

12

COUNTRY: NIGERIA  
 PROJECT: URBAN EPI  
 COUNTRY/PROJECT CODE: 000-NI-01  
 BEGIN/END DATES: APRIL 1 - SEPTEMBER 30, 1994

YEAR: PROJECT YEAR 1

02-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
8	<b>SERVICE SUPPORT</b> Provide limited operational support to LGAs to carry out EPI activities. Funding contingent upon establishment of LGA imprest accounts for EPI.	9/30/94	BASICS/ Lagos						R	X	X	X	X	X	X	Creation of LGA imprest accounts and release of governmental funds.	Support was discontinued as a result of U.S. Government decertification of Nigeria.
9	<b>PRIVATE SECTOR</b> Provide support for collaboration with private sector in EPI delivery. Funds will be used to assess and stimulate involvement. 2 studies and 1 TDY planned.	8/30/94	BASICS/ Lagos							X	X	X	X	X		Distribution of document demonstrating successes or failures of private sector collaboration.	Pilot activities discontinued due to civil unrest and decertification.
10	<b>ADMIN. ASSISTANCE</b> Conduct visit of Financial Associate in order to train staff on field accounting system. 1 TDY for 10 person-days planned.	6/30/94	Dandridge										X			Lagos/BASICS staff trained.	Visit not carried out due to country instability and uncertainty over future of BASICS involvement in Nigeria.
11	<b>HEADQUARTERS SUPPORT</b> Maintain headquarters support to program, including program, technical support visits, regular cluster meetings, and administrative oversight of project. 2 TDYs planned for a total of 20 person-days.	9/30/94	BASICS							X	X	X	X	X	X	Efficient office management and clear technical direction.	Cluster for Nigeria has been formed. Macauley visited Nigeria in March. New delivery order successfully negotiated. Planning meeting scheduled in Lagos for mid-October. Country advisor Ayodele to attend BASICS planning meeting in D.C. in October 1994.
12	<b>CAP PHASE II</b> Develop a country activity plan for expansion of urban EPI and other child survival interventions in Nigeria.	03/31/95	BASICS cluster													Approved multi-year plan for BASICS support for child survival in Nigeria.	Discussed CAP in December 1994 visit and received verbal approval. CAP called for in new delivery order. Timing to be determined during October planning visit.

KEY: R= REACH funded X= BASICS funded

KEY: R = REACH funded, X = BASICS funded

COUNTRY: LAC CHOLERA  
 PROGRAM: HEADQUARTERS MANAGEMENT  
 COUNTRY/PROGRAM CODE: 000-LC-03  
 BEGIN/END DATES: OCTOBER 1, 1993 - SEPTEMBER 30, 1994

YEAR: PROJECT YEAR 1

20-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of March 31, 1994
1	<b>HEADQUARTERS SUPPORT</b> Provide support for headquarters staff and consultants to carry out field activities, plan and coordinate technical strategies, review and distribute trip reports.	9/30/94	McCarthy O'Neill Shenk Sack Braun Salgado Jimerson Saade	X	X	X	X	X	X	X	X	X	X	X	X	Appropriate workplans, budgets, country plans, quarterly reports and cluster minutes.	Completed and ongoing. Cholera strategy revised 2-3 times and submitted to AID and LAC Bureau at end of PY1. Approval pending.
2	<b>REGIONAL ADVISOR</b> Provide support for field activities, coordinate activities with USAID Missions in Central America and other collaborating organizations.	9/30/94	Smith	X	X	X	X	X	X	X	X	X	X	X	X	Assure consistency between BASICS, other donors, and USAID bilateral efforts. Appropriate monthly reports.	Completed and ongoing. Monthly reports submitted.

7

COUNTRY: Burundi

YEAR: PROJECT YEAR 1

29-Dec-8

PROJECT: CDD/Dysentery

COUNTRY/PROJECT CODE:

BEGIN/END DATES: May 1, 1994 - September 30, 1994

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>PRELIMINARY ASSISTANCE</b> a. Conduct a planning mission to develop options for USAID/BJM to support under Burundi Health System Support Project (2 TDYs for 2 weeks).	April 30	Weierbach Lucas							X						Planning document for BASICS work in Burundi.	Planning Mission terminated early due to civil unrest in neighboring Rwanda following deaths of Rwandan and Burundian presidents. A trip report and preliminary plan were provided to USAID, but cannot be put into action because of effective shutdown of USAID/Bujumbura
2	<b>DEVLMT OF DYSENTERY TRAINING MATS.</b> 1. Develop and adapt training materials for: a. National Workshop/Briefing b. Training of Trainers for Clinical Mgt. c. Case Mgt. Training for Health Workers 2. Print materials developed for use in national and provincial case mgmt. training (700 seats) 3. Purchase additional training materials.	Aug. 1	Waldman Lucas								X	X	X			Burundi training materials.	Training materials have been drafted, they are currently pending completion following Lucas' return from Senegal  Training materials developed in US will be provided to WHO for future use in Burundi and elsewhere. BASICS has no immediate plans for additional activities.
3	<b>DYSENTERY TRNG WORKPLAN FINALIZATION</b> (TDY of Training Specialist and Training Logistics Specialist).	Aug. 15	TrainSpec Log. Spec														On hold. USAID/Bujumbura must re-initiate Mission activities before BASICS can provide support.
4	<b>NATL WORKSHOP/BRIEFING ON DYSENTERY</b> a. Select site and participants/prepare agenda and materials. b. Conduct TDYs to prepare site and local resources (2 TDYs of 10 days each; one prior and one during workshop/briefing). c. Conduct 3-day workshop/briefing with participants from Burundi and neighboring countries (25 participants, 5 facilitators).	July 29	Waldman Kabore WHO/BJM Train Spec Clin Train Spec Log. Spec.													50 people briefed.	On hold.
5	<b>TRAINING OF TRAINERS</b> Preparation June 29-July 2. Course 1 July 4-9. Course 2 July 11-16.	Aug. 30	Kabore WHO/BJM Clin Train Spec. Log. Spec.													20 trainers trained.	On hold.
6	<b>CLINICAL TRNG FOR SR. HEALTH OFCLS.</b> Course 1 TBD. Course 2 TBD.	Aug. 30	WHO/BJM Log. Spec Clin Train													20 officials trained.	On hold.
7	<b>PROVINCIAL TRAINING</b> In clinical case management of dysentery, cholera and watery diarrhea. Approximately 30 courses.	Sept. 30	Log Spec.  Trainers													600 health workers trained.	On hold.

COUNTRY: CENTRAL AMERICA  
 PROGRAM: CDD/CHOLERA (Short-Term)  
 COUNTRY/PROGRAM CODE: 000 LC 03 and 003 LC 03  
 BEGIN/END DATES: JANUARY 1 - SEPTEMBER 30, 1994

YEAR: PROJECT YEAR 1

20-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1-2	<b>CHOLERA ASSESSMENT EL SALVADOR/ CHOLERA ASSMNT NICARAGUA/HONDURAS</b> Evaluation of National Cholera Program in El Salvador, Honduras, and Nicaragua (3 one-week TDYs each Smith, McCarthy).	June	Sack, McCarthy, O'Neill, Smith						X	X	X	X				Assessment reports on national plans for three Central American countries.	Assessment undertaken in Honduras w/ EHP. Additional assessment anticipated for Ecuador; to date, no request from Missions for assessments in El Salvador and Nicaragua.
3-4	<b>PRIVATE SECTOR/FOLLOW UP PRIVATE SECTOR WORKSHOP</b> Private Sector Mobilization for Cholera: Plan and conduct a workshop for Central America HPNs and other donors. (1 two-week TDY each, Saade, Braun)	August	Saade, Braun							X	X	X				Workshop for 15 - 20 participants with increased awareness of private sector alternatives.	Plans being developed.
												X	X	X		Market assessments in selected Central American countries.	Not yet begun.

101

COUNTRY: FRANCOPHONE AFRICA

YEAR: PROJECT YEAR 1

PROJECT: REGIONAL OFFICE

COUNTRY/PROJECT CODE: 000 FA 01

BEGIN/END DATES: NOVEMBER 1, 1994 to SEPTEMBER 30, 1998

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>REGIONAL ADVISORS:</b> <ul style="list-style-type: none"> <li>Maintain salary and costs of Francophone Regional Advisor Adama Kone.</li> <li>Develop SOW for two additional Regional Advisors- an EPI Specialist and a Communications Specialist.</li> <li>Solicit approval and relocate the advisors to Senegal.</li> </ul>	8/31/94	Keith Dandridge Durgavich Kone	X	X	X	X	X	X	X	X	X	X	X	X	Workplans and reports produced, SOW developed, candidates identified & hired, advisors moved to Senegal.	Adama Kone at post, SOW completed and circulated for recruitment and comments; partial funding for positions approved. Candidates identified for IEC and MCH/EPI posts. Advisors will be hired on a consultant basis until necessary approvals are obtained so they can be hired as full-time staff.
1.a.	<b>PARTICIPATION IN REGIONAL/INTERNATIONAL CONFERENCES</b> <ul style="list-style-type: none"> <li>Attend TOT training course in Medical Education for CDD sponsored by WHO.</li> <li>Provide assistance to WHO in confirming dates for the October MedEd Workshop in Yaounde.</li> <li>Provide assistance to WHO in preparing workshop.</li> <li>Participate in the workshop in October.</li> </ul>		Kone Waldman					X						X	Participants confirmed.	Kone travelled to Mali and Niger in September and confirmed workshop candidates; conference scheduled for Oct/Nov in Yaounde.	
2	<b>FIELD OFFICE:</b> <ul style="list-style-type: none"> <li>Hire local fields staff for the Regional Office.</li> <li>Procure US and local equipment for office.</li> <li>Procure vehicle for office.</li> </ul>		Kone Dandridge Durgavich	X					X	X	X	X				Hired administrator and driver, office equipped, computer and vehicle shipped to Senegal.	Staff hired. Some equipment purchased, however the office continues to use rented computers and the office vehicle is scheduled to be turned over to SANAS.
3	<b>HEADQUARTERS SUPPORT:</b> Provide headquarters support for the Regional Office. Kone - training in EPI; training in ARI.		Blyth Durgavich Kone Taylor	X	X	X	X	X	X	X	X	X	X	X	X	Regional office need for Tech and Ops assistance are met.	Regular communications and backstopping of field office established. New OPs Officer identified. Taylor and Dandridge visited regional office in June field accounting system introduced and staff trained to use it; local procurement plan developed and personnel issues resolved at that time.

COUNTRY: Bolivia  
 PROGRAM: CDD/Cholera  
 COUNTRY/PROGRAM CODE: 000 BO 01/003 BO 01  
 BEGIN/END DATES: OCTOBER 1, 1993 - SEPTEMBER 30, 1994

YEAR: PROJECT YEAR 1

20-Dec

ACT #	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
0	<b>RESIDENT ADVISOR</b> Help plan BASICS activities w/Aguilar, USAID (1 one-week TDY, Smith).	November	Smith													SOW for various BASICS/Bolivia refined.	Completed.
1	<b>RESIDENT ADVISOR</b>																
	a. Provide technical assistance to national cholera campaign.	May	Aguilar													a. Reports on cholera campaign.	TA provided to develop educational material design training courses, and train TOT team from 12 health regions in standard case management.
	b. Provide technical support to national MCH program.	Sept.	Aguilar													b. Monthly reports.	Monthly reports prepared.
	c. Train Secretary of Health personnel in appropriate case management.	Sept.	Aguilar													c. Teams trained in all 12 health regions.	Teams trained in all 12 regions by 3/7/94.
	d. Review/revise PAHO medical school cholera/CDD curricula and prepare for post-September workshop.	Sept.	Aguilar													d. Curricula revised and submitted to PAHO.	Ongoing. Completion anticipated for 11/94.
2	<b>OFFICE SUPPORT</b> La Paz: Determine need for and purchase office furniture and equipment.		Aguilar, BASICS/W													Equipment/furniture purchased.	Moved into PY2 when office set-up is anticipated.
3	<b>SOCIAL COMMUN. MATERIALS REVIEW</b> In collaboration with UNICEF, review the effectiveness of the 1993-94 cholera campaign.	June/July	Aguilar, w/ Braun - TA (see below)													Receipts submitted.	Activity not undertaken due to timing conflict.
4	<b>PRINT EDUCATIONAL MATERIALS</b> Reproduce training materials used to standardize cholera/CDD norms with new Secretary of Health personnel.	May	Aguilar													Materials printed and available.	Completed.
5	<b>HOUSEHOLD SURVEYS</b> Conduct two household surveys in El Alto as follow up to baseline survey carried out prior to the cholera campaign, in order to measure the impact of the cholera/CDD campaign. Reflects costs for interviews, interviewers, supervisors, data entry, and analysis.	Sept.	Aguilar, Cordero													Report on survey results.	One completed in December 1994; second survey completed in April 1994. BASICS provided TA in collaboration with PAHO and UNICEF.
6	<b>MORTALITY SURVEY (ARI/CDD)</b> Conduct interviews and verbal autopsies with caretakers of children under five who have died to determine cause of death and barriers to care. Reflects cost of development of instruments and methodology.	Sept.	Aguilar, Cordero													Instruments and methodology developed.	Draft protocol prepared. To be discussed w/ BASICS/W during Oct. 1994 retreat.

COUNTRY: NIGER

YEAR: PROJECT YEAR 1

PROJECT: LONG-TERM CHILD SURVIVAL PROGRAM

COUNTRY/PROJECT CODE: 000-NG-01

BEGIN/END DATES: NOVEMBER 1, 1993 to SEPTEMBER 30, 1994

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of June 30, 1994
1	<b>CAP</b> Develop a country activity plan in Niger to identify future technical assistance and support activities in child survival (TDY: 4 persons X 3 weeks).	5/31/94	Keith Frere Kone Fields Weierbach								X					CAP developed.	Weirbach, Keith & Fields performed assessment. CAP drafted, not yet ready for distribution.
2	<b>REG ASSISTANCE</b> Conduct regional assistance to Niger, involving 2 TDYs for an average of 12 days each, in order to provide technical assistance to Niger's child survival program, and to provide technical oversight for Niger Country Advisor.	9/94	Kone						X						X	Trip reports completed.	March TDY completed.
3	<b>RESIDENT ADVISOR</b> Support and provide guidance to the MOH in its child survival program, including making field trips to provinces and assisting with supervision and planning.	9/94	Geslin					X	X	X	X	X	X	X	X	Monthly/quarterly reports.	Reports received regularly. A BASICS/MOH advisory committee has been formed and includes the program chiefs of the CDD, ARI, and malaria programs. The CA has also been a resource to the MOH in its effort to develop integrated supervisory tools/strategies.
4	<b>OFFICE SUPPORT</b> Complete the staffing of the local office by recruiting and hiring a bookkeeper and driver, and continue to maintain an office, including administrative reporting to BASICS/Washington.	9/94	Geslin							X	X	X	X	X	X	Hiring of personnel, financial reporting to HQ.	Driver currently on loan from the Malaria project. A bookkeeper is being recruited. A bookkeeper's training/orientation by Durgavich is envisioned.
5	<b>REGIONAL CDD SUPPORT</b> Conduct a training for regional CDD Coordinators, which would involve finalizing a CDD/ARI Health Facility Survey, and conducting a CDD/ARI Health Facility Workshop.	7/31/94	Kone/Geslin							X	X	X				HFS report finalized, workshop held, coordinators trained.	Pending. Niger HFS is to benefit from the experience of the Senegal HFS currently underway.
6	<b>TRAINING FOR DTU STAFF</b> Conduct a training for the staff of three DTUs, involving a 1-week TDY by the Senegal Country Advisor.	7/31/94	Sene Geslin												X	Establishment of 3 DTUs. Completed training and trip report distributed.	Pending. BASICS now envisions working with only two DTUs.
7	<b>HEADQUARTERS MANAGEMENT</b> Support from headquarters with operations staff and members of the Niger cluster. This includes 1 TDY by the Operations Officer to assist in developing the workplan, and 1 TDY by the Program Coordinator to introduce admin. and accounting systems.	Sept. 30	Keith Durgavich Molina				X	X	X	X	X	X	X	X	X	Cluster meetings held, annual workplan and regular reports produced, field staff trained in admin. accounting systems.	OPS Officer visit held. OPS Coordinator visit pending hiring of local staff.

COUNTRY: CENTRAL AMERICA

YEAR: PROJECT YEAR 1

20-Dec

PROGRAM: SUPPORT TO INCAP

COUNTRY/PROGRAM CODE: 002 LC 02 and 000 LC 02

BEGIN/END DATES: October 1, 1993 - September 30, 1994

ACT #	ACTIVITIES	END DATE	KEY PERSONS	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>REGIONAL SUPPORT</b> Provide support for field activities, coordinate activities with USAID/Guatemala and INCAP. (Regional Advisor .5 days/mo.)	1995	Smith													Assure consistency between BASICS and INCAP efforts.	Negotiations with USAID/Guatemala completed. Decision made to focus on strengthening the INC/ IISP program. Travel by BASICS LAC Regional Technical Advisor Smith with INCAP representative to El Salvador, Honduras, Nicaragua, and Panama planned for early October to meet with USAID Missions.
2	<b>HEADQUARTERS SUPPORT</b> Maintain headquarters support to program, including logistics and coordination of staff travel, review and distribution of trip reports, management of activities.	1995	McCarthy/ Shenk													Appropriate workplans, budgets, quarterly reports.	Fiscal Year 1994 workplan & budget developed. Quarterly reports written. Annual report written.

COUNTRY: SENEGAL

YEAR: PROJECT YEAR 1

PROJECT: SENEGAL COUNTRY PROGRAM

COUNTRY/PROJECT CODE: 000 SE 01

BEGIN/END DATES: NOVEMBER 1, 1993 - SEPTEMBER 30, 1998

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
7	<b>HEADQUARTERS MANAGEMENT</b> Support from headquarters with operations staff and members of the Senegal cluster. This includes 1 TDY by the Operations Officer to assist by providing oversight, and 1 TDY by the Program Coordinator to introduce administrative and accounting systems.  DHS Data Analysis Coordination w/SCS/FP Project Kick off Coordination Meeting Nutrition	9/98	Weierbach Taylor Dandridge Molina Durgavich  Kelly Frere				X	X	X	X	X	X	X	X	X	Cluster meetings held, annual workplan and regular reports produced, field staff trained in admin & accounting systems.	Weierbach visited program in Nov. 1993; discussed scope and timing of CAP and program in general. Buy-in RFP received in Nov. 1993, proposal prepared and submitted in Feb. 1994.  Country Advisor participated in 1st BASICS retreat in Washington D.C. in Jan. 1994.  Site visit conducted by Taylor/Dandridge. Field staff trained in admin and accounting systems. PY2 activities identified (see Taylor Report).

COUNTRY: NIS/VARIOUS		YEAR: PROJECT YEAR 1															
PROJECT: EPI Support																	
COUNTRY/PROJECT CODE: NS-01/KG-00/TJ-00/MD-00																	
BEGIN/END DATES: April 1 - September 30, 1994																	
ATV #	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>KYRGYZSTAN</b> Immunization Center Assistance: Advise on organization, staffing, and functions of new Center for Immunoprophylaxis & identify needs for training and T/A in KYRGYZSTAN; support initial implementation of natl EPI plan, assisting with detailed allocation of responsibilities, schedule of activities, and calculation of resource requirements (TDY: 1 person x 3 weeks).	5/12/94	Steinglass										X			Report, detailed plan of operations.	Report completed, support provided for Center for Immunoprophylaxis in Bishkek.
2	<b>TAJIKISTAN</b> Planning Exercise: Meet with MOH officials to introduce and promote immunization planning exercise in TAJIKISTAN, guide collection and analysis of needed data, conduct Mid-Level Managers' Course for central- and oblast-level health officers, and support and facilitate the planning process. Assess status of previously donated cold chain equipment & need for further TA. Follow up of planning exercise with advice on initial implementation of national plan (TDY: 1 person x 4 weeks).	5/31/94	Brown										X			Training completed, draft of national immunization plan, report on status of cold-chain equipment & T/A needs.	Training completed. National Immunization Plan drafted.
3	<b>TRANS-CAUCASUS</b> Planning Team: Participate as a member of USAID project planning team in Georgia, Armenia, and Azerbaijan determining needs and developing plans for future assistance to the Trans-Caucasus region; in Georgia, follow up on previous work (TDY: 1 person x 2 weeks).	7/15/94	Pond											X		Report on plans for future assistance.	Report completed. No future plans identified.
4	<b>UZBEKISTAN</b> Assist CDC with the design and implementation of national immunization days for the eradication of polio in Uzbekistan (TDY: 1 person x 4 weeks).	10/03/94	Wylie												X	Report on process and provide recommendations for the next round of NIDs.	Report completed. Recommendations for next round of NIDs provided.
5	<b>KAZAKHSTAN</b> EPI Assessment: Estimate requirements for vaccine and cold chain equipment, and identify and prioritize future technical assistance needs; prepare MOH officials for later training on vaccine procurement/ international tender & bid (TDY: 1 person x 2 weeks).	9/7/94	Larsen											X		Report with estimate of vaccine & equipment requirements.	Report completed.

28

COUNTRY: GUATEMALA

PROJECT YEAR 1

20-Dec-9

PROGRAM: SUPPORT TO ARI PROGRAM

COUNTRY/PROGRAM CODE: 000 GU 01 and Buy-in, Once Awarded

BEGIN/END DATES: October 1, 1993 - September 30, 1994

ACT #	ACTIVITIES	END DATE	KEY PERS	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>NATIONAL ARI WORKSHOP</b> Provide two ARI International experts to assist with "state of the art" national ARI Workshop to train health workers in four health areas (2 TDYs, 2 person-weeks).	July, 1994	TBN													Representatives from four health areas.	Workshop planned for early October; Dr. Antonic Pio and Dr. John Elder to assist as BASICS consultants.
2	<b>DESIGN OF ASSESSMENT INSTRUMENT</b> Design instrument to be used for the assessment of quality of care for pneumonia at the facility level. Field test instrument and adapt accordingly. (2 TDYs, 4 person-weeks).	June, 1994	Salgado/Smith													Assessment tool designed and field tested.	Assessment tool completed.
3	<b>IMPLEMENT/EVALUATION OF INSTRUMENT</b> Assist with field test of pneumonia control instrument developed and revised previously. Evaluate effectiveness of instrument. (6 TDYs, 6 person-weeks).	Sep, 1994	Salgado/Smith													Report analyzing area assessment results.	Assessment tool field tested and compared to WHO Health Facility Survey in Zacapa. Tool being used by all Clapp & Mayne regions. Report written.
4	<b>DEVELOPMENT OF COMMUNITY MESSAGES</b> Analyze findings of ethnographic studies, using results to develop health education messages and training materials. (2 TDYs, 4 person-weeks).	June, 1994	Jimerson													Targeted health education messages and materials developed.	BASICS consultant Patricio Barriga TDY to Guatemala to refine INCAP ethnography. Report on ARI ethnography in the highlands planned for November. Further follow up and development of health education messages planned for January.
5	<b>OPERATIONS RESEARCH PLAN</b> Develop Operations Research Plan to investigate key service delivery questions. Specific questions to be addressed will be based on needs of USAID/Guatemala. (1 TDY, 1 person-week).	1995	Burkhalter													Four operations research studies completed.	Physician prescribing practice study conducted b BASICS consultant Dr. John Elder in progress; results to be presented at the National ARI Workshop to take place in October. Report written.
6	<b>ANALYSIS OF ANTIBIOTICS SUPPLY</b> Document and analyze the availability in the private sector of antibiotics at community level. Study will cover four health areas. (2 TDYs, 4 person-weeks).	Aug, 1994	Saade													Report on availability of specified pharmaceuticals through non-MOH channels	Contact established with MSH Drug Management Project; bibliographic research begun.
7	<b>HEADQUARTERS SUPPORT</b> Provide support for headquarters staff and consultant to carry out field activities, plan and coordinate technical strategies, review and distribute trip reports. (1 TDY, 1 person-week).	1995	McCarthy/Salgado													Appropriate workplans, budgets, country plans, quarterly reports, and cluster minutes.	Ongoing. Delivery order response submitted to Contracts Office. Fiscal year 1994 budget and workplan completed; quarterly and annual reports written.
8	<b>REGIONAL SUPPORT</b> Provide support for field activities, coordinate activities with USAID/Guatemala and other collaborating organizations. (1 TDY, 1 person-week).	1995	Smith													Assure consistency between BASICS bilateral efforts.	Ongoing. Reports written.

68

## **Country Clusters and Working Groups**

COUNTRY: GUATEMALA  
 PROJECT: CDD/CHOLERA  
 COUNTRY/PROJECT CODE:  
 BEGIN/END DATES: JANUARY 1 - SEPTEMBER 30, 1994

YEAR: PROJECT YEAR 1

20-Dec-9

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>REGIONAL ASSISTANCE</b> Develop BASICS cholera/CDD strategy based on evaluation of national plan and discussions with AID bilateral contractor (1 one-week TDY each Smith, McCarthy, Sack)	May	Sack, Shenk O'Neill, Smith, McCarthy							X	X					Baseline data collected; initial fact-finding completed.	Smith TDY completed and information gathered. Sack/McCarthy TDY completed. Cholera strategy revised and submitted to AID and LAC Bureau at end of PY1.
2	<b>ASSESSMENT OF NATIONAL CHOLERA PLAN</b> Assessment of previous and current national cholera strategies with EHP and PAHO. Provide an evaluation for AID of effectiveness of previous interventions, identify potential AID contributions to current national cholera plan. (1 one-week TDY each for McCarthy, Sack).	June	Sack McCarthy									X				Evaluation of effectiveness of previous strategies and trip report.	Cholera plan assessment conducted in Guatemala w/EHP.
3	<b>IMPLEMENTATION OF DISTANCE EDUCATION</b> In collaboration with INCAP, develop a phased implementation plan for CDD/Cholera distance education materials. Activities include development of evaluation strategy, negotiation of agreement with Clapp & Mayne for first phase implementation. (2 one-week TDYs, Burkhalter, McCarthy, Sack, Shenk).	June	Burkhalter McCarthy Sack, Shenk									X				Evaluation strategy for distance education developed; subcontract with INCAP; agreement for implementation with Clapp & Mayne.	Burkhalter TDY completed to design baseline survey and evaluation. Purchase order with INCAP for design and conduct of baseline survey near completion at end of PY1.
4	<b>SUBCONTRACT FOR DISTANCE EDUCATION</b> Subcontract covering personnel costs, contractual services, supplies, operating expenses, travel, and transportation related to first phase implementation of distance education materials.	July	McCarthy									X	X			Implementation of first phase of distance education.	Activity postponed until PY2.
5	<b>EVALUATION OF CHW MATERIALS</b> Evaluation of Community Health Worker materials for Cholera/Diarrhea disease field tested in two areas prior to nationwide application. (1 two-week TDY, Jimerson).	June	Jimerson McCarthy									X				Evaluation results.	Jimerson no longer with project; no BASICS IEC Officer available for assignment. Cholera strategy revised and this activity not seen as priority.
6	<b>HEADQUARTERS SUPPORT</b> Provide support to BASICS consultants and field staff. Develop workplans and budgets, communicate with USAID/Guatemala, coordinate activities with other donors and CAs as necessary.	Sept.	McCarthy, O'Neill, Sack, Salgado, Braun, Saade, Jimerson, Shenk	X	X	X	X	X	X	X	X	X	X	X	X	Provide support to Central America regional advisor B. Smith, and to Guatemala activities.	Completed and ongoing into PY2.

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Not applicable																
Country/Regional Programs																
Africa	1,708.0	687.0	771.0	3,366.0	1,201.9	367.3	232.8	1,802.1	506.1	29.6%	519.7	58.6%	538.2	69.8%	1,563.9	46.5%
Asia	108.5	0.0	0.0	108.5	2.0	0.0	0.0	2.0	106.5	98.2%	0.0	0.0%	0.0	0.0%	106.5	98.2%
Latin America/Caribbean	378.0	24.0	144.5	546.5	435.5	42.4	60.3	538.3	-59.5	-15.8%	-18.4	-76.8%	84.2	58.3%	6.2	1.1%
Newly Independent States	0.0	1,786.0	190.0	1,976.0	0.0	433.7	0.0	433.7	0.0	0.0%	1,352.3	75.7%	190.0	100.0%	1,542.3	78.1%
Program Sub Total:	2,192.5	2,697.0	1,105.5	6,096.0	1,639.4	843.4	293.1	2,776.0	863.0	26.2%	1,863.0	68.7%	812.4	73.8%	3,219.0	83.7%
Technical Quality Assurance	801.0	1.0	0.0	802.0	315.5	0.0	0.0	315.5	485.5	60.6%	1.0	100.0%	0.0	0.0%	486.5	60.7%
Information Dissemination	702.0	0.0	0.0	702.0	533.4	0.0	0.0	533.4	168.6	24.0%	0.0	0.0%	0.0	0.0%	168.6	24.0%
Conference/Workshops	0.0	0.0	0.0	0.0	57.9	0.0	0.0	57.9	-57.9	0.0%	0.0	0.0%	0.0	0.0%	-57.9	0.0%
Evaluation & MIS	546.0	0.0	0.0	546.0	240.8	0.0	0.0	240.8	305.2	55.9%	0.0	0.0%	0.0	0.0%	305.2	55.9%
Program Management	3,596.0	0.0	0.0	3,596.0	2,482.3	0.0	0.0	2,482.3	1,113.7	31.0%	0.0	0.0%	0.0	0.0%	1,113.7	31.0%
Start-up Costs	0.0	0.0	0.0	0.0	1,661.3	0.0	0.0	1,661.3	-1,661.3	0.0%	0.0	0.0%	0.0	0.0%	-1,661.3	0.0%
Not applicable Sub Total:	7,837.6	2,698.0	1,106.0	11,641.6	6,938.7	843.4	293.1	8,075.3	908.8	11.8%	1,864.0	68.7%	812.4	73.8%	3,673.0	38.7%
Grand Total:	19,813.6	3,278.0	3,286.6	17,286.6	8,004.8	893.7	316.3	9,314.4	2,898.6	26.0%	2,284.3	69.7%	2,898.8	98.1%	7,981.6	46.1%

4/6

COUNTRY: Bolivia  
 PROGRAM: CDD/Cholera  
 COUNTRY/PROGRAM CODE: 000 BO 01/003 BO 01  
 BEGIN/END DATES: OCTOBER 1, 1993 - SEPTEMBER 30, 1994

YEAR: PROJECT YEAR 1

ACT #	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
7	<b>CHOLERA TRAINING FOLLOW UP</b> In two phases, follow up and evaluate the cholera training to determine the effectiveness of TOTs in the standardization of norms for health personnel.	Sept.	Aguilar, Cordero													Follow-on training conducted. KAP study completed.	Partially completed. Delayed due to SOH priority on other campaigns. Activity is being continued in PY2.
8	<b>PRIVATE SECTOR COMMER.</b> Provide technical assistance to analyze the possible contributions of the private sector towards improving the availability of ORS.	April	Saade													Trip report prepared including recommendations for potential BASICS activities.	Saade travel to Bolivia in April 1994. Commercial market assessed; private sector capabilities assessed; potential private sector partners identified and approached. Activity to be continued in PY2.
9	<b>CHOLERA CAMPAIGN MATERIALS REVIEW</b> In collaboration with PAHO and UNICEF, provide technical assistance to review the effectiveness of the materials used in the 1993-94 Cholera Campaign, and of the communications strategy used (one three-week TDY, Braun).	June	Braun													Trip report prepared including evaluation written on effectiveness of cholera campaign materials.	Activity not undertaken due to timing conflict.
10	<b>BASICS PLANNING</b> Assess the current cholera/CDD situation in Bolivia; propose strategies for improving availability of ORT and case management of diarrheal disease.	March	McCarthy, Sack													Trip report.	McCarthy/Sack staff traveled to Bolivia in March and assessed cholera/CDD situation.
11	<b>CAP</b> (8 three-week TDYs).	July	McCarthy O'Neill Salgado Smith Four TBDs													CAP developed for BASICS/Bolivia activities.	Undertaken in series of visits: March/April cholera/CDD and ORS visits, April TDY by Salgado for ARI planning, and May TDY by Smith, Jimerson, O'Neill for proposal development, including IEC and health sector reform. CAP completion anticipated in early PY2.
12	<b>INTERNAL TECHNICAL ASSISTANCE</b> Provide technical support to implementation of BASICS cholera activities (includes 15 in-country trips related to activities), and implementation of ARI and CAP activities.	Sept.	Cordero													Technical assistance provided under the direction of Aguilar. Monthly reports prepared.	Completed. Status provided in monthly reports.
13	<b>HEADQUARTERS SUPPORT</b> Provide support to BASICS/Bolivia representative and program. Develop workplans and communicate with USAID/La Paz, coordinate activities with other donors and CAs as necessary.	Sept.	McCarthy O'Neill Shenk Bolivia Cluster													Responses to Aguilar/Cordero monthly reports. Workplans/budgets developed.	Workplan and budget developed. Regular communications ongoing. Responded to PIO/T signed 9/30/94.

