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ABSTRACT

This directory is intended to provide information on HIV/AIDS interventions funded by the World Bank that include a component for young children. Data were collected from 1986-2001 fiscal year reports from both freestanding HIV/AIDS projects and those projects with HIV/AIDS components. Countries are listed alphabetically and projects are organized chronologically by each country. The directory highlights examples of options to improve the lives of young children made vulnerable by HIV/AIDS. Each description includes the project's overall objectives, HIV/AIDS components, and strategies to address the needs of young children within the overall context of the project. (BT)

Helping the Children

World Bank
Directory of HIV/AIDS
Interventions in Africa

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October 2000

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HELPING THE CHILDREN

World Bank
Directory of HIV/AIDS Interventions in Africa
October, 2000

Early Child Development Team
Education Group
Human Development Network

Abbreviations and Acronyms

AIDS	Acquired Immune Deficiency Syndrome
CBO	Community Based Organization
CDSF	Community Development Support Fund
ECD	Early Child Development
EPI	Expanded Program of Immunization
FP	Family Planning
HIS	Health Information System
HIV	Human Immune-Deficiency Virus
IDP	Internally Displaced Persons
IEC	Information, Education and Communication
MCH	Maternal and Child Health
MOE	Ministry of Education
MOH	Ministry of Health
MOHSW	Ministry of Health and Social Welfare
MoPH	Ministry of Public Health
MSAS	Ministère de la Santé et des Affaires Sociales (Ministry of Health and Social Affairs)
MTCT	Mother-to-Child Transmission
NGO	Non-Governmental Organization
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infection
TB	Tuberculosis
UNAIDS	Joint United Nations Programme on HIV/AIDS
USAID	U.S. Agency for International Development

Preface

HIV/AIDS is becoming a major constraint to fighting poverty in most African countries. The epidemic is depriving millions of children of parents, families, teachers, homes and even the basic support needed to survive. Moreover, the World Bank is now playing a stronger role than ever in responding to HIV/AIDS by mainstreaming it in all aspects of its work in Africa. Increasingly, services are targeted to address needs of young children affected by HIV/AIDS.

Helping the Children, World Bank Directory of HIV/AIDS Interventions in Africa is intended to provide information on HIV/AIDS interventions funded by the World Bank that include a component for young children. Data was collected from 1986-2001 fiscal year reports for both freestanding HIV/AIDS projects and those projects with HIV/AIDS components. Countries are listed alphabetically and projects are organized chronologically by each country. The directory highlights examples of options to improve the lives of young children made vulnerable by HIV/AIDS. Each description includes the project's overall objectives, HIV/AIDS components, and strategies to address the needs of young children within the overall context of the project.

I would like to thank Amber Surrency, of the World Bank's Early Child Development Team, for coordinating the preparation of this directory, and the Bank's multisectoral AIDS Campaign Team for Africa (ACT*africa*) for collaboration and support. This work was funded by a Dutch Trust Fund.

For on-line information about children affected by HIV/AIDS, please see the World Bank's *ABC's of ECD* web site at <http://www.worldbank.org/children/aids.html>. The Bank's ECD Team would also be pleased to receive your comments and questions, which can be sent to ecd@worldbank.org or asurrency@worldbank.org.

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Early Child Development Team

Introduction

Helping the Children summarizes World Bank support for the fight against HIV/AIDS in Africa. In particular, it points out Bank support for the millions of children whose lives have been blighted by the epidemic. By identifying projects targeted to AIDS-affected children, we hope to assist those designing new projects and to make abundantly clear just how much needs to be done if we are to mitigate the disease's terrible toll on young children under six.

In Sub-Saharan Africa today, one million children are infected with HIV and an estimated 12 million have been orphaned by AIDS¹. Commonly, children not yet orphaned are caring for parents too ill to care for them. Stricken families lose the ability to pay for food, school, and health care; many lose their homes and become displaced. Too often when parents die, children lose all rights to family property and are at high risk for child labor, prostitution, illness, and death.

