



ZAMBIA

FY 2002 Annual Report

March 4, 2002

Please Note:

The attached results information is from FY2002 Annual Report USAID/Zambia and was assembled and analyzed by USAID/Zambia.

The Annual Report is a "pre-decisional" USAID document and does not reflect results of USAID budgetary reviews. Additional information on the attached can be obtained from Carrie Johnson AFR/DP/PAB.

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GLOSSARY OF ACRONYMS

ACF	-	Agricultural Consultative Forum
ADR	-	Alternative Dispute Resolution
AGOA	-	African Growth and Opportunity Act
AID/W	-	Agency for International Development – Washington
BESSIP	-	Basic Education Sub-sector Investment Program
CARE	-	Cooperative for Assistance and Relief Everywhere
CMS	-	Credit Management Services
COMESA	-	Common Market for Eastern and Southern Africa
CSH	-	Child Survival and Health
CSMC	-	Community Sensitization and Mobilization Campaign
CSP	-	Country Strategic Plan
CY	-	Calendar Year
DA	-	Development Assistance
DCHA	-	Democracy, Conflict and Humanitarian Assistance
DBA	-	District Business Associations
EGAT	-	Economic Growth, Agriculture and Trade
EMIS	-	Education Management Information System
FY	-	Fiscal Year
GDP	-	Gross Domestic Product
GRZ	-	Government of the Republic of Zambia
HIPC	-	Heavily Indebted Poor Country
HIV/AIDS	-	Human Immuno-deficiency Virus/Acquired Immuno Deficiency Syndrome
IRI	-	Interactive Radio Instruction
LAZ	-	Law Association of Zambia
LCP	-	Local Compensation Plan (Foreign Service Nationals/FSN)
MOE	-	Ministry of Education
MOH	-	Ministry of Health
NGO	-	Non Governmental Organization
NORAD	-	Norwegian Development Agency
OVC	-	Orphans and Vulnerable Children
P/MTCT	-	Parent/Mother-to-Child Transmission
PAC	-	Post-abortion Care
PAGE	-	Program for the Advancement of Girls Education
PMP	-	Performance Management Plan
RNFE	-	Rural Non-Farm Enterprise
RUDO	-	Regional Urban Development Office
SHN	-	School-Based Health and Nutrition
SO	-	Strategic Objective
UNFPA	-	United Nations Fund for Population Activities
UNICEF	-	United Nations International Children's Education Fund
USAID	-	United States Agency for International Development
VCT	-	Voluntary Counseling and Testing
WTO	-	World Trade Organization
ZWRASM	-	Zambia White Ribbon Alliance for Safe Motherhood

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FY2001 PERFORMANCE NARRATIVE

Challenges

Zambia is attempting to consolidate a political transition from decades of one-party autocracy to a dynamic multi-party democracy. Fundamental economic liberalization is accompanying this political transformation. Zambia's per capita gross domestic product in 2000 was only \$287 and external debt at the end of December 2001 was \$7.3 billion. Zambia was approved for debt relief under the enhanced Heavily Indebted Poor Country (HIPC) initiative in December 2000. This has provided some relief and will eventually reduce Zambia's crippling debt service significantly. Zambia's political and economic development is impeded by its narrow economic base, limited foreign and domestic investment, high population growth rate of 2.9%, a weak education system with over 700,000 children not attending primary school and governance issues and corruption, which obstructs effective functioning of the justice system, essential for democratic governance.

The greatest threat to Zambia's future development is the HIV/AIDS pandemic with approximately 20% of adults (1998) infected with the virus. As AIDS death rates increase, a secondary crisis has emerged with an estimated 1.25 million children (27.4% of children under age 15) orphaned at the end of 2000. Malaria continues as the number one killer of children under five and a leading cause of illness in all age groups. The maternal mortality rate of 649 per 100,000 live births (1996) is one of the highest in Africa.

In 2001, USAID's program in Zambia made significant gains. Despite the negative impact of adverse weather on agriculture, USAID helped improve rural incomes through support for a liberalized economic policy environment and innovative programs dealing with agricultural and non-farm enterprises, conservation-related farming technology, and community-based natural resource management in protected areas. Access to education for the rural poor, girls, orphans, and other vulnerable children was improved by supporting basic education and nutrition on a community level, while promoting creative approaches to education. In the health sector, USAID supported a range of programs in HIV/AIDS interventions, family planning and maternal health, vitamin A food fortification and supplementation, immunization, and integrated management of childhood illnesses. USAID programs also promoted democracy, including support for public debates on major issues of civic concern.

In recognition of the fact that HIV/AIDS is not just a health problem but an overall development challenge, USAID coordinates HIV/AIDS as a cross-cutting issue to enhance the capacity of all development sectors in Zambia to deal with the wide-ranging impacts of the disease.

Program Performance

Strategic Objective and Number: Increased rural incomes of selected groups – 611001

Rural incomes of selected groups continue to increase and the overall policy environment for trade and investment in rural and semi-urban areas is improving. This SO stimulates private sector-led growth in selected areas of Zambia's rural economy, and the potential for sustainable cultivation of food and high value exports is high. The beneficiaries are farmers and rural non-farm enterprises (RNFE), who depend upon the natural resource base for their employment and incomes.

During FY2001, USAID investments resulted in increased private sector demand for new technologies, market links between producers and buyers, liberalized trade policies and an improved environment for investment in rural Zambia. Overall, this SO met its expectations as the successes of farmers and RNFEs have resulted in market efficiency, access to micro finance, increased productivity and diversification. These results contribute to all the Economic Growth, Agriculture and Trade (EGAT) objectives of 1) critical, private markets expanded and strengthened; 2) more rapid and enhanced agricultural development and food security encouraged; and 3) access to economic opportunity for the rural and urban poor expanded and more equitable.

Achievements:

Increased Incomes: Small scale farmers and RNFEs incomes increased by 11.5% (target 20%) to \$8,608,738 in 2001. The drought in parts of the country and an above average rainfall and flooding in other areas caused major food deficits and declines in agricultural production and had a negative impact on related income generation.

Increased Sustainable and Natural Resources Production: A range of improved technologies and management skills were provided through USAID's program. These include diversified cropping, organic farming, fallow technology, conservation farming and natural resource management. The number of farmers benefitting increased to 59,071 (exceeding the target of 40,000), of which 45% were women. Steady progress is being made by USAID partners in assisting farmers to diversify into new cash crops with higher gross margins and yields and to food security crops requiring less inputs and labor. The latter is particularly beneficial to farmers affected by HIV/AIDS. Crops such as sunflower, maize, cowpeas, groundnuts, sorghum, paprika, soya beans and cassava promoted under this strategic objective (SO) have increased yields and show great potential for sustainable incomes to small farmers. In addition, by end September 2001, there were 39 large-scale organic farmers and 3,100 smallholder farmers with certification and covering more than 19,688 hectares of organic production.

Increased Contribution of Rural Non-Farm Enterprises (RNFE) to Private Sector Growth: Remarkable progress was made in membership growth of the USAID supported Zambia Chamber of Small and Medium Business Associations, the largest small business chamber in the country. Company membership increased from 4,250 in FY2000, to 7,700 in 2001, with 37% women members. The Chamber operates through District Business Associations (DBA) in all nine provinces of Zambia, providing fee-based business development services to its membership. Linkages between private and public sector entities in the Livingstone area, which include the establishment of buyer and supplier meetings, and contracts with large South African companies, lodges and the Zambia Air Force have provided outlets for farmers and businesses supplying vegetables and other produce.

The Kazungula milk station project is an example of how USAID assists in leveraging partnerships to effectively increase the developmental impact on the lives of many individuals. An alliance between Zambia Agribusiness Technical Assistance Center and CARE Livingstone Food Security Project, two of the SO's activities, resulted in the establishment of a milk collection center. Three hundred and sixty small-scale farmers in the Kazungula district of Southern Province were linked to Finta Dairies, a large agribusiness milk processor, to supply 2,400 liters of milk per day. Finta Dairies provided the market and conducted training in hygiene for the farmers. Japanese aid provided the cooling equipment. This development greatly expands small farmers' potential for raising incomes. In addition, the International Executive Services Corp supported this endeavor by providing bookkeeping training to the farmers to improve efficiency in management of funds. In another instance, USAID through non-governmental organization partners helped develop a successful public-private partnership with the Livingstone City Council that established the Livingstone Council Advisory Board, to integrate resources of the many agencies and companies involved in the planning and development of Livingstone.