# **Requests to USAID Office of Procurement**

COUNTRY: LAC REGION  
 PROGRAM: REGIONAL OFFICE  
 COUNTRY/PROGRAM CODE: 000-LC-01  
 BEGIN/END DATES: OCTOBER 1, 1993 - SEPTEMBER 30, 1994

YEAR: PROJECT YEAR 1

20-Dec

ACT#	ACTIVITIES	END DATE	KEY PERSON	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>REGIONAL SUPPORT</b> Provide technical assistance as needed to USAID Missions in Latin America; coordinate and supervise country programs, oversee regional office; assist headquarters in planning regional strategies. Assist with child survival program identification and development in Latin America and the Caribbean. Activities will include, but not be restricted to, the following responses to LAC Missions for short-term tech assistance: consultation with WHO (1 TDY, 2 person-weeks), coordination with BASICS headquarters (1 TDY, 1 person-week) and country programs.	Sep. 1995	Smith													Monthly reports, trip reports.	Ongoing. TDY to Peru in November provided technical assistance for analysis of Health Facility Survey. TDYs to BASICS/W for team-building exercise in January; to Geneva to attend WHO EPI/CDD/ARI in April; to BASICS/W for regional project planning in April; to Tegucigalpa in June and August for program development; and to Guatemala in July for program planning with project CTO were all carried out.
2	<b>FIELD OFFICE COSTS</b> Rent office and hire part-time assistant to provide administrative support for Regional Advisor and regional activities; purchase necessary equipment, supplies, utilities, and rentals. Assist with production of reports, maintain communication with Headquarters Office staff. Lay groundwork for establishment of Regional Office (1 TDY, 1 person-week).	Sep. 1995														Monthly financial/administrative reports.	Field office established in La Ceiba, Honduras. Administrative staff recruited and hired. Office furniture and generator purchased. Bank account opened. Administrative staff to be trained in the use of BASICS financial systems in November.
3	<b>HEADQUARTERS MANAGEMENT</b> Provide administrative and logistics support to regional office, review and distribute trip reports, facilitate communications between regional advisor and headquarters staff.	Sep. 1995	McCarthy Shenk													Appropriate workplans, budgets, and quarterly reports.	Ongoing. Fiscal Year 1994 workplan and budget developed. Quarterly and annual reports written.

69

**BASICS Country Clusters**  
**PY1: October 1, 1993 - September 30, 1994**

<b>Bangladesh</b>	<b>Bolivia</b>	<b>Eritrea</b>	<b>Ethiopia</b>	<b>Guatemala</b>
Bob Simpson	Ana Maria Aguilar	Glenn Patterson	Bob Pond	Bart Burkhalter
Connie Church	Barry Smith	Jennifer Taylor	Diana Silimperi	Barry Smith
Diana Silimperi	Connie Church	Ken Heise	Eckhard Kleinau	Carrie O'Neill
Eckhard Kleinau	Carrie O'Neill	Marie Tien	Glenn Patterson	Camille Saadé
Glenn Patterson	Camille Saadé	Paultre Desrosiers	Jennifer Taylor	David McCarthy
Mark Hufen	David McCarthy	Paul Freund	Ken Heise	Eckhard Kleinau
Michael McGunnigle	Diana Silimperi	Pat Taylor	Marie Tien	Glenn Patterson
Mark Rasmuson	Eckhard Kleinau	Robin Steinwand	Paultre Desrosiers	Jean Asam
Paultre Desrosiers	Glenn Patterson		Paul Freund	John Murray
Pat Taylor	John Murray		Pat Taylor	Paultre Desrosiers
Rebecca Fields	Paultre Desrosiers		Rose Macauley	Pat Taylor
Rob Northrup	Pat Taylor		Robert Steinglass	René Salgado
Ron Waldman	René Salgado		Robin Steinwand	Ron Waldman
	Ron Waldman		Ron Waldman	Todd Shenk
	Todd Shenk			

<b>Haiti</b>	<b>Honduras</b>	<b>India</b>	<b>Indonesia</b>	<b>Madagascar</b>
Bronte Ward	Barry Smith	Bart Burkhalter	Bob Simpson	Carrie O'Neill
Carrie O'Neill	Carrie O'Neill	Bob Simpson	Camille Saadé	Camille Saadé
David McCarthy	David McCarthy	Carolyn Hairston	Diana Silimperi	Eckhard Kleinau
Eckhard Kleinau	Eckhard Kleinau	Camille Saadé	Eckhard Kleinau	Glenn Patterson
Glenn Patterson	Glenn Patterson	Diana Silimperi	Glenn Patterson	Jean-Jacques Frère
John Murray	Paultre Desrosiers	Glenn Patterson	Jean-Jacques Frère	John Murray
John Yanulis	Pat Taylor	Judy Yang	Keith Thornburg	Jennifer Taylor
Luca Spinelli	René Salgado	John Yanulis	Mark Hufen	John Yanulis
Mark Rasmuson	Ron Waldman	Mark Hufen	Michael McGunnigle	Karen Blyth
Nancy Keith	Todd Shenk	Michael McGunnigle	Mark Rasmuson	Ken Heise
Paultre Desrosiers		Mark Rasmuson	Rob Northrup	Marie Tien
Pat Kelly		Pat Taylor	Robert Steinglass	Paultre Desrosiers
Pat Taylor		Rob Northrup		Pat Taylor
Rebecca Fields		René Salgado		Robin Jones
René Salgado		Ron Waldman		René Salgado
Ron Waldman				Robin Steinwand
Todd Shenk				Ron Waldman

COUNTRY: GUATEMALA

PROJECT YEAR 1

20-Dec-9

PROGRAM: SUPPORT TO ARI PROGRAM

COUNTRY/PROGRAM CODE: 000 GU 01 and Buy-in, Once Awarded

BEGIN/END DATES: October 1, 1993 - September 30, 1994

ACT #	ACTIVITIES	END DATE	KEY PERS	O	N	D	J	F	M	A	M	J	J	A	S	EXPECTED OUTPUTS	Status as of September 30, 1994
1	<b>NATIONAL ARI WORKSHOP</b> Provide two ARI International experts to assist with "state of the art" national ARI Workshop to train health workers in four health areas (2 TDYs, 2 person-weeks).	July, 1994	TBN													Representatives from four health areas.	Workshop planned for early October; Dr. Antonio Pio and Dr. John Elder to assist as BASICS consultants.
2	<b>DESIGN OF ASSESSMENT INSTRUMENT</b> Design instrument to be used for the assessment of quality of care for pneumonia at the facility level. Field test instrument and adapt accordingly. (2 TDYs, 4 person-weeks).	June, 1994	Salgado/Smith													Assessment tool designed and field tested.	Assessment tool completed.
3	<b>IMPLEMENT/EVALUATION OF INSTRUMENT</b> Assist with field test of pneumonia control instrument developed and revised previously. Evaluate effectiveness of instrument. (6 TDYs, 6 person-weeks).	Sep, 1994	Salgado/Smith													Report analyzing area assessment results.	Assessment tool field tested and compared to WHO Health Facility Survey in Zacapa. Tool being used by all Clapp & Mayne regions. Report written.
4	<b>DEVELOPMENT OF COMMUNITY MESSAGES</b> Analyze findings of ethnographic studies, using results to develop health education messages and training materials. (2 TDYs, 4 person-weeks).	June, 1994	Jimerson													Targeted health education messages and materials developed.	BASICS consultant Patricio Barriga TDY to Guatemala to refine INCAP ethnography. Report on ARI ethnography in the highlands planned for November. Further follow up and development of health education messages planned for January.
5	<b>OPERATIONS RESEARCH PLAN</b> Develop Operations Research Plan to investigate key service delivery questions. Specific questions to be addressed will be based on needs of USAID/Guatemala. (1 TDY, 1 person-week).	1995	Burkhalter													Four operations research studies completed.	Physician prescribing practice study conducted by BASICS consultant Dr. John Elder in progress; results to be presented at the National ARI Workshop to take place in October. Report written.
6	<b>ANALYSIS OF ANTIBIOTICS SUPPLY</b> Document and analyze the availability in the private sector of antibiotics at community level. Study will cover four health areas. (2 TDYs, 4 person-weeks).	Aug, 1994	Saade													Report on availability of specified pharmaceuticals through non-MOH channels	Contact established with MSH Drug Management Project; bibliographic research begun.
7	<b>HEADQUARTERS SUPPORT</b> Provide support for headquarters staff and consultant to carry out field activities, plan and coordinate technical strategies, review and distribute trip reports. (1 TDY, 1 person-week).	1995	McCarthy/Salgado													Appropriate workplans, budgets, country plans, quarterly reports, and cluster minutes.	Ongoing. Delivery order response submitted to Contracts Office. Fiscal year 1994 budget and workplan completed; quarterly and annual reports written.
8	<b>REGIONAL SUPPORT</b> Provide support for field activities, coordinate activities with USAID/Guatemala and other collaborating organizations. (1 TDY, 1 person-week).	1995	Smith													Assure consistency between BASICS bilateral efforts.	Ongoing. Reports written.

# WORKING GROUPS

PUBLIC/PRIVATE SECTOR	INTEGRATED CASE MANAGEMENT	BEHAVIOR CHANGE
<p><b>CO-CHAIRS</b> Jean-Jacques Frere Rob Northrup</p> <p><b>MEMBERS</b> Bart Burkhalter Rebecca Fields Dana Inerfeld Eckhard Kleinau Rob Northrup Camille Saade Todd Shenk Bob Simpson Marie Tien Karen White John Yanulis</p>	<p><b>CO-CHAIRS</b> Bob Pond Diana Silimperi</p> <p><b>MEMBERS</b> Karen Blyth Paultre Desrosiers Dana Inerfeld Nancy Keith Susan Livinski Rose Macauley Michael McGunnigle John Murray Rob Northrup Rene Salgado Ron Waldman Lyndon Brown</p>	<p><b>CHAIR</b> Mark Rasmuson</p> <p><b>MEMBERS</b> Alex Alferieff Bart Burkhalter Hope Casper Paultre Desrosiers Paul Freund Judy Graeff Nancy Keith David McCarthy John Murray Rene Salgado Tonya Smith John Yanulis</p>
MONITORING AND EVALUATION	SUSTAINABILITY OF VACCINATION PROGRAMS	
<p><b>CO-CHAIR</b> Eckhard Kleinau John Murray</p> <p><b>MEMBERS</b> Bart Burkhalter Ken Heise Pat Kelly John Murray Rob Northrup Carrie O'Neill Bob Pond Mark Rasmuson Rene Salgado Tim Schoepke Robert Steinglass</p>	<p><b>CO-CHAIRS</b> Rebecca Fields Robert Steinglass</p> <p><b>MEMBERS</b> Karen Blyth John Durgavich Jean-Jacques Frere Rose Macauley Camille Saade Diana Silimperi Ron Waldman Alan Yost Lyndon Brown Karen Blyth Ken Heise Bob Simpson</p>	<p><b>Nutrition Task Force</b></p> <p>Bart Burkhalter Lyndon Brown Dana Inerfeld Nancy Keith Rob Northrup Mark Rasmuson Pat Taylor</p>

AP 1

#	REQUEST DESCRIPTION	DATE SENT	DATE RECEIVED	DAYS TO RESPOND	NOTES
82	Initial Salary and Substitution- Key Personnel	09/30/94	11/04/94	35	Approved
81	Initial Salary - STTA (1)	09/30/94	11/04/94	35	Approved
80	Initial Salary - STTA (1)	09/27/94	11/04/94	38	Approved
79	Initial Salary - STTA (1)	09/14/94			Pending
78	Initial Salary - Delivery Order Personnel/Consultants	09/14/94			Pending
77	Initial Salary - Non-Key Personnel (1)	09/12/94	11/04/94	53	Approved
76	Consultant Salary Increase	09/09/94	10/04/94	25	Approved
75	Initial Salary - Non-Key Personnel (1)	09/07/94	09/14/94	7	Approved
74	Key Personnel Substitution and Initial Salary	09/02/94	09/14/94	12	Approved
73	Initial Salary - STTA (1)	08/30/94	09/14/94	15	Approved
72	Initial Salary - Non-Key Personnel (1)	08/29/94	08/30/94	1	Approved
71	Initial Salary - STTA (1)	08/24/94	11/04/94	72	Approved at reduced rate
70	Initial Salary - Non Key Personnel	08/18/94	09/19/94	32	Approved
69	Initial Salary - STTA (1)	08/18/94			Pending
68	Initial Salary - STTA (2)	08/18/94	08/29/94	11	Approved
67	Initial Salary - Non Key Personnel	08/16/94	08/29/94	13	Approved
66	Key Personnel Substitution and Initial Salary	08/15/94	08/30/94	15	Approved Reduced Rate/Sent Additional Information
65	Initial Salary Increase - STTA (1)	08/09/94	08/26/94	17	Approved
64	Non-Expendable Equipment (Telephone System)	08/08/94	08/26/94	18	Approved
63	Non-Expendable Equipment (\$676,100 Subset July)	08/03/94			Pending Complete Request Approved 8/29
62	Non-Expendable Equipment (\$19K) Senegal Field	07/29/94	09/09/94	42	Approved
61	Initial Salary Approval - STTA (3)	07/29/94	08/04/94	6	Approved
60	Increases > 5.5%	07/27/94			Pending Additional Information Submitted 9/30
59	FSN Increase - Locality Pay Adjustment	07/27/94	08/26/94	30	Denied
58	Initial Salary Approval - Key Personnel	07/18/94	08/04/94	17	Approved
57	Initial Salary Approval - STTA (4)	07/18/94	08/04/94	17	Approved
56	Initial Salary Approval - STTA (2)	07/18/94	08/04/94	17	Approved
55	Initial Salary Approval - Non-Key Personnel	07/18/94	08/30/94	43	Approved
54	Initial Salary Approval - Non-Key Personnel	07/11/94	08/30/94	50	Approved
53	Non-Expendable Equipment (\$1.3 million computers)	07/08/94	09/29/94	83	Approved
52	Initial Salary Approval and Substution	07/08/94	08/30/94	53	Approved
51	Initial Salary Approval - STTA	07/07/94	08/30/94	54	Approved
50	Initial Salary Approval - STTA (2)	06/27/94	08/29/94	63	Approved
49	Initial Salary Approval - STTA (34)	06/27/94	09/13/94	64	Approved Except to In-Country Staff/Submitting Additional Info
48	Initial Salary Approval - STTA	06/27/94	07/27/94	30	Approved
47	Consultant Salary Increase	06/17/94	08/04/94	48	Approved
46	Initial Salary Approval - STTA (6)	06/17/94	08/04/94	48	Approved
45	Initial Salary Approval - STTA (45)	05/31/94	09/12/94	104	Approved
44	Initial Salary Approval - STTA	05/31/94	09/13/94	91	Approved
43	Initial Salary Approval - STTA	05/27/94	08/30/94	95	Approved
42	Initial Salary Approval - STTA	05/19/94	08/30/94	103	Approved
41	Initial Salary Approval - STTA	05/19/94	08/30/94	103	Approved
40	Annual Salary Increase	05/19/94	08/30/94	103	Approved
39	Promotional Increase	05/13/94	08/30/94	109	Approved
38	Personnel Substution -Jimerson/Versoza	05/12/94			Pending Sent Additional Info 6/17

Note: List does not include Delivery Order Submissions

93

**BASICS Country Clusters**  
**PY1: October 1, 1993 - September 30, 1994**

<b>Mali</b>	<b>Niger</b>	<b>Nigeria</b>	<b>Senegal</b>	<b>Zambia</b>
Adama Kone	Adama Kone	Bob Pond	Adama Kone	Carrie O'Neill
Diane English	Eckhard Kleinau	Carolyn Hairston	Camille Saadé	Camille Saadé
Eckhard Kleinau	Glenn Patterson	Diane English	Dana Inerfeld	Eckhard Kleinau
Glenn Patterson	John Durgavich	Diana Silimperi	Delphine Tyson	Glenn Patterson
John Durgavich	Jean-Jacques Frère	Eckhard Kleinau	Eckhard Kleinau	Jean-Jacques Frère
Jean-Jacques Frère	José Molina	Glenn Patterson	Glenn Patterson	John Murray
José Molina	John Murray	John Olu Ayodele	John Durgavich	Jennifer Taylor
John Murray	Karen Blyth	John Durgavich	José Molina	John Yanulis
Karen Blyth	Nancy Keith	Jennifer Taylor	John Murray	Karen Blyth
Nancy Keith	Paultre Desrosiers	Ken Heise	Karen Blyth	Ken Heise
Paultre Desrosiers	Pat Taylor	Pat Taylor	Mamadou Sène	Marie Tien
Pat Kelly	Rebecca Fields	Rebecca Fields	Paultre Desrosiers	Paultre Desrosiers
Rebecca Fields	Ron Waldman	Rose Macauley	Pat Kelly	Pat Taylor
Rose Macauley		Robert Steinglass	Ron Waldman	Robin Jones
Ron Waldman		Robin Steinwand	Pat Taylor	René Salgado
		Ron Waldman		Robin Steinwand
				Ron Waldman

# **Management Information Report (MIR)**

as

## **MANAGEMENT INFORMATION REPORT SUMMARY TABLES**

**The following are the tables from Project Year 1, from October 1, 1993 to September 30, 1994.**

**LOE stands for Level of Effort in Person Days.**

#	REQUEST DESCRIPTION	DATE	DATE	DAYS TO	NOTES
		SENT	RECEIVED	RESPOND	
37	Consultant Rate Approval - FS1 Waiver	05/06/94	07/15/94	70	Approved
36	Initial Salary Approval-STTA	04/26/94	05/10/94	14	Approved
35	Initial Salary Approval-Non-Key Personnel	04/20/94	05/10/94	20	Approved
34	Initial Salary Approval-Non-Key Personnel Revised	04/12/94	05/10/94	28	Approved Reduced Rate
33	Initial Salary Approval - STTA	04/06/94	05/10/94	34	Approved
32	Initial Salary Approval - STTA	04/06/94	05/10/94	34	Approved
31	Initial Salary Approval - Ammendement to 3/15/94	04/04/94	05/10/94	36	Approved
30	Initial Salary Approval - STTA (5)	03/31/94	05/10/94	40	Approved
29	Initial Salary Approval - Temporary Country Officer	03/29/94	04/12/94	14	Approved
28	Initial Salary Approval - Non-Key Personnel	03/18/94	05/10/94	53	Approved
27	Initial Salary Approval - Non-Key Personnel	03/17/94	04/07/94	21	Approved
26	Initial Salary Approval - Non-Key Personnel	03/15/94	04/12/94	28	Approved
25	Initial Salary Approvals (Resubmittal non-key 12/9/93)	03/15/94	05/10/94	56	Approved
24	Initial Salary Approval - Ammendement to 11/1/93	03/14/94	05/10/94	57	Approved
23	Initial Salary Approval	03/08/94	04/12/94	35	Approved
22	Office Lease Concurrence	02/24/94	03/02/94	1	Concurrence Granted
21	FFP Subcontract > \$25K Approval	02/16/94	02/28/94	12	Approval
20	Initial Salary Approval - FS1 Waiver	02/08/94	05/10/94	91	Approved
19	Initial Salary Approval - FS1 Waiver	02/08/94	07/15/94	157	Approved
18	Consultant Rate Increase	02/08/94	03/09/94	28	Approved reduced amount
17	FFP Subcontract > \$25K Approval	02/08/94	02/28/94	20	Approved
16	Non-Expendable Equipment (90K)	01/26/94	02/18/94	22	Approved
15	Initial Salary Approval	01/24/94	01/28/94	4	Approved
14	Non-Expendable Equipment (272K)	01/24/94	02/18/94	24	Approved
13	Initial Salary Approval (3)	01/21/94	05/10/94	109	Approved
12	Initial Salary Approval - Non Key Personnel	01/18/94	05/10/94	112	Approved
11	Approval for Pre-Subcontract Letter	12/29/93	03/09/94	69	Approved
10	Initial Salary Approval - STTA (3)	12/20/93	01/27/94	30	Approved
9	Initial Salary Approval - Resubmittal 10/21	12/20/93	01/12/94	18	Denied
8	Initial Salary Approvals - STTA	12/09/93	01/05/94	19	Approved
7	Non-Expendable Equipment > \$25,000	11/18/93	01/27/94	62	Approved
6	Consultant Rate Approval	11/16/93	12/03/93	13	Denied
5	Initial Salary Approval - Resubmittal 10/21	11/16/93	12/03/93	13	Approved
4	Salary Increase from BAFO - Key Personnel	11/01/93	12/08/93	29	Denied
3	Initial Salary Approvals - Non-Key (21)	11/01/93	12/03/93	28	Approved, reduced several
2	Approval for Pre-Subcontract Letters	10/22/93	11/03/93	7	Approved
1	Initial Salary Approvals - Non-Key (13)	10/21/93	11/03/93	8	Approved, reduced several

Note: List does not include Delivery Order Submissions

# BASICs FINANCIAL SUMMARY

06-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>I. Country/Regional Programs</b>																
A. Africa	\$1,820,466.00	\$1,139,876.00	\$761,409.00	\$3,721,751.00	\$1,017,542.07	\$605,302.78	\$174,450.33	\$1,797,295.18	\$802,923.93	44.1%	\$534,573.22	46.9%	\$586,958.67	77.1%	\$1,924,455.82	51.7%
B. Asia	\$947,017.00	\$113,512.00	\$1,948,434.00	\$3,008,963.00	\$309,380.14	\$62,261.55	\$0.00	\$371,641.69	\$637,636.86	67.3%	\$51,250.45	45.1%	\$1,948,434.00	100.0%	\$2,637,321.31	87.6%
C. Latin America/Caribbean	\$525,742.00	\$107,434.00	\$390,975.00	\$1,024,151.00	\$377,530.02	\$81,435.73	\$69,160.82	\$528,126.57	\$148,211.98	28.2%	\$25,998.27	24.2%	\$321,814.18	82.3%	\$498,024.43	48.4%
D. Newly Independent States	\$0.00	\$879,900.00	\$2,059,437.00	\$2,939,337.00	\$0.00	\$225,377.61	\$0.00	\$225,377.61	\$0.00	0.0%	\$654,522.39	74.4%	\$2,059,437.00	100.0%	\$2,713,959.39	92.3%
E. Interregional	\$0.00	\$85,088.00	\$0.00	\$85,088.00	\$0.00	\$46,293.50	\$0.00	\$46,293.50	\$0.00	0.0%	\$38,794.50	45.6%	\$0.00	0.0%	\$38,794.50	45.6%
<b>Sub Total:</b>	<b>\$3,293,225.00</b>	<b>\$2,326,810.00</b>	<b>\$8,180,288.00</b>	<b>10,779,299.00</b>	<b>\$1,704,462.23</b>	<b>\$1,020,671.18</b>	<b>\$243,611.16</b>	<b>\$2,968,734.66</b>	<b>\$1,889,772.77</b>	<b>48.2%</b>	<b>\$1,308,138.82</b>	<b>66.1%</b>	<b>\$4,918,643.86</b>	<b>88.3%</b>	<b>\$7,810,866.44</b>	<b>72.6%</b>
<b>II. Technical Quality Assurance</b>	<b>\$1,343,251.00</b>	<b>\$1,067.00</b>	<b>\$0.00</b>	<b>\$1,344,318.00</b>	<b>\$561,484.41</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$561,484.41</b>	<b>\$781,766.59</b>	<b>58.2%</b>	<b>\$1,067.00</b>	<b>100.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$782,833.59</b>	<b>58.2%</b>
<b>III. Information Dissemination</b>	<b>\$276,373.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$276,373.00</b>	<b>\$219,269.90</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$219,269.90</b>	<b>\$57,103.10</b>	<b>20.7%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$57,103.10</b>	<b>20.7%</b>
<b>IV. Conference/Workshops</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$103,991.64</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$103,991.64</b>	<b>(\$103,991.64)</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$103,991.64)</b>	<b>0.0%</b>
<b>V. Evaluation &amp; MIS</b>	<b>\$1,141,980.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$1,141,980.00</b>	<b>\$375,665.78</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$375,665.78</b>	<b>\$766,294.22</b>	<b>67.1%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$766,294.22</b>	<b>67.1%</b>
<b>VI. Program Management</b>	<b>\$2,753,698.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$2,753,698.00</b>	<b>\$2,834,090.12</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$2,834,090.12</b>	<b>(\$80,392.12)</b>	<b>-2.9%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$80,392.12)</b>	<b>-2.9%</b>
<b>VII. Start-up Costs</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$1,160,058.21</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$1,160,058.21</b>	<b>(\$1,160,058.21)</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$1,160,058.21)</b>	<b>0.0%</b>
<b>Grand Total:</b>	<b>\$8,808,887.00</b>	<b>\$2,326,877.00</b>	<b>\$8,180,288.00</b>	<b>10,298,639.00</b>	<b>\$6,889,812.28</b>	<b>\$1,020,671.18</b>	<b>\$243,611.16</b>	<b>\$8,223,294.61</b>	<b>\$1,849,494.72</b>	<b>21.0%</b>	<b>\$1,308,206.82</b>	<b>66.1%</b>	<b>\$4,918,643.86</b>	<b>88.3%</b>	<b>\$8,072,344.39</b>	<b>49.6%</b>

98

# FINANCIAL SUMMARY BY BASICS ACTIVITY

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>HQ Support</b>																
Country/Regional Programs																
Africa	\$452,355.86	\$37,202.43	\$0.00	\$489,558.29	\$277,620.97	\$0.00	\$0.00	\$277,620.97	\$174,734.89	38.6%	\$37,202.43	100.0%	\$0.00	0.0%	\$211,937.32	43.3%
Asia	\$209,939.50	\$0.00	\$87,796.00	\$297,735.50	\$21,093.00	\$0.00	\$0.00	\$21,093.00	\$188,846.50	90.0%	\$0.00	0.0%	\$87,796.00	100.0%	\$276,642.50	92.9%
Latin America/Caribbean	\$157,321.87	\$47,493.00	\$8,400.33	\$213,215.00	\$158,265.69	\$0.00	\$0.00	\$158,265.69	(\$944.02)	-0.6%	\$47,493.00	100.0%	\$8,400.33	100.0%	\$54,949.31	25.8%
Newly Independent States	\$0.00	\$196,205.67	\$31,883.33	\$228,089.00	\$0.00	\$40,491.63	\$0.00	\$40,491.63	\$0.00	0.0%	\$155,714.03	79.4%	\$31,883.33	100.0%	\$187,597.37	82.2%
<b>Program Sub Total:</b>	<b>\$819,617.82</b>	<b>\$286,901.10</b>	<b>\$128,078.67</b>	<b>\$1,234,697.59</b>	<b>\$486,978.66</b>	<b>\$40,491.63</b>	<b>\$0.00</b>	<b>\$497,471.29</b>	<b>\$362,637.37</b>	<b>44.2%</b>	<b>\$240,408.46</b>	<b>86.6%</b>	<b>\$128,078.67</b>	<b>100.0%</b>	<b>\$731,128.60</b>	<b>59.8%</b>
Technical Quality Assurance	\$80,651.00	\$0.00	\$0.00	\$80,651.00	\$89,342.20	\$0.00	\$0.00	\$89,342.20	(\$8,691.20)	-10.8%	\$0.00	0.0%	\$0.00	0.0%	(\$8,691.20)	-10.8%
Evaluation & MIS	\$1,141,960.00	\$0.00	\$0.00	\$1,141,960.00	\$374,144.27	\$0.00	\$0.00	\$374,144.27	\$767,815.73	67.2%	\$0.00	0.0%	\$0.00	0.0%	\$767,815.73	67.2%
Program Management	\$2,753,696.00	\$0.00	\$0.00	\$2,753,696.00	\$2,833,127.71	\$0.00	\$0.00	\$2,833,127.71	(\$79,429.71)	-2.9%	\$0.00	0.0%	\$0.00	0.0%	(\$79,429.71)	-2.9%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$586,402.12	\$0.00	\$0.00	\$586,402.12	(\$586,402.12)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$586,402.12)	0.0%
<b>HQ Support Sub Total:</b>	<b>\$4,788,928.82</b>	<b>\$286,901.10</b>	<b>\$128,078.67</b>	<b>\$5,203,908.59</b>	<b>\$4,339,998.66</b>	<b>\$40,491.63</b>	<b>\$0.00</b>	<b>\$4,380,490.29</b>	<b>\$468,930.08</b>	<b>9.8%</b>	<b>\$240,408.46</b>	<b>86.6%</b>	<b>\$128,078.67</b>	<b>100.0%</b>	<b>\$824,418.20</b>	<b>16.8%</b>
<b>Assessment</b>																
Country/Regional Programs																
Africa	\$119,667.00	\$346,597.50	\$0.00	\$466,264.50	\$4,086.05	\$293,478.77	\$0.00	\$297,564.82	\$115,580.96	96.6%	\$53,118.73	15.3%	\$0.00	0.0%	\$168,699.68	36.2%
Asia	\$0.00	\$65,492.00	\$0.00	\$65,492.00	\$0.00	\$41,989.34	\$0.00	\$41,989.34	\$0.00	0.0%	\$23,502.66	35.9%	\$0.00	0.0%	\$23,502.66	35.9%
Latin America/Caribbean	\$18,425.00	\$12,576.50	\$133,030.00	\$164,031.50	\$36,536.30	\$21,364.91	\$37,859.53	\$95,762.74	(\$18,113.30)	-98.3%	(\$8,788.41)	-69.9%	\$95,170.47	71.5%	\$68,268.78	41.6%
Newly Independent States	\$0.00	\$254,816.33	\$71,377.87	\$326,194.00	\$0.00	\$73,037.08	\$0.00	\$73,037.08	\$0.00	0.0%	\$181,779.26	71.3%	\$71,377.87	100.0%	\$253,156.92	77.8%
Interregional	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,402.78	\$0.00	\$12,402.78	\$0.00	0.0%	(\$12,402.78)	0.0%	\$0.00	0.0%	(\$12,402.78)	0.0%
<b>Program Sub Total:</b>	<b>\$138,092.00</b>	<b>\$679,482.33</b>	<b>\$204,407.87</b>	<b>\$1,021,982.00</b>	<b>\$40,624.34</b>	<b>\$442,272.88</b>	<b>\$37,859.53</b>	<b>\$520,756.76</b>	<b>\$97,467.66</b>	<b>70.6%</b>	<b>\$237,209.46</b>	<b>34.9%</b>	<b>\$188,648.13</b>	<b>81.8%</b>	<b>\$601,228.24</b>	<b>49.0%</b>
Technical Quality Assurance	\$98,584.33	\$0.00	\$0.00	\$98,584.33	\$41,601.68	\$0.00	\$0.00	\$41,601.68	\$56,982.66	57.8%	\$0.00	0.0%	\$0.00	0.0%	\$56,982.66	57.8%
<b>Assessment Sub Total:</b>	<b>\$236,876.33</b>	<b>\$679,482.33</b>	<b>\$204,407.87</b>	<b>\$1,120,666.33</b>	<b>\$82,226.02</b>	<b>\$442,272.88</b>	<b>\$37,859.53</b>	<b>\$562,358.44</b>	<b>\$164,450.31</b>	<b>66.3%</b>	<b>\$237,209.46</b>	<b>34.9%</b>	<b>\$188,648.13</b>	<b>81.8%</b>	<b>\$668,207.90</b>	<b>49.0%</b>

