

PD-ABQ-185

AFR/CWA

96563

INTERNATIONAL DEVELOPMENT COOPERATION AGENCY
AGENCY FOR INTERNATIONAL DEVELOPMENT
Monrovia, Liberia

MEDICAL SUPPLIES
AND EQUIPMENT
669-0169

PROJECT PAPER

MEDICAL SUPPLIES
AND EQUIPMENT PROJECT
PAPER
TABLE OF CONTENTS

Action Memorandum

Project Authorization and Request for
Allotment of Fund

Project Data Sheet

| | <u>PAGE</u> |
|------------------------------|-------------|
| I. Background and Problem | 1 |
| II. Project Description | 3 |
| A. Goal | |
| B. Purpose | |
| C. Project Activity | |
| D. Financial Plan and Budget | |
| III. Project Analysis | 5 |
| A. Technical | |
| B. Social Soundness | |
| C. Economic | |
| D. Environmental | |
| IV. Implementation | 6 |

ANNEXES

- A. PID Review Cable
- B. Project Checklist
- C. GOL Request for Assistance
- D. Equipment Descriptions

UNITED STATES AID MISSION TO LIBERIA

c/o American Embassy
Monrovia, Liberia



ACTION MEMORANDUM FOR THE DIRECTOR

FROM : Jim Dempsey, DR *Jim Dempsey*
SUBJECT: Authorization of the Medical Supplies and
Equipment Project (669-0169)

Problem: Your approval is required to authorize a grant of \$200,000 from the Foreign Assistance Act Section 531 (b)1, Economic Support Fund (ESF) to the Government of Liberia for Medical Supplies and Equipment Project (669-0169)

Background:

A. Project Activity: The project will procure microscopes, surgical equipment and X-ray machines for the county hospitals in Liberia. These hospitals provide relatively sophisticated modern health care as the third tier in the primary health care referral system. Although the Ministry of Health and Social Welfare's emphasis is on village health care, it is crucial to the system that the very sick and complex medical cases be referred to a relatively modern hospital. The Project funded goods will upgrade the quality of health care provided in the county hospitals.

B. Financial Summary: The proposed ESF grant in the amount of \$200,000 for medical equipment and instruments represents 46.5 percent of the total project cost of \$430,000 to improve county hospital facilities. The Government contribution to the project in the form of medical equipment will be \$230,000, representing 53.5 percent of the total. Total life of project funding is scheduled to be obligated in FY 1980. A detailed project budget appears in the attached Project Paper.

C. Socioeconomic, Technical and Environmental Analyses: The Government of Liberia and the Mission Project Review Committee have found the Project to be sound from social, economic, technical and environmental points of view. Further the Project has been judged to be appropriate within the framework of the USAID/Liberia Country Development Strategy.

D. Legal Criteria: The Project meets all applicable statutory criteria. A project statutory checklist is attached to the Project Paper.

E. Committee Action and Justification to Congress: A Project Review Committee, comprised of USAID/Liberia personnel, recommends authorization of the project. The Congress was notified of AID's intent to authorize and obligate \$200,000 for this Project on July 29, 1980. No objection to the project was received by the end of the 15 day waiting period.

Recommendation:

That you sign the Project Authorization and Request for Allotment of Funds for the Medical Supplies and Equipment Project (669-0169).

Clearances:

DP:EMcLeod, Draft
HLT:CMantione, Draft
CON:DD"Antonio [Signature]
DD:EEAnderson [Signature]

DR:JDempsey:bhw:8/13/80

PROJECT AUTHORIZATION AND REQUEST FOR ALLOTMENT OF FUNDS - PART II

COUNTRY : Liberia
PROJECT : Medical Supplies and Equipment
PROJECT NUMBER: 669-0169

Pursuant to Part II Chapter 4, Section 531 of the Foreign Assistance Act of 1961, as amended, I hereby authorize the Medical Supplies and Equipment Project (the Project) involving planned obligations of not to exceed \$200,000 in grant funds to the Government of Liberia (the Cooperating Country) in a one year period from date of authorization, subject to the availability of funds in accordance with the AID OYB allotment, to help finance the foreign exchange costs of the goods required for the Project.

The Project will strengthen the diagnostic and surgical capacity of the county hospitals in support of the primary health care system. It provides funding for microscopes, surgical equipment and X-ray machines for the rural county hospitals which receive referrals of the very sick or complex cases from the village health units and rural clinics.

The Project agreement which may be negotiated and executed by the officers to whom such authority is delegated in accordance with AID regulations and Delegations of Authority shall be subject to the following essential terms and conditions as AID may deem appropriate.