The AIDS epidemic is depriving millions of children of parents, families, teachers, homes, and even the basic support needed to survive. Such extreme losses early in life, which seriously affect children's overall growth and emotional well-being, must inevitably affect the health of society as a whole².

The increasing number of child-headed households in some African countries indicates the lack of capacity and support structure within communities to care for vulnerable children. As the traditional extended family systems cannot absorb all of the children in need, millions of children find themselves impoverished, ill, alone, and caring for others. Most African governments, NGOs, donors, religious organizations, and international agencies are taking an active role in addressing the problem, but as of today no one has devised a coherent strategy for alleviating AIDS's devastating impact on the lives of children.

HIV/AIDS is becoming a major constraint to fighting poverty in most African countries. The World Bank is now playing a stronger role than ever in responding to HIV/AIDS by mainstreaming it in all aspects of its work in Africa. The Bank country teams are preparing HIV/AIDS action plans that incorporate HIV/AIDS components into existing projects. There are various ways in which AIDS-afflicted communities can be assisted: ensuring that governments protect the rights of vulnerable left behind by the disease; increasing access to education; providing HIV/AIDS prevention education; strengthening health sectors; promoting counseling and support for people infected with HIV and their families; financing income generating projects; promoting behavioral change to reduce transmission rate; and targeting young children and providing them with quality health, nutrition, protective, psycho-social, and educational services.

¹ UNAIDS. 2000. Report on the global HIV/AIDS epidemic, June 2000.

² Hunter, S., Williamson, J. 2000. Children on the Brink. Health Technical Services Project of TVT Associates and The Pragma Corporation for the HIV/AIDS Division of USAID.

African children were already seriously at-risk, and now HIV/AIDS has impacted their homes and communities with insecurity that goes beyond simple interventions. Civil strife, poverty, and decimated infrastructure make the struggle for Africa's young children an uphill battle, and the AIDS crisis has resulted in a significant decrease in African children's chances for survival and healthy development.

The Early Child Development approach to childcare comprises a package of health, nutrition, and educational interventions³ to enhance the social and cognitive development of children of pre-primary school age. Evidence from both developed and developing countries shows that benefits of early interventions are even greater for the more disadvantaged children - children from poor families. This evidence must be considered, as increasingly, extended families are overburdened with caring for orphans and children otherwise affected by the disease.

Early child development programs offer opportunities to effectively improve the lives of young children made vulnerable by HIV/AIDS. Presently, of the 42 active World Bank projects in Africa containing HIV/AIDS components, ten contain provisions related to the health, education, or welfare of vulnerable children, yet only one of those - Eritrea's *Integrated Early Childhood Development Project* - is explicitly geared to improve the situation of children under six years of age. Alternative options to care for and monitor HIV/AIDS-affected children and provide for them a measure of stability in their lives will need to be identified. ECD programs can serve as links to existing health service infrastructure, and could also be used to support the hard-to-reach children by providing them basic health care services, education, and other social services. Policy makers and project managers must be aware of the significant potential and long-term benefits of early interventions. With this in mind, the question of how young children affected by HIV/AIDS fit into the current safety nets must be addressed. Early child development components should be incorporated into HIV/AIDS projects to ensure that the most vulnerable members of society - young children - are reached effectively.

³ Young, Mary Eming. 1996. *Early Child Development: Investing in the Future*. The World Bank.

