

**USAID Cooperative Agreement with
The Global Health Council
Award No. HRN-A-00-99-00018-00**

Report for April 1, 2003 – June 30, 2003

The following Quarterly Report for USAID Award Number HRN-A-00-99-00018-00 has been prepared in accordance with 22 CFR 226.51. It provides a description of the Global Health Council's accomplishments for the period between April 1 and June 30, 2003. Copies of this report are being submitted to Celeste Carr, Project Officer and Charity C. Benson, the Contracting/Agreement Officer.

I. BACKGROUND

Now entering its fourth decade, the Global Health Council is the world's largest membership alliance dedicated to saving lives by improving health throughout the world. The Council works to ensure that all who strive for improvement and equity in global health have the information and resources they need to succeed. To achieve this goal, the Council serves as the voice for *action* on global health issues and the voice for *progress* in the global health field.

The Global Health Council mobilizes support for saving lives and eliminating needless suffering. The Council serves as a voice for the thousands of individuals and organizations involved in every aspect of global health; we work to inform and educate decision-makers, opinion leaders and concerned citizens about critical issues in global health in order to spur more effective investment, programs, and policies. We do this in local communities, in the policy arena, and around the globe.

The Council also serves as a highly credible, accessible, and nonpartisan source of global public health information. We work to ensure that advances in primary health care are recognized, understood, and promoted. While many serious health problems can be addressed inexpensively and effectively with the right knowledge, too often practical advances in public health are not widely shared. The Council seeks to gather such knowledge and make it accessible for those who can use it to save lives.

II. SUPPORTING USAID'S STRATEGIC OBJECTIVES

Every aspect of the Council's work under this agreement is specifically designed to support USAID's Strategic Objectives in the PHN sector. Together we are working to reduce:

- child mortality and to improve child health and nutrition
- maternal mortality and to improve women's health and nutrition
- unintended pregnancies and to improve reproductive health
- the risk and spread of HIV/AIDS and other sexually transmitted infections
- the risk and spread of infectious diseases
- emerging threats to global health

III. ACTIVITIES AND ACCOMPLISHMENTS

Special Events

1. **Congressional Educational/Technical Brown Bag Luncheon: “Tuberculosis and Malaria: A Priority for the Global Fund” – April 23, 2003**

The HIV/AIDS epidemic has swept around the globe, infecting more than 60 million people, and directly or indirectly impacting millions of additional lives. Many parts of the world are witnessing a rapid increase in HIV/AIDS, tuberculosis and malaria. According to the World Health Organization, HIV/AIDS, TB and malaria claimed 5.7 million lives last year, and caused debilitating illness in many millions more.

The growing number of global initiatives - such as the Global Fund to Fight AIDS, TB, and Malaria and the TB Global Drug Facility - are creating new opportunities to address these diseases. The purpose of the Fund is to attract, manage and disburse additional resources through a new public-private partnership that will make a sustainable and significant contribution to the reduction of infections, illness and death. By mitigating the impact caused by HIV/AIDS, tuberculosis and malaria in countries in need, the Fund will contribute to poverty reduction as part of the Millennium Development goals.

The objective of this briefing was to provide an update to members of Congress and their staff on the Global Fund to Fight AIDS, TB and Malaria. The briefing included discussion of the US government’s role in the Fund as well as ways that the Fund has made TB and malaria a priority. Twenty-seven people attended the briefing, including 14 Congressional staff members. Speakers included Anil Soni, Advisor to the Executive Director of the Global Fund to Fight AIDS, TB and Malaria. The Congressional sponsor was Representative Barbara Lee (D-CA). (SO – 5)

2. **Congressional Educational/Technical Briefing: “Maternal Health – The Big Picture” – May 19, 2003**

We know that healthy and productive women are the backbone of strong communities. More than 500,000 women die during pregnancy or childbirth every year - one woman every minute of every day. According to the World Health Organization, the lifetime risk of dying from pregnancy-related complications or during childbirth in developing countries is 1 in 48; in developed countries the ratio is 1 in 1,800. Moreover, UNAIDS estimates that 19.2 million women are living with HIV/AIDS; in 2002, 2 million women were newly infected and another 1.2 million women died. These conditions hinder the ability of women to build strong communities and inhibit their potential to make true economic gains.