A. Source and Origin of Goods and Services

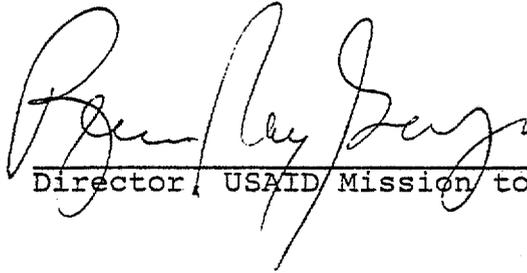
Goods and services, except for ocean shipping, financed by AID under the project, shall have their source and origin in the Cooperating Country or the United States of America except as AID may otherwise agree in writing. Ocean shipping, financed by AID under the project, shall except as AID may otherwise agree in writing, be financed only in flag vessels of the United States of America.

B. Conditions Precedent, Covenants and Waivers

No conditions precedent, covenants or waivers will be required for project implementation.

8/15/80

Date



Director, USAID Mission to Liberia

PROJECT DATA SHEET

TRANSACTION CODE

A = Add
 C = Change
 D = Delete

Amendment Number

DOCUMENT CODE

3

2. COUNTRY/ENTITY

USAID/Liberia

3. PROJECT NUMBER

669-0169

4. BUREAU/OFFICE

AFR

06

5. PROJECT TITLE (maximum 40 characters)

Medical Supplies and Equipment

6. PROJECT ASSISTANCE COMPLETION DATE (PACD)

MM DD YY
 03 01 82

7. ESTIMATED DATE OF OBLIGATION
 (Under 'B.' below, enter 1, 2, 3, or 4)

A. Initial FY 80

B. Quarter 4

C. Final FY --

8. COSTS (\$000 OR EQUIVALENT \$1 =)

| A. FUNDING SOURCE | FIRST FY | | | LIFE OF PROJECT | | |
|------------------------|----------|--------|----------|-----------------|--------|----------|
| | B. FX | C. L/C | D. Total | E. FX | F. L/C | G. Total |
| AID Appropriated Total | 200 | | 200 | 200 | | 200 |
| (Grant) | (200) | (0) | (200) | (200) | (0) | (200) |
| (Loan) | () | () | () | () | () | () |
| Other U.S. | | | | | | |
| 1. | | | | | | |
| 2. | | | | | | |
| Host Country | | 230 | | | 230 | 430 |
| Other Donor(s) | | | | | | |
| TOTALS | 200 | 230 | 430 | 200 | 230 | 430 |

9. SCHEDULE OF AID FUNDING (\$000)

| A. APPROPRIATION | B. PRIMARY PURPOSE CODE | C. PRIMARY TECH. CODE | | D. OBLIGATIONS TO DATE | | E. AMOUNT APPROVED THIS ACTION | | F. LIFE OF PROJECT | |
|------------------|-------------------------|-----------------------|---------|------------------------|---------|--------------------------------|---------|--------------------|---------|
| | | 1. Grant | 2. Loan | 1. Grant | 2. Loan | 1. Grant | 2. Loan | 1. Grant | 2. Loan |
| (1) ESF | 523 | 570 | | 0 | | 200 | | 200 | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| TOTALS | | | | 0 | | 200 | | 200 | |

10. SECONDARY TECHNICAL CODES (maximum 6 codes of 3 positions each)

11. SECONDARY PURPOSE CODE

12. SPECIAL CONCERNS CODES (maximum 7 codes of 4 positions each)

A. Code BR
 B. Amount 200

13. PROJECT PURPOSE (maximum 480 characters)

To strengthen the diagnostic and surgical capacity of the County Hospital's in Liberia to support the primary health care system.

14. SCHEDULED EVALUATIONS

Interim MM YY MM YY Final MM YY
 02 81 02 82

15. SOURCE/ORIGIN OF GOODS AND SERVICES

000 941 Local Other (Specify)

16. AMENDMENTS/NATURE OF CHANGE PROPOSED (This is page 1 of a page PP Amendment.)

17. APPROVED BY

Signature

[Handwritten Signature]

Title

Director USAID/Liberia

Date Signed

MM DD YY
 08 15 82

18. DATE DOCUMENT RECEIVED IN AID/W, OR FOR AID/W DOCUMENTS, DATE OF DISTRIBUTION

MM DD YY

I. BACKGROUND AND PROBLEM

Health facilities in Liberia are limited. There are only 33 hospitals, 24 health centers and 267 clinics and health posts throughout the entire country of 1.8 million people. Approximately 150 physicians, 520 nurses and 150 practical nurses are working in Liberia. Government health programs, which provide most health care in Liberia reach only a fraction of the population. There has been very little incremental expansion of the programs to assist rural inhabitants. Health statistics bear out this lack of health care. In Liberia the birth rate is estimated at 5.0 percent with infant mortality at 13.7 percent and life expectancy a mere 48 years, lower if the rural residents life expectancy is used.