99

# ACTIVITY CODES

TYPE OF BASICS ACTIVITY	PROGRAM/DISEASE INTERVENTION	SYSTEM STRENGTH'G FOCUS	COUNTERPART/ CLIENT ORGANIZATION(S)	IF APPLICABLE, SPECIAL AT-RISK GROUPS
A HQ Support B Assessments, prgrm reviews C Project Development Gen., PID, PP, CAP D Training Courses E Materials Development and Production F Research, surveys, studies G Seminars, Conferences H Info dissemination I Implementation monitoring J Implementation support/ commodities K Ext Advisory Groups L Advocacy M Strategy/policy development N Program evaluation O STTA not covered elsewhere P Participant Training	A ARI B CDD, Cholera, Dysentery C EPI D Malaria E Micronutrients, Nutrition, Breastfeeding F Family Planning/Matrn Care G Sick Child H General Child Survival I War Victims	A Policy/Strategy Development B Planning/evaluation C Training, Skills Development D IEC, Social Marketing, Community Mobilization, Behavior Change F Informations systems, surveillance G Drug Supply, Logistics Drug Management H Financing I Supervision/monitoring J Quality Assurance K L M	A Public Sector B Private Sector Companies C Private Sector Providers D NGO/PVO E USAID or USAID Project F International Agencies G None - only BASICS	A Urban poor B Rural poor C Minority ethnic groups D Refugee/displaced pop E Victims of War F Adolescent female
W As Yet Unknown X Other _____ Y >3 above Z Not applicable	W As Yet Unknown X Other _____ Y All of above Z Not applicable	W As Yet Unknown X Other _____ Y >3 above Z Not applicable	W As Yet Unknown X Other _____ Y >3 above Z Not applicable	W As Yet Unknown X Other _____ Y >3 above Z Not applicable

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Research, Surveys, Studies</b>																
<b>Country/Regional Programs</b>																
Africa	\$12,367.57	\$7,217.43	\$18,838.71	\$38,423.71	\$29,246.05	\$528.61	\$2,081.49	\$31,856.15	(\$16,878.48)	136.5%	\$6,688.82	92.7%	\$16,757.22	89.0%	\$6,567.56	17.1%
Asia	\$31,163.50	\$0.00	\$62,943.80	\$94,107.30	\$0.00	\$0.00	\$0.00	\$0.00	\$31,163.50	100.0%	\$0.00	0.0%	\$62,943.80	100.0%	\$94,107.30	100.0%
Latin America/Caribbean	\$15,193.67	\$4,506.67	\$22,206.33	\$41,906.67	\$8,311.94	\$290.73	\$18,310.31	\$24,912.98	\$6,881.72	58.5%	\$4,215.94	93.5%	\$3,896.02	17.5%	\$16,993.69	40.6%
Newly Independent States	\$0.00	\$38,956.33	\$48,578.50	\$87,534.83	\$0.00	\$5,871.15	\$0.00	\$5,871.15	\$0.00	0.0%	\$33,085.18	84.9%	\$48,578.50	100.0%	\$81,663.68	93.3%
Interregional	\$0.00	\$7,273.00	\$0.00	\$7,273.00	\$0.00	\$3,030.87	\$0.00	\$3,030.87	\$0.00	0.0%	\$4,242.13	58.3%	\$0.00	0.0%	\$4,242.13	58.3%
<b>Program Sub Total:</b>	<b>\$68,724.74</b>	<b>\$67,883.43</b>	<b>\$182,687.38</b>	<b>\$288,245.51</b>	<b>\$38,667.99</b>	<b>\$9,721.38</b>	<b>\$20,391.80</b>	<b>\$88,871.18</b>	<b>\$23,166.74</b>	<b>39.4%</b>	<b>\$48,232.07</b>	<b>83.2%</b>	<b>\$132,175.88</b>	<b>88.8%</b>	<b>\$203,874.38</b>	<b>76.6%</b>
<b>Technical Quality Assurance</b>	<b>\$335,262.83</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$335,262.83</b>	<b>\$128,446.25</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$128,446.25</b>	<b>\$208,816.58</b>	<b>62.3%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$208,816.58</b>	<b>62.3%</b>
<b>Research, Surveys, Studies Sub Total:</b>	<b>\$993,987.87</b>	<b>\$87,883.43</b>	<b>\$182,687.38</b>	<b>\$864,688.38</b>	<b>\$182,864.24</b>	<b>\$9,721.38</b>	<b>\$20,391.80</b>	<b>\$192,117.48</b>	<b>\$231,983.33</b>	<b>88.9%</b>	<b>\$48,232.07</b>	<b>83.2%</b>	<b>\$132,175.88</b>	<b>88.8%</b>	<b>\$412,398.94</b>	<b>68.2%</b>
<b>Seminars, Conferences</b>																
<b>Country/Regional Programs</b>																
Africa	\$0.00	\$7,358.50	\$0.00	\$7,358.50	\$0.00	\$8,875.05	\$0.00	\$8,875.05	\$0.00	0.0%	\$481.45	6.5%	\$0.00	0.0%	\$481.45	6.5%
Latin America/Caribbean	\$8,323.50	\$0.00	\$9,719.00	\$18,042.50	\$1,283.94	\$0.00	\$0.00	\$1,283.94	\$5,039.56	79.7%	\$0.00	0.0%	\$9,719.00	100.0%	\$14,758.56	92.0%
Newly Independent States	\$0.00	\$18,296.00	\$0.00	\$18,296.00	\$0.00	\$8,469.82	\$0.00	\$8,469.82	\$0.00	0.0%	\$12,826.18	66.5%	\$0.00	0.0%	\$12,826.18	66.5%
Interregional	\$0.00	\$19,348.00	\$0.00	\$19,348.00	\$0.00	\$27,828.99	\$0.00	\$27,828.99	\$0.00	0.0%	(\$8,482.99)	-43.8%	\$0.00	0.0%	(\$8,482.99)	-43.8%
<b>Program Sub Total:</b>	<b>\$8,323.50</b>	<b>\$46,998.50</b>	<b>\$9,719.00</b>	<b>\$82,041.00</b>	<b>\$1,283.94</b>	<b>\$41,173.88</b>	<b>\$0.00</b>	<b>\$42,467.88</b>	<b>\$8,039.66</b>	<b>79.7%</b>	<b>\$4,824.64</b>	<b>10.6%</b>	<b>\$9,719.00</b>	<b>100.0%</b>	<b>\$18,883.20</b>	<b>31.6%</b>
<b>Technical Quality Assurance</b>	<b>\$0.00</b>	<b>\$1,067.00</b>	<b>\$0.00</b>	<b>\$1,067.00</b>	<b>\$59,685.14</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$59,685.14</b>	<b>(\$59,685.14)</b>	<b>0.0%</b>	<b>\$1,067.00</b>	<b>100.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$58,618.14)</b>	<b>493.7%</b>
<b>Conference/Workshops</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$103,991.64</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$103,991.64</b>	<b>(\$103,991.64)</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$103,991.64)</b>	<b>0.0%</b>
<b>Seminars, Conferences Sub Total:</b>	<b>\$8,323.50</b>	<b>\$47,065.50</b>	<b>\$9,719.00</b>	<b>\$83,108.00</b>	<b>\$164,966.72</b>	<b>\$41,173.88</b>	<b>\$0.00</b>	<b>\$206,134.68</b>	<b>(\$168,837.22)</b>	<b>88.7%</b>	<b>\$6,891.64</b>	<b>12.8%</b>	<b>\$9,719.00</b>	<b>100.0%</b>	<b>(\$143,028.88)</b>	<b>228.8%</b>

101

# BASICS LOE SUMMARY

06-Jan-95

	Estimated LOE				Expended LOE				LOE Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>I. Country/Regional Programs</b>																
A. Africa	2,549.0	1,099.0	771.0	4,419.0	1,449.5	370.7	232.8	2,053.0	1,099.5	43.1%	728.3	66.3%	538.2	69.8%	2,366.0	53.5%
B. Asia	983.0	57.0	1,067.0	2,067.0	306.9	8.3	0.0	313.2	656.1	66.1%	50.7	88.9%	1,067.0	100.0%	1,773.8	85.0%
C. Latin America/Caribbean	727.0	220.0	354.0	1,301.0	500.1	159.4	83.4	823.0	146.9	20.2%	60.6	27.5%	270.6	76.4%	478.0	36.7%
D. Newly Independent States	0.0	1,786.0	1,755.0	3,541.0	0.0	433.7	0.0	433.7	0.0	0.0%	1,352.3	75.7%	1,755.0	100.0%	3,107.3	87.8%
E. Interregional	0.0	115.0	0.0	115.0	0.0	23.5	0.0	23.5	0.0	0.0%	91.5	79.8%	0.0	0.0%	91.5	79.6%
<b>Sub Total:</b>	<b>4,239.0</b>	<b>3,277.0</b>	<b>3,947.0</b>	<b>11,483.0</b>	<b>2,336.6</b>	<b>993.7</b>	<b>316.3</b>	<b>3,646.6</b>	<b>1,962.8</b>	<b>44.9%</b>	<b>2,283.3</b>	<b>69.7%</b>	<b>3,638.8</b>	<b>92.0%</b>	<b>7,816.6</b>	<b>68.2%</b>
<b>II. Technical Quality Assurance</b>	1,730.0	1.0	0.0	1,731.0	690.7	0.0	0.0	690.7	1,039.3	60.1%	1.0	100.0%	0.0	0.0%	1,040.3	60.1%
<b>III. Information Dissemination</b>	702.0	0.0	0.0	702.0	533.4	0.0	0.0	533.4	168.6	24.0%	0.0	0.0%	0.0	0.0%	168.6	24.0%
<b>IV. Conference/Workshops</b>	0.0	0.0	0.0	0.0	57.9	0.0	0.0	57.9	-57.9	0.0%	0.0	0.0%	0.0	0.0%	-57.9	0.0%
<b>V. Evaluation &amp; MIS</b>	546.0	0.0	0.0	546.0	240.8	0.0	0.0	240.8	305.2	55.9%	0.0	0.0%	0.0	0.0%	305.2	55.9%
<b>VI. Program Management</b>	3,596.0	0.0	0.0	3,596.0	2,483.9	0.0	0.0	2,483.9	1,112.1	30.9%	0.0	0.0%	0.0	0.0%	1,112.1	30.9%
<b>VII. Start-up Costs</b>	0.0	0.0	0.0	0.0	1,661.3	0.0	0.0	1,661.3	-1,661.3	0.0%	0.0	0.0%	0.0	0.0%	-1,661.3	0.0%
<b>Grand Total:</b>	<b>18,813.0</b>	<b>3,278.0</b>	<b>3,947.0</b>	<b>18,038.0</b>	<b>8,664.6</b>	<b>993.7</b>	<b>316.3</b>	<b>9,314.6</b>	<b>2,868.8</b>	<b>28.0%</b>	<b>2,284.3</b>	<b>69.7%</b>	<b>3,638.8</b>	<b>92.0%</b>	<b>8,723.0</b>	<b>48.4%</b>

1021

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Advocacy</b>																
Country/Regional Programs																
Africa	\$9,217.86	\$7,217.43	\$0.00	\$16,435.29	\$0.00	\$0.00	\$0.00	\$0.00	\$9,217.86	100.0%	\$7,217.43	100.0%	\$0.00	0.0%	\$16,435.29	100.0%
Program Sub Total:	\$9,217.86	\$7,217.43	\$0.00	\$16,435.29	\$0.00	\$0.00	\$0.00	\$0.00	\$9,217.86	100.0%	\$7,217.43	100.0%	\$0.00	0.0%	\$16,435.29	100.0%
Advocacy Sub Total:	\$9,217.86	\$7,217.43	\$0.00	\$16,435.29	\$0.00	\$0.00	\$0.00	\$0.00	\$9,217.86	100.0%	\$7,217.43	100.0%	\$0.00	0.0%	\$16,435.29	100.0%
<b>Strategy/Policy Development</b>																
Country/Regional Programs																
Africa	\$0.00	\$85,573.00	\$0.00	\$85,573.00	\$2,927.84	\$73,920.69	\$0.00	\$76,848.54	(\$2,927.84)	0.0%	(\$8,347.69)	-12.7%	\$0.00	0.0%	(\$11,275.54)	-17.2%
Latin America/Caribbean	\$6,397.00	\$0.00	\$30,631.00	\$37,028.00	\$334.31	\$0.00	\$2,068.28	\$2,402.59	\$6,062.69	94.8%	\$0.00	0.0%	\$28,562.72	93.2%	\$34,625.41	93.5%
Newly Independent States	\$0.00	\$40,351.00	\$1,668.67	\$42,017.67	\$0.00	\$10,389.14	\$0.00	\$10,389.14	\$0.00	0.0%	\$29,981.86	74.3%	\$1,668.67	100.0%	\$31,650.53	75.3%
Program Sub Total:	\$6,397.00	\$125,924.00	\$32,297.67	\$164,618.67	\$3,262.15	\$84,309.83	\$2,068.28	\$89,640.26	\$3,134.85	48.0%	\$21,614.17	20.4%	\$30,228.38	93.8%	\$64,878.46	38.8%
Technical Quality Assurance	\$748,101.83	\$0.00	\$0.00	\$748,101.83	\$177,224.03	\$0.00	\$0.00	\$177,224.03	\$570,877.80	76.3%	\$0.00	0.0%	\$0.00	0.0%	\$570,877.80	76.3%
Program Management	\$0.00	\$0.00	\$0.00	\$0.00	\$962.41	\$0.00	\$0.00	\$962.41	(\$962.41)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$962.41)	0.0%
Strategy/Policy Development Sub Total:	\$754,498.83	\$125,924.00	\$32,297.67	\$912,720.50	\$181,448.69	\$84,309.83	\$2,068.28	\$267,826.76	\$673,050.25	76.0%	\$21,614.17	20.4%	\$30,228.38	93.8%	\$624,893.80	76.0%
<b>Program Evaluation</b>																
Country/Regional Programs																
Africa	\$34,789.57	\$32,939.93	\$34,878.71	\$102,608.21	\$0.00	\$24,087.68	\$615.43	\$24,703.11	\$34,789.57	100.0%	\$8,852.25	26.9%	\$34,263.28	98.2%	\$77,905.10	75.9%
Asia	\$31,163.50	\$48,020.00	\$0.00	\$79,183.50	\$1,203.73	\$20,272.21	\$0.00	\$21,475.94	\$29,959.77	96.1%	\$27,747.79	57.8%	\$0.00	0.0%	\$57,707.56	72.9%
Latin America/Caribbean	\$0.00	\$346.67	\$9,808.00	\$10,152.67	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$346.67	100.0%	\$9,808.00	100.0%	\$10,152.67	100.0%
Program Sub Total:	\$65,953.07	\$81,306.60	\$44,686.71	\$191,946.38	\$1,203.73	\$44,359.89	\$615.43	\$46,179.05	\$64,749.34	98.2%	\$38,946.70	45.4%	\$44,068.28	98.6%	\$146,766.33	76.9%
Program Evaluation Sub Total:	\$65,953.07	\$81,306.60	\$44,686.71	\$191,946.38	\$1,203.73	\$44,359.89	\$615.43	\$46,179.05	\$64,749.34	98.2%	\$38,946.70	45.4%	\$44,068.28	98.6%	\$146,766.33	76.9%
<b>STTA not covered elsewhere</b>																
Country/Regional Programs																
Africa	\$0.00	\$27,556.00	\$0.00	\$27,556.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$27,556.00	100.0%	\$0.00	0.0%	\$27,556.00	100.0%
Program Sub Total:	\$0.00	\$27,556.00	\$0.00	\$27,556.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$27,556.00	100.0%	\$0.00	0.0%	\$27,556.00	100.0%
STTA not covered elsewhere Sub Total:	\$0.00	\$27,556.00	\$0.00	\$27,556.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$27,556.00	100.0%	\$0.00	0.0%	\$27,556.00	100.0%

103

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Project Development</b>																
Country/Regional Programs																
Africa	\$552,153.71	\$280,954.00	\$18,838.71	\$851,946.43	\$210,753.84	\$174,515.15	\$0.00	\$385,268.99	\$341,399.87	61.8%	\$108,438.85	37.9%	\$18,838.71	100.0%	\$468,677.44	54.8%
Asia	\$278,590.50	\$0.00	\$0.00	\$278,590.50	\$200,917.90	\$0.00	\$0.00	\$200,917.90	\$77,672.60	27.9%	\$0.00	0.0%	\$0.00	0.0%	\$77,672.60	27.9%
Latin America/Caribbean	\$164,770.00	\$12,578.50	\$26,294.33	\$203,640.83	\$40,444.84	\$23,206.05	\$0.00	\$63,650.90	\$124,325.18	75.5%	(\$10,829.55)	-84.5%	\$26,294.33	100.0%	\$139,989.94	68.7%
Newly Independent States	\$0.00	\$0.00	\$2,500.00	\$2,500.00	\$0.00	\$8.76	\$0.00	\$8.76	\$0.00	0.0%	(\$8.76)	0.0%	\$2,500.00	100.0%	\$2,491.25	99.6%
Program Sub Total:	\$995,514.21	\$293,538.88	\$47,633.88	\$1,336,677.76	\$462,116.88	\$197,729.98	\$0.00	\$649,846.84	\$643,397.83	64.8%	\$88,808.84	32.8%	\$47,633.88	100.0%	\$688,831.22	61.4%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$573,656.09	\$0.00	\$0.00	\$573,656.09	(\$573,656.09)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$573,656.09)	0.0%
<b>Project Development Sub Total:</b>	<b>\$995,514.21</b>	<b>\$293,538.88</b>	<b>\$47,633.88</b>	<b>\$1,336,677.76</b>	<b>\$1,028,772.67</b>	<b>\$197,729.98</b>	<b>\$0.00</b>	<b>\$1,223,602.63</b>	<b>(\$30,288.46)</b>	<b>-3.0%</b>	<b>\$88,808.84</b>	<b>32.8%</b>	<b>\$47,633.88</b>	<b>100.0%</b>	<b>\$113,178.13</b>	<b>8.5%</b>
<b>Training Courses</b>																
Country/Regional Programs																
Africa	\$93,445.57	\$7,217.43	\$157,519.21	\$258,182.21	\$5,131.71	\$0.00	\$22,404.30	\$27,536.01	\$88,313.87	94.5%	\$7,217.43	100.0%	\$135,114.91	85.8%	\$230,646.21	89.3%
Asia	\$31,163.50	\$0.00	\$62,943.80	\$94,107.30	\$0.00	\$0.00	\$0.00	\$0.00	\$31,163.50	100.0%	\$0.00	0.0%	\$62,943.80	100.0%	\$94,107.30	100.0%
Latin America/Caribbean	\$0.00	\$348.67	\$51,002.33	\$51,349.00	\$0.00	\$0.00	\$398.47	\$398.47	\$0.00	0.0%	\$348.67	100.0%	\$50,603.86	99.2%	\$50,950.53	99.2%
Newly Independent States	\$0.00	\$224,527.67	\$74,741.50	\$299,269.17	\$0.00	\$48,368.48	\$0.00	\$48,368.48	\$0.00	0.0%	\$176,159.19	78.5%	\$74,741.50	100.0%	\$250,900.69	83.8%
Program Sub Total:	\$124,609.07	\$232,891.76	\$346,268.88	\$702,907.88	\$6,131.71	\$48,368.48	\$22,802.77	\$76,302.88	\$118,477.37	86.8%	\$183,723.28	79.2%	\$323,464.88	93.4%	\$626,694.72	89.1%
Technical Quality Assurance	\$12,729.50	\$0.00	\$0.00	\$12,729.50	\$0.00	\$0.00	\$0.00	\$0.00	\$12,729.50	100.0%	\$0.00	0.0%	\$0.00	0.0%	\$12,729.50	100.0%
<b>Training Courses Sub Total:</b>	<b>\$137,338.67</b>	<b>\$232,891.76</b>	<b>\$346,268.88</b>	<b>\$716,637.18</b>	<b>\$6,131.71</b>	<b>\$48,368.48</b>	<b>\$22,802.77</b>	<b>\$76,302.88</b>	<b>\$132,206.87</b>	<b>86.3%</b>	<b>\$183,723.28</b>	<b>79.2%</b>	<b>\$323,464.88</b>	<b>93.4%</b>	<b>\$639,334.22</b>	<b>89.3%</b>
<b>Materials Development &amp; Production</b>																
Country/Regional Programs																
Africa	\$46,971.71	\$30,160.00	\$108,464.21	\$183,595.93	\$3,680.02	\$31,898.82	\$8,346.99	\$43,923.83	\$43,291.69	92.2%	(\$1,736.82)	-5.8%	\$96,117.22	92.2%	\$139,872.00	76.1%
Asia	\$31,163.50	\$0.00	\$0.00	\$31,163.50	\$0.00	\$0.00	\$0.00	\$0.00	\$31,163.50	100.0%	\$0.00	0.0%	\$0.00	0.0%	\$31,163.50	100.0%
Latin America/Caribbean	\$15,193.67	\$1,040.00	\$49,598.67	\$65,830.33	\$6,311.94	\$202.41	\$398.47	\$6,912.82	\$8,881.72	58.5%	\$837.59	80.5%	\$49,198.20	99.2%	\$58,917.51	89.5%
Newly Independent States	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$332.68	\$0.00	\$332.68	\$0.00	0.0%	(\$332.68)	0.0%	\$0.00	0.0%	(\$332.68)	0.0%
Program Sub Total:	\$93,328.88	\$31,200.00	\$158,060.88	\$280,889.76	\$9,991.97	\$32,431.80	\$8,746.46	\$51,169.33	\$83,338.91	89.3%	(\$1,231.90)	-3.9%	\$147,316.42	84.4%	\$228,428.43	81.8%
Technical Quality Assurance	\$67,921.50	\$0.00	\$0.00	\$67,921.50	\$61,472.54	\$0.00	\$0.00	\$61,472.54	\$6,448.96	9.5%	\$0.00	0.0%	\$0.00	0.0%	\$6,448.96	9.5%
<b>Materials Development &amp; Production Sub Total:</b>	<b>\$161,260.38</b>	<b>\$31,200.00</b>	<b>\$158,060.88</b>	<b>\$348,611.26</b>	<b>\$71,464.51</b>	<b>\$32,431.80</b>	<b>\$8,746.46</b>	<b>\$112,641.87</b>	<b>\$89,786.88</b>	<b>86.7%</b>	<b>(\$1,231.90)</b>	<b>-3.9%</b>	<b>\$147,316.42</b>	<b>84.4%</b>	<b>\$236,869.39</b>	<b>87.7%</b>

10

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
>3 above																
Country/Regional Programs																
Africa	\$379,740.86	\$117,272.43	\$387,192.00	\$884,205.29	\$339,386.67	\$0.00	\$136,555.14	\$475,941.81	\$40,354.19	10.6%	\$117,272.43	100.0%	\$250,636.86	64.7%	\$408,263.48	46.2%
Asia	\$240,342.50	\$0.00	\$0.00	\$240,342.50	\$21,328.97	\$0.00	\$0.00	\$21,328.97	\$219,013.53	91.1%	\$0.00	0.0%	\$0.00	0.0%	\$219,013.53	91.1%
Latin America/Caribbean	\$142,117.50	\$28,548.00	\$50,288.00	\$220,954.50	\$127,523.23	\$36,371.63	\$9,750.10	\$173,644.96	\$14,594.27	10.3%	(\$7,823.63)	-27.4%	\$40,538.90	80.6%	\$47,309.54	21.4%
Newly Independent States	\$0.00	\$49,468.33	\$9,350.00	\$58,818.33	\$0.00	\$10,303.84	\$0.00	\$10,303.84	\$0.00	0.0%	\$39,164.49	79.2%	\$9,350.00	100.0%	\$48,514.49	82.5%
Interregional	\$0.00	\$9,106.00	\$0.00	\$9,106.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$9,106.00	100.0%	\$0.00	0.0%	\$9,106.00	100.0%
Program Sub Total:	\$762,200.86	\$204,384.76	\$448,831.00	\$1,413,426.62	\$488,238.67	\$46,676.47	\$146,305.24	\$681,219.68	\$273,961.99	36.9%	\$167,719.29	77.2%	\$308,626.76	67.3%	\$732,287.84	61.6%
>3 above Sub Total:	\$762,200.86	\$204,384.76	\$448,831.00	\$1,413,426.62	\$488,238.67	\$46,676.47	\$146,305.24	\$681,219.68	\$273,961.99	36.9%	\$167,719.29	77.2%	\$308,626.76	67.3%	\$732,287.84	61.6%
Grand Total:	\$8,888,887.00	\$2,328,877.00	\$4,389,287.00	18,624,671.00	\$6,969,912.28	\$1,920,671.18	\$243,611.16	\$8,223,294.61	\$1,849,484.72	21.0%	\$1,308,205.83	66.1%	\$4,148,676.86	84.4%	\$7,381,376.39	47.6%

105

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Info Dissemination</b>																
Country/Regional Programs																
Africa	\$0.00	\$36,526.50	\$0.00	\$36,526.50	\$2,927.84	\$0.00	\$0.00	\$2,927.84	(\$2,927.84)	0.0%	\$36,526.50	100.0%	\$0.00	0.0%	\$33,598.66	92.0%
Asia	\$31,163.50	\$0.00	\$62,943.80	\$94,107.30	\$0.00	\$0.00	\$0.00	\$0.00	\$31,163.50	100.0%	\$0.00	0.0%	\$62,943.80	100.0%	\$94,107.30	100.0%
Interregional	\$0.00	\$7,273.00	\$0.00	\$7,273.00	\$0.00	\$3,030.87	\$0.00	\$3,030.87	\$0.00	0.0%	\$4,242.13	58.3%	\$0.00	0.0%	\$4,242.13	58.3%
Program Sub Total:	\$31,163.50	\$43,799.50	\$62,943.80	\$137,906.80	\$2,927.84	\$3,030.87	\$0.00	\$5,958.71	\$28,235.66	90.6%	\$48,768.63	93.1%	\$62,943.80	100.0%	\$131,848.09	96.7%
Information Dissemination	\$276,373.00	\$0.00	\$0.00	\$276,373.00	\$219,269.90	\$0.00	\$0.00	\$219,269.90	\$57,103.10	20.7%	\$0.00	0.0%	\$0.00	0.0%	\$57,103.10	20.7%
Info Dissemination Sub Total:	\$307,536.50	\$43,799.50	\$62,943.80	\$414,279.80	\$222,197.74	\$3,030.87	\$0.00	\$228,228.61	\$85,338.76	27.7%	\$48,768.63	93.1%	\$62,943.80	100.0%	\$189,051.19	46.0%
<b>Implementation Monitoring</b>																
Country/Regional Programs																
Africa	\$3,149.71	\$0.00	\$18,838.71	\$21,988.43	\$0.00	\$0.00	\$0.00	\$0.00	\$3,149.71	100.0%	\$0.00	0.0%	\$18,838.71	100.0%	\$21,988.43	100.0%
Asia	\$0.00	\$0.00	\$62,943.80	\$62,943.80	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$62,943.80	100.0%	\$62,943.80	100.0%
Newly Independent States	\$0.00	\$5,190.00	\$20,818.00	\$26,008.00	\$0.00	\$7,385.69	\$0.00	\$7,385.69	\$0.00	0.0%	(\$2,195.69)	-42.3%	\$20,818.00	100.0%	\$18,622.31	71.6%
Program Sub Total:	\$3,149.71	\$5,190.00	\$102,600.51	\$110,948.23	\$0.00	\$7,385.69	\$0.00	\$7,385.69	\$3,149.71	100.0%	(\$2,195.69)	-42.3%	\$102,600.51	100.0%	\$103,664.84	93.3%
Evaluation & MIS	\$0.00	\$0.00	\$0.00	\$0.00	\$1,521.51	\$0.00	\$0.00	\$1,521.51	(\$1,521.51)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,521.51)	0.0%
Implementation Monitoring Sub Total:	\$3,149.71	\$5,190.00	\$102,600.51	\$110,948.23	\$1,521.51	\$7,385.69	\$0.00	\$8,907.20	\$1,628.21	61.7%	(\$2,195.69)	-42.3%	\$102,600.51	100.0%	\$102,833.83	92.6%
<b>Implementation Support/Commodities</b>																
Country/Regional Programs																
Africa	\$9,217.86	\$34,773.43	\$0.00	\$43,991.29	\$16.43	\$0.00	\$4,446.96	\$4,463.41	\$9,201.43	99.8%	\$34,773.43	100.0%	(\$4,446.96)	0.0%	\$39,527.88	89.9%
Asia	\$0.00	\$0.00	\$1,608,862.80	\$1,608,862.80	\$629.32	\$0.00	\$0.00	\$629.32	(\$629.32)	0.0%	\$0.00	0.0%	\$1,608,862.80	100.0%	\$1,608,233.48	100.0%
Latin America/Caribbean	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$375.65	\$375.65	\$0.00	0.0%	\$0.00	0.0%	(\$375.65)	0.0%	(\$375.65)	0.0%
Newly Independent States	\$0.00	\$51,088.67	\$39,494.33	\$90,583.00	\$0.00	\$22,719.35	\$0.00	\$22,719.35	\$0.00	0.0%	\$28,369.32	55.5%	\$39,494.33	100.0%	\$67,863.65	74.9%
Program Sub Total:	\$9,217.86	\$86,862.10	\$1,648,367.13	\$1,743,437.09	\$645.75	\$22,719.35	\$4,822.63	\$28,187.73	\$8,572.10	93.6%	\$63,142.76	73.8%	\$1,643,634.60	99.7%	\$1,716,249.36	98.4%
Implementation Support/Commodities Sub Total:	\$9,217.86	\$86,862.10	\$1,648,367.13	\$1,743,437.09	\$645.75	\$22,719.35	\$4,822.63	\$28,187.73	\$8,572.10	93.6%	\$63,142.76	73.8%	\$1,643,634.60	99.7%	\$1,716,249.36	98.4%