- The objective of this briefing was to provide a general overview for Congressional staff of USAID programs aimed at decreasing maternal mortality. The briefing provided an overview of the state of maternal health, information about the key interventions that must happen to avert these deaths, and a report from a USAID-funded program providing insight into what works in the field. Materials were also available to highlight the activities and accomplishments of the White Ribbon Alliance for Safe Motherhood. Forty people attended this briefing including 12 Congressional staff. (SO – 2) Speakers included:
 - *Moderator:* Patricia Stephenson, ScD, Senior Advisor, Maternal and Child Health, Office of Health, Infectious Disease and Nutrition, USAID
 - Judith Robb-McCord, Director, Maternal & Neonatal Health (MNH) Program
 - Dyness Kasungami, MD, Reproductive Health Specialist, USAID/ Zambia

Sponsors:

- Representative Louise McIntosh Slaughter (D-NY)
- The Maternal and Neonatal Health Program, JHPIEGO

3. Congressional Brown Bag Series: “How to Keep a Child Healthy” – June 6, 2003

Over ten million children die every year, the vast majority of them from preventable and treatable diseases such as measles, diarrhea, and pneumonia. Although more than 75 percent of these deaths come from a handful of preventable diseases, over fifty percent are partly due to the effects of malnutrition. Undernourished children are much more likely to die from infection than those that receive proper nourishment. Certain nutrition interventions – such as breastfeeding promotion and supplementation with “micronutrients” such as vitamin A – have substantially contributed to improving the health of children worldwide. Other special nutrients, such as zinc, are now being found to help children fight infection, providing even more opportunity to make children healthier through nutrition. However, much more needs to be done.

As part of a three part series on how to keep children healthy, this session educated Members of Congress and staff on the importance of nutrition/micronutrients in improving the survival of children globally. Seven Congressional staff attended this event. The speaker was Dr. Keith P. West, Jr., Professor in the Department of International Health, Bloomberg School of Public Health, Johns Hopkins University. (SO – 3)

Sponsors:

- Senator Christopher “Kit” Bond (R-MO)
- The Johns Hopkins University
- The U.S. Coalition for Child Survival

4. Congressional Educational/Technical Briefing: “Addressing Malaria: The Burden of Disease” – June 19, 2003

Worldwide, 3,000 people die from malaria each day and 300 million people contract malaria every year. Every 40 seconds a child dies as a result of malaria ; more than 700,000 children under five years of age will die this year from the disease. The disease exerts its heaviest toll in Africa where, according to the World Health Organization, roughly 90% of the more than one million deaths from malaria worldwide occur each year.

The Roll Back Malaria (RBM) Initiative was founded in response to a growing concern by governments, particularly in Africa, about the continuing and increasing burden of disease and death due to malaria. RBM is being built on the shoulders of recent successful efforts in malaria-affected countries and regions to improve and support capacity to scale up action against the disease. (SO – 5)

The objectives of this briefing were to:

- 1) Raise awareness of the health and economic consequences of malaria, including its effect on pregnant women and the high risk of death in children from this preventable disease
- 2) Share information about what has worked and the challenges that we will continue to confront in the battle to control malaria
- 3) Update Congressional staff on the rebirth of the Roll Back Malaria campaign.

The briefing was attended by 73 people, 10 of whom were Congressional staff. The main speaker was Dr. Fatoumata Nafu-Traoré, of the Executive Secretariat for the Roll Back Malaria Partnership. (SO – 5) Sponsors were:

- Representative Donald Payne (D-NJ)
- The Roll Back Malaria Initiative

5. Congressional Educational/Technical Briefing: “Multi-sectoral Response to HIV/AIDS” – June 23, 2003

HIV/AIDS is a complex and long-term challenge that cuts across all sectors of society. All too frequently, AIDS takes the lives of people in their most productive

years, a fact which reverberates throughout a society. The death of a teacher from AIDS affects an entire classroom of children. HIV/AIDS is also devastating the agricultural sector. Even in peacetime, HIV/AIDS in military personnel is 2 to 5 times higher than among civilians. The infection rate is 50 times higher during times of conflict. Rape is increasingly used as a weapon of war and is contributing to the spread of HIV/AIDS.