Technical assistance to strengthen the rural based entrepreneurial capacity and the involvement of financial institutions made significant contributions to improved rural incomes. Sixty-four DBA members accessed approximately \$86,000 in credit in FY2001, a noteworthy achievement, considering the risk aversion of Zambia's commercial banks towards lending to small entrepreneurs. In addition, 835 farmers of USAID's natural resource management program were assisted with agricultural loans totaling \$44,000. USAID supported Credit Management Services (CMS), Zambia's largest microfinance organization provided loans totaling \$406,292 to 1,915 women and 952 men during the period under review. CMS's rural clients were affected by adverse weather conditions, making it difficult to repay all their loans. Subsequently, CMS has developed and is implementing a new strategy to improve repayment rates. The successful implementation of this strategy has led to farmers managing natural resources attaining a repayment rate of 95%. Rural non-farm access to finance through inputs and credit totaled \$2,046,516 achieving 68% of target. This was due to the shortfall in leveraged commercial credit as a result of the

prevalent low loan repayment culture in Zambia. However, producer gains have increased through provision of credit, agro inputs such as seed and fertilizer for production of higher value crops, and bulk purchase and sale of inputs and outputs to lower marketing costs and improve market efficiency.

Improved Trade and Investment: In addition to progress at the farmer and business level, there was significant progress at the policy level, which improved Zambia's economic environment. During 2001, the value of non-traditional agricultural and natural resource exports rose to \$300 million exceeding the target of \$287 million. Significant exports in horticultural and processed foods, tourist arrivals to view the total eclipse of the sun in June 2001 and attendees of the African Union Meeting held in Lusaka contributed to this increase. USAID, helped improve government's and private sector's capacity to achieve World Trade Organization (WTO) legal and regulatory compliance and assisted in the analyses and formulation of negotiation positions for the WTO Ministerial meeting held in Doha in November 2001. Particular emphasis was placed on added value of horticultural and floricultural products, Zambia's fastest growing non-traditional export. USAID provided technical assistance to the Ministries of Commerce, Trade and Industry, Finance, Legal Affairs and private sector export associations for analysis leading to Zambia's entry to the Common Market for Eastern and Southern Africa (COMESA) Free Trade Area, which commenced in October 2000. This has resulted in a 28% increase over year 2000 exports to COMESA countries. This technical assistance was also instrumental in drafting the African Growth and Opportunity Act (AGOA) regulations and textile visa requirement for Zambia, which the U.S. Government subsequently approved in December 2001. With AGOA in place, large markets will be opened to the Zambian cotton, yarn and textile industries as well as fresh produce, to become more competitive to access the U.S. market.

As a result of USAID's interactions with the Ministry of Finance and Economic Development, trade was included as a cross-cutting theme in all economic growth sectors of the Poverty Reduction Strategy Paper, to mainstream the objectives of the Integrated Framework for Trade. To enhance policy decision and formulation, the agricultural analytical and statistical capacity of the staff of the Ministry of Agriculture and the Central Statistics Office was strengthened through provision of appropriate training. The USAID, Dutch and NORAD-supported Agricultural Consultative Forum (ACF) continues to be a source of essential information for policy makers in the agricultural sector. The ACF assisted the GRZ on modalities to collaborate with the private sector to import maize to meet the estimated 200,000 ton maize shortfall in 2002. Using data from USAID/W funded Famine Early Warning Systems Network, it ensured that the government met its objective of providing food to Zambians at affordable prices while addressing private sector concerns of overly lowering prices through wholesale government imports.

Global and Regional Collaboration: USAID/Zambia collaborates with USAID's Regional Center for Southern Africa and Regional Economic and Development Services Office trade programs to deal with the Southern African Development Community and the COMESA to promote closer regional ties. Close collaboration exists between USAID/Zambia and the Office of Energy, Environment and Technology, Bureau for EGAT who have provided technical assistance to the Zambia Privatization Agency on the concessioning of the state-owned Zambia Electricity Supply Corporation, the United States Energy Association, Energy Partnership Program between the Zambian Energy Regulation Board and two U.S. regulatory commissions, and a number of targeted training workshops.

Changes to the SO: The SO team will be reviewing and revising the Performance Management Plan (PMP) by the end of the calendar year to add indicators now mandated by AID/W and adjust others. Data quality assessments will also be performed for all PMP indicators.

Strategic Objective and Number: Improved quality of basic education for more school aged children - 611002

Improving the educational level is critical to achieving all USAID objectives in Zambia. A skilled and educated workforce helps catalyze economic development and higher levels of education lead to increased incomes and improved health practices. The benefits of the SO are aimed toward school-aged children, including orphans, girls, and other vulnerable children. Other beneficiaries include Ministry of

Education (MOE) personnel at headquarters, provincial and district levels, school teachers, and school communities. The Government of the Republic of Zambia's (GRZ) commitment to the education sector in 2001 was demonstrated by the lifting of government-imposed primary school fees, the expansion of its efforts to devolve decision-making and funds from headquarters to districts from one to four provinces. The new administration that emerged from the December 2001 elections underscored its commitment to improved and expanded education.

This SO met its overall expectations by delivering school based health, nutrition and quality basic education to school aged children, and strengthening the capacity of MOE's delivery systems and its quality of information available for education decision making processes. The SO directly supports the Agency's EGAT objective to expand access to quality basic education for under-served populations, especially for girls and women.

Achievements

Improved Quality of Learning Environments in targeted areas: During FY2001, USAID support for the interactive radio instruction (IRI) program expanded from 21 IRI centers with a total enrollment of 1,254 pupils in two provinces in 2000 to a total of 169 centers (target 171) in all 9 provinces with a total enrollment of 7,782 in 2001. The number of children enrolled in USAID-supported basic education schools and IRI centers dramatically increased from 12,565 pupils in 63 basic education sites in 2000 (40 government schools, 2 community schools, and 21 IRI centers) to 37,140 pupils enrolled in 256 basic education sites in 2001 (85 government schools, 2 community schools, and 169 IRI centers).

An assessment of Grade 1 learners from a sample of 405 pupils in 30 IRI centers (18% of 169 centers) indicated that pupils learned from the lessons. The literacy skills assessment, based on the MOE's Grade 1 curriculum, indicated a mean score performance of pupils of 56.5% as compared to a target of 47% and the conventional primary school standard set for "passing" of 50% or better. An analysis of the Grade 1 pupil profiles collected from the same centers indicated that over 32% were orphans, 48.7% were female, and only about 17% of the enrollees had received schooling prior to IRI. The MOE commenced broadcasting a 6-month package of 200 Grade 2 radio lessons in August 2001 and began developing Grade 3 lessons.

USAID continued to develop and strengthen the capacity of MOE Education Broadcasting Services by training 21 writing and production staff including 10 new staff members to develop IRI programming and providing studio equipment to reduce production delays. Each IRI center represents a partnership between the MOE and a community group, non-governmental organization, or individual. The MOE agrees to broadcast lessons, train IRI mentors, and provide mentors guides and some supervision while the communities provide radios, recruit IRI mentors, provide center venues, mobilize local out-of-school children to attend, and provide minimal teaching aids such as chalk and chalkboard.

Improved Delivery of School-based Health and Nutrition (SHN) Interventions to Support Pupil Learning: USAID made significant progress in assisting the MOE to introduce SHN interventions in 40 schools in Eastern Province and set up a pilot SHN delivery system in 20 of those 40 schools for the treatment of worms and provision of micronutrients. Preliminary analysis of SHN baseline data collected on pupils in the 20 pilot schools indicate that half of the surveyed schools have a greater than 50% positive rate for urinary schistosomiasis, while considerably more than half of the schools have a greater than 50% positive rate for other worm infestation. Left untreated, moderate to heavy worm infections in children can lead to malnutrition, anemia, stunting, poor school attendance and learning difficulties. Japan has partnered with USAID for the first time in education for this activity by funding the MOE's purchase of all the de-worming and micronutrient supplies required for the USAID supported delivery system.

Setting up the SHN delivery system in the 20 targeted schools was a complex and significant accomplishment, given the requisite collaboration of personnel in the Ministries of Health, Education, and Community Development. Over 200 SHN teachers, community health workers, and representatives from District Health Management Teams and the Ministry of Community Development were trained in SHN interventions, with teachers and in-service providers trained to calculate and administer proper dosages,

to keep proper SHN pupil records, and to administer the cognitive assessment instrument in the pilot schools to establish the baseline information. Communities in the 40 SHN school catchment areas were sensitized to SHN and HIV/AIDS issues through popular drama, public meetings, and discussions with village leaders.