100

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Assessment</b>																
Country/Regional Programs																
Africa	180.0	364.5	0.0	524.5	0.0	173.0	0.0	173.0	160.0	100.0%	191.5	52.5%	0.0	0.0%	351.5	67.0%
Asia	0.0	39.5	0.0	39.5	0.0	4.9	0.0	4.9	0.0	0.0%	34.6	87.7%	0.0	0.0%	34.6	87.7%
Latin America/Caribbean	20.0	12.0	128.0	160.0	31.1	13.3	45.9	90.3	-11.1	-55.6%	-1.3	-11.2%	82.1	64.2%	69.7	43.5%
Newly Independent States	0.0	545.8	37.3	583.2	0.0	144.8	0.0	144.8	0.0	0.0%	401.0	73.5%	37.3	100.0%	438.4	75.2%
Interregional	0.0	0.0	0.0	0.0	0.0	3.7	0.0	3.7	0.0	0.0%	-3.7	0.0%	0.0	0.0%	-3.7	0.0%
Program Sub Total:	180.0	961.8	165.3	1,307.2	31.1	338.7	45.9	416.7	148.9	82.7%	822.1	64.7%	119.8	72.3%	890.4	68.1%
Technical Quality Assurance	138.3	0.0	0.0	138.3	63.1	0.0	0.0	63.1	75.3	54.4%	0.0	0.0%	0.0	0.0%	75.3	54.4%
Assessment Sub Total:	318.3	961.8	165.3	1,445.8	94.2	338.7	45.9	478.8	224.1	70.4%	822.1	64.7%	119.8	72.3%	965.7	66.8%
<b>Project Development</b>																
Country/Regional Programs																
Africa	547.0	272.0	12.4	831.4	220.2	129.0	0.0	349.2	328.8	59.7%	143.0	52.6%	12.4	100.0%	482.2	58.0%
Asia	382.7	0.0	0.0	382.7	225.6	0.0	0.0	225.6	157.1	41.1%	0.0	0.0%	0.0	0.0%	157.1	41.1%
Latin America/Caribbean	178.0	12.0	6.0	194.0	47.8	23.3	0.0	71.2	128.2	72.8%	-11.3	-94.5%	6.0	100.0%	122.6	63.3%
Newly Independent States	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	1,106.7	284.0	18.4	1,409.1	493.6	152.4	0.0	646.0	612.1	66.4%	131.8	46.3%	18.4	100.0%	782.3	64.1%
Start-up Costs	0.0	0.0	0.0	0.0	819.1	0.0	0.0	819.1	-819.1	0.0%	0.0	0.0%	0.0	0.0%	-819.1	0.0%
Project Development Sub Total:	1,106.7	284.0	18.4	1,409.1	1,312.7	152.4	0.0	1,465.0	-207.0	-18.7%	131.8	46.3%	18.4	100.0%	-63.8	-4.6%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Participant Training</b>																
Country/Regional Programs																
Africa	\$3,149.71	\$0.00	\$18,838.71	\$21,988.43	\$0.00	\$0.00	\$0.00	\$0.00	\$3,149.71	100.0%	\$0.00	0.0%	\$18,838.71	100.0%	\$21,988.43	100.0%
Asia	\$31,163.50	\$0.00	\$0.00	\$31,163.50	\$0.00	\$0.00	\$0.00	\$0.00	\$31,163.50	100.0%	\$0.00	0.0%	\$0.00	0.0%	\$31,163.50	100.0%
Program Sub Total:	\$34,313.21	\$0.00	\$18,838.71	\$53,151.93	\$0.00	\$0.00	\$0.00	\$0.00	\$34,313.21	100.0%	\$0.00	0.0%	\$18,838.71	100.0%	\$53,151.93	100.0%
Participant Training Sub Total:	\$34,313.21	\$0.00	\$18,838.71	\$53,151.93	\$0.00	\$0.00	\$0.00	\$0.00	\$34,313.21	100.0%	\$0.00	0.0%	\$18,838.71	100.0%	\$53,151.93	100.0%
Country/Regional Programs																
Africa	\$0.00	\$0.00	\$0.00	\$0.00	\$1,034.72	\$0.00	\$0.00	\$1,034.72	(\$1,034.72)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,034.72)	0.0%
Program Sub Total:	\$0.00	\$0.00	\$0.00	\$0.00	\$1,034.72	\$0.00	\$0.00	\$1,034.72	(\$1,034.72)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,034.72)	0.0%
Sub Total:	\$0.00	\$0.00	\$0.00	\$0.00	\$1,034.72	\$0.00	\$0.00	\$1,034.72	(\$1,034.72)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,034.72)	0.0%
<b>As Yet Unknown</b>																
Country/Regional Programs																
Africa	\$104,239.00	\$101,312.00	\$0.00	\$205,551.00	\$140,729.93	\$0.00	\$0.00	\$140,729.93	(\$36,490.93)	-35.0%	\$101,312.00	100.0%	\$0.00	0.0%	\$64,821.07	31.5%
Latin America/Caribbean	\$0.00	\$0.00	\$0.00	\$0.00	\$515.83	\$0.00	\$0.00	\$515.83	(\$515.83)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$515.83)	0.0%
Newly Independent States	\$0.00	\$0.00	\$988,059.00	\$988,059.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$988,059.00	100.0%	\$988,059.00	100.0%
Interregional	\$0.00	\$42,090.00	\$0.00	\$42,090.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$42,090.00	100.0%	\$0.00	0.0%	\$42,090.00	100.0%
Program Sub Total:	\$104,239.00	\$143,402.00	\$988,059.00	\$1,235,700.00	\$141,245.76	\$0.00	\$0.00	\$141,245.76	(\$37,066.76)	-38.6%	\$143,402.00	100.0%	\$988,059.00	100.0%	\$1,094,464.24	88.6%
Technical Quality Assurance	\$0.00	\$0.00	\$0.00	\$0.00	\$5,712.57	\$0.00	\$0.00	\$5,712.57	(\$5,712.57)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$5,712.57)	0.0%
As Yet Unknown Sub Total:	\$104,239.00	\$143,402.00	\$988,059.00	\$1,235,700.00	\$146,958.33	\$0.00	\$0.00	\$146,958.33	(\$42,719.33)	-41.0%	\$143,402.00	100.0%	\$988,059.00	100.0%	\$1,098,741.67	88.1%
<b>Other</b>																
Country/Regional Programs																
Asia	\$31,163.50	\$0.00	\$0.00	\$31,163.50	\$64,207.22	\$0.00	\$0.00	\$64,207.22	(\$33,043.72)	106.0%	\$0.00	0.0%	\$0.00	0.0%	(\$33,043.72)	106.0%
Program Sub Total:	\$31,163.50	\$0.00	\$0.00	\$31,163.50	\$64,207.22	\$0.00	\$0.00	\$64,207.22	(\$33,043.72)	106.0%	\$0.00	0.0%	\$0.00	0.0%	(\$33,043.72)	106.0%
Other Sub Total:	\$31,163.50	\$0.00	\$0.00	\$31,163.50	\$64,207.22	\$0.00	\$0.00	\$64,207.22	(\$33,043.72)	106.0%	\$0.00	0.0%	\$0.00	0.0%	(\$33,043.72)	106.0%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Research, Surveys, Studies																
Country/Regional Programs																
Africa	4.3	2.1	12.4	18.8	0.0	2.5	0.0	2.5	4.3	100.0%	-0.4	-16.7%	12.4	100.0%	16.4	86.7%
Asia	21.7	0.0	57.0	78.7	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	57.0	100.0%	78.7	100.0%
Latin America/Caribbean	31.7	0.0	14.7	46.3	19.8	0.0	0.0	19.8	11.9	37.6%	0.0	0.0%	14.7	100.0%	26.6	57.4%
Newly Independent States	0.0	31.6	48.0	79.6	0.0	0.6	0.0	0.6	0.0	0.0%	31.0	98.0%	48.0	100.0%	79.0	99.2%
Interregional	0.0	5.0	0.0	5.0	0.0	0.0	0.0	0.0	0.0	0.0%	5.0	100.0%	0.0	0.0%	5.0	100.0%
Program Sub Total:	87.7	38.7	132.1	226.8	19.8	3.1	0.0	22.9	37.9	85.7%	35.6	91.9%	132.1	100.0%	208.8	99.9%
Technical Quality Assurance	444.8	0.0	0.0	444.8	164.8	0.0	0.0	164.8	279.9	62.9%	0.0	0.0%	0.0	0.0%	279.9	62.9%
Research, Surveys, Studies Sub Total:	802.6	38.7	132.1	873.3	184.7	3.1	0.0	187.8	317.8	63.2%	35.6	91.9%	132.1	100.0%	488.8	72.1%

# LOE SUMMARY BY BASICS ACTIVITY

10-Jan-85

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
HQ Support																
Country/Regional Programs																
Africa	1,026.8	63.1	0.0	1,089.9	591.7	0.0	0.0	591.7	435.1	42.4%	63.1	100.0%	0.0	0.0%	498.2	45.7%
Asia	349.7	0.0	149.0	498.7	49.7	0.0	0.0	49.7	300.0	85.8%	0.0	0.0%	149.0	100.0%	449.0	90.0%
Latin America/Caribbean	365.7	108.0	8.3	502.0	356.3	0.0	0.0	356.3	29.3	7.6%	108.0	100.0%	8.3	100.0%	145.7	29.0%
Newly Independent States	0.0	499.3	0.0	499.3	0.0	113.9	0.0	113.9	0.0	0.0%	385.4	77.2%	0.0	0.0%	385.4	77.2%
Program Sub Total:	1,762.2	670.8	187.3	2,899.9	997.8	113.9	0.0	1,111.7	764.4	43.4%	666.6	83.0%	187.3	100.0%	1,478.3	67.1%
Technical Quality Assurance	129.5	0.0	0.0	129.5	109.0	0.0	0.0	109.0	20.5	15.8%	0.0	0.0%	0.0	0.0%	20.5	15.8%
Evaluation & MIS	546.0	0.0	0.0	546.0	240.8	0.0	0.0	240.8	305.2	55.9%	0.0	0.0%	0.0	0.0%	305.2	55.9%
Program Management	3,596.0	0.0	0.0	3,596.0	2,482.3	0.0	0.0	2,482.3	1,113.7	31.0%	0.0	0.0%	0.0	0.0%	1,113.7	31.0%
Start-up Costs	0.0	0.0	0.0	0.0	842.2	0.0	0.0	842.2	-842.2	0.0%	0.0	0.0%	0.0	0.0%	-842.2	0.0%
HQ Support Sub Total:	6,033.7	670.8	187.3	6,861.8	4,672.1	113.9	0.0	4,786.1	1,361.8	22.6%	666.6	83.0%	187.3	100.0%	2,076.4	38.2%

	Estimated Budget				Expenditures				Balance Remaining					
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total		
<b>Implementation Monitoring</b>														
Country/Regional Programs														
Africa	0.0	0.0	12.4	12.4	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	12.4	100.0%
Asia	0.0	0.0	57.0	57.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	57.0	100.0%
Newly Independent States	0.0	7.0	18.0	25.0	0.0	8.2	0.0	8.2	0.0	0.0%	-1.2	-17.0%	18.0	100.0%
Program Sub Total:	0.0	7.0	87.4	94.4	0.0	8.2	0.0	8.2	0.0	0.0%	-1.2	-17.0%	87.4	100.0%
Evaluation & MIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%
Implementation Monitoring Sub Total:	0.0	7.0	87.4	94.4	0.0	8.2	0.0	8.2	0.0	0.0%	-1.2	-17.0%	87.4	100.0%
<b>Implementation Support/Commodities</b>														
Country/Regional Programs														
Africa	4.3	14.6	0.0	18.9	0.0	0.0	0.0	0.0	4.3	100.0%	14.6	100.0%	0.0	0.0%
Asia	0.0	0.0	690.0	690.0	2.0	0.0	0.0	2.0	-2.0	0.0%	0.0	0.0%	690.0	100.0%
Latin America/Caribbean	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%
Newly Independent States	0.0	39.0	37.3	76.3	0.0	18.1	0.0	18.1	0.0	0.0%	20.9	53.6%	37.3	100.0%
Program Sub Total:	4.3	53.6	727.3	785.3	2.0	18.1	0.0	20.1	2.3	53.3%	35.5	66.3%	727.3	100.0%
Implementation Support/Commodities Sub Total:	4.3	53.6	727.3	785.3	2.0	18.1	0.0	20.1	2.3	53.3%	35.5	66.3%	727.3	100.0%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Training Courses</b>																
Country/Regional Programs																
Africa	42.3	2.1	126.4	172.8	6.5	0.0	0.2	6.7	35.8	84.6%	2.1	100.0%	126.2	99.9%	166.2	96.1%
Asia	21.7	0.0	57.0	78.7	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	57.0	100.0%	78.7	100.0%
Latin America/Caribbean	0.0	0.0	27.3	27.3	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	27.3	100.0%	27.3	100.0%
Newly Independent States	0.0	531.7	42.0	573.7	0.0	123.4	0.0	123.4	0.0	0.0%	406.3	76.8%	42.0	100.0%	450.3	78.5%
Program Sub Total:	64.0	533.8	264.8	862.6	6.5	123.4	0.2	130.1	67.6	89.9%	418.4	76.9%	264.6	99.9%	722.6	84.7%
Technical Quality Assurance	20.0	0.0	0.0	20.0	0.0	0.0	0.0	0.0	20.0	100.0%	0.0	0.0%	0.0	0.0%	20.0	100.0%
Training Courses Sub Total:	84.0	533.8	264.8	872.6	6.5	123.4	0.2	130.1	77.6	92.3%	418.4	76.9%	264.6	99.9%	742.6	85.1%
<b>Materials Development &amp; Production</b>																
Country/Regional Programs																
Africa	36.0	15.0	62.4	133.4	0.0	16.6	0.0	17.4	35.4	98.3%	-1.8	-11.7%	62.4	100.0%	116.1	87.0%
Asia	21.7	0.0	0.0	21.7	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	0.0	0.0%	21.7	100.0%
Latin America/Caribbean	31.7	0.0	29.3	61.0	19.6	0.0	0.0	19.6	11.9	37.6%	0.0	0.0%	29.3	100.0%	41.3	67.6%
Newly Independent States	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	89.4	15.0	111.8	216.1	29.6	16.6	0.0	37.1	69.6	77.2%	-1.8	-11.7%	111.8	100.0%	179.6	82.8%
Technical Quality Assurance	109.5	0.0	0.0	109.5	72.9	0.0	0.0	72.9	36.6	33.4%	0.0	0.0%	0.0	0.0%	36.6	33.4%
Materials Development & Production Sub Total:	198.9	15.0	111.8	325.8	93.3	16.6	0.0	110.1	106.6	53.1%	-1.8	-11.7%	111.8	100.0%	216.6	66.2%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Program Evaluation</b>																
Country/Regional Programs																
Africa	53.3	35.6	47.4	136.4	0.0	0.4	0.0	0.4	53.3	100.0%	35.2	96.8%	47.4	100.0%	135.9	99.7%
Asia	21.7	17.5	0.0	39.2	4.6	1.5	0.0	6.1	17.1	78.7%	16.0	91.6%	0.0	0.0%	33.1	84.5%
Latin America/Caribbean	0.0	0.0	6.3	6.3	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	6.3	100.0%	6.3	100.0%
Program Sub Total:	75.0	53.1	53.8	181.9	4.6	1.9	0.0	6.5	70.4	93.8%	51.2	96.4%	53.8	100.0%	175.4	96.4%
Program Evaluation Sub Total:	75.0	53.1	53.8	181.9	4.6	1.9	0.0	6.5	70.4	93.8%	51.2	96.4%	53.8	100.0%	175.4	96.4%
<b>STTA not covered elsewhere</b>																
Country/Regional Programs																
Africa	0.0	12.5	0.0	12.5	0.0	0.0	0.0	0.0	0.0	0.0%	12.5	100.0%	0.0	0.0%	12.5	100.0%
Program Sub Total:	0.0	12.5	0.0	12.5	0.0	0.0	0.0	0.0	0.0	0.0%	12.5	100.0%	0.0	0.0%	12.5	100.0%
STTA not covered elsewhere Sub Total:	0.0	12.5	0.0	12.5	0.0	0.0	0.0	0.0	0.0	0.0%	12.5	100.0%	0.0	0.0%	12.5	100.0%
<b>Participant Training</b>																
Country/Regional Programs																
Africa	0.0	0.0	12.4	12.4	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	12.4	100.0%	12.4	100.0%
Asia	21.7	0.0	0.0	21.7	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	0.0	0.0%	21.7	100.0%
Program Sub Total:	21.7	0.0	12.4	34.1	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	12.4	100.0%	34.1	100.0%
Participant Training Sub Total:	21.7	0.0	12.4	34.1	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	12.4	100.0%	34.1	100.0%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Seminars, Conferences</b>																
<b>Country/Regional Programs</b>																
Africa	0.0	5.0	0.0	5.0	0.0	3.0	0.0	3.0	0.0	0.0%	2.0	40.6%	0.0	0.0%	2.0	40.6%
Latin America/Caribbean	7.0	0.0	6.0	13.0	1.7	0.0	0.0	1.7	5.3	75.9%	0.0	0.0%	6.0	100.0%	11.3	87.0%
Newly Independent States	0.0	27.3	0.0	27.3	0.0	0.6	0.0	0.6	0.0	0.0%	26.6	97.7%	0.0	0.0%	26.6	97.7%
Interregional	0.0	12.0	0.0	12.0	0.0	19.8	0.0	19.8	0.0	0.0%	-7.8	-65.1%	0.0	0.0%	-7.8	-65.1%
<b>Program Sub Total:</b>	<b>7.0</b>	<b>44.3</b>	<b>6.0</b>	<b>57.3</b>	<b>1.7</b>	<b>23.4</b>	<b>0.0</b>	<b>25.1</b>	<b>5.3</b>	<b>76.9%</b>	<b>26.6</b>	<b>47.1%</b>	<b>6.0</b>	<b>100.0%</b>	<b>32.2</b>	<b>56.2%</b>
Technical Quality Assurance	0.0	1.0	0.0	1.0	56.1	0.0	0.0	56.1	-56.1	0.0%	1.0	100.0%	0.0	0.0%	-55.1	-512.5%
Conference/Workshops	0.0	0.0	0.0	0.0	57.9	0.0	0.0	57.9	-57.9	0.0%	0.0	0.0%	0.0	0.0%	-57.9	0.0%
<b>Seminars, Conferences Sub Total:</b>	<b>7.0</b>	<b>45.3</b>	<b>6.0</b>	<b>58.3</b>	<b>118.7</b>	<b>23.4</b>	<b>0.0</b>	<b>139.1</b>	<b>-102.7</b>	<b>662.7%</b>	<b>21.6</b>	<b>48.3%</b>	<b>6.0</b>	<b>100.0%</b>	<b>-80.8</b>	<b>138.6%</b>
<b>Info Dissemination</b>																
<b>Country/Regional Programs</b>																
Africa	0.0	10.0	0.0	10.0	7.6	0.0	0.0	7.6	-7.6	0.0%	10.0	100.0%	0.0	0.0%	2.4	23.8%
Asia	21.7	0.0	57.0	78.7	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	57.0	100.0%	78.7	100.0%
Interregional	0.0	5.0	0.0	5.0	0.0	0.0	0.0	0.0	0.0	0.0%	5.0	100.0%	0.0	0.0%	5.0	100.0%
<b>Program Sub Total:</b>	<b>21.7</b>	<b>15.0</b>	<b>57.0</b>	<b>93.7</b>	<b>7.6</b>	<b>0.0</b>	<b>0.0</b>	<b>7.6</b>	<b>14.1</b>	<b>64.9%</b>	<b>15.0</b>	<b>100.0%</b>	<b>57.0</b>	<b>100.0%</b>	<b>89.1</b>	<b>91.9%</b>
Information Dissemination	702.0	0.0	0.0	702.0	533.4	0.0	0.0	533.4	168.6	24.0%	0.0	0.0%	0.0	0.0%	168.6	24.0%
<b>Info Dissemination Sub Total:</b>	<b>723.7</b>	<b>15.0</b>	<b>57.0</b>	<b>795.7</b>	<b>541.1</b>	<b>0.0</b>	<b>0.0</b>	<b>541.1</b>	<b>182.6</b>	<b>26.2%</b>	<b>15.0</b>	<b>100.0%</b>	<b>57.0</b>	<b>100.0%</b>	<b>264.6</b>	<b>32.0%</b>

BEST AVAILABLE COPY

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
>3 above																
Country/Regional Programs																
Africa	577.8	134.1	463.0	1,174.9	398.2	0.0	232.6	630.8	179.6	31.1%	134.1	100.0%	230.4	48.8%	544.1	46.3%
Asia	78.7	0.0	0.0	78.7	25.0	0.0	0.0	25.0	53.7	68.2%	0.0	0.0%	0.0	0.0%	53.7	68.2%
Latin America/Caribbean	64.0	88.0	96.0	250.0	101.3	122.8	34.9	259.0	-37.3	-58.3%	-34.8	-39.5%	63.1	64.3%	-9.0	-3.6%
Newly Independent States	0.0	56.3	7.3	63.6	0.0	10.6	0.0	10.6	0.0	0.0%	45.7	81.2%	7.3	100.0%	53.0	83.4%
Interregional	0.0	39.0	0.0	39.0	0.0	0.0	0.0	0.0	0.0	0.0%	39.0	100.0%	0.0	0.0%	39.0	100.0%
<b>Program Sub Total:</b>	<b>720.5</b>	<b>317.4</b>	<b>668.3</b>	<b>1,696.2</b>	<b>624.6</b>	<b>133.3</b>	<b>267.6</b>	<b>925.4</b>	<b>198.0</b>	<b>27.2%</b>	<b>184.1</b>	<b>88.0%</b>	<b>306.8</b>	<b>82.9%</b>	<b>688.8</b>	<b>42.4%</b>
<b>&gt;3 above Sub Total:</b>	<b>720.5</b>	<b>317.4</b>	<b>668.3</b>	<b>1,696.2</b>	<b>624.6</b>	<b>133.3</b>	<b>267.6</b>	<b>925.4</b>	<b>198.0</b>	<b>27.2%</b>	<b>184.1</b>	<b>88.0%</b>	<b>306.8</b>	<b>82.9%</b>	<b>688.8</b>	<b>42.4%</b>
<b>Grand Total:</b>	<b>16,813.0</b>	<b>3,278.0</b>	<b>3,206.0</b>	<b>17,296.0</b>	<b>8,004.8</b>	<b>883.7</b>	<b>318.3</b>	<b>9,314.4</b>	<b>2,808.8</b>	<b>28.0%</b>	<b>2,284.3</b>	<b>69.7%</b>	<b>2,888.8</b>	<b>88.1%</b>	<b>7,981.8</b>	<b>46.1%</b>

BEST AVAILABLE COPY

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Advocacy</b>																
Country/Regional Programs																
Africa	4.3	2.1	0.0	6.4	0.0	0.0	0.0	0.0	4.3	100.0%	2.1	100.0%	0.0	0.0%	6.4	100.0%
<b>Program Sub Total:</b>	<b>4.3</b>	<b>2.1</b>	<b>0.0</b>	<b>6.4</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>4.3</b>	<b>100.0%</b>	<b>2.1</b>	<b>100.0%</b>	<b>0.0</b>	<b>0.0%</b>	<b>6.4</b>	<b>100.0%</b>
<b>Advocacy Sub Total:</b>	<b>4.3</b>	<b>2.1</b>	<b>0.0</b>	<b>6.4</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>4.3</b>	<b>100.0%</b>	<b>2.1</b>	<b>100.0%</b>	<b>0.0</b>	<b>0.0%</b>	<b>6.4</b>	<b>100.0%</b>
<b>Strategy/Policy Development</b>																
Country/Regional Programs																
Africa	0.0	61.0	0.0	61.0	7.6	46.0	0.0	53.6	-7.6	0.0%	15.0	24.6%	0.0	0.0%	7.4	12.1%
Latin America/Caribbean	11.0	0.0	30.0	41.0	1.4	0.0	2.6	4.0	9.6	87.5%	0.0	0.0%	27.4	91.3%	37.0	90.2%
Newly Independent States	0.0	48.1	0.0	48.1	0.0	13.4	0.0	13.4	0.0	0.0%	34.7	72.1%	0.0	0.0%	34.7	72.1%
<b>Program Sub Total:</b>	<b>11.0</b>	<b>109.1</b>	<b>30.0</b>	<b>150.1</b>	<b>9.0</b>	<b>59.4</b>	<b>2.6</b>	<b>71.0</b>	<b>2.0</b>	<b>18.2%</b>	<b>49.7</b>	<b>48.6%</b>	<b>27.4</b>	<b>91.3%</b>	<b>78.1</b>	<b>82.7%</b>
Technical Quality Assurance	667.6	0.0	0.0	667.6	217.8	0.0	0.0	217.8	670.0	75.5%	0.0	0.0%	0.0	0.0%	670.0	75.5%
Program Management	0.0	0.0	0.0	0.0	1.6	0.0	0.0	1.6	-1.6	0.0%	0.0	0.0%	0.0	0.0%	-1.6	0.0%
<b>Strategy/Policy Development Sub Total:</b>	<b>688.6</b>	<b>109.1</b>	<b>30.0</b>	<b>1,837.8</b>	<b>228.8</b>	<b>59.4</b>	<b>2.6</b>	<b>290.8</b>	<b>670.4</b>	<b>74.6%</b>	<b>49.7</b>	<b>48.6%</b>	<b>27.4</b>	<b>91.3%</b>	<b>747.4</b>	<b>72.0%</b>

BEST AVAILABLE COPY

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>EPI</b>																
Country/Regional Programs																
Africa	\$167,958.00	\$105,634.00	\$0.00	\$273,592.00	\$53,896.05	\$0.00	\$693.83	\$54,589.88	\$114,059.95	67.9%	\$105,634.00	100.0%	(\$693.83)	0.0%	\$219,000.12	80.0%
Asia	\$223,467.50	\$0.00	\$1,948,434.00	\$2,171,901.50	\$13,996.20	\$0.00	\$0.00	\$13,996.20	\$209,471.30	93.7%	\$0.00	0.0%	\$1,948,434.00	100.0%	\$2,157,905.30	99.4%
Latin America/Caribbean	\$0.00	\$0.00	\$0.00	\$0.00	\$1,904.83	\$0.00	\$0.00	\$1,904.83	(\$1,904.83)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,904.83)	0.0%
Newly Independent States	\$0.00	\$684,856.00	\$300,410.00	\$1,165,266.00	\$0.00	\$205,416.23	\$0.00	\$205,416.23	\$0.00	0.0%	\$659,439.77	76.2%	\$300,410.00	100.0%	\$959,849.77	82.4%
Program Sub Total:	\$391,423.50	\$979,490.00	\$2,248,844.00	\$3,619,757.50	\$69,797.08	\$205,416.23	\$693.83	\$275,907.13	\$321,826.42	82.2%	\$766,073.77	78.8%	\$2,248,168.17	100.0%	\$3,334,866.37	82.4%
Technical Quality Assurance	\$168,382.75	\$1,067.00	\$0.00	\$169,449.75	\$115,440.83	\$0.00	\$0.00	\$115,440.83	\$52,941.92	31.4%	\$1,067.00	100.0%	\$0.00	0.0%	\$54,008.92	31.9%
Program Management	\$0.00	\$0.00	\$0.00	\$0.00	\$962.41	\$0.00	\$0.00	\$962.41	(\$962.41)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$962.41)	0.0%
EPI Sub Total:	\$869,806.25	\$971,557.00	\$2,248,844.00	\$3,780,207.25	\$188,206.31	\$205,416.23	\$693.83	\$392,316.37	\$373,808.94	66.7%	\$766,140.77	78.8%	\$2,248,168.17	100.0%	\$3,387,896.88	89.6%
<b>Malaria</b>																
Country/Regional Programs																
Africa	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,271.09	\$8,271.09	\$0.00	0.0%	\$0.00	0.0%	(\$8,271.09)	0.0%	(\$8,271.09)	0.0%
Program Sub Total:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,271.09	\$8,271.09	\$0.00	0.0%	\$0.00	0.0%	(\$8,271.09)	0.0%	(\$8,271.09)	0.0%
Technical Quality Assurance	\$201,232.50	\$0.00	\$0.00	\$201,232.50	\$82,444.34	\$0.00	\$0.00	\$82,444.34	\$118,788.16	59.0%	\$0.00	0.0%	\$0.00	0.0%	\$118,788.16	59.0%
Malaria Sub Total:	\$201,232.50	\$0.00	\$0.00	\$201,232.50	\$82,444.34	\$0.00	\$8,271.09	\$90,715.43	\$118,788.16	59.0%	\$0.00	0.0%	(\$8,271.09)	0.0%	\$110,517.67	54.9%
<b>Micronutrients, Nutrition, Breastfeeding</b>																
Country/Regional Programs																
Africa	\$0.00	\$12,536.00	\$0.00	\$12,536.00	\$0.00	\$11,244.88	\$0.00	\$11,244.88	\$0.00	0.0%	\$1,291.42	10.3%	\$0.00	0.0%	\$1,291.42	10.3%
Latin America/Caribbean	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,361.32	\$1,361.32	\$0.00	0.0%	\$0.00	0.0%	(\$1,361.32)	0.0%	(\$1,361.32)	0.0%
Program Sub Total:	\$0.00	\$12,536.00	\$0.00	\$12,536.00	\$0.00	\$11,244.88	\$1,361.32	\$12,606.91	\$0.00	0.0%	\$1,291.42	10.3%	(\$1,361.32)	0.0%	(\$69.91)	-0.6%
Micronutrients, Nutrition, Breastfeeding Sub Total:	\$0.00	\$12,536.00	\$0.00	\$12,536.00	\$0.00	\$11,244.88	\$1,361.32	\$12,606.91	\$0.00	0.0%	\$1,291.42	10.3%	(\$1,361.32)	0.0%	(\$69.91)	-0.6%

BEST AVAILABLE COPY

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Country/Regional Programs</b>																
Africa	0.0	0.0	0.0	0.0	3.4	0.0	0.0	3.4	-3.4	0.0%	0.0	0.0%	0.0	0.0%	-3.4	0.0%
Program Sub Total:	0.0	0.0	0.0	0.0	3.4	0.0	0.0	3.4	-3.4	0.0%	0.0	0.0%	0.0	0.0%	-3.4	0.0%
Sub Total:	0.0	0.0	0.0	0.0	3.4	0.0	0.0	3.4	-3.4	0.0%	0.0	0.0%	0.0	0.0%	-3.4	0.0%
<b>As Yet Unknown</b>																
<b>Country/Regional Programs</b>																
Africa	93.0	105.0	0.0	198.0	213.6	0.0	0.0	213.6	-120.6	129.7%	105.0	100.0%	0.0	0.0%	-15.0	-7.9%
Latin America/Caribbean	0.0	0.0	0.0	0.0	0.9	0.0	0.0	0.9	-0.9	0.0%	0.0	0.0%	0.0	0.0%	-0.9	0.0%
Newly Independent States	0.0	0.0	823.0	823.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	823.0	100.0%	823.0	100.0%
Interregional	0.0	54.0	0.0	54.0	0.0	0.0	0.0	0.0	0.0	0.0%	54.0	100.0%	0.0	0.0%	54.0	100.0%
Program Sub Total:	93.0	159.0	823.0	1,075.0	214.5	0.0	0.0	214.5	-121.5	139.7%	159.0	100.0%	823.0	100.0%	866.4	89.8%
Technical Quality Assurance	0.0	0.0	0.0	0.0	6.8	0.0	0.0	6.8	-6.8	0.0%	0.0	0.0%	0.0	0.0%	-6.8	0.0%
As Yet Unknown Sub Total:	93.0	159.0	823.0	1,075.0	221.3	0.0	0.0	221.3	-128.3	139.6%	159.0	100.0%	823.0	100.0%	859.7	79.4%
<b>Other</b>																
<b>Country/Regional Programs</b>																
Asia	21.7	0.0	0.0	21.7	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	0.0	0.0%	21.7	100.0%
Program Sub Total:	21.7	0.0	0.0	21.7	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	0.0	0.0%	21.7	100.0%
Other Sub Total:	21.7	0.0	0.0	21.7	0.0	0.0	0.0	0.0	21.7	100.0%	0.0	0.0%	0.0	0.0%	21.7	100.0%

