

AGENCY FOR INTERNATIONAL DEVELOPMENT

PROJECT DATA SHEET

1. TRANSACTION CODE

**A** A = Add  
C = Change  
D = Delete

Amendment Number  
New

DOCUMENT CODE  
3

COUNTRY/ENTITY Bangladesh

3. PROJECT NUMBER 388-0083

4. BUREAU/OFFICE USAID/Dhaka 388

5. PROJECT TITLE (maximum 40 characters)  
Health/Nutrition Surveillance (Disaster)

6. PROJECT ASSISTANCE COMPLETION DATE (PACD)  
MM DD YY  
09/30/94

7. ESTIMATED DATE OF OBLIGATION  
(Under "B" below, enter 1, 2, 3, or 4)  
A. Initial FY 89 B. Quarter 4 C. Final FY 89

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

A. FUNDING SOURCE	FIRST FY <u>89</u>			LIFE OF PROJECT		
	B. FX	C. L/C	D. Total	E. FX	F. L/C	G. Total
AID Appropriated Total						
(Grant)	( 2000 )	( )	( 2000 )	( 2000 )	( )	( 2000 )
(Loan)	( )	( )	( )	( )	( )	( )
Other						
U.S.						
1.						
2.						
Host Country						
Other Donor(s)						
<b>TOTALS</b>	<b>2000</b>		<b>2000</b>	<b>2000</b>		<b>2000</b>

9. SCHEDULE OF AID FUNDING (\$000)

A. APPRO- PRIATION	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) PH	900	920	0	-	-	2000	-	2000	-
(2)									
(3)									
(4)									
<b>TOTALS</b>				<b>-</b>	<b>-</b>	<b>2000</b>	<b>-</b>	<b>2000</b>	<b>-</b>

10. SECONDARY TECHNICAL CODES (maximum 6 codes of 3 positions each)  
940 540 300

11. SECONDARY PURPOSE CODE  
580 419 394

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

A. Code	TECH	PVOU	R/H	NUTR	PVON
B. Amount					

13. PROJECT PURPOSE (maximum 480 characters)

To establish the institutional capacity to produce analyze and use child health/nutrition data to guide policy formation and targeting of relief efforts.

14. SCHEDULED EVALUATIONS

Interim MM YY 03/91 09/92 Final MM YY 09/94

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.)

*[Signature]*  
9/29/89  
George Jenkins  
Controller

17. APPROVED BY Malcolm J. Purvis  
Title Acting Mission Director  
Date Signed MM DD YY 10/27/89

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

Yellow copy

UNITED STATES OF AMERICA

AGENCY FOR INTERNATIONAL DEVELOPMENT

Dhaka, Bangladesh

September 26, 1989

MEMORANDUM TO THE ACTING MISSION DIRECTOR

FROM: Gary Cook, OPH *[Signature]*

SUBJ: Authorization of Health/Nutritional Surveillance for Disaster Preparedness Project (388-0083)

Issue:

You are requested to authorize the subject project pursuant to Handbook 3, Chapter 4. Helen Keller International has submitted a proposal to develop and coordinate a national health/nutritional surveillance system for disaster preparedness. The proposal is for a 5-year project and USAID is requested to provide \$2 million over the life of the project.

Background:

Bangladesh is located in the delta of three great rivers, the Ganga, the Megna and the Bramaputra. The riverine environment brings with it the annual threat of floods. In 1988 Bangladesh experienced floods which covered as much as two thirds of the nation and affected as much as half the population. Bangladesh likewise lies at the northern end of the Bay of Bengal and is subject to frequent cyclones arising out of the Indian Ocean. Although not as frequent a threat, Bangladesh has suffered through severe droughts, the most recent in 1974.