The panelists at this briefing educated Members of Congress and their staff on the cross-cutting impact of HIV/AIDS on the sectors and the programs that are currently being implemented to address these issues in developing countries. The event was attended by 103 people, which included 24 Congressional staff. (SO – 4)

Speakers included:

- Gene Sperling, Director, Center for Universal Education at the Council on Foreign Relations and co-chair of the Basic Education Coalition's Advisory Group
- Cheryl Morden, Director of Policy and Communications, ICRW
- Carol Larivee, Associate Director, Behavior Change Communications, Family Health International (FHI)
- Carl C. Stecker, RN, MPH, EdD, Senior Technical Advisor for HIV/AIDS, Program Quality and Support Department, Catholic Relief Services (CRS)

Sponsors:

- Representative Jim McDermott (D-WA)
- Basic Education Coalition
- CARE
- Catholic Relief Services
- Family Health International

Ongoing Activities

Global Health Council Annual Conference

This year the Global Health Council hosted its 30th Annual Conference, *Our Future on Common Ground: Health and the Environment*. The conference was held in Washington, DC from May 27th through the 30th, 2003.

The environment – physical, economic and social – exerts a profound influence on health. Many of the world's health disparities derive from underlying environmental conditions. The role of the global health community is not only to respond to the consequences with effective services, but to directly influence and improve these

conditions. How can the global health practitioner make a difference that could affect the lives of millions?

Over the past generation, vital lessons have been learned in addressing environmental threats to health among the poor. In some cases, preventative actions aimed at environmental factors have benefited many; in others, mitigation of environmental effects through clearly directed health program interventions have been more practical. As we search for a better understanding of how to bring about improvements in both health and the environment, we must share what has been learned about both effective and ineffective action. Our conference provided practitioners, advocates, environmentalists, and decision-makers with the opportunity to share just this sort of information..

Activities during this reporting period centered around finalizing all logistics, confirming plenary speakers, solidifying volunteer network, ensuring payment of conference and exhibition fees, and making final arrangements for our annual Awards Banquet. This year we were pleased to have the participation of His Excellency Marc Ravalomanana, President of Madagascar, who delivered a presidential address on the second morning of the conference.

USAID helped to support the following technical sessions at this year's conference:

- *A Modern Paradigm for Improving Health Care Quality*
- *Developing an Expanded and Comprehensive Response to the HIV/AIDS Epidemic*
- *Using Best Practices to Improve Program Performance*
- *Using Research Evidence to Improve Health: Understanding and Interpreting*
- *People Power: Strategies for Improvement among Health Care Workers*
- *Knowing to Caring: VCT, MTCT and Home-Based Care*
- *It's Back: The Return of Vector Control as a Tool Against Malaria*
- *The Special Vulnerabilities of Children to Environmental Conditions*
- *Health Sector Reform and Financing: Resources and Expenditures*
- *Supply and Demand: Addressing Challenges in Health Service Delivery*
- *In the Face of Famine: Increasing Food Security in Sub-Saharan Africa*
- *Taking Child Health Services to Scale*
- *The Persistence of Inequity: Current Trends in Reproductive Health*
- *Community Participation for Youth Reproductive and Sexual Health*
- *Life in Balance: Partnering to Improve Reproductive Health and the Environment*
- *Mainstreaming Prevention of Diarrhea in Child Health*
- *Healthy Families, Healthy Forests: Integrated Programs*
- *Local Solutions: Communities Impacting Child Health and Survival*
- *The Baby's Environment: Improving Newborn Care*
- *Defining Population-Environment Linkages and Institutionalizing Response*
- *Managing Injection Waste: Experience from the Field*
- *Improving Maternal and Child Health in Urban Slums and Squatter Settlements*

- *Best Practices for Reduction of Maternal Mortality: Experiences from Egypt*
- *Advancing Global Alliances for Health: Communication Tools and Strategies*
- *Environmental Impact and Challenges among Displaced Populations*
- *HIV/AIDS and the Environment: What Are the Linkages?*

A copy of the Final Conference Program is included as an attachment to this report. (SO – 1,2,3,4,5)

Publications: *Global HealthLink* and *Global AIDSLink*

The Council continued to publish and distribute bimonthly issues of *Global HealthLink* and *Global AIDSLink* during this reporting period. The publications provide a forum for donors, policymakers, technical experts, PVO/NGO representatives and advocates to share experiences, resources and pertinent information. They also provide an important vehicle for sharing information on USAID's priorities, programs, and policies.

- *Global AIDSLink* provides analysis of the latest news, information and trends in the global response to the AIDS pandemic. A bimonthly publication, every issue contains articles and regular features addressing current international HIV/AIDS prevention, care and treatment issues. Researchers and activists also report from the field the latest findings in their spheres, and every issue includes a comprehensive listing of events and conferences in countries around the world.
- *Global HealthLink* disseminates best practices and experiences from the field. Each issue highlights the programs, findings and research of our members around the world. *HealthLink* informs the global health community about current legislation, innovative programs, and new findings in the field of global health. The broad range of articles presents both the challenges and the progress that individuals and organizations are making every day.