Improved Information for Education Decision Making Processes: USAID's support for Zambia's National Census in 2000, combined with the short term technical assistance provided to the MOE for its education management information system (EMIS), led to the establishment of an EMIS platform and a significant improvement in the accuracy of education data available to education planners for making better-informed decisions. Unlike previous years when Basic Education Sub-Sector Investment Program (BESSIP) partners, including the World Bank, disputed MOE education statistics reports, BESSIP partners at this year's annual review accepted the report without requiring modifications. However, a key target toward the production of a timely annual school census report (e.g., CY2001 data reported in this year's CY2001 results reporting) was not reached, due to delays in establishing a long-term technical assistance mechanism to address this problem.

The current national census (2000) school-age population figures revealed that the primary school population (the 7-13 year age range) had been underestimated by about 250,000 and therefore the past gross and net enrollment rates from the MOE were artificially high. The most recent school enrollment number is 1,589,544 pupils for 2000. Boys' enrollment still exceeds that of girls but the gender gap has slowly decreased to 7.4%, as compared to an 8.8% gap in 1996. Net admission rate is at 37%, with girls enrollment being 36% at the national level, reaching near parity with that of boys which is 38%. The current, more accurate information will inform the MOE's five-year strategic planning process that began this year, with a first draft of a plan to be completed by June 2002.

Mitigation of HIV/AIDS Impact: Given the rate of HIV infection and its significant negative impact on education, USAID assisted the MOE to develop its first HIV/AIDS strategic plan, which led to its 2001 HIV/AIDS annual plan. The EMIS strategy incorporates the development of district and school-level HIV/AIDS data to help planners understand how the educational system is affected in order to address these effects. The teacher-training component of SHN teaches life skills so teachers can transfer important attitudes, knowledge and skills to their pupils regarding HIV/AIDS. The community mobilization effort integrates HIV/AIDS information to ensure that parents and community leaders consider what HIV/AIDS is, how it affects life in Zambia, and measures to prevent their children, especially girls, from the disease. In addition, the IRI program provides basic education to out-of-school AIDS orphans and other vulnerable children who have no access to government schools.

Changes to the SO: The SO team will be reviewing and revising the PMP by the end of the calendar year. Data quality assessments will also be performed for all PMP indicators. The timeframe of the SO2 report is CY2001, reflecting the January to December school year of the MOE's BESSIP. Enrollment figures for the government schools are taken from the official MOE BESSIP 2000 Programme Performance Indicators Report (November 2001), which is based on 2000 National Census and MOE's 2000 annual school census. The IRI enrollment numbers are based on 2001 IRI center enrollment and pupil profiles collected by the MOE's Education Broadcasting Services.

Strategic Objective and Number: Increased use of integrated child and reproductive health and HIV/AIDS interventions - 611003

USAID focuses its health sector program both on key national level interventions and specific activities in 30 districts that account for approximately 60% of the total Zambian population. USAID assistance continues to strengthen the institutional capacity of the Ministry of Health (MOH) and district and community level health workers to improve their capabilities to implement Zambia's health reforms. The ultimate beneficiaries are the Zambian citizens, who receive better health care through expanded access to quality public health services addressing HIV/AIDS, infectious diseases, child survival and family planning/reproductive health. Overall, the SO met expectations during FY 2001 and contributes to all of the Agency's Global Health objectives.

Achievements

HIV/AIDS: Zambia is one of four “rapid scale-up” countries worldwide and progress in all HIV/AIDS intervention areas has been strong. The 2000 Zambia Sexual Behavior Survey confirms positive trends in behavioral changes. Between 1998 and 2000, the proportion of persons reporting a non-marital sexual partner declined from 30% to 22% for men and from 12% to 11% for women. During the same period, condom use among sexually active persons with non-marital partners increased from 33% to 39% for men and from 24% to 33% for women (exceeding the targets of 35% for men and 28% for women). A 2000 evaluation of the nationwide, youth-targeted, mass media campaign revealed that HIV/AIDS prevention messages promoting abstinence and condom use reached 71% of urban and 37% of rural youth. Of those who recalled the messages, approximately 74% of male and 68% of female viewers said the media messages prompted them to change their behavior. The most frequent change was a decision to remain abstinent or to return to abstinence. Additional prevalence and behavior change data will be reported in 2002 as Zambia is currently carrying out both a Demographic and Health Survey (the first ever to include both HIV and syphilis testing) and national sentinel surveillance for HIV and syphilis.

Sales of socially marketed male condoms reached 10.1 million during CY2001 (exceeding the target of 9.5 million and a 17% increase over CY2000). The Zambia Voluntary Counseling and Testing (VCT) Partnership conducted baseline assessments in four Phase I districts to identify key obstacles to acceptance of VCT. Barriers such as concern over confidentiality and high levels of community social stigma against HIV/AIDS were significant findings that will guide the development of VCT services. USAID partners with other donors in this initiative and specifically supports VCT promotion and community mobilization. Four new brochures on VCT were produced and disseminated this year. Prevention of parent/mother-to-child transmission (P/MTCT) of HIV activities focused on the Ndola demonstration project. While 946 persons were counseled and tested in the six Ndola sites in CY2001, VCT uptake has not increased as hoped given additional inputs and experience. USAID and the implementing partner are re-examining the model before initiating this year’s planned scale up.

The Cross-Border Initiative, a collaborative model supported by the Mission, regional USAID HIV/AIDS funds and the Japan International Cooperation Agency, diagnosed and treated 5,687 commercial sex workers and 1,096 truck drivers for sexually transmitted infections. The program works in seven key Zambian border sites, making it one of the most comprehensive in the region. Target groups for the HIV/AIDS awareness component were expanded to include moneychangers, uniformed services, youth and cross-border traders.

Orphans and Vulnerable Children (OVC): Thirty USAID funded non-governmental organizations/community based organizations working in eight districts reached 54,063 OVCs in 7,683 households (approximately 15% of the OVCs in the target areas). USAID’s partners assisted communities with priority needs, including increasing household food security through income-generating activities, and maintaining OVC’s access to education through strengthening or establishing community schools. In one district, USAID funds helped leverage additional donor funds to benefit approximately 8,000 more OVCs. USAID, in collaboration with UNICEF and the Ministry of Youth, Sports and Child Development, helped to draft national OVC guidelines which will identify a minimum package of services to be provided by organizations supporting OVCs.

Malaria: As a malaria “plus-up” country, USAID developed a five-year malaria strategy to include rapid scale up of insecticide-treated net distribution, and more emphasis on appropriate care-seeking behavior and on intermittent presumptive treatment of pregnant women. Sales of these nets were 81,000 (exceeding the target of 60,000). New initiatives were started to reach additional children and pregnant women through a partnership with a large faith-based organization and to expand access for the general population through NetMark’s partnership with the private sector. USAID advocacy for reduction of taxes and tariffs helped to eliminate tariffs on nets. USAID continued to advocate for the elimination of value-added tax, which the GRZ announced it was lifting in its budget presentation on March 1, 2002. A \$1.5 million grant from the Centers for Disease Control and Prevention that includes additional funds for

research, training and surveillance was secured by the National Malaria Control Center with assistance from the USAID-funded National Malaria Advisor.

Child Health: For the fifth year in a row, USAID support to the national vitamin A supplementation program resulted in over 80% coverage, with 81% of all children aged 6-60 months receiving a supplement during the August distribution round. USAID-supported multi-nation research has documented that coverage of 80% can yield under-5 mortality reductions of 20% or more. The USAID target of 85% for 2001 was not met. However, given the current national resources for this activity it will be adjusted to 80%, a more realistic, sustainable target, during the next revision of the Performance Monitoring Plan. All domestic sugar in Zambia has been fortified with vitamin A for the fifth consecutive year. USAID's support to raise nationwide awareness of the benefits of vitamin A and to enforce government fortification regulations is key to this successful partnership with the private sector.

Sales of the socially marketed home water treatment product Clorin during CY2001 were 1,028,000 million bottles, 58% over the target of 650,000 and 81% over sales in CY2000. Clorin is being promoted to reduce exposure to diarrheal disease. Children under five and areas with seasonal cholera outbreaks are targets, but sales figures indicate increasingly widespread year-round use. A key indicator of successful child health activities, immunization coverage exceeded expectations. Preliminary CY2001 figures show 84.7% of children were fully vaccinated by 12 months of age over a target of 78%.

Reproductive Health/Maternal Health: Sales of socially marketed oral contraceptives exceeded expectations to reach 518,000 (target 500,000) during CY2001. During 2001, 161 health workers were trained in family planning and reproduction health, making a total of 76% of health workers in 12 target districts who have upgraded their knowledge and skills. Renovation of 57 health clinics was completed, providing additional facilities for family planning, including private examination and counseling space, youth corners and education areas. UNFPA joined USAID in helping the MOH to produce and distribute nationally a Family Planning Counseling Kit that features counseling tips for youth and men, and information on post-abortion care.