World Bank-Sponsored Projects in Africa with HIV/AIDS components

(shaded areas indicate projects with components addressing children affected by HIV/AIDS)

October, 2000

Country <i>Board approval and closing dates*</i>	Project <i>Total loan amount US\$m*</i>	Project Objectives	HIV/AIDS Components
Angola 1993-1998	Health Project 19.9	<ul style="list-style-type: none"> ▪ Strengthen MOH's capabilities in essential areas of health policy, health sector management, public health program development ▪ Improve health care in selected regions through rehabilitation of training and health facilities, including improvement of health training and service delivery 	<ul style="list-style-type: none"> ▪ Assist MOH officials to review National AIDS Control Program ▪ Provide support for AIDS education
Benin 1995-2001	Health and Population Project 27.8	<ul style="list-style-type: none"> ▪ Support national sector policy and strategic objectives ▪ Assist in further development and expansion of family planning program ▪ Support implementation of three main reforms, aimed at improving quality, coverage and efficiency of basic health services included in national health sector strategy 	<ul style="list-style-type: none"> ▪ Support treatment and prevention of HIV/AIDS ▪ Strengthen coordination of the malaria and STD/AIDS programs ▪ Define a policy for STDs/AIDS
Benin 1989-1997	Health Services Development Project 18.6	<ul style="list-style-type: none"> ▪ Strengthen Government's capacity to respond to the essential health needs of the population, with a special emphasis on rural health facilities ▪ Improve mobilization and more efficient allocation of financial resources, improved utilization of human resources, and increased participation of local communities and beneficiaries 	<ul style="list-style-type: none"> ▪ Strengthen MOH's capacity to develop and manage the integrated MCH, FP, STD/AIDS and EPI programs
Botswana 1984-1993	Family Health Project 11.0	<ul style="list-style-type: none"> ▪ Strengthen family planning activities ▪ Reduce unit cost of health care ▪ Improve efficiency of pharmaceutical supply system included in national health sector strategy 	<ul style="list-style-type: none"> ▪ Establish Community Health Sciences Center, which includes Epidemiology and Disease Control Unit and AIDS program
Burkina Faso 1994-2000	Population and AIDS Control Project 26.3	<ul style="list-style-type: none"> ▪ Enhance onset of fertility decline by increasing prevalence of modern methods of contraception ▪ Slow spread of HIV infections by promoting behavioral change and treating STDs 	<ul style="list-style-type: none"> ▪ Establish a fund to finance HIV/AIDS projects ▪ Strengthen the institution in charge of implementing national AIDS program and the health system's capacity to deal with AIDS needs ▪ Promote safer health practices and behavioral change through IEC campaigns

* Pipeline projects based on fiscal year

* Actual project cost for HIV/AIDS components may be much less

<i>Country Board approval and closing dates*</i>	<i>Project Total loan amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Burkina Faso 1994-2000	<i>Health and Nutrition Project</i> 29.2	<ul style="list-style-type: none"> ▪ Improve significantly the quality, coverage and utilization of basic health services for the population ▪ Enhance the nutritional status of the population ▪ Develop a national capacity for achieving sustainable control of endemic parasitic diseases 	<ul style="list-style-type: none"> ▪ Provide support (building construction, training and specialist services) for epidemiological services
Burundi 2000-2003	<i>Social Action Project II</i> 12.0	<ul style="list-style-type: none"> ▪ Establish and support community social investments ▪ Establish community health centers ▪ Train communities to maintain flow of social services ▪ Improve services for poorest and most vulnerable populations ▪ Reintegrate refugees and IDPs 	<ul style="list-style-type: none"> ▪ Improve vulnerable young children's health, nutrition and social development by supporting an increase in basic health and education infrastructure and services ▪ Support child protection projects
Burundi 1987-1992	<i>Population and Health Project</i> 14.0	<ul style="list-style-type: none"> ▪ Improve Maternal and Child Health (MCH) status by strengthening nationwide MCH services, including family planning and nutrition activities ▪ Increase contraceptive prevalence to 14% by 1992 ▪ Assist in controlling AIDS epidemic ▪ Strengthen the institutional capability of the MOH ▪ Improve financing and efficiency of health services ▪ Improve demographic database for population policy development and socio-economic planning 	<ul style="list-style-type: none"> ▪ Support National AIDS Control Program (staff training, IEC material development, purchase of medical supplies and lab equipment, operating costs to carry out control activities) ▪ Promote prevention of AIDS as priority health program
Cameroon 1995-2001	<i>Health, Fertility, and Nutrition Project</i> 43.0	<ul style="list-style-type: none"> ▪ Provide institutional support for continued development of the national population policy and rapid implementation of a national FP/IEC strategy ▪ Promote complementary organizational and administrative reforms needed to strengthen the management of health sector resources and advance the decentralization of health services ▪ Expand coverage and improve the quality of primary health care coverage to underserved, low-income populations 	<ul style="list-style-type: none"> ▪ Promote multi-sectoral, grassroots HIV transmission prevention ▪ Provide materials and support educational seminars focusing on AIDS prevention