"Primary health care" is an approach Liberia is trying to implement as it searches for ways and means to provide access to modern health services in the rural areas. After a series of pilot projects, most importantly in Bong, Lofa and Maryland counties, the Government has developed a model for its primary health care system. This model is a modified form of the commonly used health care pyramid with village health workers at the base, paraprofessionals receiving referrals from that level and referring those that they can not treat to the modern county hospitals which provide tertiary level care. Although there are only 9 counties, there are 13 public hospitals that function at the tertiary level. There are some 26 other hospitals, 12 of which are private and the remaining number are small public hospitals that function as health centers. John F. Kennedy Memorial Hospital is the most modern and advanced facility in Liberia and is at the top of the health care referral system.

At present only 35% of the population is covered by the modern health care system. The Ministry's plans call for complete coverage by the year 2000. In the CDSS, USAID agrees with both the goal of this program, directed primarily towards the rural poor, and the means chosen to reach the targets. USAID has proposed a major project to give priority to the upgrading of the management, administrative, and technical services of the Ministry of Health and Social Welfare allowing them

to support the expansion of the health care program. However, the Ministry realizes that many of those who are treated now in government facilities do not receive adequate or proper care. The most serious problem, which is addressed in the proposed AID Primary Health Care Project is the lack of human resources trained to implement a primary health care delivery system. But there are also serious shortages of equipment and supplies used to support the already trained professional and paraprofessionals. It is crucial to provide these individuals with equipment so they can go about the job for which they are trained.

There is no doubt that the vast majority of illness in Liberia can be treated at the local level with limited equipment and supplies, but the County Hospitals are important referral points in the system where many life and death outcomes are determined. This is so in the cases of critically ill patients, advanced stages of disease, complicated deliveries, etc. Thus the County Hospital must be fully equipped to bring it to a level where it will serve as an effective tertiary care center.

At present all of the county hospitals have a greater demand for routine hematology blood studies, parasitology stool sample examinations and general bacteriological studies than can be handled with the present equipment. Functioning microscopes are in short supply in every hospital and several hospitals have no microscopes at all. Therefore, nearby private hospitals or clinics are depended upon to do the critical diagnostic workups. Additionally in the eleven hospitals that do basic surgery, some of the most commonly used surgical instruments such as forceps, retractors and other equipment are missing. Furthermore, no hospital has a complete back-up set of routine surgical instruments.

Finally, the Ministry plan calls for each county hospital to provide X-ray services. At present only JFK Hospital, and three of the county units have fully functioning X-ray facilities. This capability is crucial at the tertiary level of health care where complex cases are the routine.

For the County Hospital tertiary level care to be adequate, the Ministry needs to provide or up-grade medical equipment and supplies at each hospital. It is tragic to have trained personnel idle because essential basic equipment and instruments are lacking.

II. PROJECT DESCRIPTION

A. GOAL: To improve the health of the rural poor by assisting Liberia develop and strengthen its primary health care delivery system.

B. PURPOSE: To strengthen the diagnostic and surgical capacity of the county hospitals in Liberia to support the primary health care system.

C. PROJECT ACTIVITY: The proposed project will provide commodity support to the county hospitals as the tertiary level of the primary health care system. Although this project can not provide all necessary equipment and supplies to the hospitals, it can supply the equipment and machines that are most desperately needed.

Microscopes for routine hospital and clinic tests were judged the highest priority items. Trained professionals are stationed at the hospitals to do bacteriological and other laboratory procedures requiring microscopes. At present diagnosis at the hospitals (Note that these patients are the very sick or complex cases referred from the clinics.) depends on physical diagnosis and analysis of the patient symptomatology which is at best subjective. The use of microscopes for common bacteriological and other analyses will provide the hospital with more definitive information enabling health care providers better diagnostic capability to more accurately dispense and provide care for patients.

Additionally one microscope will be purchased for the Public Health Laboratory in Monrovia. Thus a total of 14 microscopes will be procured.

The Ministry of Health and Social Welfare has also identified the need in 11 of the 13 county hospitals for additional surgical equipment. It has requested that AID provide 22 basic major surgical equipment sets, two for each of the hospitals. Further suture and laceration sets for several of the larger clinics were requested. Thus this project proposes to provide 22 basic major surgical equipment sets, 48 suture and laceration sets.