USAID helped revise the Zambian pre-service registered midwifery curriculum to reflect current practice in post-abortion care (PAC), management of labor, management of malaria in pregnancy, VCT for HIV/AIDS, and prevention of mother-to-child transmission. Similar revisions are underway for the basic nursing curriculum. A National Task Force for PAC was reconstituted and the three PAC training sites, established in 2001 in national referral and teaching hospitals, now deliver comprehensive services, including family planning to help prevent unwanted pregnancies. To create demand for improved maternal and newborn health services and to establish links between the community and service delivery providers, USAID helped establish the Zambia White Ribbon Alliance for Safe Motherhood (ZWRASM), which was launched in May 2001 with 22 institutional members. Local and national events to raise awareness of pregnancy risks and encourage planning for safer deliveries included community-theater, a national journalist competition, educational programs on television and radio, and development of community action groups. USAID support to ZWRASM has leveraged additional funding from UNFPA for advocacy and social mobilization activities.

Sector-wide Assistance: USAID continues to support the implementation of Zambia's health reforms through strengthening systems of the Ministry of Health (MOH), Central Board of Health, Provincial Health Offices and District Health Management Teams. A Policy Status Report was produced for the first time, providing a comprehensive overview of key policies and their stages of development. The Hospital Policy, a core reference for reform, was submitted to Cabinet. The authority and responsibility of provinces and districts in the annual planning process was strengthened, building on previous work to make plans more realistic and useful. Skills in reporting information and use of data for decision-making were improved at all levels through support for the Health Management Information System. Efforts to inform and educate the general public and health workers on key health issues through the mass media "Better Health Campaign" and training of over 6,025 Neighborhood Health Committees members will continue to increase demand and supply of quality health services. USAID's sector-wide assistance program released \$500,000 to the District Health Services Basket when the MOH successfully met the performance milestone of submitting a national health care financing policy to cabinet.

USAID participated in the development of the health sector chapter of Zambia's Poverty Reduction Strategic Plan and is an active partner in the MOH's current deliberations on expansion of the sector-wide approach. USAID also provides guidance and support in planning and implementation of new initiatives such as HIPC debt relief and Zambia's application to the "Global Fund to Fight AIDS, Tuberculosis and Malaria."

Changes to the SO: The SO team will be reviewing and revising the PMP by the end of the calendar year to add indicators now mandated by AID/W and adjust others. Data quality assessments will also be performed for all PMP indicators.

Strategic Objective and Number: Expanded opportunities for effective participation in democratic governance – 611004

SO4 targets the citizens of Zambia so as the young democracy evolves, they can increasingly participate in democratic process, influence public policy, and give feedback on how effectively government implements policy and delivers services. In FY2001 Civil society advocacy took a qualitative step forward in activism to generate public pressure. This successfully prevented a change in the Constitution of Zambia, which would have allowed the then incumbent President to run for a third term. This is of great significance to Zambia and contributes to the Agency's Democracy and Conflict and Humanitarian Assistance (DCHA) objective to promote development of politically active civil society.

In early 2001, the redesign of the SO with USAID Washington input took place. While the SO remains the same, its components focus on support to alternative dispute resolution and legal information access, and increased public debate, which now accents civil society organizations and media as partners and direct beneficiaries rather than government institutions. The third component, the local government activity was suspended due to funding constraints. The SO made important progress in selecting its partner to support a permanent alternative dispute resolution center and the new institutional contractor who was mobilized in September 2001 to implement increased public debate as the cornerstone of the SO. The SO team also worked with the Embassy to design a targeted support program for the presidential and parliamentary elections held in December 2001. Final enactment of the new Arbitration Act was another important achievement that took a major step toward providing a means of resolving cases outside the court system. In the light of the redesign and subsequent activities carried out, this SO is judged to have met its expectations.

Achievements

Increased Efficiency of the Administration of Justice: From an abyss, basic alternative dispute resolution (ADR) legal reform was achieved, spearheaded by the Law Association of Zambia (LAZ) and the Judiciary. USAID assisted in the repeal and replacement of the Arbitration Act from the 1930s with a new Arbitration Act in December 2000. The LAZ, with USAID support, became the first civil society group to lead a policy reform exercise, from legislative drafting to approval by Parliament in a record 12 months. This helped to bring Zambia in line with international standards for commercial dispute resolution, through arbitration, which is essential for attracting foreign investors. The Arbitration Association was legally established and 150 trained arbitrators and mediators began resolving cases expeditiously on a basis of client-contracted services. A total of 453 cases were referred to mediation greatly exceeding the target of 200. This was due to the under-estimation of the backlog of litigation cases which could be handled by mediation. However, the number of Arbitration cases resolved fell short of the target of 50 cases by 31, due to the delay in legal recognition of the two institutions, Zambia Dispute Resolution Center and the Zambia Association of Arbitrators, to handle arbitration cases. The ADR system has helped to avoid the prolonged delays resulting from case backlogs and is ensuring a more timely dispensation of justice, with reason to anticipate that ADR will become permanent in the Zambian justice system.

USAID assisted a local institute within the University of Zambia to develop a legal information website to provide ready access to legal information, reduce resolution timeframes and improve legal institutional

effectiveness and overall justice performance. A survey of legal professionals, which comprises lawyers, judges and researchers was completed. This established a baseline on access to legal information, which indicated that only 7-10% of practicing lawyers presently have regular access to online information.

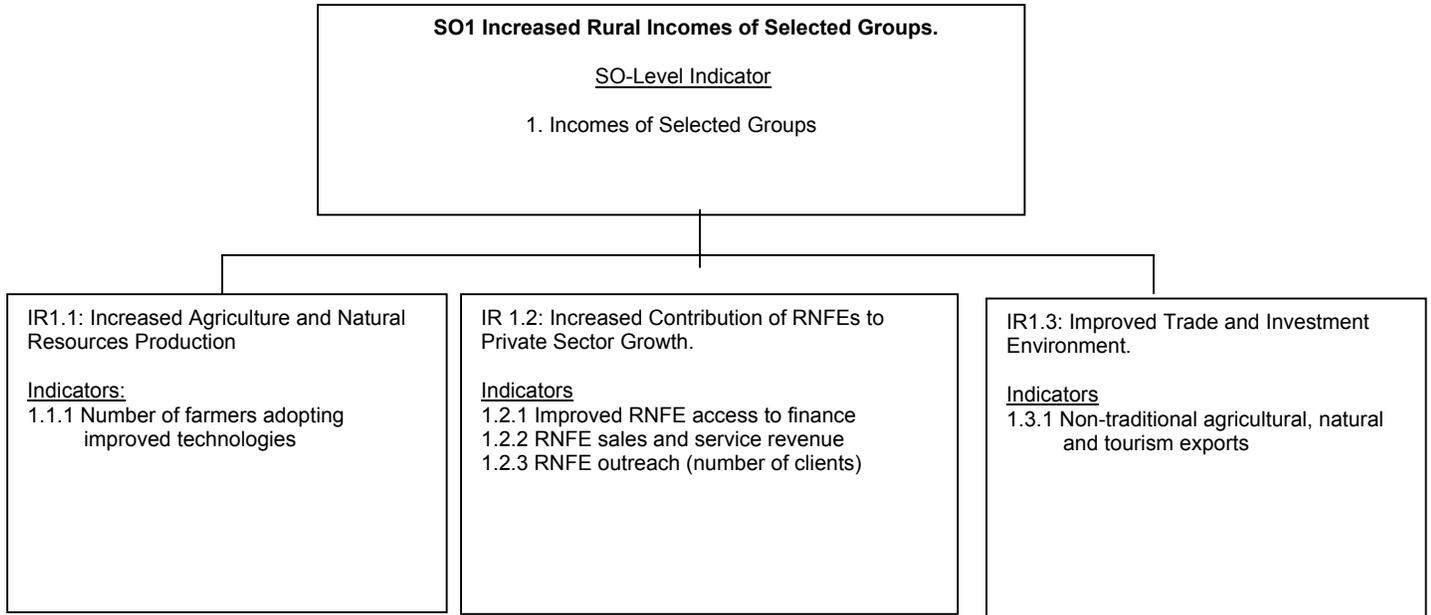
Increased Public Debate: USAID catalyzed and recently collaborated with other donors to support the "Oasis" debate in Zambia, which focused on a constitutional issue of presidential term limits. This election-related debate involved a civil society group comprising churches, the LAZ, a women's coordinating group, and other parties who peacefully and successfully lobbied and fought against an amendment to the Zambian Constitution which would have allowed the then incumbent President to serve a third term. "Oasis", named after the venue of the first public meeting, became a series of seminars and public gatherings, street protests and debate throughout the country. In mid 2001, the President declared he would not run again. The "Oasis" debate was a major breakthrough, which demonstrated the influence that civil society can carry in the political arena and is a significant contribution to the Agency's DCHA objective.