BEST AVAILABLE COPY

18

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>As Yet Unknown</b>																
<b>Country/Regional Programs</b>																
Africa	\$213,481.00	\$101,312.00	\$0.00	\$314,793.00	\$156,354.69	\$0.00	\$0.00	\$156,354.69	\$57,126.31	26.8%	\$101,312.00	100.0%	\$0.00	0.0%	\$156,436.31	50.3%
Latin America/Caribbean	\$135,781.00	\$0.00	\$0.00	\$135,781.00	\$40,960.67	\$0.00	\$0.00	\$40,960.67	\$94,820.33	69.6%	\$0.00	0.0%	\$0.00	0.0%	\$94,820.33	69.6%
Newly Independent States	\$0.00	\$0.00	\$988,059.00	\$988,059.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$988,059.00	100.0%	\$988,059.00	100.0%
<b>Program Sub Total:</b>	<b>\$349,262.00</b>	<b>\$101,312.00</b>	<b>\$988,059.00</b>	<b>\$1,438,633.00</b>	<b>\$197,315.36</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$197,315.36</b>	<b>\$161,946.64</b>	<b>43.6%</b>	<b>\$101,312.00</b>	<b>100.0%</b>	<b>\$988,059.00</b>	<b>100.0%</b>	<b>\$1,241,317.64</b>	<b>86.3%</b>
Technical Quality Assurance	\$0.00	\$0.00	\$0.00	\$0.00	\$5,712.57	\$0.00	\$0.00	\$5,712.57	(\$5,712.57)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$5,712.57)	0.0%
<b>As Yet Unknown Sub Total:</b>	<b>\$349,262.00</b>	<b>\$101,312.00</b>	<b>\$988,059.00</b>	<b>\$1,438,633.00</b>	<b>\$203,027.93</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$203,027.93</b>	<b>\$146,234.07</b>	<b>41.9%</b>	<b>\$101,312.00</b>	<b>100.0%</b>	<b>\$988,059.00</b>	<b>100.0%</b>	<b>\$1,236,005.07</b>	<b>86.9%</b>
<b>Other</b>																
<b>Country/Regional Programs</b>																
Africa	\$0.00	\$0.00	\$0.00	\$0.00	\$16.43	\$528.61	\$0.00	\$545.04	(\$16.43)	0.0%	(\$528.61)	0.0%	\$0.00	0.0%	(\$545.04)	0.0%
<b>Program Sub Total:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$16.43</b>	<b>\$528.61</b>	<b>\$0.00</b>	<b>\$545.04</b>	<b>(\$16.43)</b>	<b>0.0%</b>	<b>(\$528.61)</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$545.04)</b>	<b>0.0%</b>
<b>Other Sub Total:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$16.43</b>	<b>\$528.61</b>	<b>\$0.00</b>	<b>\$545.04</b>	<b>(\$16.43)</b>	<b>0.0%</b>	<b>(\$528.61)</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$545.04)</b>	<b>0.0%</b>
<b>&gt;3 above</b>																
<b>Country/Regional Programs</b>																
Africa	\$978.00	\$139,030.00	\$0.00	\$140,008.00	\$39,484.10	\$128,260.80	\$0.00	\$167,744.91	(\$38,506.10)	93.2%	\$10,769.20	7.7%	\$0.00	0.0%	(\$27,736.91)	-19.8%
Newly Independent States	\$0.00	\$15,044.00	\$0.00	\$15,044.00	\$0.00	\$19,961.38	\$0.00	\$19,961.38	\$0.00	0.0%	(\$4,917.38)	-32.7%	\$0.00	0.0%	(\$4,917.38)	-32.7%
<b>Program Sub Total:</b>	<b>\$978.00</b>	<b>\$154,074.00</b>	<b>\$0.00</b>	<b>\$155,052.00</b>	<b>\$39,484.10</b>	<b>\$148,222.18</b>	<b>\$0.00</b>	<b>\$187,706.29</b>	<b>(\$38,506.10)</b>	<b>93.2%</b>	<b>\$6,851.81</b>	<b>3.8%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$32,654.29)</b>	<b>-21.1%</b>
Technical Quality Assurance	\$90,402.25	\$0.00	\$0.00	\$90,402.25	\$19,321.84	\$0.00	\$0.00	\$19,321.84	\$71,080.41	78.6%	\$0.00	0.0%	\$0.00	0.0%	\$71,080.41	78.6%
Information Dissemination	\$260,284.00	\$0.00	\$0.00	\$260,284.00	\$201,971.39	\$0.00	\$0.00	\$201,971.39	\$58,312.61	22.4%	\$0.00	0.0%	\$0.00	0.0%	\$58,312.61	22.4%
Evaluation & MIS	\$1,141,960.00	\$0.00	\$0.00	\$1,141,960.00	\$375,665.78	\$0.00	\$0.00	\$375,665.78	\$766,294.22	67.1%	\$0.00	0.0%	\$0.00	0.0%	\$766,294.22	67.1%
Program Management	\$2,753,696.00	\$0.00	\$0.00	\$2,753,696.00	\$2,423,563.03	\$0.00	\$0.00	\$2,423,563.03	\$330,134.97	12.0%	\$0.00	0.0%	\$0.00	0.0%	\$330,134.97	12.0%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$12,746.03	\$0.00	\$0.00	\$12,746.03	(\$12,746.03)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$12,746.03)	0.0%
<b>&gt;3 above Sub Total:</b>	<b>\$4,247,322.25</b>	<b>\$154,074.00</b>	<b>\$0.00</b>	<b>\$4,401,396.25</b>	<b>\$3,072,782.16</b>	<b>\$148,222.18</b>	<b>\$0.00</b>	<b>\$3,220,974.35</b>	<b>\$1,174,878.09</b>	<b>27.7%</b>	<b>\$6,851.81</b>	<b>3.8%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$1,188,421.06</b>	<b>26.8%</b>

BEST AVAILABLE COPY

# FINANCIAL SUMMARY BY PROGRAM/DISEASE INTERVENTION

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>ARI</b>																
Country/Regional Programs																
Africa	\$194,280.00	\$44,431.00	\$165,497.00	\$404,208.00	\$86,131.61	\$19,400.78	\$24,757.61	\$130,289.99	\$108,148.39	55.7%	\$25,030.22	56.3%	\$140,739.39	85.0%	\$273,918.01	67.6%
Latin America/Caribbean	\$76,653.00	\$23,808.50	\$126,259.50	\$226,721.00	\$47,447.18	\$25,638.98	\$17,389.82	\$90,475.99	\$29,205.82	38.1%	(\$1,830.48)	-7.7%	\$108,069.68	86.2%	\$136,245.01	60.1%
Program Sub Total:	\$270,933.00	\$68,239.50	\$291,786.50	\$630,929.00	\$133,678.79	\$45,039.76	\$42,147.43	\$220,766.98	\$137,354.21	66.7%	\$23,199.74	34.6%	\$248,809.07	88.6%	\$410,163.02	66.0%
Technical Quality Assurance	\$119,080.00	\$0.00	\$0.00	\$119,080.00	\$15,572.91	\$0.00	\$0.00	\$15,572.91	\$103,507.09	86.9%	\$0.00	0.0%	\$0.00	0.0%	\$103,507.09	86.9%
ARI Sub Total:	\$390,013.00	\$68,239.50	\$291,786.50	\$760,009.00	\$149,251.70	\$45,039.76	\$42,147.43	\$236,338.89	\$240,861.30	61.8%	\$23,199.74	34.0%	\$248,809.07	88.6%	\$613,878.11	68.6%
<b>CDD, Cholera, Dysentery</b>																
Country/Regional Programs																
Africa	\$464,941.00	\$74,591.00	\$595,912.00	\$1,135,444.00	\$343,473.18	\$55,759.06	\$138,268.40	\$537,490.65	\$121,467.82	26.1%	\$18,831.94	25.2%	\$457,645.60	76.8%	\$597,945.35	52.7%
Asia	\$67,650.00	\$0.00	\$0.00	\$67,650.00	\$105,348.72	\$0.00	\$0.00	\$105,348.72	(\$37,698.72)	-55.7%	\$0.00	0.0%	\$0.00	0.0%	(\$37,698.72)	-55.7%
Latin America/Caribbean	\$147,445.00	\$83,625.50	\$264,715.50	\$495,786.00	\$127,401.13	\$55,796.74	\$50,409.88	\$233,607.56	\$20,043.87	13.6%	\$27,828.76	33.3%	\$214,305.82	81.0%	\$262,178.44	52.9%
Program Sub Total:	\$680,036.00	\$158,216.50	\$880,627.50	\$1,698,880.00	\$576,223.03	\$111,555.81	\$188,678.28	\$876,454.92	\$103,812.97	16.3%	\$46,660.69	28.5%	\$671,981.42	78.1%	\$869,312.08	48.4%
Technical Quality Assurance	\$169,638.25	\$0.00	\$0.00	\$169,638.25	\$17,549.99	\$0.00	\$0.00	\$17,549.99	\$152,088.26	89.7%	\$0.00	0.0%	\$0.00	0.0%	\$152,088.26	89.7%
Information Dissemination	\$16,089.00	\$0.00	\$0.00	\$16,089.00	\$17,298.51	\$0.00	\$0.00	\$17,298.51	(\$1,209.51)	-7.5%	\$0.00	0.0%	\$0.00	0.0%	(\$1,209.51)	-7.5%
Conference/Workshops	\$0.00	\$0.00	\$0.00	\$0.00	\$103,991.64	\$0.00	\$0.00	\$103,991.64	(\$103,991.64)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$103,991.64)	0.0%
CDD, Cholera, Dysentery Sub Total:	\$866,763.25	\$158,216.50	\$880,627.50	\$1,844,667.25	\$716,663.18	\$111,555.81	\$188,678.28	\$1,016,298.07	\$169,768.97	17.4%	\$46,660.69	28.6%	\$671,981.42	78.1%	\$869,312.18	46.1%

BEST AVAILABLE COPY

120

# LOE SUMMARY BY PROGRAM/DISEASE INTERVENTION

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
ARI																
Country/Regional Programs																
Africa	389.0	20.0	217.0	626.0	233.9	1.0	104.6	339.5	155.1	39.9%	19.0	95.0%	112.4	51.8%	286.5	45.8%
Latin America/Caribbean	129.0	56.0	142.5	327.5	99.7	65.6	0.0	165.3	29.3	22.7%	-9.6	-17.6%	142.5	100.0%	162.0	49.5%
Program Sub Total:	518.0	76.0	359.5	953.5	333.6	66.6	104.6	504.8	184.4	35.6%	9.2	12.6%	254.9	76.9%	448.5	47.0%
Technical Quality Assurance	133.0	0.0	0.0	133.0	10.1	0.0	0.0	10.1	122.9	92.4%	0.0	0.0%	0.0	0.0%	122.9	92.4%
ARI Sub Total:	651.0	76.0	359.5	1,086.5	343.7	66.6	104.6	514.9	307.3	47.2%	9.2	12.6%	254.9	76.9%	571.4	62.8%

BEST AVAILABLE COPY

12/1

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Sick Child</b>																
Country/Regional Programs																
Africa	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$16,358.74	\$0.00	\$16,358.74	\$0.00	0.0%	(\$16,358.74)	0.0%	\$0.00	0.0%	(\$16,358.74)	0.0%
Program Sub Total:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$16,358.74	\$0.00	\$16,358.74	\$0.00	0.0%	(\$16,358.74)	0.0%	\$0.00	0.0%	(\$16,358.74)	0.0%
Technical Quality Assurance	\$226,245.25	\$0.00	\$0.00	\$226,245.25	\$169,646.38	\$0.00	\$0.00	\$169,646.38	\$56,598.87	25.0%	\$0.00	0.0%	\$0.00	0.0%	\$56,598.87	25.0%
Sick Child Sub Total:	\$226,245.25	\$0.00	\$0.00	\$226,245.25	\$169,646.38	\$16,358.74	\$0.00	\$186,005.13	\$66,598.87	28.0%	(\$16,358.74)	0.0%	\$0.00	0.0%	\$49,240.12	17.8%
<b>General Child Survival</b>																
Country/Regional Programs																
Africa	\$778,830.00	\$610,897.00	\$0.00	\$1,389,727.00	\$305,437.42	\$325,574.84	\$2,461.40	\$633,473.65	\$473,392.58	60.8%	\$285,322.16	46.7%	(\$2,461.40)	0.0%	\$758,253.35	54.4%
Asia	\$655,869.50	\$0.00	\$0.00	\$655,869.50	\$190,035.23	\$0.00	\$0.00	\$190,035.23	\$465,864.27	71.0%	\$0.00	0.0%	\$0.00	0.0%	\$465,864.27	71.0%
Latin America/Caribbean	\$165,863.00	\$0.00	\$0.00	\$165,863.00	\$159,816.20	\$0.00	\$0.00	\$159,816.20	\$6,046.80	3.6%	\$0.00	0.0%	\$0.00	0.0%	\$6,046.80	3.6%
Program Sub Total:	\$1,600,562.50	\$610,897.00	\$0.00	\$2,211,459.50	\$655,288.84	\$328,674.84	\$2,461.40	\$983,328.08	\$945,303.66	69.1%	\$285,322.16	46.7%	(\$2,461.40)	0.0%	\$1,228,164.42	68.6%
Technical Quality Assurance	\$368,270.00	\$0.00	\$0.00	\$368,270.00	\$135,795.55	\$0.00	\$0.00	\$135,795.55	\$232,474.45	63.1%	\$0.00	0.0%	\$0.00	0.0%	\$232,474.45	63.1%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$1,147,312.18	\$0.00	\$0.00	\$1,147,312.18	(\$1,147,312.18)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,147,312.18)	0.0%
General Child Survival Sub Total:	\$1,968,862.50	\$610,897.00	\$0.00	\$2,579,759.50	\$1,938,398.67	\$328,674.84	\$2,461.40	\$2,269,432.81	\$30,465.93	1.8%	\$285,322.16	46.7%	(\$2,461.40)	0.0%	\$313,328.69	12.1%
<b>War Victims</b>																
Country/Regional Programs																
Africa	\$0.00	\$51,445.00	\$0.00	\$51,445.00	\$0.00	\$48,175.36	\$0.00	\$48,175.36	\$0.00	0.0%	\$3,269.64	6.4%	\$0.00	0.0%	\$3,269.64	6.4%
Asia	\$0.00	\$113,512.00	\$0.00	\$113,512.00	\$0.00	\$62,281.55	\$0.00	\$62,281.55	\$0.00	0.0%	\$51,250.45	45.1%	\$0.00	0.0%	\$51,250.45	45.1%
Interregional	\$0.00	\$85,068.00	\$0.00	\$85,068.00	\$0.00	\$46,293.50	\$0.00	\$46,293.50	\$0.00	0.0%	\$38,794.50	45.6%	\$0.00	0.0%	\$38,794.50	45.6%
Program Sub Total:	\$0.00	\$250,045.00	\$0.00	\$250,045.00	\$0.00	\$156,730.42	\$0.00	\$156,730.42	\$0.00	0.0%	\$93,314.68	37.3%	\$0.00	0.0%	\$93,314.68	37.3%
War Victims Sub Total:	\$0.00	\$250,045.00	\$0.00	\$250,045.00	\$0.00	\$156,730.42	\$0.00	\$156,730.42	\$0.00	0.0%	\$93,314.68	37.3%	\$0.00	0.0%	\$93,314.68	37.3%

BEST AVAILABLE COPY

122

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>EPI</b>																
Country/Regional Programs																
Africa	366.0	40.0	0.0	406.0	16.2	0.0	0.0	16.2	349.8	95.6%	40.0	100.0%	0.0	0.0%	369.8	96.0%
Asia	175.5	0.0	1,067.0	1,242.5	19.4	0.0	0.0	19.4	156.1	88.9%	0.0	0.0%	1,067.0	100.0%	1,223.1	98.4%
Latin America/Caribbean	0.0	0.0	0.0	0.0	5.9	0.0	0.0	5.9	-5.9	0.0%	0.0	0.0%	0.0	0.0%	-5.9	0.0%
Newly Independent States	0.0	1,771.0	190.0	1,961.0	0.0	406.2	0.0	406.2	0.0	0.0%	1,362.8	77.0%	190.0	100.0%	1,552.8	79.2%
Program Sub Total:	641.6	1,811.0	1,267.0	3,808.6	41.6	406.2	0.0	447.7	606.6	82.3%	1,402.8	77.6%	1,267.0	100.0%	3,169.8	87.6%
Technical Quality Assurance	195.3	1.0	0.0	196.3	135.4	0.0	0.0	135.4	59.8	30.6%	1.0	100.0%	0.0	0.0%	60.8	31.0%
Program Management	0.0	0.0	0.0	0.0	1.6	0.0	0.0	1.6	-1.6	0.0%	0.0	0.0%	0.0	0.0%	-1.6	0.0%
EPI Sub Total:	736.9	1,812.0	1,267.0	3,808.8	178.6	406.2	0.0	584.7	668.2	76.8%	1,403.8	77.6%	1,267.0	100.0%	3,219.0	84.6%
<b>Malaria</b>																
Country/Regional Programs																
Africa	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Technical Quality Assurance	289.5	0.0	0.0	289.5	109.1	0.0	0.0	109.1	180.4	62.3%	0.0	0.0%	0.0	0.0%	180.4	62.3%
Malaria Sub Total:	289.5	0.0	0.0	289.5	109.1	0.0	0.0	109.1	180.4	62.3%	0.0	0.0%	0.0	0.0%	180.4	62.3%

BEST AVAILABLE COPY

123



	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>General Child Survival</b>																
Country/Regional Programs																
Africa	806.0	681.0	0.0	1,487.0	350.3	234.9	0.0	585.3	455.7	56.5%	446.1	65.5%	0.0	0.0%	901.8	60.6%
Asia	720.5	0.0	0.0	720.5	172.4	0.0	0.0	172.4	548.1	76.1%	0.0	0.0%	0.0	0.0%	548.1	76.1%
Latin America/Caribbean	157.0	0.0	0.0	157.0	154.1	0.0	0.0	154.1	2.9	1.8%	0.0	0.0%	0.0	0.0%	2.9	1.8%
Program Sub Total:	1,683.5	681.0	0.0	2,364.5	676.8	234.9	0.0	911.8	1,006.6	69.8%	446.1	66.6%	0.0	0.0%	1,482.7	61.4%
Technical Quality Assurance	523.0	0.0	0.0	523.0	181.4	0.0	0.0	181.4	341.6	65.3%	0.0	0.0%	0.0	0.0%	341.6	65.3%
Start-up Costs	0.0	0.0	0.0	0.0	1,638.2	0.0	0.0	1,638.2	-1,638.2	0.0%	0.0	0.0%	0.0	0.0%	-1,638.2	0.0%
General Child Survival Sub Total:	2,206.5	681.0	0.0	2,887.5	2,496.4	234.9	0.0	2,731.4	-289.9	-13.1%	446.1	66.6%	0.0	0.0%	166.1	6.4%
<b>War Victims</b>																
Country/Regional Programs																
Africa	0.0	67.0	0.0	67.0	0.0	0.9	0.0	0.9	0.0	0.0%	66.1	98.7%	0.0	0.0%	66.1	98.7%
Asia	0.0	57.0	0.0	57.0	0.0	6.3	0.0	6.3	0.0	0.0%	50.7	88.9%	0.0	0.0%	50.7	88.9%
Interregional	0.0	115.0	0.0	115.0	0.0	23.5	0.0	23.5	0.0	0.0%	91.5	79.6%	0.0	0.0%	91.5	79.6%
Program Sub Total:	0.0	239.0	0.0	239.0	0.0	30.7	0.0	30.7	0.0	0.0%	208.3	87.1%	0.0	0.0%	208.3	87.1%
War Victims Sub Total:	0.0	239.0	0.0	239.0	0.0	30.7	0.0	30.7	0.0	0.0%	208.3	87.1%	0.0	0.0%	208.3	87.1%

BEST AVAILABLE COPY

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
CDD, Cholera, Dysentery																
Country/Regional Programs																
Africa	597.0	35.0	554.0	1,186.0	520.8	28.8	128.2	675.7	76.3	12.8%	8.3	23.6%	425.8	76.8%	510.3	43.0%
Asia	87.0	0.0	0.0	87.0	115.0	0.0	0.0	115.0	-48.0	-71.7%	0.0	0.0%	0.0	0.0%	-48.0	-71.7%
Latin America/Caribbean	297.0	164.0	211.5	672.5	271.7	93.8	82.5	447.8	25.3	8.5%	70.4	42.9%	129.0	61.0%	224.8	33.4%
Program Sub Total:	981.0	199.0	766.6	1,926.6	967.4	128.3	210.7	1,238.8	63.6	6.6%	78.7	39.8%	664.8	72.8%	887.8	36.7%
Technical Quality Assurance	204.8	0.0	0.0	204.8	15.8	0.0	0.0	15.8	189.2	92.4%	0.0	0.0%	0.0	0.0%	189.2	92.4%
Information Dissemination	68.0	0.0	0.0	68.0	63.4	0.0	0.0	63.4	4.6	6.7%	0.0	0.0%	0.0	0.0%	4.6	6.7%
Conference/Workshops	0.0	0.0	0.0	0.0	57.9	0.0	0.0	57.9	-57.9	0.0%	0.0	0.0%	0.0	0.0%	-57.9	0.0%
CDD, Cholera, Dysentery Sub Total:	1,233.8	199.0	766.6	2,199.3	1,044.3	128.3	210.7	1,375.4	189.4	18.4%	78.7	39.8%	664.8	72.8%	822.9	37.4%

BEST AVAILABLE COPY

176

	Estimated Budget				Expenditures				Balance Remaining			
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total
>3 above												
Country/Regional Programs												
Africa	4.0	139.0	0.0	143.0	19.3	101.4	0.0	120.7	-15.3 382.8%	37.6 27.1%	0.0 0.0%	22.3 15.6%
Newly Independent States	0.0	15.0	0.0	15.0	0.0	25.5	0.0	25.5	0.0 0.0%	-10.5 -70.0%	0.0 0.0%	-10.5 -70.0%
Program Sub Total:	4.0	154.0	0.0	158.0	19.3	126.9	0.0	146.2	-16.3 382.8%	27.1 17.8%	0.0 0.0%	11.8 7.8%
Technical Quality Assurance	62.8	0.0	0.0	62.8	15.8	0.0	0.0	15.8	68.9 80.9%	0.0 0.0%	0.0 0.0%	65.9 80.9%
Information Dissemination	634.0	0.0	0.0	634.0	470.0	0.0	0.0	470.0	164.0 25.9%	0.0 0.0%	0.0 0.0%	164.0 25.9%
Evaluation & MIS	546.0	0.0	0.0	546.0	240.8	0.0	0.0	240.8	305.2 55.9%	0.0 0.0%	0.0 0.0%	305.2 55.9%
Program Management	3,596.0	0.0	0.0	3,596.0	2,482.3	0.0	0.0	2,482.3	1,113.7 31.0%	0.0 0.0%	0.0 0.0%	1,113.7 31.0%
Start-up Costs	0.0	0.0	0.0	0.0	23.1	0.0	0.0	23.1	-23.1 0.0%	0.0 0.0%	0.0 0.0%	-23.1 0.0%
>3 above Sub Total:	4,862.8	154.0	0.0	5,016.8	3,261.4	126.9	0.0	3,378.3	1,611.4 33.1%	27.1 17.8%	0.0 0.0%	1,638.6 32.7%
Not applicable												
Country/Regional Programs												
Africa	0.0	0.0	0.0	0.0	77.7	0.0	0.0	77.7	-77.7 0.0%	0.0 0.0%	0.0 0.0%	-77.7 0.0%
Program Sub Total:	0.0	0.0	0.0	0.0	77.7	0.0	0.0	77.7	-77.7 0.0%	0.0 0.0%	0.0 0.0%	-77.7 0.0%
Program Management	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0 0.0%	0.0 0.0%	0.0 0.0%	0.0 0.0%
Not applicable Sub Total:	0.0	0.0	0.0	0.0	77.7	0.0	0.0	77.7	-77.7 0.0%	0.0 0.0%	0.0 0.0%	-77.7 0.0%

BEST AVAILABLE COPY

187

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Micronutrients, Nutrition, Breastfeeding</b>																
Country/Regional Programs																
Africa	0.0	12.0	0.0	12.0	0.0	3.3	0.0	3.3	0.0	0.0%	8.8	72.9%	0.0	0.0%	8.8	72.9%
Latin America/Caribbean	0.0	0.0	0.0	0.0	0.0	0.0	0.9	0.9	0.0	0.0%	0.0	0.0%	-0.9	0.0%	-0.9	0.0%
Program Sub Total:	0.0	12.0	0.0	12.0	0.0	3.3	0.9	4.2	0.0	0.0%	8.8	72.9%	-0.9	0.0%	7.9	66.1%
Micronutrients, Nutrition, Breastfeeding Sub Total:	0.0	12.0	0.0	12.0	0.0	3.3	0.9	4.2	0.0	0.0%	8.8	72.9%	-0.9	0.0%	7.9	66.1%
<b>Sick Child</b>																
Country/Regional Programs																
Africa	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Technical Quality Assurance	301.8	0.0	0.0	301.8	216.5	0.0	0.0	216.5	85.3	28.3%	0.0	0.0%	0.0	0.0%	85.3	28.3%
Sick Child Sub Total:	301.8	0.0	0.0	301.8	216.5	0.0	0.0	216.5	85.3	28.3%	0.0	0.0%	0.0	0.0%	85.3	28.3%

BEST AVAILABLE COPY

120

# FINANCIAL SUMMARY BY SYSTEM STRENGTH'G FOCUS

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Policy/Strategy Development</b>																
<b>Country/Regional Programs</b>																
Africa	\$10,754.17	\$8,420.33	\$87,625.50	\$106,800.00	\$41,511.14	\$14,177.76	\$0.00	\$55,688.91	(\$30,756.97)	286.0%	(\$5,757.43)	-68.4%	\$87,625.50	100.0%	\$51,111.09	47.9%
Asia	\$0.00	\$0.00	\$649,478.00	\$649,478.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$649,478.00	100.0%	\$649,478.00	100.0%
Latin America/Caribbean	\$0.00	\$0.00	\$21,415.00	\$21,415.00	\$12,499.66	\$5,229.60	\$29,992.77	\$47,722.02	(\$12,499.66)	0.0%	(\$5,229.60)	0.0%	(\$8,577.77)	-40.1%	(\$26,307.02)	122.8%
Newly Independent States	\$0.00	\$52,463.03	\$27,962.08	\$80,425.12	\$0.00	\$14,225.72	\$0.00	\$14,225.72	\$0.00	0.0%	\$38,237.31	72.9%	\$27,962.08	100.0%	\$66,199.39	82.3%
Interregional	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,402.78	\$0.00	\$12,402.78	\$0.00	0.0%	(\$12,402.78)	0.0%	\$0.00	0.0%	(\$12,402.78)	0.0%
<b>Program Sub Total:</b>	<b>\$10,754.17</b>	<b>\$88,883.37</b>	<b>\$786,488.58</b>	<b>\$886,118.12</b>	<b>\$64,010.80</b>	<b>\$46,836.87</b>	<b>\$29,992.77</b>	<b>\$139,839.43</b>	<b>(\$43,266.83)</b>	<b>402.2%</b>	<b>\$14,847.60</b>	<b>24.4%</b>	<b>\$786,487.82</b>	<b>88.2%</b>	<b>\$728,078.88</b>	<b>84.6%</b>
<b>Technical Quality Assurance</b>	<b>\$850,826.70</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$850,826.70</b>	<b>\$181,164.08</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$181,164.08</b>	<b>\$669,642.62</b>	<b>78.7%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$669,642.62</b>	<b>78.7%</b>
<b>Program Management</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$962.41</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$962.41</b>	<b>(\$962.41)</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$962.41)</b>	<b>0.0%</b>
<b>Policy/Strategy Development Sub Total:</b>	<b>\$861,680.87</b>	<b>\$88,883.37</b>	<b>\$786,488.58</b>	<b>\$1,708,944.82</b>	<b>\$236,167.29</b>	<b>\$46,836.87</b>	<b>\$29,992.77</b>	<b>\$312,186.92</b>	<b>\$628,423.88</b>	<b>72.8%</b>	<b>\$14,847.60</b>	<b>24.4%</b>	<b>\$786,487.82</b>	<b>86.2%</b>	<b>\$1,398,768.90</b>	<b>81.7%</b>
<b>Planning/Evaluation</b>																
<b>Country/Regional Programs</b>																
Africa	\$3,674.67	\$0.00	\$21,978.50	\$25,653.17	\$2,027.04	\$4,461.47	\$5,337.78	\$11,826.28	\$1,647.63	44.8%	(\$4,461.47)	0.0%	\$16,640.73	75.7%	\$13,826.88	53.9%
Asia	\$0.00	\$0.00	\$0.00	\$0.00	\$1,203.73	\$0.00	\$0.00	\$1,203.73	(\$1,203.73)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,203.73)	0.0%
Latin America/Caribbean	\$47,226.50	\$25,499.67	\$36,818.00	\$109,544.17	\$32,877.37	\$40,993.59	\$6,318.41	\$80,189.37	\$14,349.13	30.4%	(\$15,493.92)	-60.8%	\$30,499.59	82.8%	\$29,354.79	28.8%
Newly Independent States	\$0.00	\$52,463.03	\$27,962.08	\$80,425.12	\$0.00	\$14,403.80	\$0.00	\$14,403.80	\$0.00	0.0%	\$38,059.23	72.5%	\$27,962.08	100.0%	\$66,021.31	82.1%
<b>Program Sub Total:</b>	<b>\$60,901.17</b>	<b>\$77,962.70</b>	<b>\$86,788.58</b>	<b>\$226,622.46</b>	<b>\$38,108.14</b>	<b>\$69,858.86</b>	<b>\$11,656.19</b>	<b>\$107,623.19</b>	<b>\$14,793.02</b>	<b>29.1%</b>	<b>\$18,103.84</b>	<b>23.2%</b>	<b>\$76,182.40</b>	<b>86.6%</b>	<b>\$107,899.26</b>	<b>86.1%</b>
<b>Technical Quality Assurance</b>	<b>\$31,192.20</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$31,192.20</b>	<b>\$28,874.19</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$28,874.19</b>	<b>\$2,318.01</b>	<b>7.4%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$2,318.01</b>	<b>7.4%</b>
<b>Planning/Evaluation Sub Total:</b>	<b>\$82,093.37</b>	<b>\$77,962.70</b>	<b>\$86,788.58</b>	<b>\$246,814.86</b>	<b>\$64,982.34</b>	<b>\$69,858.86</b>	<b>\$11,656.19</b>	<b>\$136,497.38</b>	<b>\$17,111.03</b>	<b>20.8%</b>	<b>\$18,103.84</b>	<b>23.2%</b>	<b>\$76,182.40</b>	<b>86.6%</b>	<b>\$110,317.27</b>	<b>44.7%</b>

10/9

Estimated Budget				Expenditures				Balance Remaining								
Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total					
Grand Total:	16,813.6	3,278.6	3,288.6	17,296.8	8,604.8	993.7	316.3	9,314.4	2,886.6	26.6%	2,284.3	61.7%	2,888.8	66.1%	7,981.6	46.1%