USAID supports the development of technical sections of these publications, including:

- *Notes From the Field*
- *Best Practices*
- *Outbreaks*
- *Calendar*
- *Global Updates*
- *Resources*

Copies of *AIDSLink* and *HealthLink* that were published between April 1 and June 30, 2003 are included as an appendix to this report. They are also available on our website, www.globalhealth.org. (SO – 1,2,3,4,5)

Website Technical Information Update

The Council's use of technology remains a critical component of our ability to enhance the effectiveness of those working in the field. Our website, www.globalhealth.org, is among the most comprehensive on-line resources for information about global health. Through it we provide up-to-the-minute news related to global health and development, discussion groups that facilitate debate on health topics, on-line access to Council publications, research and directories, and links with other sources of global health information. The site has proven to be a highly effective means for making broadly available the findings and experiences of USAID-funded projects. Please visit the site itself for a more complete review of the resources available there. (SO – 1,2,3,4,5)

Global Health Council Database

The Council maintains a database of individuals, organizations, and coalitions from around the globe working to improve health. This program database is the heart of our network. Its role is to link together individuals and organizations that share a common mission, enabling them to exchange ideas, provide guidance about particular countries or regions, and better leverage existing resources.

Each entry in the database includes data on organizational objectives, geographic focus, and sources of financial support, as well as pertinent contact information. During this reporting period the Council continued its ongoing work to expand and update the information contained in the database. (SO – 1,2,3,4,5)

International AIDS Candlelight Memorial, May 18, 2003

The Global Health Council is the organizer of this annual event, which last year took place in 1,800 communities in over 85 countries around the world. The Memorial, now in its 19th year, is the world's largest grassroots AIDS event. The Memorial honors the memory of those lost to AIDS, shows support for those living with HIV and AIDS, raises community awareness of the disease and initiates involvement in the fight against it. The Candlelight Memorial brings together individuals and groups that work in the ongoing battle against AIDS, and fosters the creation of and support for effective networks and alliances.

In an effort to foster linkages, the Council hosts meetings of Candlelight coordinators at regional and international HIV/AIDS conferences throughout the year. These venues provide an opportunity for individuals to come together to share information, best practices and lessons learned.

From April until the date of the Memorial (May 18, 2003), the Council was busy organizing final Memorial efforts. This included our work to provide up-to-the minute tools and ideas to coordinators, answer questions from coordinators, and help them with their mobilization skills. The Council also organized a Candlelight Memorial in Panama City in conjunction with the local Panamanian coordinating organization, PROBISIDA. This Memorial was attended by over 1,000 people and raised about \$5,000 for this local AIDS charity. The featured speaker was the official Candlelight Memorial spokesperson, Miss Universe, Justine Pasek, along with a representative of the Panamanian Government and a delegate from UNDP in Panama.

This year the memorial took place at 3,000 locations in 87 countries. This was almost double the number of people participating from the years past. Following the Memorial, the council put in place an on-line documentation form for the coordinators to report on the events that took place at their local memorial. A mobilization report is now in production and will be provided to USAID as part of our next Interim Report. (SO – 4)

Research and Analysis

The goal of the Council's Research and Analysis Department is to provide up-to-date and reliable information on what works and what does not work in health care, and to promote the use of this information by policy makers, managers, health care practitioners and advocates. USAID provides core support for the department and a summary of all of their activities for this reporting period.

In April 2003, the Global Health Council named Karin Ringheim as Director of the Research and Analysis Department. She replaces Jimmy Volmink, who left the Council in December to return to South Africa as Professor and Chair of Primary Health Care at the University of Cape Town. Ringheim joins the Council from the Program for Appropriate Technology in Health (PATH) in Washington, D.C., where, since 2000, she was a Senior Program Officer working to improve evaluation systems and on projects addressing HIV/AIDS, gender and human rights. From 1993-2000, she served as a technical advisor in the Office of Population, USAID, managing operations research and evaluation projects.

During this reporting period the Department conducted a workshop at the Global Health Council's 30th Annual Conference entitled *Using Research Evidence to Improve Health: Understanding and Interpreting Systematic Reviews*. Utilizing case studies relating to health and the environment, this interactive workshop illustrated how to identify and use key evidence-based health care resources and discussed factors that need to be considered when applying research evidence in "real world." More than 40 workshop attendees – representing practitioners, policy makers and researchers from four continents – participated in a rich discussion on the pivotal role of research evidence in the healthcare decision-making process. Research staff also served as moderators and facilitators for

various conference sessions, including a presentation by former USAID senior advisor, Duff Gillespie. In addition, the department conducted a workshop on the WHO Reproductive Health Library and evidence based medicine for the USAID cooperating agency Commercial Marketing Strategies (CMS).