More Effective and Inclusive Local Government: Joint technical and financial inputs from USAID/RUDO Pretoria and the Mission contributed to the local governance sector despite the cutback in Mission funds. Support to the Ndola municipality and its citizens helped define a strategic plan to promote local economic recovery and environmental protection. The previous Movement for Multi-party Democracy government announced that one of the strategic recommendations, namely instituting tax incentives, would be implemented to help Ndola recover from losses due to privatization of copper mines.

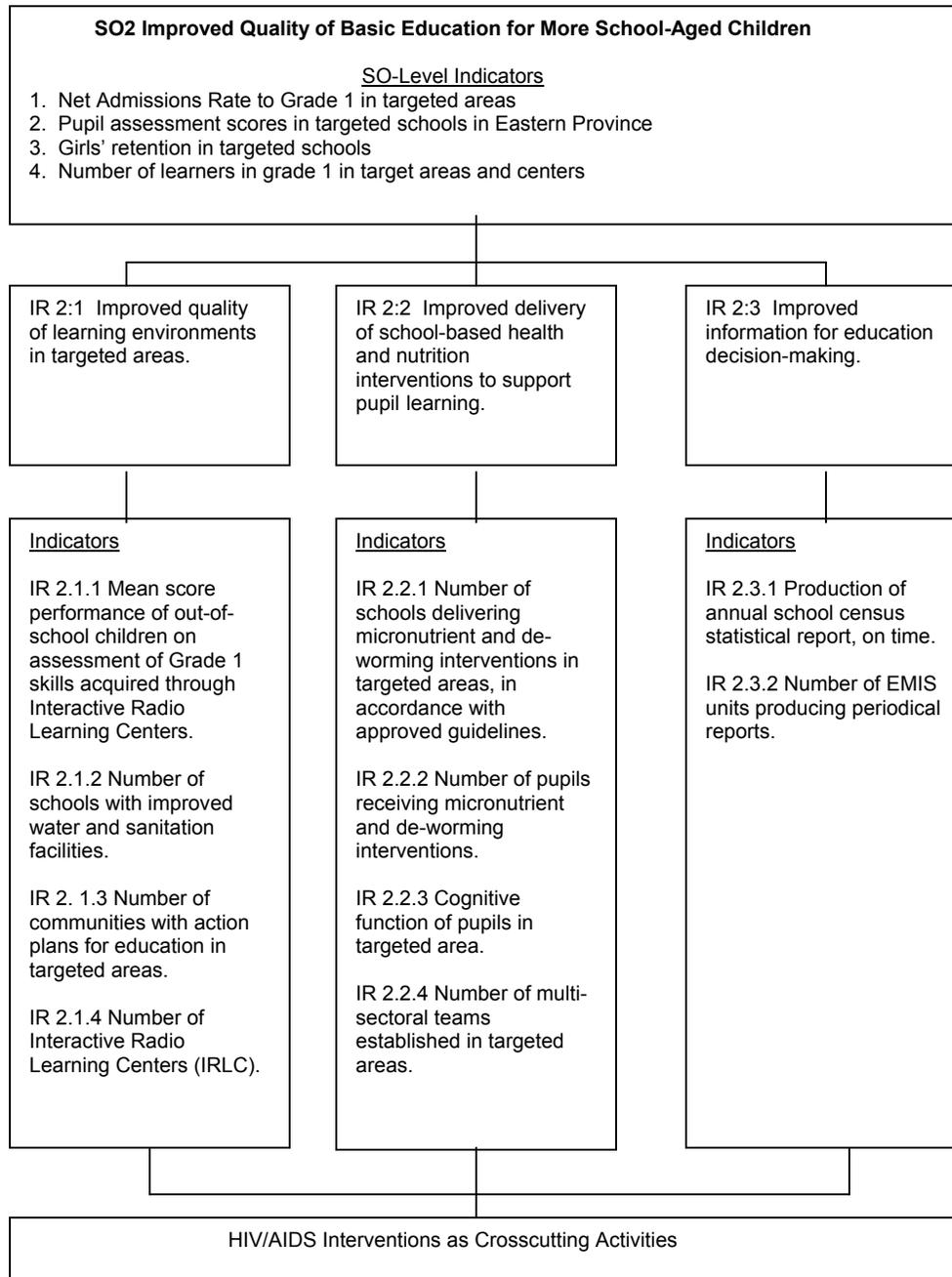
Changes to the SO: The SO team will be reviewing and revising the PMP by the end of the calendar year. Data quality assessments will also be performed for all PMP indicators.