150

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Information Systems, Surveillance</b>																
<b>Country/Regional Programs</b>																
Latin America/Caribbean	\$0.00	\$4,160.00	\$4,000.00	\$8,160.00	\$0.00	\$290.73	\$0.00	\$290.73	\$0.00	0.0%	\$3,869.27	93.0%	\$4,000.00	100.0%	\$7,869.27	96.4%
Newly Independent States	\$0.00	\$6,920.00	\$20,353.33	\$27,273.33	\$0.00	\$9,835.92	\$0.00	\$9,835.92	\$0.00	0.0%	(\$2,915.92)	-42.1%	\$20,353.33	100.0%	\$17,437.42	83.9%
Interregional	\$0.00	\$14,546.00	\$0.00	\$14,546.00	\$0.00	\$6,061.74	\$0.00	\$6,061.74	\$0.00	0.0%	\$8,484.26	58.3%	\$0.00	0.0%	\$8,484.26	58.3%
<b>Program Sub Total:</b>	<b>\$0.00</b>	<b>\$25,626.00</b>	<b>\$24,353.33</b>	<b>\$49,979.33</b>	<b>\$0.00</b>	<b>\$16,188.38</b>	<b>\$0.00</b>	<b>\$16,188.38</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$9,437.62</b>	<b>36.8%</b>	<b>\$24,353.33</b>	<b>100.0%</b>	<b>\$33,796.86</b>	<b>67.6%</b>
Technical Quality Assurance	\$0.00	\$0.00	\$0.00	\$0.00	\$2,356.10	\$0.00	\$0.00	\$2,356.10	(\$2,356.10)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$2,356.10)	0.0%
Evaluation & MIS	\$0.00	\$0.00	\$0.00	\$0.00	\$1,521.51	\$0.00	\$0.00	\$1,521.51	(\$1,521.51)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,521.51)	0.0%
<b>Information Systems, Surveillance Sub Total:</b>	<b>\$0.00</b>	<b>\$26,626.00</b>	<b>\$24,353.33</b>	<b>\$49,979.33</b>	<b>\$3,878.61</b>	<b>\$16,188.38</b>	<b>\$0.00</b>	<b>\$20,067.99</b>	<b>(\$3,879.60)</b>	<b>0.0%</b>	<b>\$9,437.62</b>	<b>36.8%</b>	<b>\$24,353.33</b>	<b>100.0%</b>	<b>\$29,911.36</b>	<b>59.8%</b>
<b>Drug Supply</b>																
<b>Country/Regional Programs</b>																
Africa	\$27,397.83	\$36,580.33	\$21,978.50	\$87,956.67	\$1,782.49	\$48,255.56	\$0.00	\$50,038.05	\$25,615.35	93.5%	(\$9,675.23)	-25.1%	\$21,978.50	100.0%	\$37,918.61	43.1%
Latin America/Caribbean	\$187.50	\$0.00	\$27,012.00	\$27,199.50	\$0.00	\$0.00	\$0.00	\$0.00	\$187.50	100.0%	\$0.00	0.0%	\$27,012.00	100.0%	\$27,199.50	100.0%
Newly Independent States	\$0.00	\$255,588.70	\$67,986.75	\$323,575.45	\$0.00	\$64,220.60	\$0.00	\$64,220.60	\$0.00	0.0%	\$191,368.10	74.9%	\$67,986.75	100.0%	\$259,354.85	80.2%
<b>Program Sub Total:</b>	<b>\$27,885.33</b>	<b>\$294,169.03</b>	<b>\$116,977.25</b>	<b>\$439,031.62</b>	<b>\$1,782.49</b>	<b>\$112,476.16</b>	<b>\$0.00</b>	<b>\$114,268.65</b>	<b>\$26,802.85</b>	<b>83.6%</b>	<b>\$181,692.87</b>	<b>61.8%</b>	<b>\$116,977.25</b>	<b>100.0%</b>	<b>\$324,472.97</b>	<b>74.6%</b>
Technical Quality Assurance	\$31,192.20	\$0.00	\$0.00	\$31,192.20	\$50,193.62	\$0.00	\$0.00	\$50,193.62	(\$19,001.62)	-60.9%	\$0.00	0.0%	\$0.00	0.0%	(\$19,001.62)	-60.9%
<b>Drug Supply Sub Total:</b>	<b>\$88,777.83</b>	<b>\$294,169.03</b>	<b>\$116,977.25</b>	<b>\$489,923.82</b>	<b>\$61,976.31</b>	<b>\$112,476.16</b>	<b>\$0.00</b>	<b>\$164,452.47</b>	<b>\$6,801.23</b>	<b>11.6%</b>	<b>\$181,692.87</b>	<b>61.8%</b>	<b>\$116,977.25</b>	<b>100.0%</b>	<b>\$306,471.38</b>	<b>66.6%</b>
<b>Financing</b>																
<b>Country/Regional Programs</b>																
Africa	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,502.19	\$2,461.40	\$7,963.59	\$0.00	0.0%	(\$5,502.19)	0.0%	(\$2,461.40)	0.0%	(\$7,963.59)	0.0%
Newly Independent States	\$0.00	\$35,823.70	\$20,278.75	\$56,102.45	\$0.00	\$4,330.33	\$0.00	\$4,330.33	\$0.00	0.0%	\$31,493.37	87.9%	\$20,278.75	100.0%	\$51,772.12	92.3%
<b>Program Sub Total:</b>	<b>\$0.00</b>	<b>\$35,823.70</b>	<b>\$20,278.75</b>	<b>\$56,102.45</b>	<b>\$0.00</b>	<b>\$9,832.52</b>	<b>\$2,461.40</b>	<b>\$12,293.92</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$26,991.18</b>	<b>72.8%</b>	<b>\$17,817.36</b>	<b>87.9%</b>	<b>\$43,808.63</b>	<b>78.1%</b>
Technical Quality Assurance	\$0.00	\$0.00	\$0.00	\$0.00	\$9,230.60	\$0.00	\$0.00	\$9,230.60	(\$9,230.60)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$9,230.60)	0.0%
<b>Financing Sub Total:</b>	<b>\$0.00</b>	<b>\$35,823.70</b>	<b>\$20,278.75</b>	<b>\$56,102.45</b>	<b>\$9,230.60</b>	<b>\$9,832.52</b>	<b>\$2,461.40</b>	<b>\$21,624.52</b>	<b>(\$9,230.60)</b>	<b>0.0%</b>	<b>\$26,991.18</b>	<b>72.8%</b>	<b>\$17,817.36</b>	<b>87.9%</b>	<b>\$34,677.93</b>	<b>61.6%</b>

13

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Training, Skills Development</b>																
Country/Regional Programs																
Africa	\$95,506.83	\$6,420.33	\$160,650.00	\$264,586.17	\$7,156.75	\$0.00	\$26,601.18	\$33,959.92	\$88,346.09	92.5%	\$6,420.33	100.0%	\$133,857.82	83.3%	\$230,626.24	87.2%
Asia	\$103,878.33	\$17,472.00	\$649,478.00	\$770,828.33	\$314.06	\$19,723.26	\$0.00	\$20,037.92	\$103,563.67	99.7%	(\$2,251.26)	-12.9%	\$649,478.00	100.0%	\$750,790.41	97.4%
Latin America/Caribbean	\$27,914.17	\$1,386.67	\$97,170.83	\$126,471.67	\$7,930.19	\$1,854.62	\$4,954.52	\$14,739.34	\$19,983.98	71.6%	(\$467.96)	-33.7%	\$92,216.31	94.9%	\$111,732.33	88.3%
Newly Independent States	\$0.00	\$217,004.87	\$78,610.17	\$295,615.03	\$0.00	\$51,338.19	\$0.00	\$51,338.19	\$0.00	0.0%	\$165,666.66	76.3%	\$78,610.17	100.0%	\$244,276.85	82.6%
Program Sub Total:	\$227,299.33	\$244,283.87	\$886,918.00	\$1,467,661.29	\$16,463.88	\$72,916.87	\$31,786.70	\$120,076.37	\$211,896.74	83.2%	\$171,367.79	70.2%	\$964,162.38	96.8%	\$1,337,426.83	91.8%
Technical Quality Assurance	\$12,729.50	\$0.00	\$0.00	\$12,729.50	\$5,388.02	\$0.00	\$0.00	\$5,388.02	\$7,341.48	57.7%	\$0.00	0.0%	\$0.00	0.0%	\$7,341.48	57.7%
<b>Training, Skills Development Sub Total:</b>	<b>\$240,028.83</b>	<b>\$244,283.87</b>	<b>\$886,918.00</b>	<b>\$1,479,239.78</b>	<b>\$26,781.81</b>	<b>\$72,916.87</b>	<b>\$31,786.70</b>	<b>\$125,463.39</b>	<b>\$219,237.22</b>	<b>81.3%</b>	<b>\$171,367.79</b>	<b>70.2%</b>	<b>\$964,162.38</b>	<b>96.8%</b>	<b>\$1,344,767.31</b>	<b>91.8%</b>
<b>IEC, Social Marketing, Com. Mobilization, B</b>																
Country/Regional Programs																
Africa	\$45,261.83	\$6,420.33	\$21,978.50	\$75,680.67	\$1,897.54	\$0.00	\$0.00	\$1,897.54	\$43,384.30	95.6%	\$6,420.33	100.0%	\$21,978.50	100.0%	\$73,763.13	97.5%
Asia	\$103,878.33	\$0.00	\$649,478.00	\$753,356.33	\$0.00	\$0.00	\$0.00	\$0.00	\$103,878.33	100.0%	\$0.00	0.0%	\$649,478.00	100.0%	\$753,356.33	100.0%
Latin America/Caribbean	\$15,193.67	\$346.67	\$28,942.33	\$44,482.67	\$6,311.94	\$1,652.22	\$11,859.25	\$19,823.41	\$8,661.72	58.5%	(\$1,305.55)	-376.6%	\$17,063.09	58.0%	\$24,659.26	55.4%
Newly Independent States	\$0.00	\$19,394.00	\$22,873.50	\$42,267.50	\$0.00	\$424.14	\$0.00	\$424.14	\$0.00	0.0%	\$16,969.86	97.8%	\$22,873.50	100.0%	\$41,843.36	99.0%
Program Sub Total:	\$164,353.83	\$28,161.89	\$723,272.33	\$963,663.67	\$8,269.48	\$2,076.36	\$11,859.25	\$22,146.88	\$166,144.36	86.8%	\$26,084.64	92.6%	\$711,413.89	98.4%	\$883,642.88	97.8%
Technical Quality Assurance	\$147,876.50	\$0.00	\$0.00	\$147,876.50	\$69,505.31	\$0.00	\$0.00	\$69,505.31	\$78,371.19	53.0%	\$0.00	0.0%	\$0.00	0.0%	\$78,371.19	53.0%
Conference/Workshops	\$0.00	\$0.00	\$0.00	\$0.00	\$103,991.64	\$0.00	\$0.00	\$103,991.64	(\$103,991.64)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$103,991.64)	0.0%
<b>IEC, Social Marketing, Com. Mobilization, Beh Change Sub Total:</b>	<b>\$312,230.33</b>	<b>\$28,161.89</b>	<b>\$723,272.33</b>	<b>\$1,063,663.67</b>	<b>\$181,766.43</b>	<b>\$2,076.36</b>	<b>\$11,859.25</b>	<b>\$198,642.83</b>	<b>\$138,623.89</b>	<b>41.8%</b>	<b>\$26,084.64</b>	<b>92.6%</b>	<b>\$711,413.89</b>	<b>98.4%</b>	<b>\$888,021.83</b>	<b>81.8%</b>

BEST AVAILABLE COPY

130

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Other																
Country/Regional Programs																
Africa	\$10,874.00	\$88,862.00	\$0.00	\$99,736.00	\$5,855.68	\$38,801.55	\$0.00	\$44,657.23	\$5,018.32	46.1%	\$50,080.45	58.3%	\$0.00	0.0%	\$55,078.77	55.2%
Asia	\$0.00	\$0.00	\$0.00	\$0.00	\$64,207.22	\$0.00	\$0.00	\$64,207.22	(\$64,207.22)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$64,207.22)	0.0%
Program Sub Total:	\$10,874.00	\$88,862.00	\$0.00	\$99,736.00	\$70,062.91	\$38,801.55	\$0.00	\$108,864.46	(\$89,188.91)	84.3%	\$80,080.45	88.3%	\$0.00	0.0%	(\$9,128.46)	-9.2%
Other Sub Total:	\$10,874.00	\$88,862.00	\$0.00	\$99,736.00	\$70,062.91	\$38,801.55	\$0.00	\$108,864.46	(\$89,188.91)	84.3%	\$80,080.45	88.3%	\$0.00	0.0%	(\$9,128.46)	-9.2%
>3 above																
Country/Regional Programs																
Africa	\$1,364,912.67	\$889,020.00	\$409,170.50	\$2,643,103.17	\$771,692.28	\$476,363.09	\$138,540.72	\$1,386,596.07	\$593,220.40	43.5%	\$392,856.91	45.2%	\$270,629.78	66.1%	\$1,258,507.10	47.5%
Asia	\$739,280.33	\$98,040.00	\$0.00	\$835,300.33	\$243,339.86	\$40,544.42	\$0.00	\$283,884.29	\$495,920.47	67.1%	\$55,495.58	57.8%	\$0.00	0.0%	\$551,416.05	66.0%
Latin America/Caribbean	\$435,220.17	\$76,041.00	\$58,689.33	\$569,950.50	\$317,395.03	\$31,414.97	\$375.65	\$349,185.65	\$117,825.14	27.1%	\$44,626.03	58.7%	\$58,313.68	99.4%	\$220,784.85	38.7%
Newly Independent States	\$0.00	\$230,643.67	\$31,883.33	\$262,527.00	\$0.00	\$80,120.34	\$0.00	\$80,120.34	\$0.00	0.0%	\$170,523.32	73.9%	\$31,883.33	100.0%	\$202,406.66	77.1%
Interregional	\$0.00	\$21,536.00	\$0.00	\$21,536.00	\$0.00	\$22,043.39	\$0.00	\$22,043.39	\$0.00	0.0%	(\$507.39)	-2.4%	\$0.00	0.0%	(\$507.39)	-2.4%
Program Sub Total:	\$2,839,393.17	\$1,285,280.67	\$489,743.17	\$4,332,417.00	\$1,332,427.16	\$630,486.21	\$138,916.37	\$2,101,829.73	\$1,286,986.91	47.6%	\$662,794.46	61.2%	\$388,826.80	72.2%	\$2,238,887.27	61.8%
Technical Quality Assurance	\$238,241.70	\$0.00	\$0.00	\$238,241.70	\$172,904.01	\$0.00	\$0.00	\$172,904.01	\$65,337.69	27.4%	\$0.00	0.0%	\$0.00	0.0%	\$65,337.69	27.4%
Information Dissemination	\$186,781.00	\$0.00	\$0.00	\$186,781.00	\$142,852.63	\$0.00	\$0.00	\$142,852.63	\$43,928.37	23.5%	\$0.00	0.0%	\$0.00	0.0%	\$43,928.37	23.5%
Evaluation & MIS	\$1,141,960.00	\$0.00	\$0.00	\$1,141,960.00	\$374,144.27	\$0.00	\$0.00	\$374,144.27	\$767,815.73	67.2%	\$0.00	0.0%	\$0.00	0.0%	\$767,815.73	67.2%
Program Management	\$2,753,696.00	\$0.00	\$0.00	\$2,753,696.00	\$2,400,086.72	\$0.00	\$0.00	\$2,400,086.72	\$353,611.28	12.8%	\$0.00	0.0%	\$0.00	0.0%	\$353,611.28	12.8%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$1,147,312.18	\$0.00	\$0.00	\$1,147,312.18	(\$1,147,312.18)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,147,312.18)	0.0%
>3 above Sub Total:	\$6,888,873.87	\$1,285,280.67	\$489,743.17	\$8,663,897.70	\$6,669,728.98	\$630,486.21	\$138,916.37	\$8,339,129.83	\$1,290,346.91	18.6%	\$662,794.46	61.2%	\$388,826.80	72.2%	\$2,313,888.17	26.7%

139

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Not applicable																
Country/Regional Programs																
Africa	\$11,732.17	\$8,420.33	\$0.00	\$20,152.50	\$0.00	\$17,741.15	\$0.00	\$17,741.15	\$11,732.17	100.0%	(\$9,320.82)	110.7%	\$0.00	0.0%	\$2,411.35	12.0%
Latin America/Caribbean	\$0.00	\$0.00	\$77,486.00	\$77,486.00	\$0.00	\$0.00	\$15,660.23	\$15,660.23	\$0.00	0.0%	\$0.00	0.0%	\$61,825.77	79.8%	\$61,825.77	79.8%
Newly Independent States	\$0.00	\$9,599.00	\$0.00	\$9,599.00	\$0.00	\$6,469.82	\$0.00	\$6,469.82	\$0.00	0.0%	\$3,129.18	32.6%	\$0.00	0.0%	\$3,129.18	32.6%
Interregional	\$0.00	\$6,916.00	\$0.00	\$6,916.00	\$0.00	\$5,785.60	\$0.00	\$5,785.60	\$0.00	0.0%	\$1,130.40	16.3%	\$0.00	0.0%	\$1,130.40	16.3%
Program Sub Total:	\$11,732.17	\$24,936.33	\$77,486.00	\$114,163.99	\$0.00	\$29,996.57	\$15,660.23	\$46,666.80	\$11,732.17	100.0%	(\$8,981.24)	-20.3%	\$61,825.77	79.8%	\$68,466.78	69.8%
Technical Quality Assurance	\$0.00	\$1,067.00	\$0.00	\$1,067.00	\$4,229.61	\$0.00	\$0.00	\$4,229.61	(\$4,229.61)	0.0%	\$1,067.00	100.0%	\$0.00	0.0%	(\$3,162.61)	296.4%
Information Dissemination	\$89,592.00	\$0.00	\$0.00	\$89,592.00	\$76,417.27	\$0.00	\$0.00	\$76,417.27	\$13,174.73	14.7%	\$0.00	0.0%	\$0.00	0.0%	\$13,174.73	14.7%
Program Management	\$0.00	\$0.00	\$0.00	\$0.00	\$433,040.99	\$0.00	\$0.00	\$433,040.99	(\$433,040.99)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$433,040.99)	0.0%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$12,746.03	\$0.00	\$0.00	\$12,746.03	(\$12,746.03)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$12,746.03)	0.0%
Not applicable Sub Total:	\$101,324.17	\$26,602.33	\$77,486.00	\$204,812.60	\$516,433.96	\$29,996.57	\$15,660.23	\$572,090.71	(\$426,109.74)	419.8%	(\$3,984.24)	-16.4%	\$61,825.77	79.8%	(\$367,278.21)	179.3%
Grand Total:	\$8,808,607.00	\$2,326,877.00	\$4,389,287.00	16,624,671.00	\$6,969,612.28	\$1,020,871.18	\$243,811.16	\$8,223,294.61	\$1,849,484.72	21.0%	\$1,306,206.82	66.1%	\$4,148,676.86	84.4%	\$7,301,376.38	47.8%

134

# LOE SUMMARY BY SYSTEM STRENGTH'G FOCUSING

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Policy/Strategy Development																
Country/Regional Programs																
Africa	5.0	2.5	70.0	77.5	24.9	0.0	0.0	24.9	-19.9	396.3%	2.5	100.0%	70.0	100.0%	52.6	67.8%
Asia	0.0	0.0	355.7	355.7	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	355.7	100.0%	355.7	100.0%
Latin America/Caribbean	0.0	0.0	18.0	18.0	0.0	3.0	34.1	37.1	0.0	0.0%	-3.0	0.0%	-16.1	-89.4%	-19.1	106.0%
Newly Independent States	0.0	43.1	25.3	68.5	0.0	10.3	0.0	10.3	0.0	0.0%	32.8	76.1%	25.3	100.0%	58.1	84.9%
Interregional	0.0	0.0	0.0	0.0	0.0	3.7	0.0	3.7	0.0	0.0%	-3.7	0.0%	0.0	0.0%	-3.7	0.0%
Program Sub Total:	5.0	45.6	469.0	619.6	24.9	17.0	34.1	76.0	-19.9	398.3%	28.6	62.7%	434.9	92.7%	443.6	88.4%
Technical Quality Assurance	1,002.0	0.0	0.0	1,002.0	213.4	0.0	0.0	213.4	788.6	78.7%	0.0	0.0%	0.0	0.0%	788.6	78.7%
Program Management	0.0	0.0	0.0	0.0	1.6	0.0	0.0	1.6	-1.6	0.0%	0.0	0.0%	0.0	0.0%	-1.6	0.0%
Policy/Strategy Development Sub Total:	1,007.0	45.6	469.0	1,521.6	239.9	17.0	34.1	291.0	767.1	78.2%	28.6	62.7%	434.9	92.7%	1,236.6	88.9%

1001

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Planning/Evaluation</b>																
Country/Regional Programs																
Africa	0.0	0.0	14.5	14.5	5.0	0.0	0.0	14.8	-5.6	0.0%	-9.0	0.0%	14.5	100.0%	-0.1	-0.7%
Asia	0.0	0.0	0.0	0.0	4.0	0.0	0.0	4.0	-4.6	0.0%	0.0	0.0%	0.0	0.0%	-4.0	0.0%
Latin America/Caribbean	52.0	24.0	31.3	107.3	46.0	35.0	11.3	93.7	5.3	10.1%	-11.6	-48.4%	20.0	63.8%	13.0	12.7%
Newly Independent States	0.0	43.1	25.3	68.5	0.0	10.3	0.0	10.3	0.0	0.0%	32.8	76.1%	25.3	100.0%	58.1	84.9%
Program Sub Total:	62.0	67.1	71.2	199.3	67.0	64.9	11.3	123.2	-8.0	-9.6%	12.2	18.2%	69.8	84.1%	67.0	36.2%
Technical Quality Assurance	45.0	0.0	0.0	45.0	31.0	0.0	0.0	31.0	13.2	29.3%	0.0	0.0%	0.0	0.0%	13.2	29.3%
Planning/Evaluation Sub Total:	97.0	67.1	71.2	236.3	88.0	64.9	11.3	188.0	8.2	8.8%	12.2	18.2%	69.8	84.1%	86.3	34.1%
<b>Training, Skills Development</b>																
Country/Regional Programs																
Africa	43.0	2.5	130.5	176.0	12.1	0.0	0.2	12.3	30.9	71.9%	2.5	100.0%	130.3	99.0%	163.7	93.0%
Asia	72.3	22.0	355.7	450.0	1.0	0.1	0.0	1.1	71.3	98.6%	21.9	99.4%	355.7	100.0%	448.0	99.8%
Latin America/Caribbean	49.7	0.0	59.7	109.3	22.0	1.9	12.3	37.0	26.9	54.1%	-1.9	0.0%	47.4	79.4%	72.3	66.2%
Newly Independent States	0.0	523.9	44.0	567.9	0.0	125.9	0.0	125.9	0.0	0.0%	398.0	76.0%	44.0	100.0%	442.0	77.8%
Program Sub Total:	165.0	548.4	689.9	1,303.2	35.1	127.9	12.5	176.3	128.1	78.2%	420.4	76.7%	677.4	87.9%	1,126.0	86.8%
Technical Quality Assurance	20.0	0.0	0.0	20.0	10.5	0.0	0.0	10.5	9.5	47.5%	0.0	0.0%	0.0	0.0%	9.5	47.5%
Training, Skills Development Sub Total:	185.0	548.4	689.9	1,323.2	45.6	127.9	12.5	186.8	138.6	74.9%	420.4	76.7%	677.4	87.9%	1,135.5	86.6%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
IEC, Social Marketing, Com. Mobilization, B																
Country/Regional Programs																
Africa	31.0	2.5	14.5	48.0	0.0	0.0	0.0	0.0	30.4	98.0%	2.5	100.0%	14.5	100.0%	47.4	98.7%
Asia	72.3	0.0	355.7	428.0	0.0	0.0	0.0	0.0	72.3	100.0%	0.0	0.0%	355.7	100.0%	428.0	100.0%
Latin America/Caribbean	31.7	0.0	26.7	58.3	19.8	1.9	0.0	21.7	11.9	37.6%	-1.9	0.0%	26.7	100.0%	36.7	62.9%
Newly Independent States	0.0	30.5	24.0	54.5	0.0	0.0	0.0	0.0	0.0	0.0%	29.9	98.0%	24.0	100.0%	53.9	98.9%
Program Sub Total:	138.0	33.0	420.8	688.8	20.4	2.9	0.0	22.9	114.6	84.9%	30.8	92.3%	420.8	100.0%	666.9	96.1%
Technical Quality Assurance	207.5	0.0	0.0	207.5	102.1	0.0	0.0	102.1	105.4	50.8%	0.0	0.0%	0.0	0.0%	105.4	50.8%
Conference/Workshops	0.0	0.0	0.0	0.0	57.9	0.0	0.0	57.9	-57.9	0.0%	0.0	0.0%	0.0	0.0%	-57.9	0.0%
IEC, Social Marketing, Com. Mobilization, Beh Change Sub Total:	342.8	33.0	420.8	788.3	160.3	2.9	0.0	162.9	162.2	47.3%	30.8	92.3%	420.8	100.0%	613.4	77.8%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Information Systems, Surveillance</b>																
Country/Regional Programs																
Latin America/Caribbean	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%		
Newly Independent States	0.0	9.3	20.0	29.3	0.0	10.9	0.0	10.9	0.0	0.0%	-1.6	-17.0%	20.0	100.0%	18.4	62.8%
Interregional	0.0	10.0	0.0	10.0	0.0	0.0	0.0	0.0	0.0	0.0%	10.0	100.0%	0.0	0.0%	10.0	100.0%
Program Sub Total:	0.0	19.3	20.0	39.3	0.0	10.9	0.0	10.9	0.0	0.0%	8.4	43.6%	20.0	100.0%	28.4	72.2%
Technical Quality Assurance	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.1	-0.1	0.0%	0.0	0.0%	0.0	0.0%	-0.1	0.0%
Evaluation & MIS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Information Systems, Surveillance Sub Total:	0.0	19.3	20.0	39.3	0.1	10.9	0.0	11.0	-0.1	0.0%	8.4	43.6%	20.0	100.0%	28.3	72.0%
<b>Drug Supply</b>																
Country/Regional Programs																
Africa	15.0	17.5	14.5	47.0	0.0	16.6	0.0	16.6	15.0	100.0%	0.6	4.3%	14.5	100.0%	30.3	64.4%
Latin America/Caribbean	0.0	0.0	25.0	25.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	25.0	100.0%	25.0	100.0%
Newly Independent States	0.0	551.6	33.3	585.1	0.0	135.2	0.0	135.2	0.0	0.0%	416.6	75.5%	33.3	100.0%	449.9	78.0%
Program Sub Total:	15.0	669.3	72.8	857.1	0.0	151.8	0.0	151.8	15.0	100.0%	417.4	73.3%	72.8	100.0%	608.2	70.9%
Technical Quality Assurance	45.0	0.0	0.0	45.0	65.7	0.0	0.0	65.7	-20.7	-46.0%	0.0	0.0%	0.0	0.0%	-20.7	-46.0%
Drug Supply Sub Total:	60.0	669.3	72.8	702.1	65.7	151.8	0.0	217.6	-8.7	-9.6%	417.4	73.3%	72.8	100.0%	484.6	69.0%

198

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Financing</b>																
Country/Regional Programs																
Africa	0.0	0.0	0.0	0.0	0.0	10.3	0.0	10.3	0.0	0.0%	-10.3	0.0%	0.0	0.0%	-10.3	0.0%
Newly Independent States	0.0	27.5	18.0	45.5	0.0	0.4	0.0	0.4	0.0	0.0%	27.1	98.5%	18.0	100.0%	45.1	99.1%
Program Sub Total:	0.0	27.5	18.0	45.5	0.0	10.7	0.0	10.7	0.0	0.0%	16.8	61.2%	18.0	100.0%	34.8	76.8%
Technical Quality Assurance	0.0	0.0	0.0	0.0	12.1	0.0	0.0	12.1	-12.1	0.0%	0.0	0.0%	0.0	0.0%	-12.1	0.0%
Financing Sub Total:	0.0	27.5	18.0	45.5	12.1	10.7	0.0	22.7	-12.1	0.0%	16.8	61.2%	18.0	100.0%	22.7	88.8%
<b>Supervision/Monitoring</b>																
Country/Regional Programs																
Africa	54.0	2.5	49.5	106.0	0.0	0.0	0.0	0.0	54.0	100.0%	2.5	100.0%	49.5	100.0%	106.0	100.0%
Asia	0.0	0.0	0.0	0.0	0.0	3.3	0.0	3.3	0.0	0.0%	-3.3	0.0%	0.0	0.0%	-3.3	0.0%
Newly Independent States	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	54.0	2.5	49.5	106.0	0.0	3.3	0.0	3.3	54.0	100.0%	-0.8	-31.2%	49.5	100.0%	102.7	96.9%
Supervision/Monitoring Sub Total:	54.0	2.5	49.5	106.0	0.0	3.3	0.0	3.3	54.0	100.0%	-0.8	-31.2%	49.5	100.0%	102.7	96.9%

129

	Estimated Budget				Expenditures				Balance Remaining					
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total		
<b>Quality Assurance</b>														
Country/Regional Programs														
Africa	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%
Asia	0.0	0.0	0.0	0.0	1.0	0.0	0.0	1.0	-1.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	0.0	0.0	0.0	0.0	1.0	0.0	0.0	1.0	-1.0	0.0%	0.0	0.0%	-1.0	0.0%
Technical Quality Assurance	45.0	0.0	0.0	45.0	42.2	0.0	0.0	42.2	2.8	6.2%	0.0	0.0%	0.0	0.0%
Quality Assurance Sub Total:	45.0	0.0	0.0	45.0	43.2	0.0	0.0	43.2	1.8	4.0%	0.0	0.0%	0.0	0.0%
<b>As Yet Unknown</b>														
Country/Regional Programs														
Africa	387.0	105.0	0.0	492.0	231.4	0.0	0.0	231.4	155.6	40.2%	105.0	100.0%	0.0	0.0%
Latin America/Caribbean	0.0	0.0	9.0	9.0	0.0	0.0	0.0	0.0	-0.0	0.0%	0.0	0.0%	9.0	100.0%
Newly Independent States	0.0	0.0	823.0	823.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	823.0	100.0%
Interregional	0.0	54.0	0.0	54.0	0.0	0.0	0.0	0.0	0.0	0.0%	54.0	100.0%	0.0	0.0%
Program Sub Total:	387.0	159.0	832.0	1,378.0	232.3	0.0	0.0	232.3	154.7	40.0%	159.0	100.0%	832.0	100.0%
Technical Quality Assurance	0.0	0.0	0.0	0.0	6.8	0.0	0.0	6.8	-6.8	0.0%	0.0	0.0%	0.0	0.0%
As Yet Unknown Sub Total:	387.0	159.0	832.0	1,378.0	239.1	0.0	0.0	239.1	147.9	38.2%	159.0	100.0%	832.0	100.0%

140

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Other																
Country/Regional Programs																
Africa	38.0	40.0	0.0	78.0	15.3	2.0	0.0	17.3	20.8	57.6%	38.0	95.0%	0.0	0.0%	58.8	77.3%
Asia	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	38.0	40.0	0.0	78.0	15.3	2.0	0.0	17.3	20.8	57.6%	38.0	95.0%	0.0	0.0%	58.8	77.3%
Other Sub Total:	38.0	40.0	0.0	78.0	15.3	2.0	0.0	17.3	20.8	57.6%	38.0	95.0%	0.0	0.0%	58.8	77.3%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
>3 above																
Country/Regional Programs																
Africa	1,969.0	924.0	477.5	3,370.5	1,159.6	324.3	232.6	1,716.5	809.4	41.1%	599.7	64.9%	244.9	51.3%	1,653.6	49.1%
Asia	816.3	35.0	0.0	851.3	300.3	2.9	0.0	303.2	518.1	63.3%	32.1	91.6%	0.0	0.0%	550.1	64.5%
Latin America/Caribbean	583.7	196.0	106.3	886.0	489.6	117.0	0.0	606.6	103.8	17.5%	79.0	40.3%	106.3	100.0%	289.2	32.3%
Newly Independent States	0.0	544.6	0.0	544.6	0.0	139.4	0.0	139.4	0.0	0.0%	405.4	74.4%	0.0	0.0%	405.4	74.4%
Interregional	0.0	51.0	0.0	51.0	0.0	17.6	0.0	17.6	0.0	0.0%	33.2	65.1%	0.0	0.0%	33.2	65.1%
Program Sub Total:	3,381.9	1,760.6	583.8	5,726.3	1,949.5	601.6	232.6	2,783.7	1,431.3	42.3%	1,149.3	66.6%	361.2	60.2%	2,931.8	61.3%
Technical Quality Assurance	365.5	0.0	0.0	365.5	200.6	0.0	0.0	200.6	164.9	45.1%	0.0	0.0%	0.0	0.0%	164.9	45.1%
Information Dissemination	500.0	0.0	0.0	500.0	360.1	0.0	0.0	360.1	139.9	28.0%	0.0	0.0%	0.0	0.0%	139.9	28.0%
Evaluation & MIS	546.0	0.0	0.0	546.0	240.6	0.0	0.0	240.6	305.2	55.9%	0.0	0.0%	0.0	0.0%	305.2	55.9%
Program Management	3,596.0	0.0	0.0	3,596.0	2,442.1	0.0	0.0	2,442.1	1,153.9	32.1%	0.0	0.0%	0.0	0.0%	1,153.9	32.1%
Start-up Costs	0.0	0.0	0.0	0.0	1,638.2	0.0	0.0	1,638.2	-1,638.2	0.0%	0.0	0.0%	0.0	0.0%	-1,638.2	0.0%
>3 above Sub Total:	8,388.6	1,760.6	583.8	10,733.0	6,831.6	601.6	232.6	7,665.8	1,867.6	18.6%	1,149.3	66.6%	361.2	60.2%	3,667.6	28.6%

