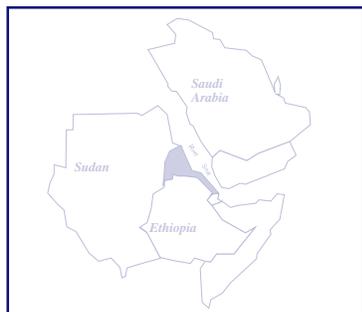


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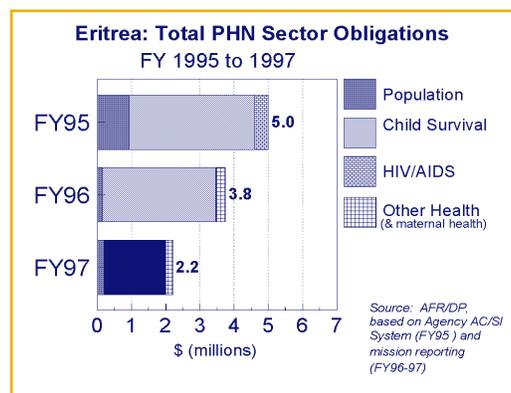
Family Planning and Health Activities in

Eritrea



Population:	3.4 million (UN estimate for 1997)
Infant mortality rate:	66 deaths per 1,000 births (1995 DHS)
Adequate nutrition (wt.-for-age):	44% of children age 12–23 months (1995 DHS)
Total fertility rate:	6.1 children per woman (1995 DHS)
Contraceptive prevalence rate:	3.1% (all women/modern methods, 1995 DHS)
Demographic and Health Survey:	1995
Multi-indicator cluster survey:	1995 (UNICEF)

USAID is the primary donor to the Eritrean Ministry of Health (MOH). The Eritrea mission is pursuing a five-year program (1996–2001) centered on the Eritrea Health and Population Project, which focuses on the three most populated of Eritrea's six zones (Maekel, Dehub, and Gash Barka) but also has impact elsewhere in the country as well as at the national level. The mission works in close conjunction with the MOH as well as with the national women's and youth unions. Agencywide funding trends for family planning and health activities in Eritrea for 1995–97 are summarized in the figure to the right. USAID/Eritrea's results framework includes one strategic objective and three intermediate results (IRs) focusing on primary health care (PHC).



Strategic Objective 1: Increase the use of sustainable, integrated primary health care services by Eritreans.

IR 1.1: Access to integrated primary health care services improved.

IR 1.2: Client demand for primary health care services enhanced.

IR 1.3: Quality of primary health care services improved.

Activities in Family Planning and Health

Improving Health Service Delivery Capacity. In conjunction with other donors, the mission supports renovation of health facilities, including provision of necessary equipment and furniture; and improvement of outreach services. At the national level, substantial USAID assistance is provided to the MOH's Nutrition, Primary Health Care, and Information, Education, and Communication (IEC) units. USAID/Eritrea has helped the MOH to complete the National Primary Health Care Policy Guidelines and the National Drug Policy and Standard Treatment Guidelines. USAID technical assistance has also facilitated the development of a national health management information system and related training.

Increasing Human Resource Capacity. USAID/Eritrea provides support for the development of improved training curricula for health service professionals. Past results include the development of the first national in-service family planning training curriculum and the nursing curriculum for the College of Health Sciences. Mission assistance is currently helping to upgrade health professionals' management skills, particularly within the national IEC unit and among zonal planning teams whose responsibilities have grown with decentralization.

Promotion of Child Survival. USAID/Eritrea is a lead player with the MOH in developing strategies to improve child health. Successful efforts so far include the expansion of Eritrea's national immunization and vitamin A distribution programs in collaboration with UNICEF, and promoting and facilitating the iodization and use of locally-

produced salt. The mission is working with the MOH to develop policies and protocols for integrated management of childhood illnesses (IMCI) and to adapt IMCI materials for local use. New directions to promote child survival include support for vector surveys for malaria control.

Promotion of Reproductive Health. USAID/Eritrea is promoting improved family planning and maternal health through training for service providers in the public sector, traditional birth attendants, and rural drug vendors; IEC activities targeting women, men, and youth; and facilitation of commodity distribution. The mission is also commencing activities in safe motherhood and advocacy on the prevention of female circumcision. USAID/Eritrea supported the procurement of the majority of contraceptives required nationwide in 1997 and is now embarking on a condom social marketing program to help prevent and control the spread of human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS). The implementing organization, Population Services International, is targeting Assab, Keren, Massawa, and Asmara through high-impact communication campaigns; distribution strategies for urban and rural areas; and a pricing strategy to deliver affordable condoms to low-income Eritreans with profit margins that are appealing to private distributors.

Global Bureau and USAID/Eritrea Joint Planning Activities

Basic Support for Institutionalizing Child Survival is coordinating the child survival component of USAID/Eritrea's strategy, focusing on critical system and capacity-building activities with the MOH. Areas of technical input address decentralization, strengthening of service delivery through training (particularly for nurses), IMCI quality improvements, and the national health information system.

Family Planning Services Expansion and Technical Support emphasizes improving the quality of and access to reproductive health services, particularly family planning services. Activities with the MOH include clinical and management training, procurement of clinical equipment and furniture, and IEC activities to promote awareness of reproductive health issues, particularly among youth.

Opportunities for Micronutrient Intervention is promoting appropriate treatment and prevention measures for micronutrient deficiencies by strengthening the IEC unit within the MOH, promoting universal salt iodization through the Iodine Deficiency Task Force, and assessing vitamin A and iron folate supplement needs.

Quality Assurance (QA) is working with the MOH to promote the design and utilization of a QA protocol and the development of the National QA coordinating center to improve the quality of health services delivery.

The Environmental Health Project plans to conduct a malaria entomological survey to inform the MOH's plan for malaria prevention and control.

Bureau for Humanitarian Response, Office of Private & Voluntary Cooperation Child Survival Grantees as of 1998

Africare is completing a four-year project (1994–1998) founded on a child survival and maternal health partnership with the MOH in the Bada region of the Northern Red Sea Zone. Africare's role focuses on training traditional birth attendants and increasing immunization coverage.



This USAID Country Program Brief was prepared for the Human Resources Division, Office of Sustainable Development, USAID Africa Bureau (AFR/SD/HRD), by the Center for International Health Information (CIHI). Questions and comments can be directed to CIHI (info@cihi.com).