<i>Country Board approval and closing dates*</i>	<i>Project Total loan amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Cameroon 1990-1994	<i>Social Dimensions of Adjustment Project 21.5</i>	<ul style="list-style-type: none"> ▪ Improve basic services in population planning, health, and education, rendering them more cost-effective and restoring services directed at the poor ▪ Promote job creation and facilitate job placement ▪ Improve opportunities for women to participate in development ▪ Provide support to community-based micro-activities which generate income or provide basic social infrastructure to the poor ▪ Strengthen institutional capability for formulating and implementing social policies 	<ul style="list-style-type: none"> ▪ Strengthen Government's STD/AIDS program ▪ Carry out training workshops for four laboratories per province ▪ Furnish supplies for HIV rapid tests ▪ Undertake seroprevalence surveys among vulnerable groups ▪ Carry out applied research on knowledge, attitudes, and practices in the use of prophylactics and other preventive measures
Chad /Cameroon 2000-2005	<i>Petroleum Development and Pipeline Project 92.9</i>	<ul style="list-style-type: none"> ▪ Increase Chad Government expenditures on poverty alleviation activities ▪ Increase Cameroon fiscal revenues available for financing priority development expenditures, in the context of the Government's strategy for economic growth and poverty reduction 	<ul style="list-style-type: none"> ▪ Monitor STD and HIV status of the workforce ▪ Vigorous marketing of subsidized condoms ▪ Promote IEC activities ▪ Treat classic STDs ▪ Develop interventions to modify high-risk behavior ▪ Coordinate with existing government and NGO programs, particularly those directed toward commercial sex workers ▪ Prepare technical assistance projects to help governments monitor and assess health impact of the project
Chad 2000-2005	<i>Health Sector Support Project 41.5</i>	<ul style="list-style-type: none"> ▪ Improve human resources for better delivery of health services ▪ Strengthen the professional quality of health and management personnel ▪ Improve accessibility and quality of basic health services, especially in the areas of child and reproductive health in selected underserved areas ▪ Improve financing and management of the health system in the context of the national decentralization framework ▪ Strengthen the MoPH for the implementation of national strategies ▪ Collect data to evaluate and monitor progress in the sector 	<ul style="list-style-type: none"> ▪ Support institutional capacity building of MoPH for National AIDS Control Program ▪ Improve epidemiological surveillance system ▪ Enhance blood safety ▪ Improve STD treatment and control ▪ Reduce risks of clinical infection