142

	Estimated Budget				Expenditures				Balance Remaining			
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total
Not applicable												
Country/Regional Programs												
Africa	9.0	2.5	0.0	11.5	0.0	8.3	0.0	8.3	9.0 100.0%	-5.8 233.8%	0.0 0.0%	3.2 27.4%
Latin America/Caribbean	0.0	0.0	78.0	78.0	0.0	0.0	25.8	25.8	0.0 0.0%	0.0 0.0%	52.3 67.0%	52.3 67.0%
Newly Independent States	0.0	12.0	0.0	12.0	0.0	0.6	0.0	0.6	0.0 0.0%	11.4 94.8%	0.0 0.0%	11.4 94.8%
Interregional	0.0	0.0	0.0	0.0	0.0	2.0	0.0	2.0	0.0 0.0%	-2.0 0.0%	0.0 0.0%	-2.0 0.0%
Program Sub Total:	9.0	14.6	78.0	101.6	0.0	11.0	26.8	36.7	9.0 100.0%	3.6 24.4%	62.3 67.6%	64.6 63.6%
Technical Quality Assurance	0.0	1.0	0.0	1.0	5.5	0.0	0.0	5.5	-5.5 0.0%	1.0 100.0%	0.0 0.0%	-4.5 450.0%
Information Dissemination	202.0	0.0	0.0	202.0	173.3	0.0	0.0	173.3	28.7 14.2%	0.0 0.0%	0.0 0.0%	28.7 14.2%
Program Management	0.0	0.0	0.0	0.0	40.3	0.0	0.0	40.3	-40.3 0.0%	0.0 0.0%	0.0 0.0%	-40.3 0.0%
Start-up Costs	0.0	0.0	0.0	0.0	23.1	0.0	0.0	23.1	-23.1 0.0%	0.0 0.0%	0.0 0.0%	-23.1 0.0%
Not applicable Sub Total:	211.0	16.6	78.0	304.6	242.2	11.0	26.8	278.0	-31.2 -14.8%	4.6 29.2%	62.3 67.6%	26.6 8.4%
Grand Total:	18,813.0	3,278.0	3,206.0	17,296.0	8,004.8	993.7	316.2	9,314.4	2,808.6 26.6%	2,284.3 69.7%	2,888.8 96.1%	7,981.6 46.1%

106

# FINANCIAL SUMMARY BY COUNTERPART/CLIENT ORGANIZATION(S)

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Public Sector</b>																
Country/Regional Programs																
Africa	\$787,507.33	\$71,952.87	\$505,868.50	\$1,365,328.50	\$313,378.63	\$18,534.95	\$42,232.92	\$372,146.50	\$474,128.70	60.2%	\$55,417.72	77.0%	\$463,633.58	91.7%	\$993,180.00	72.7%
Asia	\$811,422.50	\$0.00	\$649,478.00	\$1,280,900.50	\$147,770.68	\$0.00	\$0.00	\$147,770.68	\$463,651.82	75.8%	\$0.00	0.0%	\$649,478.00	100.0%	\$1,113,129.82	88.3%
Latin America/Caribbean	\$76,403.00	\$16,043.17	\$166,117.50	\$258,563.67	\$47,800.78	\$18,961.41	\$27,112.60	\$93,874.80	\$26,802.22	37.4%	(\$2,918.25)	-18.2%	\$139,004.90	83.7%	\$164,686.87	83.7%
Newly Independent States	\$0.00	\$462,845.87	\$236,843.33	\$699,489.00	\$0.00	\$118,509.77	\$0.00	\$118,509.77	\$0.00	0.0%	\$344,335.90	74.4%	\$236,843.33	100.0%	\$580,979.23	83.1%
Interregional	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,402.78	\$0.00	\$12,402.78	\$0.00	0.0%	(\$12,402.78)	0.0%	\$0.00	0.0%	(\$12,402.78)	0.0%
Program Sub Total:	\$1,478,332.83	\$860,841.88	\$1,668,106.33	\$3,684,278.87	\$889,958.19	\$186,408.91	\$69,346.82	\$744,704.54	\$966,382.73	66.6%	\$384,432.69	69.8%	\$1,488,789.81	98.6%	\$2,839,876.13	78.2%
Technical Quality Assurance	\$291,006.50	\$533.50	\$0.00	\$292,230.00	\$142,753.27	\$0.00	\$0.00	\$142,753.27	\$148,943.23	51.1%	\$533.50	100.0%	\$0.00	0.0%	\$149,476.73	51.2%
Public Sector Sub Total:	\$1,769,339.33	\$861,376.08	\$1,668,106.33	\$3,876,608.87	\$961,703.37	\$186,408.91	\$69,346.82	\$887,467.91	\$1,115,326.86	63.1%	\$384,966.09	69.8%	\$1,488,789.81	98.6%	\$2,989,681.86	77.1%
<b>Private Sector Companies</b>																
Country/Regional Programs																
Asia	\$0.00	\$0.00	\$649,478.00	\$649,478.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$649,478.00	100.0%	\$649,478.00	100.0%
Latin America/Caribbean	\$125.00	\$0.00	\$54,738.50	\$54,863.50	\$0.00	\$0.00	\$20,474.06	\$20,474.06	\$125.00	100.0%	\$0.00	0.0%	\$34,284.44	62.6%	\$34,389.44	62.7%
Newly Independent States	\$0.00	\$196,205.87	\$31,883.33	\$228,089.00	\$0.00	\$40,158.98	\$0.00	\$40,158.98	\$0.00	0.0%	\$156,046.71	79.5%	\$31,883.33	100.0%	\$187,930.04	82.4%
Program Sub Total:	\$125.00	\$196,205.87	\$736,099.83	\$892,436.88	\$0.00	\$40,158.98	\$20,474.06	\$88,633.02	\$125.00	100.0%	\$156,046.71	79.6%	\$716,826.77	97.2%	\$871,797.48	93.6%
Technical Quality Assurance	\$47,471.00	\$0.00	\$0.00	\$47,471.00	\$0.00	\$0.00	\$0.00	\$0.00	\$47,471.00	100.0%	\$0.00	0.0%	\$0.00	0.0%	\$47,471.00	100.0%
Private Sector Companies Sub Total:	\$47,596.00	\$196,205.87	\$736,099.83	\$892,901.88	\$0.00	\$40,158.98	\$20,474.06	\$88,633.02	\$47,596.00	100.0%	\$156,046.71	79.6%	\$716,826.77	97.2%	\$891,288.48	93.6%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Private Sector Providers</b>																
Country/Regional Programs																
Africa	\$51,286.33	\$16,840.67	\$0.00	\$68,127.00	\$9,748.68	\$176.20	\$5,996.76	\$15,921.64	\$41,537.65	81.0%	\$16,664.48	99.0%	(\$5,996.76)	0.0%	\$52,205.36	76.6%
Asia	\$76,723.00	\$0.00	\$0.00	\$76,723.00	\$14,479.97	\$0.00	\$0.00	\$14,479.97	\$62,243.03	81.1%	\$0.00	0.0%	\$0.00	0.0%	\$62,243.03	81.1%
Latin America/Caribbean	\$125.00	\$0.00	\$16,006.00	\$16,133.00	\$2,258.44	\$0.00	\$2,006.49	\$5,166.93	(\$2,133.44)	706.7%	\$0.00	0.0%	\$15,099.51	83.8%	\$12,966.07	71.5%
Newly Independent States	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$59.36	\$0.00	\$59.36	\$0.00	0.0%	(\$59.36)	0.0%	\$0.00	0.0%	(\$59.36)	0.0%
Program Sub Total:	\$128,134.33	\$16,840.67	\$16,006.00	\$162,983.00	\$26,487.09	\$235.56	\$8,003.25	\$38,627.90	\$101,847.26	79.3%	\$16,605.10	98.6%	\$9,102.76	66.8%	\$127,388.10	78.1%
Technical Quality Assurance	\$47,471.00	\$0.00	\$0.00	\$47,471.00	\$5,950.11	\$0.00	\$0.00	\$5,950.11	\$41,520.89	87.5%	\$0.00	0.0%	\$0.00	0.0%	\$41,520.89	87.5%
Private Sector Providers Sub Total:	\$175,605.33	\$16,840.67	\$16,006.00	\$218,454.00	\$32,437.19	\$235.56	\$8,003.25	\$41,678.00	\$143,168.14	81.6%	\$16,605.10	98.6%	\$9,102.76	66.8%	\$168,876.00	80.2%
<b>NGO/PVO</b>																
Country/Regional Programs																
Africa	\$29,776.00	\$0.00	\$0.00	\$29,776.00	\$12,789.24	\$176.20	\$820.47	\$13,785.91	\$16,986.76	57.1%	(\$176.20)	0.0%	(\$820.47)	0.0%	\$15,992.09	53.7%
Asia	\$9,073.00	\$0.00	\$649,478.00	\$658,551.00	\$3,520.55	\$1,993.87	\$0.00	\$5,514.42	\$5,552.45	61.2%	(\$1,993.87)	0.0%	\$649,478.00	100.0%	\$653,036.58	99.2%
Latin America/Caribbean	\$0.00	\$15,003.17	\$17,174.00	\$32,177.17	\$2,258.44	\$13,529.41	\$9,326.27	\$25,114.11	(\$2,258.44)	0.0%	\$1,473.75	9.8%	\$7,847.73	45.7%	\$7,063.05	22.0%
Newly Independent States	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$59.36	\$0.00	\$59.36	\$0.00	0.0%	(\$59.36)	0.0%	\$0.00	0.0%	(\$59.36)	0.0%
Program Sub Total:	\$38,849.00	\$15,003.17	\$666,652.00	\$720,506.17	\$18,568.23	\$16,758.86	\$10,146.73	\$44,473.81	\$20,282.77	62.2%	(\$766.68)	-8.0%	\$666,666.27	98.6%	\$676,932.38	93.8%
Technical Quality Assurance	\$47,471.00	\$0.00	\$0.00	\$47,471.00	\$11,037.91	\$0.00	\$0.00	\$11,037.91	\$36,433.09	76.7%	\$0.00	0.0%	\$0.00	0.0%	\$36,433.09	76.7%
NGO/PVO Sub Total:	\$86,322.00	\$15,003.17	\$666,652.00	\$767,977.17	\$29,606.14	\$16,758.86	\$10,146.73	\$55,511.72	\$56,715.86	66.7%	(\$766.68)	-8.0%	\$666,666.27	98.6%	\$712,465.46	92.8%

USAID or USAID Project	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Country/Regional Programs</b>																
Africa	\$147,754.00	\$734,013.00	\$0.00	\$881,767.00	\$26,580.92	\$509,995.04	\$0.00	\$536,575.97	\$121,173.08	82.0%	\$224,017.96	30.5%	\$0.00	0.0%	\$345,191.03	39.1%
Asia	\$0.00	\$113,512.00	\$0.00	\$113,512.00	\$0.00	\$60,267.68	\$0.00	\$60,267.68	\$0.00	0.0%	\$53,244.32	46.9%	\$0.00	0.0%	\$53,244.32	46.9%
Latin America/Caribbean	\$28,969.00	\$0.00	\$0.00	\$28,969.00	\$11,700.91	\$17,529.93	\$6,147.00	\$35,377.84	\$17,288.09	59.6%	(\$17,529.93)	0.0%	(\$6,147.00)	0.0%	(\$6,388.64)	-22.0%
Newly Independent States	\$0.00	\$15,044.00	\$0.00	\$15,044.00	\$0.00	\$19,961.38	\$0.00	\$19,961.38	\$0.00	0.0%	(\$4,917.38)	-32.7%	\$0.00	0.0%	(\$4,917.38)	-32.7%
Interregional	\$0.00	\$85,068.00	\$0.00	\$85,068.00	\$0.00	\$33,890.72	\$0.00	\$33,890.72	\$0.00	0.0%	\$51,197.28	60.2%	\$0.00	0.0%	\$51,197.28	60.2%
<b>Program Sub Total:</b>	<b>\$176,743.00</b>	<b>\$948,657.00</b>	<b>\$0.00</b>	<b>\$1,124,400.00</b>	<b>\$38,281.83</b>	<b>\$641,644.76</b>	<b>\$6,147.00</b>	<b>\$686,073.60</b>	<b>\$138,481.17</b>	<b>78.3%</b>	<b>\$306,612.24</b>	<b>32.3%</b>	<b>(\$6,147.00)</b>	<b>0.6%</b>	<b>\$438,326.48</b>	<b>39.6%</b>
Technical Quality Assurance	\$0.00	\$533.50	\$0.00	\$533.50	\$2,114.80	\$0.00	\$0.00	\$2,114.80	(\$2,114.80)	0.0%	\$533.50	100.0%	\$0.00	0.0%	(\$1,581.30)	296.4%
Conference/Workshops	\$0.00	\$0.00	\$0.00	\$0.00	\$103,991.64	\$0.00	\$0.00	\$103,991.64	(\$103,991.64)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$103,991.64)	0.0%
Program Management	\$0.00	\$0.00	\$0.00	\$0.00	\$481.20	\$0.00	\$0.00	\$481.20	(\$481.20)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$481.20)	0.0%
<b>USAID or USAID Project Sub Total:</b>	<b>\$176,743.00</b>	<b>\$948,190.68</b>	<b>\$0.00</b>	<b>\$1,124,933.68</b>	<b>\$144,869.48</b>	<b>\$641,644.76</b>	<b>\$6,147.00</b>	<b>\$792,661.26</b>	<b>\$31,873.62</b>	<b>18.0%</b>	<b>\$306,646.74</b>	<b>32.3%</b>	<b>(\$6,147.00)</b>	<b>0.6%</b>	<b>\$332,272.28</b>	<b>29.8%</b>
<b>International Agencies</b>																
<b>Country/Regional Programs</b>																
Africa	\$5,437.00	\$44,431.00	\$87,625.50	\$137,493.50	\$16,374.30	\$19,406.78	\$0.00	\$35,775.07	(\$10,937.30)	201.2%	\$25,030.22	56.3%	\$87,625.50	100.0%	\$101,718.43	74.0%
Latin America/Caribbean	\$6,397.00	\$346.67	\$94,367.00	\$101,110.67	\$334.31	\$0.00	\$3,192.40	\$3,526.71	\$6,062.69	94.8%	\$346.67	100.0%	\$91,174.60	96.6%	\$97,583.96	96.5%
<b>Program Sub Total:</b>	<b>\$11,834.00</b>	<b>\$44,777.67</b>	<b>\$181,992.50</b>	<b>\$238,804.17</b>	<b>\$16,708.61</b>	<b>\$19,406.78</b>	<b>\$3,192.40</b>	<b>\$39,301.78</b>	<b>(\$4,874.60)</b>	<b>-41.2%</b>	<b>\$26,376.89</b>	<b>66.7%</b>	<b>\$178,800.10</b>	<b>88.2%</b>	<b>\$199,302.39</b>	<b>83.6%</b>
Technical Quality Assurance	\$67,921.50	\$0.00	\$0.00	\$67,921.50	\$75,409.63	\$0.00	\$0.00	\$75,409.63	(\$7,488.13)	-11.0%	\$0.00	0.0%	\$0.00	0.0%	(\$7,488.13)	-11.0%
Program Management	\$0.00	\$0.00	\$0.00	\$0.00	\$481.20	\$0.00	\$0.00	\$481.20	(\$481.20)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$481.20)	0.0%
<b>International Agencies Sub Total:</b>	<b>\$79,755.68</b>	<b>\$44,777.67</b>	<b>\$181,992.50</b>	<b>\$306,526.67</b>	<b>\$92,699.43</b>	<b>\$19,406.78</b>	<b>\$3,192.40</b>	<b>\$116,192.61</b>	<b>(\$12,843.93)</b>	<b>-16.1%</b>	<b>\$26,376.89</b>	<b>66.7%</b>	<b>\$178,800.10</b>	<b>88.2%</b>	<b>\$181,333.86</b>	<b>82.4%</b>

1/19

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>None - only BASICS</b>																
<b>Country/Regional Programs</b>																
Africa	\$207,881.33	\$18,840.87	\$0.00	\$224,722.00	\$139,418.70	\$4,461.47	\$0.00	\$143,880.17	\$68,462.63	32.9%	\$12,379.20	73.5%	\$0.00	0.0%	\$80,841.83	36.0%
Latin America/Caribbean	\$0.00	\$0.00	\$0.00	\$0.00	\$8,576.68	\$0.00	\$0.00	\$8,576.68	(\$8,576.68)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$8,576.68)	0.0%
<b>Program Sub Total:</b>	<b>\$207,881.33</b>	<b>\$18,840.87</b>	<b>\$0.00</b>	<b>\$224,722.00</b>	<b>\$147,995.38</b>	<b>\$4,461.47</b>	<b>\$0.00</b>	<b>\$152,456.85</b>	<b>\$59,885.95</b>	<b>28.8%</b>	<b>\$12,379.20</b>	<b>73.8%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$72,269.15</b>	<b>32.2%</b>
Technical Quality Assurance	\$295,753.00	\$0.00	\$0.00	\$295,753.00	\$126,820.02	\$0.00	\$0.00	\$126,820.02	\$168,932.98	57.1%	\$0.00	0.0%	\$0.00	0.0%	\$168,932.98	57.1%
Information Dissemination	\$81,878.00	\$0.00	\$0.00	\$81,878.00	\$80,717.28	\$0.00	\$0.00	\$80,717.28	\$20,958.72	25.7%	\$0.00	0.0%	\$0.00	0.0%	\$20,958.72	25.7%
Evaluation & MIS	\$1,141,980.00	\$0.00	\$0.00	\$1,141,980.00	\$375,865.78	\$0.00	\$0.00	\$375,865.78	\$766,294.22	67.1%	\$0.00	0.0%	\$0.00	0.0%	\$766,294.22	67.1%
Program Management	\$2,753,898.00	\$0.00	\$0.00	\$2,753,898.00	\$2,444,563.03	\$0.00	\$0.00	\$2,444,563.03	\$309,134.97	11.2%	\$0.00	0.0%	\$0.00	0.0%	\$309,134.97	11.2%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$12,746.03	\$0.00	\$0.00	\$12,746.03	(\$12,746.03)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$12,746.03)	0.0%
<b>None - only BASICS Sub Total:</b>	<b>\$4,488,868.33</b>	<b>\$18,840.87</b>	<b>\$0.00</b>	<b>\$4,487,809.00</b>	<b>\$3,168,807.82</b>	<b>\$4,461.47</b>	<b>\$0.00</b>	<b>\$3,173,269.29</b>	<b>\$1,312,488.81</b>	<b>29.3%</b>	<b>\$12,379.20</b>	<b>73.8%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$1,324,868.01</b>	<b>29.6%</b>
<b>As Yet Unknown</b>																
<b>Country/Regional Programs</b>																
Africa	\$213,481.00	\$101,312.00	\$0.00	\$314,793.00	\$158,354.69	\$14,177.76	\$0.00	\$170,532.45	\$57,128.31	26.8%	\$87,134.24	86.0%	\$0.00	0.0%	\$144,280.55	45.8%
Latin America/Caribbean	\$0.00	\$0.00	\$0.00	\$0.00	\$515.83	\$0.00	\$0.00	\$515.83	(\$515.83)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$515.83)	0.0%
Newly Independent States	\$0.00	\$0.00	\$988,059.00	\$988,059.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$988,059.00	100.0%	\$988,059.00	100.0%
<b>Program Sub Total:</b>	<b>\$213,481.00</b>	<b>\$101,312.00</b>	<b>\$988,059.00</b>	<b>\$1,302,852.00</b>	<b>\$168,870.52</b>	<b>\$14,177.76</b>	<b>\$0.00</b>	<b>\$171,048.28</b>	<b>\$66,816.48</b>	<b>26.6%</b>	<b>\$87,134.24</b>	<b>86.0%</b>	<b>\$988,059.00</b>	<b>100.0%</b>	<b>\$1,131,803.72</b>	<b>86.9%</b>
Technical Quality Assurance	\$0.00	\$0.00	\$0.00	\$0.00	\$5,712.57	\$0.00	\$0.00	\$5,712.57	(\$5,712.57)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$5,712.57)	0.0%
<b>As Yet Unknown Sub Total:</b>	<b>\$213,481.00</b>	<b>\$101,312.00</b>	<b>\$988,059.00</b>	<b>\$1,302,852.00</b>	<b>\$182,883.09</b>	<b>\$14,177.76</b>	<b>\$0.00</b>	<b>\$176,766.86</b>	<b>\$60,897.81</b>	<b>23.8%</b>	<b>\$87,134.24</b>	<b>86.0%</b>	<b>\$988,059.00</b>	<b>100.0%</b>	<b>\$1,128,091.16</b>	<b>86.4%</b>
<b>Other</b>																
<b>Country/Regional Programs</b>																
Africa	\$5,437.00	\$44,431.00	\$0.00	\$49,868.00	\$0.00	\$19,406.78	\$0.00	\$19,406.78	\$5,437.00	100.0%	\$25,030.22	56.3%	\$0.00	0.0%	\$30,467.22	61.1%
<b>Program Sub Total:</b>	<b>\$5,437.00</b>	<b>\$44,431.00</b>	<b>\$0.00</b>	<b>\$49,868.00</b>	<b>\$0.00</b>	<b>\$19,406.78</b>	<b>\$0.00</b>	<b>\$19,406.78</b>	<b>\$5,437.00</b>	<b>100.0%</b>	<b>\$25,030.22</b>	<b>66.3%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$30,467.22</b>	<b>61.1%</b>
<b>Other Sub Total:</b>	<b>\$5,437.00</b>	<b>\$44,431.00</b>	<b>\$0.00</b>	<b>\$49,868.00</b>	<b>\$0.00</b>	<b>\$19,406.78</b>	<b>\$0.00</b>	<b>\$19,406.78</b>	<b>\$5,437.00</b>	<b>100.0%</b>	<b>\$25,030.22</b>	<b>66.3%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$30,467.22</b>	<b>61.1%</b>

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
>3 above																
Country/Regional Programs																
Africa	\$371,904.00	\$110,055.00	\$167,917.00	\$649,876.00	\$342,896.90	\$20,979.80	\$125,400.18	\$489,276.68	\$29,007.10	7.6%	\$89,075.40	80.9%	\$42,516.62	25.3%	\$160,599.32	24.7%
Asia	\$93,981.00	\$0.00	\$0.00	\$93,981.00	\$79,401.72	\$0.00	\$0.00	\$79,401.72	\$14,579.28	15.5%	\$0.00	0.0%	\$0.00	0.0%	\$14,579.28	15.5%
Latin America/Caribbean	\$413,703.00	\$78,041.00	\$40,570.00	\$530,314.00	\$304,084.64	\$31,414.97	\$0.00	\$335,499.61	\$109,818.36	26.5%	\$44,826.03	58.7%	\$40,570.00	100.0%	\$194,814.39	36.7%
Newly Independent States	\$0.00	\$196,205.67	\$31,883.33	\$228,089.00	\$0.00	\$40,158.98	\$0.00	\$40,158.98	\$0.00	0.0%	\$158,046.71	79.5%	\$31,883.33	100.0%	\$187,930.04	82.4%
Program Sub Total:	\$878,888.00	\$382,381.67	\$240,370.33	\$1,602,269.00	\$726,383.26	\$92,663.63	\$128,406.18	\$944,336.97	\$163,264.74	17.4%	\$289,748.14	76.8%	\$114,976.16	47.8%	\$687,923.83	37.1%
Technical Quality Assurance	\$545,467.00	\$0.00	\$0.00	\$545,467.00	\$191,686.10	\$0.00	\$0.00	\$191,686.10	\$353,780.90	64.9%	\$0.00	0.0%	\$0.00	0.0%	\$353,780.90	64.9%
Information Dissemination	\$186,781.00	\$0.00	\$0.00	\$186,781.00	\$142,852.63	\$0.00	\$0.00	\$142,852.63	\$43,928.37	23.5%	\$0.00	0.0%	\$0.00	0.0%	\$43,928.37	23.5%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$1,147,312.18	\$0.00	\$0.00	\$1,147,312.18	(\$1,147,312.18)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,147,312.18)	0.0%
>3 above Sub Total:	\$1,611,838.00	\$382,381.67	\$240,370.33	\$2,234,689.00	\$2,208,234.17	\$92,663.63	\$128,406.18	\$2,426,187.88	(\$696,398.17)	-37.0%	\$289,748.14	76.8%	\$114,976.16	47.8%	(\$181,879.88)	-8.6%
Not applicable																
Country/Regional Programs																
Asia	\$155,817.50	\$0.00	\$0.00	\$155,817.50	\$64,207.22	\$0.00	\$0.00	\$64,207.22	\$91,610.28	58.8%	\$0.00	0.0%	\$0.00	0.0%	\$91,610.28	58.8%
Newly Independent States	\$0.00	\$9,599.00	\$0.00	\$9,599.00	\$0.00	\$6,469.82	\$0.00	\$6,469.82	\$0.00	0.0%	\$3,129.18	32.6%	\$0.00	0.0%	\$3,129.18	32.6%
Program Sub Total:	\$155,817.50	\$9,599.00	\$0.00	\$165,416.50	\$64,207.22	\$6,469.82	\$0.00	\$70,677.04	\$91,610.28	88.8%	\$3,129.18	32.6%	\$0.00	0.0%	\$94,739.46	87.3%
Information Dissemination	\$7,916.00	\$0.00	\$0.00	\$7,916.00	\$15,699.99	\$0.00	\$0.00	\$15,699.99	(\$7,783.99)	-96.3%	\$0.00	0.0%	\$0.00	0.0%	(\$7,783.99)	-96.3%
Program Management	\$0.00	\$0.00	\$0.00	\$0.00	\$388,564.67	\$0.00	\$0.00	\$388,564.67	(\$388,564.67)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$388,564.67)	0.0%
Not applicable Sub Total:	\$163,733.50	\$9,599.00	\$0.00	\$173,332.50	\$468,471.89	\$6,469.82	\$0.00	\$474,941.71	(\$304,738.39)	186.1%	\$3,129.18	32.6%	\$0.00	0.0%	(\$381,809.21)	174.6%
<b>Grand Total:</b>	<b>\$8,808,667.00</b>	<b>\$2,326,877.00</b>	<b>\$4,389,287.00</b>	<b>16,624,671.00</b>	<b>\$6,869,012.28</b>	<b>\$1,026,871.18</b>	<b>\$243,611.16</b>	<b>\$8,223,294.61</b>	<b>\$1,849,484.72</b>	<b>21.0%</b>	<b>\$1,306,286.82</b>	<b>86.1%</b>	<b>\$4,148,878.86</b>	<b>84.4%</b>	<b>\$7,361,378.39</b>	<b>47.6%</b>

# LOE SUMMARY BY COUNTERPART/CLIENT ORGANIZATION(S)

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Public Sector</b>																
Country/Regional Programs																
Africa	1,079.3	30.0	541.0	1,650.3	483.2	0.8	104.6	588.6	596.2	55.2%	29.2	97.2%	436.4	80.7%	1,061.7	64.3%
Asia	560.5	0.0	355.7	916.2	189.7	0.0	0.0	189.7	370.8	66.2%	0.0	0.0%	355.7	100.0%	726.4	79.3%
Latin America/Caribbean	129.0	12.0	123.0	264.0	93.8	13.2	40.1	147.1	35.3	27.3%	-1.2	-10.2%	82.9	67.4%	116.9	44.3%
Newly Independent States	0.0	780.3	190.0	950.3	0.0	179.7	0.0	179.7	0.0	0.0%	580.6	76.4%	180.0	100.0%	770.6	81.1%
Interregional	0.0	0.0	0.0	0.0	0.0	3.7	0.0	3.7	0.0	0.0%	-3.7	0.0%	0.0	0.0%	-3.7	0.0%
Program Sub Total:	1,768.8	802.3	1,209.7	3,780.8	766.6	197.4	144.8	1,108.8	1,002.2	66.7%	604.9	76.4%	1,064.9	88.0%	2,872.6	76.7%
Technical Quality Assurance	404.5	0.5	0.0	405.0	158.8	0.0	0.0	158.8	245.9	60.8%	0.5	100.0%	0.0	0.0%	246.4	60.8%
Public Sector Sub Total:	2,173.3	802.8	1,209.7	4,185.8	925.3	197.4	144.8	1,267.5	1,248.1	67.4%	605.4	76.4%	1,064.9	88.0%	2,919.0	69.7%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Private Sector Companies</b>																
Country/Regional Programs																
Asia	0.0	0.0	355.7	355.7	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	355.7	100.0%	355.7	100.0%
Latin America/Caribbean	0.0	0.0	49.7	49.7	0.0	0.0	24.1	24.1	0.0	0.0%	0.0	0.0%	25.6	51.6%	25.6	51.6%
Newly Independent States	0.0	499.3	0.0	499.3	0.0	113.9	0.0	113.9	0.0	0.0%	385.4	77.2%	0.0	0.0%	385.4	77.2%
Program Sub Total:	0.0	499.3	405.3	904.7	0.0	113.9	24.1	138.0	0.0	0.0%	385.4	77.2%	381.3	94.1%	766.7	84.7%
Technical Quality Assurance	67.7	0.0	0.0	67.7	0.0	0.0	0.0	0.0	67.7	100.0%	0.0	0.0%	0.0	0.0%	67.7	100.0%
Private Sector Companies Sub Total:	67.7	499.3	405.3	972.3	0.0	113.9	24.1	138.0	67.7	100.0%	385.4	77.2%	381.3	94.1%	834.3	85.8%
<b>Private Sector Providers</b>																
Country/Regional Programs																
Africa	39.3	5.0	0.0	44.3	0.0	0.0	0.0	0.0	39.3	100.0%	4.2	83.3%	0.0	0.0%	43.5	98.1%
Asia	73.5	0.0	0.0	73.5	18.1	0.0	0.0	18.1	55.4	75.4%	0.0	0.0%	0.0	0.0%	55.4	75.4%
Latin America/Caribbean	0.0	0.0	16.7	16.7	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	16.7	100.0%	16.7	100.0%
Newly Independent States	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	112.8	5.0	16.7	134.6	18.1	0.0	0.0	18.1	94.8	84.0%	4.2	83.3%	16.7	100.0%	118.6	88.0%
Technical Quality Assurance	67.7	0.0	0.0	67.7	7.1	0.0	0.0	7.1	60.6	89.5%	0.0	0.0%	0.0	0.0%	60.6	89.5%
Private Sector Providers Sub Total:	180.6	5.0	16.7	202.3	25.1	0.0	0.0	25.1	155.4	86.1%	4.2	83.3%	16.7	100.0%	178.2	87.1%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
NGO/PVO																
Country/Regional Programs																
Africa	29.3	0.0	0.0	29.3	8.4	0.8	0.0	9.2	20.9	71.3%	-0.8	0.0%	0.0	0.0%	20.1	68.5%
Asia	6.5	0.0	355.7	362.2	9.9	3.3	0.0	13.2	-3.4	-52.4%	-3.3	0.0%	355.7	100.0%	349.0	96.4%
Latin America/Caribbean	0.0	12.0	12.3	24.3	0.0	10.2	0.0	10.2	0.0	0.0%	1.8	14.8%	12.3	100.0%	14.1	58.0%
Newly Independent States	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	0.0	0.0%	0.0	0.0%
Program Sub Total:	36.8	12.0	368.0	416.8	18.3	14.3	0.0	32.6	17.6	48.9%	-2.3	-19.4%	368.0	100.0%	363.2	87.1%
Technical Quality Assurance	67.7	0.0	0.0	67.7	9.8	0.0	0.0	9.8	57.8	85.5%	0.0	0.0%	0.0	0.0%	57.8	85.5%
NGO/PVO Sub Total:	104.5	12.0	368.0	484.5	28.1	14.3	0.0	42.4	75.4	72.8%	-2.3	-19.4%	368.0	100.0%	441.0	91.2%