Despite the constant threat of disaster little has been done to develop and promote realistic preparedness measures. The lack of health/nutrition information proved a serious hinderance in the early stages of 1988 flood relief effort. Following the recommendations of CDC disaster team representatives Drs. Foster and Mast, who emphasized the importance of establishing ongoing sentinel surveillance in disaster-prone areas, and the AID/W approved 1989-90 Mission Action Plan, the Mission financed a TDY by Dr. Philip Nieburg of CDC (an internationally renowned expert in disaster relief and nutrition) to identify what Mission should do in the area of nutritional surveillance with particular reference to disaster preparedness and relief. In his report, Dr. Nieburg stressed that a sentinel surveillance of nutritional status of children in disaster-prone areas is essential to establish a baseline for future analyses and to permit a more rapid detection and response to negative impacts of diasters than was previously possible.

During the floods of 1988, UNICEF, with the assistance of USAID, the CDC and ICDDR/B, set up a temporary post-flood nutritional surveillance monitoring system of child nutrition status. They based their analysis on data collected from NGOs which had nutritional monitoring activities. The analyses were used as a tool for advocacy both for disaster assistance of children at high risk of acute malnutrition and by food aid donors to target limited food aid

resources to areas of greatest need. The Mission initially hoped that UNICEF would establish an on-going surveillance program. However, UNICEF's structure does not allow it to directly implement projects and a proposal was never submitted by UNICEF. UNICEF is, however, in full agreement with USAID that such a project is essential and coordinated with USAID in efforts to identify a possible implementing agency.

Two organizations submitted unsolicited proposals for establishing health and nutritional surveillance systems: HKI/Bangladesh and WHO. The WHO proposal design was based upon a weak system of government field health workers which would provide neither accurate nor timely information during periods of disaster, and extensive dialogue with WHO was unsuccessful in producing a technically acceptable revision. Although no BDG institution submitted a proposal, the possibility of BDG implementation was carefully considered and the capacity of all health, nutrition and/or disaster-related BDG institutions was carefully reviewed. None currently have the technical and administrative capacity to establish a project which would provide rapid and accurate information during times of disaster. Long-term efforts to strengthen such BDG institutions are already a part of both UNICEF and WHO's assistance programs, but there is consensus that it will be many years before these efforts bear fruit.

The Mission was, consequently, pleased to receive a proposal from HKI/Bangladesh since HKI/B has a clear nutritional focus, is perceived as politically neutral by both BDG and NGOs, has good relations with local NGOs, prior experience in projects containing NGO subgrants and has the technical and managerial capacity to administer such a project.

#### Project Description:

HKI will be the coordinating organization for a system of data collection, analyses and dissemination. Data will consist of measurements of indicators of health and nutritional status among children under five in disaster prone areas. Staff members from selected NGOs will be trained by HKI to collect data and transfer data to the HKI office in Dhaka. Data will be collected on a regular basis throughout the year and more frequently during times of natural disaster. HKI will maintain a data base and provide regular reports on data analyses to UNICEF which will be responsible for disseminating the information to the BDG, the donors and NGOs.

#### Discussion:

##### 1. Technical Capacity.

The HKI/B proposal was developed in Bangladesh by HKI/B Country Director (a well qualified nutritional epidemiologist with prior LDC research experience, in whom the Mission has great confidence) with input from WHO Nutrition Advisor, UNICEF, ICDDR/B and others. It draws heavily upon the recommendations made by Dr. Nieburg and the experience of the UNICEF/NGO surveillance system successfully piloted during the 1988 floods. The proposal has the strong support of

UNICEF, which has agreed to be responsible for dissemination of the project's findings to BDG, NGOs and donors during times of disaster, and to maintain close links with the project in an advocacy role.