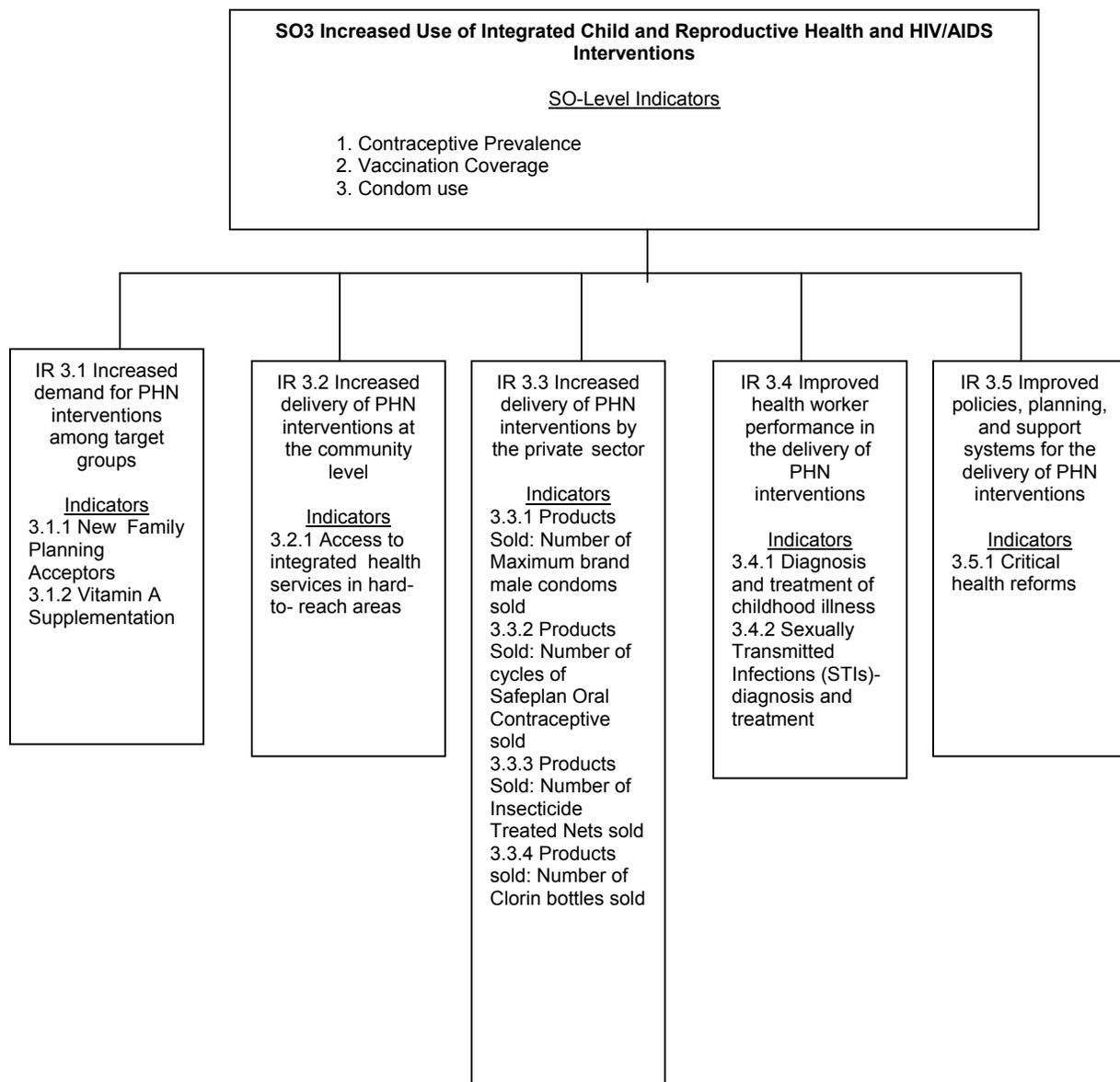
RESULTS FRAMEWORKS

SO1 RESULTS FRAMEWORK AND PERFORMANCE INDICATORS

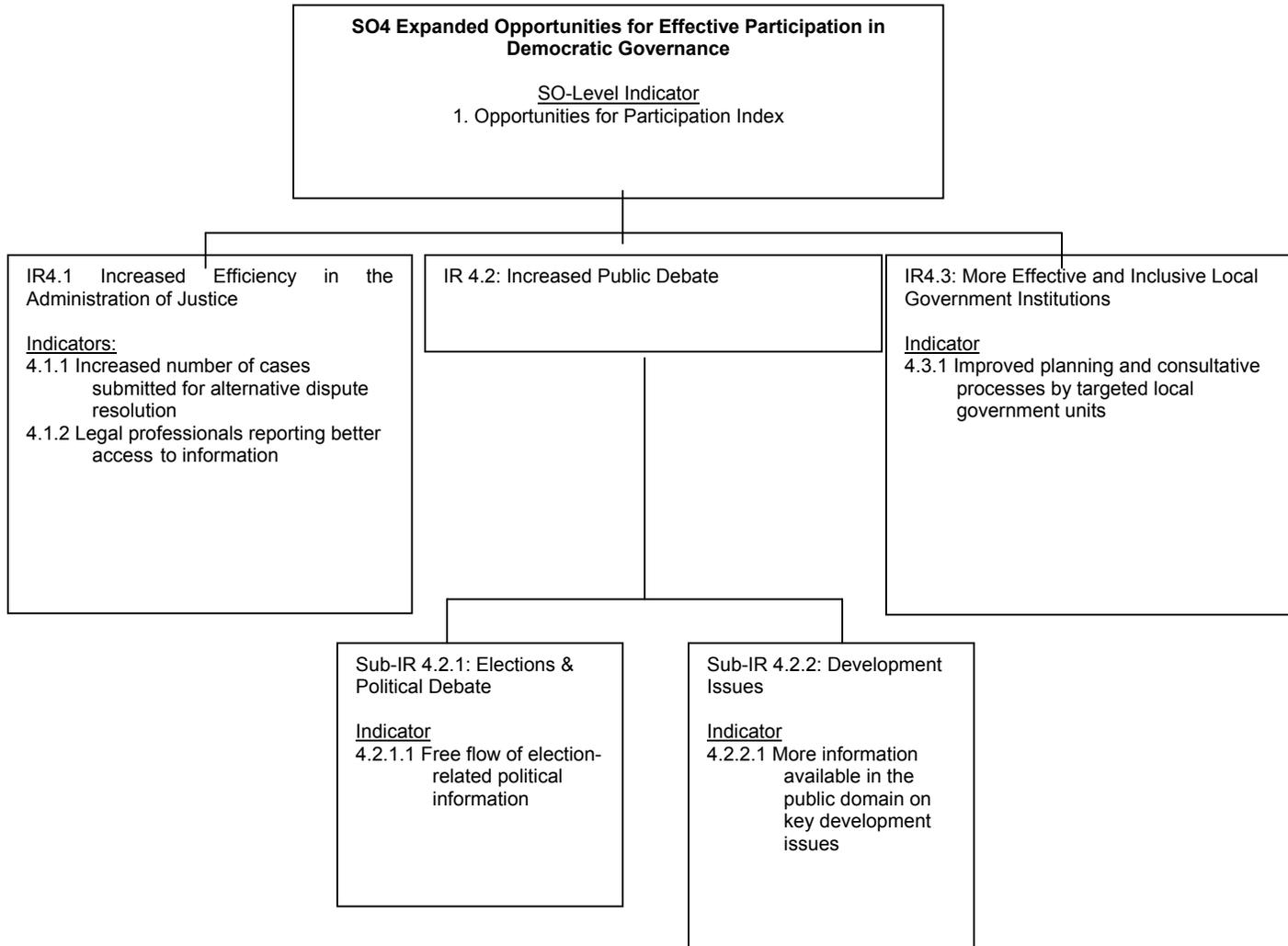


SO2 RESULTS FRAMEWORK AND PERFORMANCE INDICATORS





SO-4 RESULTS FRAMEWORK AND PERFORMANCE INDICATORS



ENVIRONMENTAL COMPLIANCE

Component 1. Plan for new or amended Initial Environmental Examination (IEE) or Environmental Assessments (EA) actions for coming year. Planned Reg. 216 actions are listed in FY 2002 column in the table below. The Mission plans to submit to Bureau Environmental Officer (BEO) SO1 IEE amendment for approval in March 2002. Once the Insecticide Treated Net (ITN) Pesticide Evaluation Report and Safe Use Action Plan (PERSUAP) is approved, there might be a need to amend the SO3 IEE. Request for REDSO or Bureau assistance will be submitted. A new Country Strategy Plan starts in FY 2004. Therefore Environmental Threat and Opportunities Analysis is expected to be carried out in late 2002 – early 2003, including Foreign Assistance Act (FAA) section 117 – 119; Tropical Forestry and Biodiversity Analysis.

Component 2. Compliance with previously approved IEEs or EAs. Most Mission activities comply with their corresponding approved IEEs, as reflected in the “FY 2001 and previous” columns of the table on the following page.

USAID/Zambia Environmental Review status plans and schedule. Last updated: February, 2002.

Assistance Activities	FY 2001and Previous	FY 2002	Comments
<p>SO 1 Increased Rural Incomes of Selected Groups</p> <p>Strategic Objective level IEE amendment for all activities. IEE signed by Bureau Environmental Officer (BEO) on 8/4/99: 29zamb2-iee.</p> <p>Amended IEE in preparation for: IR 1.1 sustainable increases in agricultural and natural resources production. IR 1.2 Increased productivity of Rural Non-farm enterprises IR 1.3 Reduced constraints to private growth</p>	<p>Environmental Reviews and PERSUAP recommendations conducted for projects that engaged in use of pesticides.</p> <p>Categorical Exclusion with conditions recommended for ZATAC, CMS, ZCSMBA, and IESC and Privatization Support project (PSP). Negative Determination with conditions recommended for CLUSA RGB, WVI IAP, CARE LFSP, and CLUSA NRM.</p> <p>All activities in compliance with approved IEE except CLUSA RGB, and CLUSA NRM, due to the introduction of high value crops in the cropping system, which requires use of pesticides.</p>	<p>SOAG IEE amendment to include PERSUAP and new activities will be submitted to REO and BEO for approval o/a March 2002.</p> <p>The SO1 PERSUAP will be submitted to BEO o/a March 2002.</p>	<p>USAID/Zambia/SO1 Categorical Exclusion status will be monitored to ensure that the activities undertaken are within the realm of Categorical Exclusion conditions e.g. awareness, promotion, training in and /or capacity building in international environment standards etc, will be integral to promoting agricultural and natural resources-based exports and international trade.</p> <p>USAID/Zambia/SO1 ensures that projects conduct the environmental screening and monitors the implementation of mitigation requirements.</p> <p>Implementation of the PERSUAP recommendations will be closely monitored.</p>
<p>SO 2 Improved Use of Integrated Child and Reproductive Health and HIV/AIDS Interventions</p> <p>SO level / SOAG IEE for all activities. IEE signed by BEO on 10/25/99. 29zam SO2 iee.</p>	<p>All activities comply with the approved IEE.</p>	<p>Results for water quality are expected from UNICEF by June 2002, which received support from USAID for drilling of boreholes and construction of pit latrines.</p>	<p>USAID/Zambia/SO2 to continue monitoring the negative determination with conditions recommended for the construction of boreholes and latrines as specified in section 4 and Annex of the IEE.</p>