Finally, the project will provide basic radiographic X-ray systems and the necessary support items for the Grand Cape Mount and Grand Gedeh county hospitals in Robertsport and Zwedru respectively.

D. Financial Plan and Budget: All of the AID funds will be provided for foreign exchange costs for microscopes, surgical instruments, and X-ray machines and accessories. The estimated budget is as follows:

I. AID CONTRIBUTION

| <u>ITEM*</u> | <u>COST</u> |
|---|---------------|
| 1. Basic Surgical Sets (22 @ \$3000/each) | 66,000 |
| 2. Laceration & Suture Sets (48 @ \$200/each) | 9,600 |
| 3. Microscopes (14 @ \$1600/each) | 22,400 |
| 4. Radiographic X-Ray System 300 MA-125 K.V. (2 @ \$40,000) | 80,000 |
| 5. Darkroom and Radiographic Accessories Package (2 @ \$11,000) | <u>22,000</u> |
| TOTAL | 200,000 |

II. GOL CONTRIBUTION

| <u>ITEM</u> | <u>COST</u> |
|--|-------------|
| Equipment and Supplies for County Hospitals | 230,000 |

Total Project Costs \$430,000

* All Budget estimates include shipping. More detailed descriptions of the AID purchased items appear in Annex D

III. PROJECT ANALYSES

A. Technical Analysis: All equipment being financed by this project has been judged safe, effective and even necessary for hospital programs. The microscopes are designed to function without electricity but do have the capacity for an add-on electric light for optimum illumination. The surgical instruments were selected for basic major surgery. No esoteric equipment will be purchased.

The hospitals are staffed by trained professionals and paraprofessionals who are being underutilized because of the lack of and/or malfunctioning equipment. Thus, there is no question of the capability of the health personnel to use the equipment. Although the equipment is fairly sophisticated it supports primary health care by strengthening the tertiary level of the system. Thus the purchase of the equipment is technically appropriate and supportive of the Liberian rural health care delivery system.

B. Social Soundness Analysis: The equipment financed by the grant will benefit those rural residents referred from health clinics and post in need of more sophisticated health treatment. There are no significant negative social consequence from the hospital health care provided. In fact there are substantial benefits to the rural society through improved health, less suffering, and greater productive capacity.

Although the primary health care delivery system is not being accepted by all families in the target areas, most are accepting modern medical practices. Rural people still depend on traditional medicine but there is a growing acceptance of modern medicine where the traditional healers have not provided help or cure. Thus, there are growing numbers of rural residents who are coming to the county hospitals for medical assistance. Modern preventative and curative health care is expanding

C. Economic Analysis: Since the project does not generate revenue, a simple economic cost-benefit analysis can not be calculated. The economic impact of the new equipment is difficult to access because the benefits appear as improved health for the hospital patients. The equipment contribution to the improved health is impossible to measure. Thus, rather than try to calculate a specific economic value of the project, this analysis assumes a positive impact and then tries to determine if they project is the least cost, most effective approach to strengthening country hospitals.

12

First the provisions of the equipment listed above enables trained personnel to use the health care skills they have acquired. Without the equipment provided by the project, the health care at the hospitals will be of a lower quality. Underutilized trained professionals mean not only lower levels of health care, but also wasted economic resources.

Secondly, the provision of sophisticated equipment to a country like Liberia where modern health care covers only a third of the population would be wasteful if it were not integrated into a system that assures access to as large a number of people as possible. The pyramidal structure of the primary health care system in Liberia refers patients from the village health units and secondary level clinics to the tertiary county hospitals. In this manner, the facilities at the hospital support a large number of rural poor. Assistance through the provision of sophisticated equipment to the hospital is cost effective because the hospitals' use is structured for referral of patients who are most in need of its services.

D. Environmental Aspects: No significant environmental impacts will result from the project activity. All equipment and instruments will be used by professionals trained in its use. AID/W has prepared and approved the PID which includes a negative determination in the Initial Environmental Examination.

IV. IMPLEMENTATION: PROCUREMENT AND EVALUATION

Implementation of the project will consist of only two major activities, the procurement of equipment and the evaluation of its use.

Review of the Ministry of Health and Social Welfare's capacity to manage the procurement of goods has uncovered serious bottlenecks that can substantially delay the arrival of goods. USAID is in the discussion stage with the MOHSW of providing assistance for the function. However, in order to assure timely delivery of the commodities purchased under the grant, AID direct procurement is recommended for all commodities.

One month after assignment of all goods to the Ministry, the USAID health office with appropriate Ministry personnel will make a field inspection to verify distribution. One year later a similar field visit will be made to determine the extend of use of the equipment. A report will be produced that will constitute the final evaluation of the project. Funding for the evaluation will be supplied through USAID and MOH operation budgets.