## 2. Institutional Sustainability.

a) The current HKI/B Country Director, who is at the beginning of a two year contract (with the option to extend), is deeply committed to this project and has demonstrated this by personally drafting the proposal, holding extensive meetings with UNICEF, USAID, and the NGOs, and pulling together inter-donor consensus on design. Following the recent visit by HKI/NY representative Dr. Susan Eastman, HKI/NY is now thoroughly committed to the project and convinced of both its necessity and feasibility.

b) One objective of the project is that upon completion of the project period, responsibility for coordinating the NGO data collection, processing and analyzing the data will be transferred from HKI to the BDG Institute for Public Health Nutrition (IPHN). The following will occur during the life of the project to enable this transition:

- UNICEF will continue their ongoing projects with IPHN, which contain significant training and institutional building components.
- IPHN staff will work as counterparts to HKI, receiving on the job training in implementation of surveillance systems, data collection and analysis.

At the point where IPHN will be expected to take over lead responsibility the system will already be in place, with NGO field staff trained and experienced. The activity will thus be less demanding of technical and managerial capacity while at the same time, IPHN capacity will have increased.

## 3. Financial Sustainability.

USAID funding will support the development and piloting of this new surveillance system. Upon completion of the project period, the responsibility for coordination of NGO data collection, data processing and analysis will be transferred from HKI to IPHN. HKI will work with IPHN and NGOs to identify the cost for maintaining the data collection and analysis activities upon the conclusion of the USAID grant. HKI will also work with IPHN and UNICEF to develop a plan for transferring long-term funding support for the surveillance project to the BDG or other domestic sources. Other donors -- UNICEF and WHO -- have long-term projects to support IPHN and have affirmed their commitment to this support, including any additional support that might be needed to support this activity.

Although HKI will make some in-kind contributions to the grant activity, these contributions are not expected to meet the 25% contribution usually required of OPG recipients under Handbook 3, Section 4B5 e(5)(a). A waiver of the requirement is attached hereto for your approval.

#### 4. Bangladesh Government Approval.

HKI has discussed this project with BDG Institute of Public Health and Nutrition (IPHN) which agrees to the concept and will be cooperating with HKI in implementation. USAID has notified ERD of its intention to provide Helen Keller International with funding for a health and nutritional surveillance project and has received no objection. HKI has assured USAID that it will obtain all necessary approvals for this project from the Government of Bangladesh. Given the proposed role of IPHN and UNICEF the implementation of the project, no difficulty is anticipated in obtaining approval.

#### 5. Initial Environmental Examination (IEE).

Per cable State 298784, ANE/PD Environmental Coordinator concurs that the subject project comes under the exclusion provisions of Agency Environmental Procedures (22 CFR 216), Sec. 216.2 (C)(2)(VIII), involving nutrition and health activities that have no direct environmental affects.

#### 6. Evaluation.

Project evaluation will be conducted after 18 months of project activities to determine whether data is in place and progress has been made towards developing and maintaining an adequate surveillance system. Assessment will also look at progress made toward institutionalization and financial sustainability. Benchmarks will be established early in the project to use in evaluation.

#### Authority:

Delegation of Authority No. 652, Section 2A, permits the Mission Director to authorize projects up to \$20 million in value, provided they do not present significant policy issues, do not require waivers that must be approved in AID/W (unless such waivers have been approved) and do not have a life of project exceeding 10 years. Per DOA 652, Section 4, this authority may be exercised, without limitation, by an Acting Mission Director. The ANE bureau concurred in our authorization of this project, by STATE 311865, on the basis of the Mission's PID-like cable and additional cabled information.

Recommendation

That you authorize this subject project by signing in the space provided below and by executing the attached Project Authorization.

Approve

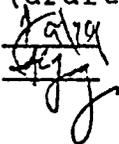


Disapprove

29<sup>th</sup> September 1989

Date

clearance (per M.O. 200-1, item 4)

- (draft) MWarren: PRO(A)
- (draft) ZHahn: PDE and A/Environmental Officer
- (draft) RRashid: WID
- (draft) JMudge: OPE
- (draft) PRamsey: RLA
-  GJenkins: CONT
- FYoung: DD(A)

doc:0057R:slb