The Department is in the final stages of conducting two systematic reviews dealing with key interventions for the prevention and treatment of HIV/AIDS, TB and Cholera. *Drugs for preventing tuberculosis in HIV positive individuals* was peer reviewed by the World Health Organization (WHO) and will be submitted for peer review by the Cochrane Collaboration's HIV/AIDS review group in September. Data analysis has been completed and the write up is underway for the review entitled *Reduced osmolarity ORS for treating cholera*. The Department is also finalizing the protocol for a systematic review entitled *Education and counselling for improving adherence to tuberculosis treatment*.

During this period the department also published the following *Evidence for Action* reports on Council's Web site as well as in our bi-monthly publications, *Global HealthLink* and *AIDSLink*:

- *Are peer-delivered health promotion interventions effective for young people?*
Issue 13 | April 2003
- *Does iron supplementation increase the risk of infectious diseases in children?*
Issue 14 | May 2003

Finally, the Department is currently peer reviewing chapter submissions for a technical report entitled *Reducing malaria's burden on global health: Evidence of effectiveness for practitioners and policymakers*. This report, written in collaboration with leading malaria researchers and public health professionals, highlights the value of research evidence in making informed decisions for managing malaria. It focuses on effective treatment and prevention strategies for malaria, as well as on the need for a comprehensive strategy that should include increased resource allocation and political commitment to achieve real progress. (SO – 1,2,3,4,5)

IV. CONCLUSION

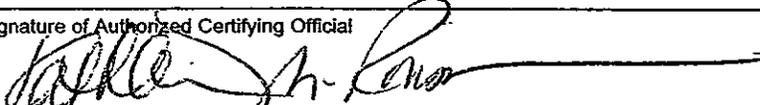
The second quarter of each year is always a very busy time for the Council, as we move forward with final planning for and implementation of our annual conference. The Conference generates a significant amount of activity in all our program areas, from our publications to our outreach on Capitol Hill and within the Administration.

We were pleased to have hosted another successful conference during this reporting period, and accompany it with a full complement of education and outreach activities, both in Washington, around the country, and – with the steady growth of the Candlelight

Memorial – around the world. As USAID moves forward with implementation of changes in its internal communications strategy, we look forward to continuing with planning and implementation of the series of ongoing sessions, events, and activities outlined in the Agreement.

FINANCIAL STATUS REPORT
(Short Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted USAID/M/FM/CMP		2. Federal Grant or Other Identifying Number Assigned By Federal Agency HRN-A-00-99-00018-00		OMB Approval No. 0348-0038	Page of 1 1 pages
3. Recipient Organization (Name and complete address, including ZIP code) GLOBAL HEALTH ORGANIZATION, 20 Palmer Court White River Junction, VT 05001					
4. Employer Identification Number 52-1048393		5. Recipient Account Number or Identifying Number 10302		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual					
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 8/3/1999			To: (Month, Day, Year) 7/31/2004		
9. Period Covered by this Report From: (Month, Day, Year) 4/1/2003			To: (Month, Day, Year) 6/30/2003		
10. Transactions:				I Previously Reported	II This Period
				III Cumulative	
a. Total outlays				5,151,447.15	393,215.63
b. Recipient share of outlays				336,379.03	69,081.07
c. Federal share of outlays				4,815,068.10	324,134.56
d. Total unliquidated obligations					0.00
e. Recipient share of unliquidated obligations					0.00
f. Federal share of unliquidated obligations					0.00
g. Total Federal share(Sum of lines c and f)					5,139,202.66
h. Total Federal funds authorized for this funding period					5,348,000.00
i. Unobligated balance of Federal funds(Line h minus line g)					208,797.34
11. Indirect Expense					
a. Type of Rate(Place "X" in appropriate box) <input checked="" type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
b. Rate 39%		c. Base 393,215.63		d. Total Amount 153,354.10	
				e. Federal Share 90,663.67	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.					
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.					
14. Typed or Printed Name and Title Kathleen M. Rorison, Director of Finance and IT				Telephone (Area code, number and extension) (802) 649-1340 x.2141	
Signature of Authorized Certifying Official 				Date Report Submitted August 14, 2003	

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