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Annex A

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AIDAC

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E.O. 12065: N/A

TAGS:

SUBJECT: REQUEST FOR ESF DOLS 200,000 FOR MEDICAL EQUIP-
MENT AND SUPPLIES

REF: MONROVIA 5321

1. BUDGET ALLOCATION FOR AN ESF GRANT IN THE AMOUNT OF DOLS 200,000 TO FINANCE PROCUREMENT OF MEDICAL SUPPLIES/EQUIPMENT PER REQUEST REFTEL HAS BEEN APPROVED.

2. AUTHORIZATION WILL REQUIRE PREPARATION AND APPROVAL OF SMALL PROJECT PAPER OR ALTERNATIVE APPROPRIATE AUTHORIZATION DOCUMENT. USAID HAS AUTHORITY TO APPROVE SUCH ACTIVITIES AND SHOULD PROCEED WITH DOCUMENTATION ASAP. AID/W STANDS READY OFFER ANY ASSISTANCE USAID MAY REQUIRE SINCE THIS NOT ROUTINE QUOTE PROJECT UNQUOTE.

3. PER GARUFI/ANDERSON TELECON, JULY 9, ANDERSON SEARCH FOR ALTERNATIVE APPROACH TO QUOTE PROJECTIZING UNQUOTE SUBJECT GRANT UNSUCCESSFUL. CONSENSUS AID/W IS THAT FULL

DOCUMENTATION REQUIRED FOR GRANT APPROVAL THOUGH DOCUMENTATION NEED NOT BE AS DETAILED/LENGTHY AS IN CASE OF ROUTINE PROJECT. FYI: REGULAR REQUIREMENT FOR GOL 25 PERCENT CONTRIBUTION APPLICABLE FOR THIS GRANT. SUCH ITEMS AS PERSONNEL, TRANSPORTATION AND OTHER COSTS INCURRED BY GOL TO RECEIVE AND DISTRIBUTE MEDICAL SUPPLIES SHOULD SATISFY GOVERNMENT CONTRIBUTION REQUIREMENT.

4. AS CN REQUIRED BEFORE FUNDS MAY BE OBLIGATED, USAID SHOULD CABLE AFR/CWA SOONEST NAME GIVEN TO THIS GRANT ACTIVITY AND PROJECT NUMBER ASSIGNED. WILL ADVISE CN EXPIRATION DATE AND MAKE ALLOTMENT AS SOON AS AA/AFR APPROVES DOCUMENTS PREPARED AFR/W TO SERVE AS PTD. SEND FIVE COPIES OF PROJECT AUTHORIZATION DOCUMENTATION PACKAGE TO AID/W, ATTN: AFR/CWA/L DESK. MUSKIE

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#5195

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US AID, LIBERIA
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- PROJECT CHECKLIST

CROSS REFERENCES: IS COUNTRY CHECKLIST UP TO DATE?
HAS STANDARD ITEM CHECKLIST BEEN REVIEWED FOR THIS PRODUCT?

A. GENERAL CRITERIA FOR PROJECT

1. FY 79 App. Act Unnumbered; FAA Sec. 653 (b); Sec. 634A. (a) Describe how Committees on Appropriations of Senate and House have been or will be notified concerning the project; (b) is assistance within (Operational Year Budget) country or international organization allocation reported to Congress (or not more than \$1 million over that figure)?
- (a) A CN will be sent to Congress before authorization
(b) Yes
2. FAA Sec. 611(a)(1). Prior to obligation in excess of \$100,000, will there be (a) engineering, financial, and other plans necessary to carry out the assistance and (b) a reasonably firm estimate of the cost to the U.S. of the assistance?
- (a) Yes
(b) Yes
3. FAA Sec. 611(a)(2). If further legislative action is required within recipient country, what is basis for reasonable expectation that such action will be completed in time to permit orderly accomplishment of purpose of the assistance?
- NA
4. FAA Sec. 611(b); FY 79 App. Act Sec. 101. If for water or water-related land resource construction, has project met the standards and criteria as per the Principles and Standards for Planning Water and Related Land Resources dated October 25, 1973?
- NA
5. FAA Sec. 611(e). If project is capital assistance (e.g., construction), and all U.S. assistance for it will exceed \$1 million, has Mission Director certified and Regional Assistant Administrator taken into consideration the country's capability effectively to maintain and utilize the project?
- NA
6. FAA Sec. 209. Is project susceptible of execution as part of regional or multilateral project? If so why is project not so executed? Information and conclusion whether assistance will encourage regional development programs.
- There is no regional project that supports this type of intervention.