<i>Country Board approval and closing dates*</i>	<i>Project Total loan amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Chad 1995-2001	<i>Population and AIDS Control Project 20.4</i>	<ul style="list-style-type: none"> ▫ Advance the onset of fertility decline by increasing use of modern methods of contraception ▫ Slow the spread of HIV infection by promoting behavioral change 	<ul style="list-style-type: none"> ▫ Support interventions targeted at 21,000 families and 45,000 orphans to alleviate the burden of HIV/AIDS ▫ Strengthen national capacity to contain spread of HIV/AIDS through institutional strengthening of MOH and supporting epidemiological, operational and socio-economic research ▫ Set-up social fund to promote participation of the private sector and NGOs in HIV/AIDS programs ▫ Social marketing of condoms
Chad 1994-2000	<i>Health and Safe Motherhood Project 29.4</i>	<ul style="list-style-type: none"> ▫ Increase access to quality basic health care, nutrition, and family planning services ▫ Improve regional and community health services ▫ Make low-cost drugs widely available 	<ul style="list-style-type: none"> ▫ Integrate AIDS management and prevention activities into all project components
Comoros 1993-2000	<i>Population and Human Resources Project 13.0</i>	<ul style="list-style-type: none"> ▫ Increase efficiency and effectiveness of basic health services through establishment of efficient regional health administrations and other supportive services ▫ Promote complementary community development initiatives through a Community Development Support Fund 	<ul style="list-style-type: none"> ▫ Provide comprehensive AIDS prevention interventions involving community participation, self-management and cost recovery
Congo, Democratic Republic of (former Zaire) 1988-1994	<i>National AIDS Control Program Assistance Project 8.1</i>	<ul style="list-style-type: none"> ▫ Prevent HIV transmission ▫ Improve database on AIDS in Zaire through epidemiological, sociological and economic research ▫ Reduce impact of AIDS on individuals, families and communities 	<ul style="list-style-type: none"> ▫ Control perinatal HIV transmission through STD detection and treatment ▫ Provide counseling and social support for AIDS-affected individuals, families and communities ▫ Target children (10-14) in preventive measures aimed at protecting most vulnerable ▫ Integrate AIDS control activities in Health and Social Programs (blood screening, sterilization of skin-piercing instruments, in-service training and supervision program, strengthen social activities) ▫ Support operational research and studies (HIV transmission, socio-cultural aspects of AIDS, cost-effectiveness of control measures, constraints of condom use, case management strategies, economic impact of the disease) ▫ Strengthen surveillance system

<i>Country Board approval and closing dates*</i>	<i>Project Total loan amount US\$m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Côte d'Ivoire 1996-2000	<i>Integrated Health Services Development Project</i> 40.0	<ul style="list-style-type: none"> ▫ Expand access to health services and improve utilization ▫ Make health services available on a sustainable basis ▫ Improve ability of the MSP to analyze health problems and to formulate, monitor and evaluate policies, strategies and programs 	<ul style="list-style-type: none"> ▫ Support training in program management and coordination for staff of National AIDS Control program in Abidjan and the regions ▫ Support training for health care providers and managers responsible for STD services in care and management of people infected and affected by HIV/AIDS ▫ Provide medical supplies and equipment for HIV/AIDS diagnostics and treatment ▫ Strengthen planned programs, address critical needs and strengthen partnerships with cooperating bodies in the public and NGO sectors
Djibouti 2000-2004	<i>International Road Corridor Rehabilitation Project</i> 15.0	<ul style="list-style-type: none"> ▫ Secure, over the medium-term, an acceptable level of service on the Djibouti-Galafi Road which constitutes Djibouti Port's transit corridor to Ethiopia ▫ Provide technical assistance to support institutional development 	<ul style="list-style-type: none"> ▫ Finance HIV/AIDS study to develop awareness and outreach programs
Equatorial Guinea 1992-1998	<i>Health Improvement Project</i> 5.5	<ul style="list-style-type: none"> ▫ Strengthen capacity of MOH to plan, coordinate and monitor health sector activities by establishing sector policy and strategy ▫ Help government improve quality of its field services ▫ Increase capacity for service delivery in critical areas of primary health care 	<ul style="list-style-type: none"> ▫ Help establish an STD control program, elaborating norms for STD diagnosis and treatment ▫ Supply STD laboratory equipment and materials ▫ Support staff travel and training costs for epidemiological surveillance
Eritrea 2001 pipeline	<i>Malaria, HIV/AIDS, STD and TB Project</i> 40.0	<ul style="list-style-type: none"> ▫ Enable the population to adopt health practices and use quality, effective health care, thereby reducing the transmission and prevalence of malaria and HIV/AIDS, STDs and TB 	<ul style="list-style-type: none"> ▫ Social marketing of condoms ▫ Support implementation of an integrated disease surveillance system
Eritrea 2000-2005	<i>Integrated Early Childhood Development Project</i> 42.0	<ul style="list-style-type: none"> ▫ Expand access to quality health, nutrition, protective, psycho-social, and educational services for young children ▫ Equip caregivers and the community with knowledge and services to support child growth and development ▫ Target 560,000 children under 6; 310,000 children of primary-school age, and 32,000 orphans 	<ul style="list-style-type: none"> ▫ Provide support for AIDS orphans, which include efforts to reintegrate them into communities ▫ Reunify orphans with nearest relatives ▫ Establish group homes for orphans ▫ Train social workers ▫ Promote behavioral change by developing a package of messages for parents/caregivers which includes information on HIV/AIDS