<p>SO 3 Increased Use of Integrated Child and Reproductive Health and HIV/AIDS interventions</p> <p>SO –level / SOAG IEE for all activities. IEE signed by BEO on 3/3/99, 29zamb1 - iee</p>	<p>SOAG IEE amended to introduce all ITN activities proposed by the Grantee, which are recommended for deferral under the current IEE.</p> <p>Deferral recommended ITNs.</p>	<p>Amended IEE to be submitted to BEO once the ITNs PERSUAP is completed by April 2002.</p>	<p>USAID/Zambia/SO3 to monitor the negative determination recommended for STI and HIV case management and testing activities in accordance with the SOAG IEE recommendations.</p> <p>USAID/Zambia/SO3 will monitor compliance with the ITN PERSUAP by the grantees once approved.</p>
<p>SO 4 Expanded Opportunities for Effective Participation in Democratic Governance</p> <p>SO –level: SO4 has three IRs and all of them operate under the same IEE. For all activities, the provisions of ADS 204 apply. IEE signed by BEO on 8/4/99 with categorical exclusion 29zamb3 – iee.</p>	<p>No action anticipated.</p>	<p>No action anticipated.</p>	<p>USAID/Zambia/SO4 to continue monitoring inclusion of new activities that will require amendment of this IEE.</p>

Table 1: Annual Report Selected Performance Measures

Indicator (all data should pertain to FY or CY 01)	OU Response			Fund Account	Data Quality Factors Mission will conduct Data Quality Assessments for all PMP indicators in CY 2002.
Pillar I: Global Development Alliance: GDA serves as a catalyst to mobilize the ideas, efforts, and resources of the public sector, corporate America and non-governmental organizations in support of shared objectives					
1 Did your operating unit achieve a significant result working in alliance with the public sector or NGOs?	Yes X	No	N/A		
2 a. How many alliances did you implement in 2001? (list partners) 6	(1) Agriflora Alliance: Agriflora Ltd, ZNFU/ Agri-business forum, JICA. (2) ZCSMBA Alliance: Private Sector Development program (PSDP), Ecumenical Church Loan Fund (ECLOF), Friedrick Ebert Stiftung (FES), Microprojects Unit, Micro Bankers Trust. (3) Livingstone Linkages Program Alliance: IESC, Livingstone District Business Association, PSDP, CARE, Livingstonian, Kabu Visual Arts, ZCSMBA, Bank of Zambia, Livingstone City Council, Zambia Airforce etc. (4) Kazungula Milk Station Alliance: FINTA DAIRIES LTD, CARE, JICA, IESC. (5) Interactive Radio Instruction (IRI) Activity(FY2001) - with major partners being Banyon Tree Foundation, IRI Mentors, Freeplay Foundation, Chikuni Community Development Association, Zambia Open and Community Schools Secretariat. (6) School Health and Nutrition (SHN) Activity - with major partner being Glaxo SmithKline (FY2000) .				
b. How many alliances do you plan to implement in FY 2002?	3				
3 What amount of funds has been leveraged by the alliances in relationship to USAID's contribution?	2,739,750				1) Agriflora - \$2,052,000 2) ZCSMBA Alliance - \$ 324,000. 3) Livingstone Linkages - \$ 265,000. 4) Kazungula Milk Station - \$100,000. 5) IRI = \$157,530 + Glaxo SmithKline (SHN) = \$11,220 NB. Other contributions are in kind.
Pillar II: Economic Growth, Agriculture and Trade: USAID works to improve country economic performance using five approaches: (1) liberalizing markets, (2) improving agriculture, (3) supporting microenterprise, (4) ensuring primary education, and (5) protecting the environment and improving energy efficiency.					
4 If you have a Strategic Objective or Objectives linked to the EGAT pillar, did it/they exceed, meet, or not meet its/their targets?	Exceed	Met X	Not Met	This is an overall assessment based on all SO1 PMP indicators. Since it is a composite assessment, this has a subjectivity data quality limitation.	
USAID Objective 1: Critical, private markets expanded and strengthened					
5 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A	This is a proxy indicator showing the SO's contribution to Non Traditional Exports. The indicator reflects the impact of our work with the Ministry of Commerce, Trade and Industry that facilitated Zambia's entry into the COMESA FTA leading to an increase in Zambia's exports in the region.	

Indicator (all data should pertain to FY or CY 01)	OU Response			Fund Account	Data Quality Factors Mission will conduct Data Quality Assessments for all PMP indicators in CY 2002.
USAID Objective 2: More rapid and enhanced agricultural development and food security encouraged					
6 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		This reflects the number of farmers participating in our various programs. There is a possible data limitation on different partners double counting their clients. A full data quality assessment will be conducted on this indicator.
USAID Objective 3: Access to economic opportunity for the rural and urban poor expanded and made more equitable					
7 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		This reflects the number of Rural Non Farm Enterprises participating in our various programs. There is a possible data limitation on different partners double counting their clients.
USAID Objective 4: Access to quality basic education for under-served populations, especially for girls and women, expanded					
8 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		<p>1. The target population is children in 85 government schools, 2 community schools and 169 Interactive Radio Learning Centers. The most significant increase has been in the Interactive Radio Program which has experienced an increase from 1,254 learners in CY2000 to 7,782 learners by end of 2001.</p> <p>2. Data Quality Factors - data is obtained from contractors for Interactive Radio Instruction (IRI) Centers and School Health and Nutrition (SHN) interventions and the Ministry of Education. For IRI centers the likely data quality limitation is that individual teachers may not keep records in the manner that is required for USAID reporting and the likely failure to capture unregistered centers. IRI centers can be established and registered with Ministry of Education anytime a community is ready to support one and can also close down if a community fails to support the center.</p>
					<p>Actions taken to redress these issues include regular school supervision/visits by the Ministry of Education Inspectorate, NGOs/CBOs, and the Implementing Partner. Similarly for SHN schools, teachers/schools may find it difficult to keep accurate and up-to-date pupil records (on micro-nutrients and deworming) and verifiable school enrolment data as the program expands. Actions to address data limitations include enrolment data verification with the official Ministry Annual School Census reports and on spot checks and supervision by the Ministry and implementing partner. Programme for Advancement of Girls' Education (PAGE) schools data limitations may include lack of trained teachers in intervention schools to locate historical enrolment data to track trends. Actions planned to address this limitation include asking our implementing partners to work with school administrators and Ministry officials (for national records) to obtain accurate enrolment data by gender.</p>
9 a. Number of children enrolled in primary schools affected by USAID basic education programs (2001 actual)	Male 19,310	Female 17,830	Total 37,140		<p>1. CY 2001 total enrollment is obtained from 85 government schools, 2 community schools and 169 Interactive Radio Instruction (IRI) centers - specifically 40 School Health and Nutrition (SHN) Schools in Eastern Province (8,700 males, 8,169 females), 5 Community Sensitization and Mobilization Campaign (CSMC) Schools in Southern Province (620m, 558f) 42 Program for Advancement of Girls' Education (PAGE) schools in Southern Province (5,996m, 5,315f) and 169 IRI centers (3,994m, 3,788f).</p>
b. Number of children enrolled in primary schools affected by USAID basic education programs (2002 target)	29,218	28,048	57,266		<p>2. For the CY2002 we expect to have 115 government schools, 2 Community Schools and 371 IRI centers - This means the SO will have interventions in 60 SHN schools (25,304 pupils), 42 PAGE schools (11,311 pupils as CY2001), 371 IRI centers (w/approx. 46 learners per centre or 17,066 learners) and 15 CSMC schools (3,585 pupils). For reporting purposes, enrollment data for SHN, PAGE and CSMC schools is based on current official 2000 Ministry of Education Annual School Census while enrollment data from IRI centers is from the implementor for the year 2001.</p>

Indicator (all data should pertain to FY or CY 01)	OU Response			Fund Account	Data Quality Factors Mission will conduct Data Quality Assessments for all PMP indicators in CY 2002.
USAID Objective 5: World's environment protected					
10 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes	No	N/A		
11 a. Hectares under Approved Management Plans (2001 actual) b. Hectares under Approved Management Plans (2002 target)					
Pillar III: Global Health: USAID works to: (1) stabilize population, (2) improve child health, (3) improve maternal health, (4) address the HIV/AIDS epidemic, and (5) reduce the threat of other infectious diseases.					
12 If you have a Strategic Objective or Objectives linked to the Global Health pillar, did it/they exceed, meet, or not meet its/their targets?	Exceed	Met X	Not Met		Mission will conduct Data Quality Assessments for all PMP indicators in CY 2002. Assessment based on PMP.
USAID Objective 1: Reducing the number of unintended pregnancies					
13 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		Sales of socially marketed oral contraceptives exceeded targets. Data is collected monthly from PSI/SFH field offices. As sales invoices could be lost, PSI/SFH has set up controls to ensure data accuracy, including submission of bank statements, expense analysis, bank deposit slips, and bank reconciliation statements. During data entry, the double entry system detects missing data. Contraceptive Prevalence Rate (2001 Demographic & Health Survey) will be reported next year.
USAID Objective 2: Reducing infant and child mortality					
14 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		Sales of socially marketed home water treatment (Clorin) exceeded target--see discussion of data quality for PSI/SFH above. Children fully immunized by one year--target exceeded. This figure is preliminary as only 3 quarters of Health Management Information System (HMIS) data available. Although target for Vitamin A coverage of children 6-60 months is not met, results are significant. Data quality issues pertain to national HMIS. Data drawn from district level tallies and there is a risk of missing data or double entry. To avoid this, data is validated by mini surveys conducted with technical support from MOST and National Food Nutrition Commission.
USAID Objective 3: Reducing deaths and adverse health outcomes to women as a result of pregnancy and childbirth					
15 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes	No	N/A X		No performance indicator tracking these activities. SO will add one to PMP and report next year.