A.

7. FAA Sec. 601(a). Information and conclusions whether project will encourage efforts of the country to: (a) increase the flow of international trade; (b) foster private initiative and competition; (c) encourage development and use of cooperatives, credit unions, and savings and loan associations; (d) discourage monopolistic practices; (e) improve technical efficiency of industry, agriculture and commerce; and (f) strengthen free labor unions.

The project will have no impact on any of the areas listed.

8. FAA Sec. 601(b). Information and conclusion on how project will encourage U.S. private trade and investment abroad and encourage private U.S. participation in foreign assistance programs (including use of private trade channels and the services of U.S. private enterprise).

The commodities purchased through the grant will be of US source and origin.

9. FAA Sec. 612(b); Sec. 636(h). Describe steps taken to assure that, to the maximum extent possible, the country is contributing local currencies to meet the cost of contractual and other services, and foreign currencies owned by the U.S. are utilized to meet the cost of contractual and other services.

The GOL is providing 53.5 percent of the project costs and nearly 100 percent of local costs.

10. FAA Sec. 612(d). Does the U.S. own excess foreign currency of the country and, if so, what arrangements have been made for its release?

The US owns no foreign currencies in Liberia.

11. FAA Sec. 601(e). Will the project utilize competitive selection procedures for the awarding of contracts, except where applicable procurement rules allow otherwise?

Yes

12. FY 79 App. Act Sec. 608. If assistance is for the production of any commodity for export, is the commodity likely to be in surplus on world markets at the time the resulting productive capacity becomes operative, and is such assistance likely to cause substantial injury to U.S. producers of the same, similar, or competing commodity?

NA

B. FUNDING CRITERIA FOR PROJECT

1. Development Assistance Project Criteria

a. FAA Sec. 102(b); 111; 113; 281a. Extent to which activity will (a) effectively involve the poor in development, by extending access to economy at local level, increasing labor-intensive production and the use of appropriate technology, spreading investment out from cities to small towns and rural areas, and insuring wide participation of the poor in the benefits of development on a sustained

(a) By improving the health of the rural and urban poor, they have more time for productive activities.

B.1.a.

basis, using the appropriate U.S. institutions; (b) help develop cooperatives, especially by technical assistance, to assist rural and urban poor to help themselves toward better life, and otherwise encourage democratic private and local governmental institutions; (c) support the self-help efforts of developing countries; (d) promote the participation of women in the national economies of developing countries and the improvement of women's status; and (e) utilize and encourage regional cooperation by developing countries?

- (b) Improved health will mean a better life for the rural poor
- (c) No effect.
- (d) Women will have more free time because they and their families are healthier.
- (e) No effect

b. FAA Sec. 103, 103A, 104, 105, 106, 107.

Is assistance being made available: (include only applicable paragraph which corresponds to source of funds used. If more than one fund source is used for project, include relevant paragraph for each fund source.)

(1) [103] for agriculture, rural development or nutrition; if so, extent to which activity is specifically designed to increase productivity and income of rural poor; [103A] if for agricultural research, is full account taken of needs of small farmers;

(2) [104] for population planning under sec. 104(b) or health under sec. 104(c); if so, extent to which activity emphasizes low-cost, integrated delivery systems for health, nutrition and family planning for the poorest people, with particular attention to the needs of mothers and young children, using paramedical and auxiliary medical personnel, clinics and health posts, commercial distribution systems and other modes of community research.

(3) [105] for education, public administration, or human resources development; if so, extent to which activity strengthens nonformal education, makes formal education more relevant, especially for rural families and urban poor, or strengthens management capability of institutions enabling the poor to participate in development;

(4) [106] for technical assistance, energy, research, reconstruction, and selected development problems; if so, extent activity is:

(i) technical cooperation and development, especially with U.S. private and voluntary, or regional and international development, organizations;

(ii) to help alleviate energy problems;

(iii) research into, and evaluation of, economic development processes and techniques;

(iv) reconstruction after natural or manmade disaster;

B.1.b.(4).

(v) for special development problem, and to enable proper utilization of earlier U.S. infrastructure, etc., assistance;

(vi) for programs of urban development, especially small labor-intensive enterprises, marketing systems, and financial or other institutions to help urban poor participate in economic and social development.

c. [107] Is appropriate effort placed on use of appropriate technology?

Yes

d. FAA Sec. 110(a). Will the recipient country provide at least 25% of the costs of the program, project, or activity with respect to which the assistance is to be furnished (or has the latter cost-sharing requirement been waived for a "relatively least-developed" country)?