151

USAID or USAID Project	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Country/Regional Programs																
Africa	198.0	782.0	0.0	978.0	42.9	341.7	0.0	384.6	153.1	78.1%	440.3	56.3%	0.0	0.0%	503.4	60.7%
Asia	0.0	57.0	0.0	57.0	0.0	3.1	0.0	3.1	0.0	0.0%	53.9	94.6%	0.0	0.0%	53.9	94.6%
Latin America/Caribbean	32.0	0.0	0.0	32.0	15.0	19.0	17.0	51.0	16.4	51.2%	-19.0	0.0%	-17.0	0.0%	-19.0	-61.3%
Newly Independent States	0.0	15.0	0.0	15.0	0.0	25.5	0.0	25.5	0.0	0.0%	-10.5	-70.0%	0.0	0.0%	-10.5	-70.0%
Interregional	0.0	115.0	0.0	115.0	0.0	19.8	0.0	19.8	0.0	0.0%	95.2	82.8%	0.0	0.0%	95.2	82.8%
Program Sub Total:	228.0	869.0	0.0	1,107.0	88.0	409.1	17.0	484.0	189.8	74.3%	889.8	87.8%	-17.0	0.0%	712.4	68.8%
Technical Quality Assurance	0.0	0.5	0.0	0.5	2.8	0.0	0.0	2.8	-2.8	0.0%	0.5	100.0%	0.0	0.0%	-2.3	-450.0%
Conference/Workshops	0.0	0.0	0.0	0.0	57.9	0.0	0.0	57.9	-57.9	0.0%	0.0	0.0%	0.0	0.0%	-57.9	0.0%
Program Management	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-0.0	0.0%	0.0	0.0%	0.0	0.0%	-0.0	0.0%
USAID or USAID Project Sub Total:	228.0	869.6	0.0	1,107.6	119.9	409.1	17.0	546.0	188.1	47.4%	880.4	87.8%	-17.0	0.0%	681.8	64.4%

12/1

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
International Agencies																
Country/Regional Programs																
Africa	18.0	20.0	70.0	108.0	36.8	1.0	0.0	37.8	-20.8	115.7%	19.0	95.0%	70.0	100.0%	68.2	63.1%
Latin America/Caribbean	11.0	0.0	60.3	71.3	1.4	0.0	2.3	3.6	9.6	87.5%	0.0	0.0%	56.1	95.3%	67.7	94.9%
Program Sub Total:	29.0	20.0	130.3	179.3	48.2	1.0	2.3	51.5	-11.2	-38.6%	19.0	95.0%	126.1	88.3%	135.9	75.8%
Technical Quality Assurance	109.5	0.0	0.0	109.5	87.8	0.0	0.0	87.8	21.8	19.9%	0.0	0.0%	0.0	0.0%	21.8	19.9%
Program Management	0.0	0.0	0.0	0.0	0.8	0.0	0.0	0.8	-0.8	0.0%	0.0	0.0%	0.0	0.0%	-0.8	0.0%
International Agencies Sub Total:	138.5	20.0	130.3	288.8	128.8	1.0	2.3	132.1	9.7	7.6%	19.0	95.0%	126.1	88.3%	155.6	64.3%

1539

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
None - only BASICS																
Country/Regional Programs																
Africa	423.0	5.0	0.0	428.0	274.0	9.0	0.0	283.0	149.0	35.2%	-4.0	-9.0%	0.0	0.0%	145.0	33.9%
Latin America/Caribbean	0.0	0.0	0.0	0.0	17.7	0.0	0.0	17.7	-17.7	0.0%	0.0	0.0%	0.0	0.0%	-17.7	0.0%
Program Sub Total:	423.0	5.0	0.0	428.0	291.7	9.0	0.0	300.7	131.3	31.0%	-4.0	-9.0%	0.0	0.0%	127.3	29.7%
Technical Quality Assurance	415.0	0.0	0.0	415.0	193.9	0.0	0.0	193.9	221.1	53.3%	0.0	0.0%	0.0	0.0%	221.1	53.3%
Information Dissemination	178.0	0.0	0.0	178.0	126.1	0.0	0.0	126.1	51.9	29.1%	0.0	0.0%	0.0	0.0%	51.9	29.1%
Evaluation & MIS	546.0	0.0	0.0	546.0	240.8	0.0	0.0	240.8	305.2	55.9%	0.0	0.0%	0.0	0.0%	305.2	55.9%
Program Management	3,596.0	0.0	0.0	3,596.0	2,482.3	0.0	0.0	2,482.3	1,113.7	31.0%	0.0	0.0%	0.0	0.0%	1,113.7	31.0%
Start-up Costs	0.0	0.0	0.0	0.0	23.1	0.0	0.0	23.1	-23.1	0.0%	0.0	0.0%	0.0	0.0%	-23.1	0.0%
None - only BASICS Sub Total:	6,168.0	5.0	0.0	6,173.0	3,358.0	9.0	0.0	3,367.0	1,806.0	34.9%	-4.0	-9.0%	0.0	0.0%	1,796.0	34.9%

154

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>As Yet Unknown</b>																
Country/Regional Programs																
Africa	387.0	105.0	0.0	492.0	231.4	0.0	0.0	231.4	155.6	40.2%	105.0	100.0%	0.0	0.0%	260.6	53.0%
Latin America/Caribbean	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-0.9	0.0%	0.0	0.0%	0.0	0.0%	-0.9	0.0%
Newly Independent States	0.0	0.0	823.0	823.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	823.0	100.0%	823.0	100.0%
<b>Program Sub Total:</b>	<b>387.0</b>	<b>105.0</b>	<b>823.0</b>	<b>1,315.0</b>	<b>231.4</b>	<b>0.0</b>	<b>0.0</b>	<b>231.4</b>	<b>154.7</b>	<b>40.0%</b>	<b>105.0</b>	<b>100.0%</b>	<b>823.0</b>	<b>100.0%</b>	<b>1,082.7</b>	<b>82.3%</b>
Technical Quality Assurance	0.0	0.0	0.0	0.0	6.8	0.0	0.0	6.8	-6.8	0.0%	0.0	0.0%	0.0	0.0%	-6.8	0.0%
<b>As Yet Unknown Sub Total:</b>	<b>387.0</b>	<b>105.0</b>	<b>823.0</b>	<b>1,315.0</b>	<b>238.2</b>	<b>0.0</b>	<b>0.0</b>	<b>238.2</b>	<b>147.9</b>	<b>38.2%</b>	<b>105.0</b>	<b>100.0%</b>	<b>823.0</b>	<b>100.0%</b>	<b>1,075.9</b>	<b>81.6%</b>
<b>Other</b>																
Country/Regional Programs																
Africa	18.0	20.0	0.0	38.0	0.0	1.0	0.0	1.0	18.0	100.0%	19.0	95.0%	0.0	0.0%	37.0	97.4%
<b>Program Sub Total:</b>	<b>18.0</b>	<b>20.0</b>	<b>0.0</b>	<b>38.0</b>	<b>0.0</b>	<b>1.0</b>	<b>0.0</b>	<b>1.0</b>	<b>18.0</b>	<b>100.0%</b>	<b>19.0</b>	<b>95.0%</b>	<b>0.0</b>	<b>0.0%</b>	<b>37.0</b>	<b>97.4%</b>
<b>Other Sub Total:</b>	<b>18.0</b>	<b>20.0</b>	<b>0.0</b>	<b>38.0</b>	<b>0.0</b>	<b>1.0</b>	<b>0.0</b>	<b>1.0</b>	<b>18.0</b>	<b>100.0%</b>	<b>19.0</b>	<b>95.0%</b>	<b>0.0</b>	<b>0.0%</b>	<b>37.0</b>	<b>97.4%</b>

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
>3 above																
Country/Regional Programs																
Africa	359.0	132.0	160.0	651.0	370.8	15.5	128.2	514.5	-11.8	-3.3%	116.5	88.3%	31.8	19.9%	136.5	21.0%
Asia	214.0	0.0	0.0	214.0	89.2	0.0	0.0	89.2	124.8	58.3%	0.0	0.0%	0.0	0.0%	124.8	58.3%
Latin America/Caribbean	555.0	196.0	92.0	843.0	450.7	117.0	0.0	567.7	104.3	18.8%	79.0	40.3%	92.0	100.0%	275.3	32.7%
Newly Independent States	0.0	499.3	0.0	499.3	0.0	113.9	0.0	113.9	0.0	0.0%	385.4	77.2%	0.0	0.0%	385.4	77.2%
Program Sub Total:	1,128.0	827.3	282.0	2,237.3	910.7	246.4	128.2	1,285.3	217.3	19.3%	686.9	70.2%	123.8	48.1%	822.6	41.8%
Technical Quality Assurance	500.0	0.0	0.0	500.0	223.9	0.0	0.0	223.9	374.1	62.6%	0.0	0.0%	0.0	0.0%	374.1	62.6%
Information Dissemination	500.0	0.0	0.0	500.0	360.1	0.0	0.0	360.1	139.9	28.0%	0.0	0.0%	0.0	0.0%	139.9	28.0%
Start-up Costs	0.0	0.0	0.0	0.0	1,638.2	0.0	0.0	1,638.2	-1,638.2	0.0%	0.0	0.0%	0.0	0.0%	-1,638.2	0.0%
>3 above Sub Total:	2,228.0	827.3	282.0	3,337.3	3,132.9	246.4	128.2	3,507.6	-306.9	-40.7%	686.9	70.2%	123.8	48.1%	-282.2	-8.1%

15/16

	Estimated Budget				Expenditures				Balance Remaining					
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total		
<b>Victims of War</b>														
Country/Regional Programs														
Africa	0.0	67.0	0.0	67.0	0.0	0.9	0.0	0.9	0.0	66.1	0.0%	66.1	98.7%	
Asia	0.0	57.0	0.0	57.0	0.0	6.3	0.0	6.3	0.0	50.7	88.9%	50.7	88.9%	
Interregional	0.0	115.0	0.0	115.0	0.0	23.5	0.0	23.5	0.0	91.5	79.6%	91.5	79.6%	
Program Sub Total:	0.0	239.0	0.0	239.0	0.0	30.7	0.0	30.7	0.0	208.3	87.1%	208.3	87.1%	
Victims of War Sub Total:	0.0	239.0	0.0	239.0	0.0	30.7	0.0	30.7	0.0	208.3	87.1%	208.3	87.1%	
<b>As Yet Unknown</b>														
Country/Regional Programs														
Africa	387.0	105.0	0.0	492.0	231.4	0.0	0.0	231.4	155.6	40.2%	105.0	100.0%	260.6	53.0%
Latin America/Caribbean	0.0	108.0	96.0	204.0	0.0	0.0	23.1	24.1	-0.9	0.0%	108.0	100.0%	72.9	75.9%
Newly Independent States	0.0	0.0	823.0	823.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%	823.0	100.0%
Program Sub Total:	387.0	213.0	919.0	1,519.0	232.3	0.0	23.1	255.4	164.7	46.6%	213.0	100.0%	896.9	87.5%
Technical Quality Assurance	514.0	0.0	0.0	514.0	183.8	0.0	0.0	183.8	330.3	64.3%	0.0	0.0%	0.0	0.0%
As Yet Unknown Sub Total:	901.0	213.0	919.0	2,033.0	416.1	0.0	23.1	439.2	484.9	53.8%	213.0	100.0%	896.9	87.5%

151

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
>3 above																
Country/Regional Programs																
Latin America/Caribbean	207.0	0.0	0.0	207.0	95.8	0.0	0.0	95.8	111.2	53.7%	0.0	0.0%	0.0	0.0%	111.2	53.7%
Program Sub Total:	207.0	0.0	0.0	207.0	95.8	0.0	0.0	95.8	111.2	53.7%	0.0	0.0%	0.0	0.0%	111.2	53.7%
Technical Quality Assurance	0.0	0.0	0.0	0.0	0.3	0.0	0.0	0.3	-0.3	0.0%	0.0	0.0%	0.0	0.0%	-0.3	0.0%
>3 above Sub Total:	207.0	0.0	0.0	207.0	96.1	0.0	0.0	96.1	110.9	53.6%	0.0	0.0%	0.0	0.0%	110.9	53.6%

58

	Estimated Budget				Expenditures				Balance Remaining			
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total
Not applicable												
Country/Regional Programs												
Asia	108.5	0.0	0.0	108.5	0.0	0.0	0.0	0.0	108.5	100.0%	0.0	0.0%
Newly Independent States	0.0	12.0	0.0	12.0	0.0	0.0	0.0	0.0	0.0	0.0%	11.4	94.8%
Program Sub Total:	108.5	12.0	0.0	120.5	0.0	0.0	0.0	0.0	108.5	100.0%	11.4	94.8%
Information Dissemination	24.0	0.0	0.0	24.0	47.2	0.0	0.0	47.2	-23.2	-96.6%	0.0	0.0%
Program Management	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0%	0.0	0.0%
Not applicable Sub Total:	132.5	12.0	0.0	144.5	47.2	0.0	0.0	47.2	85.3	64.4%	11.4	94.8%
<b>Grand Total:</b>	<b>10,813.0</b>	<b>3,278.0</b>	<b>3,206.0</b>	<b>17,296.0</b>	<b>8,004.6</b>	<b>893.7</b>	<b>316.3</b>	<b>9,214.6</b>	<b>2,808.6</b>	<b>26.0%</b>	<b>2,284.3</b>	<b>69.7%</b>

159

# FINANCIAL SUMMARY BY SPECIAL AT-RISK GROUPS

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Urban Poor</b>																
Country/Regional Programs																
Africa	\$225,027.50	\$80,373.00	\$0.00	\$305,400.50	\$53,896.05	\$264.31	\$0.00	\$54,160.35	\$171,131.45	76.0%	\$80,106.69	99.7%	\$0.00	0.0%	\$251,240.15	82.3%
Asia	\$791,199.50	\$0.00	\$1,948,434.00	\$2,739,633.50	\$238,739.15	\$0.00	\$0.00	\$238,739.15	\$552,460.35	69.8%	\$0.00	0.0%	\$1,948,434.00	100.0%	\$2,500,894.35	91.3%
Latin America/Caribbean	\$51,778.33	\$14,794.00	\$34,994.00	\$101,566.33	\$20,256.92	\$15,707.49	\$10,678.08	\$46,642.49	\$31,521.41	60.9%	(\$913.49)	-6.2%	\$24,315.92	89.5%	\$54,923.84	54.1%
Program Sub Total:	\$1,068,005.33	\$95,167.00	\$1,983,428.00	\$3,146,600.33	\$312,892.11	\$16,071.79	\$10,678.08	\$339,641.99	\$756,113.22	76.7%	\$79,195.21	83.2%	\$1,972,749.92	89.6%	\$2,807,968.36	89.2%
Technical Quality Assurance	\$147,876.50	\$0.00	\$0.00	\$147,876.50	\$63,319.43	\$0.00	\$0.00	\$63,319.43	\$84,557.07	57.2%	\$0.00	0.0%	\$0.00	0.0%	\$84,557.07	57.2%
Program Management	\$0.00	\$0.00	\$0.00	\$0.00	\$962.41	\$0.00	\$0.00	\$962.41	(\$962.41)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$962.41)	0.0%
Urban Poor Sub Total:	\$1,216,881.83	\$95,167.00	\$1,983,428.00	\$3,294,478.83	\$377,173.94	\$16,071.79	\$10,678.08	\$403,823.81	\$838,767.88	69.8%	\$79,195.21	83.2%	\$1,972,749.92	89.6%	\$2,890,863.81	87.7%
<b>Rural Poor</b>																
Country/Regional Programs																
Africa	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$264.31	\$0.00	\$264.31	\$0.00	0.0%	(\$264.31)	0.0%	\$0.00	0.0%	(\$264.31)	0.0%
Asia	\$0.00	\$0.00	\$0.00	\$0.00	\$5,804.45	\$0.00	\$0.00	\$5,804.45	(\$5,804.45)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$5,804.45)	0.0%
Latin America/Caribbean	\$45,260.33	\$0.00	\$10,736.00	\$55,996.33	\$13,481.61	\$0.00	\$1,952.61	\$15,434.22	\$31,778.72	70.2%	\$0.00	0.0%	\$8,783.39	81.8%	\$40,562.11	72.4%
Program Sub Total:	\$45,260.33	\$0.00	\$10,736.00	\$55,996.33	\$19,286.06	\$264.31	\$1,952.61	\$21,502.98	\$26,974.27	67.4%	(\$264.31)	6.0%	\$8,783.39	81.8%	\$34,493.36	61.6%
Technical Quality Assurance	\$147,876.50	\$0.00	\$0.00	\$147,876.50	\$62,402.51	\$0.00	\$0.00	\$62,402.51	\$85,473.99	57.8%	\$0.00	0.0%	\$0.00	0.0%	\$85,473.99	57.8%
Rural Poor Sub Total:	\$193,136.83	\$0.00	\$10,736.00	\$203,872.83	\$81,688.58	\$264.31	\$1,952.61	\$83,905.49	\$111,448.26	67.7%	(\$264.31)	0.0%	\$8,783.39	81.8%	\$119,967.34	68.9%
<b>Minority Ethnic Groups</b>																
Country/Regional Programs																
Africa	\$32,262.50	\$25,261.00	\$0.00	\$57,523.50	\$0.00	\$0.00	\$0.00	\$0.00	\$32,262.50	100.0%	\$25,261.00	100.0%	\$0.00	0.0%	\$57,523.50	100.0%
Latin America/Caribbean	\$51,778.33	\$14,274.00	\$20,285.00	\$86,337.33	\$13,481.61	\$15,707.49	\$1,952.61	\$31,141.71	\$38,296.72	74.0%	(\$1,433.49)	-10.0%	\$18,332.39	90.4%	\$55,195.62	63.9%
Program Sub Total:	\$84,040.83	\$39,535.00	\$20,285.00	\$143,860.83	\$13,481.61	\$15,707.49	\$1,952.61	\$31,141.71	\$70,559.22	84.0%	\$23,827.61	60.3%	\$18,332.39	90.4%	\$112,719.12	78.4%
Minority Ethnic Groups Sub Total:	\$84,040.83	\$39,535.00	\$20,285.00	\$143,860.83	\$13,481.61	\$15,707.49	\$1,952.61	\$31,141.71	\$70,559.22	84.0%	\$23,827.61	60.3%	\$18,332.39	90.4%	\$112,719.12	78.4%

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Refugee/Displaced Pop.</b>																
Technical Quality Assurance	\$0.00	\$0.00	\$0.00	\$0.00	\$916.92	\$0.00	\$0.00	\$916.92	(\$916.92)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$916.92)	0.0%
<b>Refugee/Displaced Pop. Sub Total:</b>	<b>\$8.88</b>	<b>\$8.88</b>	<b>\$8.88</b>	<b>\$8.88</b>	<b>\$916.92</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$916.92</b>	<b>(\$916.92)</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>(\$916.92)</b>	<b>0.0%</b>
<b>Victims of War</b>																
<b>Country/Regional Programs</b>																
Africa	\$0.00	\$51,445.00	\$0.00	\$51,445.00	\$0.00	\$48,175.36	\$0.00	\$48,175.36	\$0.00	0.0%	\$3,269.64	6.4%	\$0.00	0.0%	\$3,269.64	6.4%
Asia	\$0.00	\$113,512.00	\$0.00	\$113,512.00	\$0.00	\$62,261.55	\$0.00	\$62,261.55	\$0.00	0.0%	\$51,250.45	45.1%	\$0.00	0.0%	\$51,250.45	45.1%
Interregional	\$0.00	\$85,068.00	\$0.00	\$85,068.00	\$0.00	\$46,293.50	\$0.00	\$46,293.50	\$0.00	0.0%	\$38,794.50	45.6%	\$0.00	0.0%	\$38,794.50	45.6%
<b>Program Sub Total:</b>	<b>\$8.88</b>	<b>\$250,048.88</b>	<b>\$0.00</b>	<b>\$250,048.88</b>	<b>\$8.88</b>	<b>\$166,736.42</b>	<b>\$0.00</b>	<b>\$166,736.42</b>	<b>\$8.88</b>	<b>0.0%</b>	<b>\$93,314.68</b>	<b>37.3%</b>	<b>\$8.88</b>	<b>0.0%</b>	<b>\$93,314.68</b>	<b>37.3%</b>
<b>Victims of War Sub Total:</b>	<b>\$8.88</b>	<b>\$250,048.88</b>	<b>\$0.00</b>	<b>\$250,048.88</b>	<b>\$8.88</b>	<b>\$166,736.42</b>	<b>\$0.00</b>	<b>\$166,736.42</b>	<b>\$8.88</b>	<b>0.0%</b>	<b>\$93,314.68</b>	<b>37.3%</b>	<b>\$8.88</b>	<b>0.0%</b>	<b>\$93,314.68</b>	<b>37.3%</b>
<b>As Yet Unknown</b>																
<b>Country/Regional Programs</b>																
Africa	\$213,481.00	\$101,312.00	\$0.00	\$314,793.00	\$156,354.69	\$14,177.76	\$0.00	\$170,532.45	\$57,126.31	26.8%	\$87,134.24	86.0%	\$0.00	0.0%	\$144,280.55	45.8%
Latin America/Caribbean	\$0.00	\$47,493.00	\$155,542.00	\$203,035.00	\$515.83	\$0.00	\$14,388.88	\$14,904.72	(\$515.83)	0.0%	\$47,493.00	100.0%	\$141,153.12	90.7%	\$188,130.28	92.7%
Newly Independent States	\$0.00	\$0.00	\$988,059.00	\$988,059.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$988,059.00	100.0%	\$988,059.00	100.0%
<b>Program Sub Total:</b>	<b>\$213,481.00</b>	<b>\$148,805.00</b>	<b>\$1,143,601.00</b>	<b>\$1,866,887.88</b>	<b>\$166,870.52</b>	<b>\$14,177.76</b>	<b>\$14,388.88</b>	<b>\$166,437.17</b>	<b>\$56,610.48</b>	<b>28.5%</b>	<b>\$134,627.24</b>	<b>86.8%</b>	<b>\$1,128,212.12</b>	<b>88.7%</b>	<b>\$1,328,448.83</b>	<b>87.7%</b>
Technical Quality Assurance	\$359,618.00	\$0.00	\$0.00	\$359,618.00	\$162,423.67	\$0.00	\$0.00	\$162,423.67	\$197,194.33	54.8%	\$0.00	0.0%	\$0.00	0.0%	\$197,194.33	54.8%
<b>As Yet Unknown Sub Total:</b>	<b>\$673,099.00</b>	<b>\$148,805.00</b>	<b>\$1,143,601.00</b>	<b>\$1,866,888.88</b>	<b>\$319,294.19</b>	<b>\$14,177.76</b>	<b>\$14,388.88</b>	<b>\$347,860.84</b>	<b>\$253,804.81</b>	<b>44.3%</b>	<b>\$134,627.24</b>	<b>86.8%</b>	<b>\$1,128,212.12</b>	<b>88.7%</b>	<b>\$1,817,644.18</b>	<b>81.4%</b>
<b>&gt;3 above</b>																
<b>Country/Regional Programs</b>																
Latin America/Caribbean	\$95,528.00	\$0.00	\$0.00	\$95,528.00	\$45,276.62	\$0.00	\$0.00	\$45,276.62	\$50,257.38	52.6%	\$0.00	0.0%	\$0.00	0.0%	\$50,257.38	52.6%
<b>Program Sub Total:</b>	<b>\$95,528.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$95,528.00</b>	<b>\$45,276.62</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$45,276.62</b>	<b>\$50,257.38</b>	<b>52.6%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$50,257.38</b>	<b>52.6%</b>
Technical Quality Assurance	\$0.00	\$0.00	\$0.00	\$0.00	\$7,074.29	\$0.00	\$0.00	\$7,074.29	(\$7,074.29)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$7,074.29)	0.0%
<b>&gt;3 above Sub Total:</b>	<b>\$95,528.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$95,528.00</b>	<b>\$52,344.91</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$52,344.91</b>	<b>\$43,183.09</b>	<b>48.2%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$0.00</b>	<b>0.0%</b>	<b>\$43,183.09</b>	<b>48.2%</b>

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Not applicable																
Country/Regional Programs																
Africa	\$1,349,605.00	\$881,485.00	\$761,408.00	\$2,992,508.00	\$807,291.33	\$542,421.04	\$174,450.33	\$1,524,162.71	\$542,403.67	40.2%	\$339,063.96	38.5%	\$586,958.67	77.1%	\$1,468,426.29	49.1%
Asia	\$155,817.50	\$0.00	\$0.00	\$155,817.50	\$64,836.55	\$0.00	\$0.00	\$64,836.55	\$90,980.95	58.4%	\$0.00	0.0%	\$0.00	0.0%	\$90,980.95	58.4%
Latin America/Caribbean	\$261,397.00	\$30,873.00	\$169,418.00	\$481,688.00	\$264,523.42	\$50,020.75	\$40,188.64	\$374,732.81	(\$3,126.42)	-1.1%	(\$19,147.75)	-62.0%	\$129,229.36	76.3%	\$106,955.19	22.2%
Newly Independent States	\$0.00	\$879,900.00	\$300,410.00	\$1,180,310.00	\$0.00	\$225,377.61	\$0.00	\$225,377.61	\$0.00	0.0%	\$654,522.39	74.4%	\$300,410.00	100.0%	\$954,932.39	80.9%
Program Sub Total:	\$1,766,820.50	\$1,792,258.00	\$1,231,237.00	\$4,810,484.50	\$1,166,681.30	\$817,819.41	\$214,638.97	\$2,199,139.67	\$639,288.20	38.3%	\$974,438.59	64.4%	\$1,816,698.63	82.6%	\$2,621,294.83	84.8%
Technical Quality Assurance	\$687,860.00	\$1,067.00	\$0.00	\$688,947.00	\$265,347.58	\$0.00	\$0.00	\$265,347.58	\$422,532.42	61.4%	\$1,067.00	100.0%	\$0.00	0.0%	\$423,599.42	61.5%
Information Dissemination	\$276,373.00	\$0.00	\$0.00	\$276,373.00	\$219,269.80	\$0.00	\$0.00	\$219,269.80	\$57,103.10	20.7%	\$0.00	0.0%	\$0.00	0.0%	\$57,103.10	20.7%
Conference/Workshops	\$0.00	\$0.00	\$0.00	\$0.00	\$103,991.64	\$0.00	\$0.00	\$103,991.64	(\$103,991.64)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$103,991.64)	0.0%
Evaluation & MIS	\$1,141,900.00	\$0.00	\$0.00	\$1,141,900.00	\$375,665.78	\$0.00	\$0.00	\$375,665.78	\$766,294.22	67.1%	\$0.00	0.0%	\$0.00	0.0%	\$766,294.22	67.1%
Program Management	\$2,753,698.00	\$0.00	\$0.00	\$2,753,698.00	\$2,633,127.71	\$0.00	\$0.00	\$2,633,127.71	(\$79,429.71)	-2.9%	\$0.00	0.0%	\$0.00	0.0%	(\$79,429.71)	-2.9%
Start-up Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$1,180,058.21	\$0.00	\$0.00	\$1,180,058.21	(\$1,180,058.21)	0.0%	\$0.00	0.0%	\$0.00	0.0%	(\$1,180,058.21)	0.0%
Not applicable Sub Total:	\$6,648,828.50	\$1,793,326.00	\$1,231,237.00	\$9,671,382.50	\$8,114,112.12	\$817,819.41	\$214,638.97	\$9,146,570.49	\$632,708.38	8.0%	\$876,698.59	64.4%	\$1,816,698.63	82.6%	\$2,621,294.81	26.1%
Grand Total:	\$8,808,697.00	\$2,326,877.00	\$4,389,287.00	15,524,871.00	\$8,969,012.28	\$1,629,671.18	\$243,611.16	\$10,842,294.61	\$1,849,494.72	21.0%	\$1,306,286.82	66.1%	\$4,146,676.85	84.4%	\$7,391,376.39	47.6%

# LOE SUMMARY BY SPECIAL AT-RISK GROUPS

10-Jan-95

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
Urban Poor																
Country/Regional Programs																
Africa	439.0	32.5	0.0	471.5	16.2	1.3	0.0	17.4	422.8	96.3%	31.3	96.2%	0.0	0.0%	454.1	96.3%
Asia	854.5	0.0	1,067.0	1,921.5	299.9	0.0	0.0	299.9	554.6	64.9%	0.0	0.0%	1,067.0	100.0%	1,621.6	84.4%
Latin America/Caribbean	48.0	44.0	55.5	147.5	15.9	58.5	0.0	74.4	32.1	66.8%	-14.5	-33.0%	55.5	100.0%	73.1	49.5%
Program Sub Total:	1,341.6	76.6	1,122.6	2,540.8	332.1	69.8	0.0	391.9	1,009.4	75.2%	16.8	21.9%	1,122.6	100.0%	2,148.7	84.6%
Technical Quality Assurance	207.5	0.0	0.0	207.5	95.6	0.0	0.0	95.6	111.9	53.9%	0.0	0.0%	0.0	0.0%	111.9	53.9%
Program Management	0.0	0.0	0.0	0.0	1.6	0.0	0.0	1.6	-1.6	0.0%	0.0	0.0%	0.0	0.0%	-1.6	0.0%
Urban Poor Sub Total:	1,649.0	76.6	1,122.6	2,748.0	429.3	69.8	0.0	489.0	1,119.7	72.3%	16.8	21.9%	1,122.6	100.0%	2,289.0	82.3%

10/17

	Estimated Budget				Expenditures				Balance Remaining							
	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total	Core	Des. Core	D.O.	Total				
<b>Rural Poor</b>																
Country/Regional Programs																
Africa	0.0	0.0	0.0	0.0	0.0	1.3	0.0	1.3	0.0	0.0%	-1.3	0.0%	0.0	0.0%	-1.3	0.0%
Asia	0.0	0.0	0.0	0.0	4.9	0.0	0.0	4.9	-4.9	0.0%	0.0	0.0%	0.0	0.0%	-4.9	0.0%
Latin America/Caribbean	48.0	0.0	12.0	60.0	15.9	0.0	0.0	15.9	32.1	66.8%	0.0	0.0%	12.0	100.0%	44.1	73.4%
Program Sub Total:	48.0	0.0	12.0	60.0	20.9	1.3	0.0	22.1	27.1	66.8%	-1.3	0.0%	12.0	100.0%	37.8	63.1%
Technical Quality Assurance	207.5	0.0	0.0	207.5	94.6	0.0	0.0	94.6	112.9	54.4%	0.0	0.0%	0.0	0.0%	112.9	54.4%
Rural Poor Sub Total:	255.5	0.0	12.0	267.5	115.5	1.3	0.0	116.7	149.9	54.8%	-1.3	0.0%	12.0	100.0%	150.9	56.4%
<b>Minority Ethnic Groups</b>																
Country/Regional Programs																
Africa	15.0	7.5	0.0	22.5	0.0	0.0	0.0	0.0	15.0	100.0%	7.5	100.0%	0.0	0.0%	22.5	100.0%
Latin America/Caribbean	48.0	44.0	48.0	138.0	15.9	58.5	0.0	74.4	32.1	66.8%	-14.5	-33.0%	46.0	100.0%	63.0	46.1%
Program Sub Total:	63.0	51.5	48.0	160.5	15.9	58.5	0.0	74.4	47.1	74.7%	-7.0	-13.6%	46.0	100.0%	86.1	63.6%
Minority Ethnic Groups Sub Total:	63.0	51.5	48.0	160.5	15.9	58.5	0.0	74.4	47.1	74.7%	-7.0	-13.6%	46.0	100.0%	86.1	63.6%
<b>Refugee/Displaced Pop.</b>																
Technical Quality Assurance	0.0	0.0	0.0	0.0	1.0	0.0	0.0	1.0	-1.0	0.0%	0.0	0.0%	0.0	0.0%	-1.0	0.0%
Refugee/Displaced Pop. Sub Total:	0.0	0.0	0.0	0.0	1.0	0.0	0.0	1.0	-1.0	0.0%	0.0	0.0%	0.0	0.0%	-1.0	0.0%

107