Indicator (all data should pertain to FY or CY 01)	OU Response			Fund Account	Data Quality Factors Mission will conduct Data Quality Assessments for all PMP indicators in CY 2002.
USAID Objective 4: Reducing the HIV transmission rate and the impact of HIV/AIDS pandemic in developing countries					
16 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		Condom use exceeded targets. Data from 2000 Zambia Sexual Behavior Survey (released 2001). There is risk of missing data or double counting of data. To address this, each questionnaire has a unique ID that prevents duplication. Field check tables are also run during data processing. Condom sales exceeded targets. See discussion of data quality for PSI/SFH above.
USAID Objective 5: Reducing the threat of infectious diseases of major public health importance					
17 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		Sales of socially marketed insecticide-treated bednets to prevent malaria exceeded targets. See discussion of data quality for PSI/SFH above.
Pillar IV: Democracy, Conflict and Humanitarian Assistance					
18 If you have a Strategic Objective or Objectives linked to the Democracy, Conflict and Humanitarian Assistance Pillar, did it/they exceed, meet, or not meet its/their targets?	Exceed	Met X	Not Met		
USAID Objective 1: Rule of law and respect for human rights of women as well as men strengthened					
19 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		Quantitative data is available for the ADR activity which focuses on court annexed mediation and arbitration. Implementing partners are the Zambian Bar and the Judiciary. Not all arbitrations may be reported. Plan to require periodic returns from all known arbitrators.
USAID Objective 2: Credible and competitive political processes encouraged					
20 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		For the Zambian 2001 elections, USAID provided training to NGOs on election observation and independent media reporting on political processes. The election resulted in a more multi-party representative legislature than its predecessor.
USAID Objective 3: The development of politically active civil society promoted					
21 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes X	No	N/A		USAID contributed 20% to the cost of 'Oasis', a broad coalition of the Law Association, protestant and catholic churches, and a women's coordinating NGO lobby group, to successfully lead a civil society fight against an unconstitutional third term for the incumbent President. The Law Association, a statutory independent organization led the reform of the Arbitration Act including legal drafting, which was passed into law in record time.
USAID Objective 4: More transparent and accountable government institutions encouraged					
22 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes	No	N/A X		

Indicator (all data should pertain to FY or CY 01)	OU Response			Fund Account	Data Quality Factors Mission will conduct Data Quality Assessments for all PMP indicators in CY 2002.
USAID Objective 5: Conflict					
23 Did your program in a pre-conflict situation achieve a significant result in the past year that is likely to contribute to this objective?	Yes	No	N/A		
24 Did your program in a post-conflict situation achieve a significant result in the past year that is likely to contribute to this objective?	Yes	No	N/A		
25 Number of refugees and internally displaced persons assisted by USAID	Male	Female	Total		
USAID Objective 6: Humanitarian assistance following natural or other disasters					
26 Did your program achieve a significant result in the past year that is likely to contribute to this objective?	Yes	No	N/A		
27 Number of beneficiaries					

Table 2: Selected Performance Measures for Other Reporting Purposes

The information in this table will be used to provide data for standard USAID reporting requirements

Indicator (all data should pertain to FY or CY 01)	OU Response	Fund Account	Data Quality Factors Mission will conduct Data Quality Assessments for all PMP indicators in CY 2002		
Child Survival Report					
Global Health Objective 1: Reducing the number of unintended pregnancies					
1 Percentage of in-union women age 15-49 using, or whose partner is using, a modern method of contraception at the time of the survey. (DHS/RHS)	N/A		To be reported next year from the 2001 DHS		
Global Health Objective 2: Reducing infant and child mortality					
2 Percentage of children age 12 months or less who have received their third dose of DPT (DHS/RHS)	Male	Female	Total		To be reported next year from the 2001 DHS
3 Percentage of children age 6-59 months who had a case of diarrhea in the last two weeks and received ORT (DHS/RHS)	N/A				To be reported next year from the 2001 DHS
4 Percentage of children age 6-59 months receiving a vitamin A supplement during the last six months (DHS/RHS)	Male	Female	Total 81		2001 data from national program. Data are drawn from district level tallies and there is a risk of missing data or double entry. To avoid this, data is validated by mini surveys conducted with technical support from MOST and NFNC. The current national system does not disaggregate this data by gender.
5 Were there any confirmed cases of wild-strain polio transmission in your country?	No				
Global Health Objective 3: Reducing deaths and adverse health outcomes to women as a result of pregnancy and childbirth					
6 Percentage of births attended by medically-trained personnel (DHS/RHS)	N/A				To be reported next year from the 2001 DHS
Global Health Objective 5: Reducing the threat of infectious diseases of major public health importance					
7 a. Number of insecticide impregnated bed-nets sold (Malaria) (2001 actual) b. Number of insecticide impregnated bed-nets sold (Malaria) (2002 target)	81,000 150,000				PSI/SFH sales reports of ITNs are expected once a month from the field. This may result in loss of sales invoices. To address this, PSI/SFH has set up controls to ensure data accuracy, including submission by field offices of bank statements, expense analysis, bank deposit slips, and bank reconciliation statements. During data entry, a system of double entry has been set up at the central level. Note: 2001 numbers include PSI/SFH's PowerNet and Safenite products but not products sold through NetMark project. Targets for 2002 include PSI/SFH's Powernet and Mama Safenite products and NetMark products but not PSI/SFH's Safenite.
8 Proportion of districts implementing the DOTS Tuberculosis strategy	N/A				No program in this area

HIV/AIDS Report

Global Health Objective 4: Reducing the HIV transmission rate and the impact of HIV/AIDS pandemic in developing countries

<p>9</p> <p>a. Total condom sales (2001 actual)</p> <p>b. Total condom sales (2002 target)</p>	<p>10.1 million</p> <p>10.5 million</p>				<p>This figure represents national coverage for calendar year 2001. PSI/SFH sales reports of condoms are expected once a month from the field. This may result in loss of sales invoices. To address this, PSI/SFH has set up controls to ensure data accuracy, including submission by field offices of bank statements, expense analysis, bank deposit slips, and bank reconciliation statements. During data entry, a system of double entry has been set up at the central level.</p>
<p>10</p> <p>a. Number of individuals treated in STI programs (2001 actual)</p> <p>b. Number of individuals treated in STI programs (2002 target)</p>	<p>Male 1,096</p>	<p>Female 5,687</p>	<p>Total 6,783</p>		<p>These figures reflect coverage of only a high risk-sub-population, and not the general population. A system has been set up to validate all figures from the field through a computer program and manually by the data collection supervisor. Activity is the process of setting targets for 2002.</p>
<p>11</p> <p>Is your operating unit supporting an MTCT program?</p>	<p>Yes</p>				
<p>12</p> <p>a. Number of individuals reached by community and home based care programs (2001 actual)</p> <p>b. Number of individuals reached by community and home based care programs (2002 target)</p>	<p>Male N/A</p>	<p>Female N/A</p>	<p>Total N/A</p>		<p>Not tracking, but will report next year.</p>
<p>13</p> <p>a. Number of orphans and vulnerable children reached (2001 actual)</p> <p>b. Number of orphans and vulnerable children reached (2002 target)</p>	<p>Male</p>	<p>Female</p>	<p>Total 54,063 137,000</p>		<p>Some of the NGOs supported do not submit information on numbers of OVCs reached (resulting in under-reporting). Forms have been developed to be distributed to all NGOs receiving support from the program to report OVCs they are reaching. And since data has previously not been disaggregated, forms have been developed that capture information by gender, and thus next year reporting will be possible by gender.</p>
<p>14</p> <p>a. Number of individuals reached by antiretroviral (ARV) treatment programs (2001 actual)</p> <p>b. Number of individuals reached by antiretroviral (ARV) treatment programs (2002 target)</p>	<p>Male N/A</p>	<p>Female N/A</p>	<p>Total</p>		<p>No program</p>