Yes, 53.5 percent

e. FAA Sec. 110(b). Will grant capital assistance be disbursed for project over more than 3 years? If so, has justification satisfactory to the Congress been made, and efforts for other financing, or is the recipient country "relatively least developed"?

NA

f. FAA Sec. 281(b). Describe extent to which program recognizes the particular needs, desires, and capacities of the people of the country; utilizes the country's intellectual resources to encourage institutional development; and supports civil education and training in skills required for effective participation in governmental and political processes essential to self-government.

The project will assist the health needs of the people.

g. FAA Sec. 122(b). Does the activity give reasonable promise of contributing to the development of economic resources, or to the increase or productive capacities and self-sustaining economic growth?

Yes, through healthier, more productive individuals.

2. Development Assistance Project Criteria
(Loans Only)

a. FAA Sec. 122(b). Information and conclusion on capacity of the country to repay the loan, including reasonableness of repayment prospects.

b. FAA Sec. 620(d). If assistance is for any productive enterprise which will compete in the U.S. with U.S. enterprise, is there an agreement by the recipient country to prevent export to the U.S. of more than 20% of the enterprise's annual production during the life of the loan?

B.

3. Project Criteria Solely for Economic Support Fund

a. FAA Sec. 531(a). Will this assistance support promote economic or political stability? To the extent possible, does it reflect the policy directions of section 102?

Yes

Yes

b. FAA Sec. 533. Will assistance under this chapter be used for military, or paramilitary activities?

1/2

UNCLASSIFIED

STATE 213010

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DUE DATE: 8/14/80

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AIDAC, ABIDJAN FOR REDSO/WA

ACTION: HLTH
 INFO: D/DD
 CON
 DP
 CHRON

E.O. 12065: N/A

TAGS:

SUBJECT: MEDICAL SUPPLIES AND EQUIPMENT PROJECT NO.
 669-0169

REF: MONROVIA 06686, MONROVIA 06935

1. SER/COM UNABLE TO FURNISH PRICING AND OR SHIPPING CHARGES FOR 13 MICROSCOPES AS DESCRIBED IN PARA 1A REFTEL. WE NEED TO KNOW IF MISSION DESIRES MONOCULAR OR BINOCULAR MODEL, LABORATORY/TEACHING MODEL ACCESSORIES DESIRED WITH MICROSCOPE SELECTED. IF CATALOGS ON VARIOUS MODELS NEEDED FOR REVIEW AND SELECTION TO MEET YOUR REQUIREMENT, ADVISE.

2. BASIC SURGICAL SET CONSISTING OF 174 INSTRUMENTS CAN BE PROCURED UNDER VA CONTRACT AT DOLLARS 2,704.00 EACH.

3. LACERATION AND SUTURE SETS CONSISTING OF 15 ITEMS CAN BE PROCURED AT DOLLARS 185.00 EACH.

4. SHIPPING CHARGES FOR 22 SURGICAL SETS AND 50 LACERATION AND SUTURES SETS ARE ESTIMATED AS FOLLOWS:

OCEAN FREIGHT - DOLLARS 800.00

AIR FREIGHT - DOLLARS 1,300.00

5. RADIOGRAPHIC X-RAY SYSTEM INCLUDING: 300 MA - 125 K.V. GENERATOR WITH FOUR WAY FLOATING TOP BUCKY TABLE, INTEGRATED TUBESTAND, ONE ROTATING ANODE X-RAY TUBE, HIGH TENSION CABLES AND ALL NECESSARY INTERCONNECTING CABLES. TOTAL PRICE INCLUDING EXPORT PACKING IS DOLLARS 32,000.00, OCEAN TRANSPORTATION - DOLLARS 1,500.00, AIR TRANSPORTATION DOLLARS 3,750.00, INSTALLATION APPROXIMATELY - DOLLARS 6,750.00.

6. RADIOGRAPHIC AND FLUOROSCOPIC SYSTEM INCLUDING: 300 MA - 125 K.V. GENERATOR WITH MOTOR DRIVEN TILTING DIAGNOSTIC TABLE, FLOOR GRILING TUBESTAND, TWO ROTATING ANODE X-RAY TUBES, HIGH TENSION CABLES, AND ALL NECESSARY INTERCONNECTING CABLES. TOTAL

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PRICE INCLUDING EXPORT PACKING IS DOLLARS 68,307.00,
SEA TRANSPORTATION - DOLLARS 2,000.00, AIR TRANS-
PORTATION - DOLLARS 5,300.00, INSTALLATION
APPROXIMATELY - DOLLARS 10,200.00.

DUE DATE: 3/14/70

7. DARKROOM AND RADIOGRAPHIC ACCESSORIES: TOTAL
PRICE APPROXIMATELY INCLUDING EXPORT PACKING DOLLARS
9,000.00, SEA TRANSPORTATION - DOLLARS 300.00,
AIR TRANSPORTATION - DOLLARS 900.00, INSTALLATION
APPROXIMATELY - DOLLARS 900.00.

8. DARKROOM SPECIFICATIONS:

ACTION: HLTH
INFO: D/DD
CON
DP
CHRON

1-1-60400 INSULATED STAINLESS STEEL REFRIGERATED
1-62275 TANK 56CM X 107CM X 48CM WITH TWO FIVE
1-60690 GALLONS INSERTS. AUTOMATICALLY DELIVER
1-60279 22 GALLONS OF 68 DEGREES WATERS PER HOUR
WITH INCOMING WATER TEMPERATURE UP TO 35
DEGREES, DRAIN PLUMBING, FACTORY INSTAL-
LED. FLUSH COVER, TOWEL BAR

2-1-24202 TANK AGITATOR

3-1-24205 TANK BRUSH

4-2-60117 FILM DRYING RACK TYPE 316 STAINLESS
STEEL FOR 12 STANDARD HANGERS

5-4-60729 FILM STORAGE HANGERS TYPE 316 STAINLESS
STEEL CAPACITY 18 HANGERS

6-1-60503 STAINLESS STEEL DIAL THERMOMETER WITH
SUSPENSION CLIP

7-1-60555 INTERVAL TIMER 15 MINUTE RANGE

8-1-120 12 FILM ELECTRIC DRYER THERMOSTATICALLY
CONTROLLED WITH 750 WATTS HEATING ELEMENT

9-8-16302 8 X 10 DEVELOPING HANGERS (STAINLESS
STEEL)

10-8-16303 10 X 12 DEVELOPING HANGERS (STAINLESS
STEEL)

11-4-16304 11 X 14 DEVELOPING HANGERS (STAINLESS
STEEL)

12-12-16305 14 X 17 DEVELOPING HANGERS (STAINLESS
STEEL)

13-1-61112 CASSETTE TRANSFER CABINET 1.5MM LEAD
LINED FOR 11 CASSETTES, WITH INTERLOCK

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DUE DATE: 8/14/80

DEVICE TO PREVENT OPENING OF DOORS FROM
OPPOSITE ENDS, VOICE TRANSMISSION PASSAGE
LEAD LINED FLANGE.

14-1-125 FILM LOADING BIN FLOOR MODEL 3 COMPART-
MENTS

15-1-160 3 COMPARTMENT CASSETTE STORAGE CABINET

16-1-12400 BASE AND LINOLEUM REP. FOR CAT. NO. 125-
160 AND 120 UNITS

17-4-11118 8 INCH X 10 INCH STAINLESS STEEL CASSETTE

18-4-11119 10" X 12" STAINLESS STEEL CASSETTE

19-2-11120 11" X 14" STAINLESS STEEL CASSETTE

20-6-11121 14" X 17" STAINLESS STEEL CASSETTE

21-4-10502 8 X 10 INTENSIFYING SCREENS (HIGH SPEED)

22-4-10503 10 X 12 INTENSIFYING SCREENS (HIGH SPEED)

23-2-10504 11 X 14 INTENSIFYING SCREENS (HIGH SPEED)

24-6-10505 14 X 17 INTENSIFYING SCREENS (HIGH SPEED)

25-1-50114 RELIABLE MARKER

26-1-19106 COMBINATION DARKROOM SAFELIGHT AND NORMAL
ROOMLIGHT. SAFELIGHT DIMENSION 8" X 10"

27-1-50728 STOOL WITH HIGH HANDLE

28-1-18103 CALIPER

29-1-14110 SET OF POSITIONING BLOCKS

30-1-1304 WALL CASSETTE HOLDER

31-1-23102 PROTECTIVE FLOOR SCREEN 36" X 72" WITH
5" X 12" LEAD GLASS WINDOW

32-1-21135 FOUR BANK ILLUMINATOR WITH MAGIC GRIP.
60 CYCLES

33-1-21313 INTENSI SPOT ILLUMINATOR WITH THERMOSTAT
FOR VARIABLE INTENSITY

ACTION: HLTH
INFO: D/DD
CON
DP
CHRON

9. BROCHURES ON THE RADIOGRAPHIC X-RAY SYSTEMS AND
SURGICAL AND LACERATION SETS WILL BE POUCHED TO
MISSION. CHRISTOPHER

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23