<i>Country Board approval and closing dates^o</i>	<i>Project Total loan amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Eritrea 1997-2003	National Health Development Program 18.3	<ul style="list-style-type: none"> o Strengthen health care services through training o Improve sectoral capacity for planning and management o Improve sustainability of health programs 	<ul style="list-style-type: none"> o Develop national blood bank service o Ensure safe blood banks in regional hospitals o Support communication for behavioral change by promoting healthy lifestyles through the education system o Pilot studies for prevention of MTCT o Promote community-managed response program
Ethiopia 2000-2004	Multi-Sectoral HIV/AIDS Project 59.7	<ul style="list-style-type: none"> o Reduce spread of HIV/AIDS o Alleviate impact of the epidemic o Increase access to treatment, care and support for people infected and affected by HIV/AIDS 	<ul style="list-style-type: none"> o Strengthen orphan care activities o Create and enforce a supportive legal framework for people living with AIDS and their families o Support capacity building by enhancing planning, implementation and monitoring capacity of public, private, NGO and community-based organizations o Develop prevention, care and treatment activities through a multi-sectoral approach o Establish new funding channels by creating an emergency HIV/AIDS Fund to provide grants for HIV/AIDS prevention and mitigation measures o Establish an effective Project Coordination Unit
Ethiopia 1998-2003	Health Sector Development Program 100.0	<ul style="list-style-type: none"> o Improve institutions and procedures throughout the health system o Provide quality primary health care services at community-level facilities 	<ul style="list-style-type: none"> o Strengthen HIS to enhance behavioral changes through IEC
Gambia 2001 pipeline	HIV/AIDS Rapid Response Project 14.7	<ul style="list-style-type: none"> o Work with communities, various relevant sectors, and institutions to address both those infected with HIV, and those affected by AIDS in their households and communities 	<ul style="list-style-type: none"> o Target and assist people living with AIDS o Assist orphans and child-headed households
Gambia 1998-2003	Participatory Health, Population, and Nutrition Project 18.0	<ul style="list-style-type: none"> o Improve maternal and child health, family planning, and nutrition o Strengthen strategies of safe motherhood, child survival, and improved reproductive health 	<ul style="list-style-type: none"> o Finance extensive IEC to increase knowledge about STIs and HIV, change attitudes, promote condom use and encourage those with STI symptoms to seek care and inform partners about necessity to equally seek treatment o Expand pre-natal STI screening for women

<i>Country Board approval and closing dates*</i>	<i>Project Total loan amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Gambia 1987-1995	<i>National Health Development Project</i> 5.6	<ul style="list-style-type: none"> ▪ Strengthen and expand The Gambia's health program ▪ Decentralize health sector management ▪ Improve health sector planning ▪ Introduce a more effective cost recovery system 	<ul style="list-style-type: none"> ▪ Expand communicable disease program nationwide ▪ Finance STI surveys
Ghana 1997-2002	<i>Health Sector Support Program</i> 35.0	<ul style="list-style-type: none"> ▪ Support a sector-wide reform program by increasing access, quality, and efficiency of health services ▪ Foster linkages with other partners in health development 	<ul style="list-style-type: none"> ▪ Prepare HIV/AIDS Fund ▪ Establish Education and HIV/AIDS Task Force
Guinea 1998-2003	<i>Population and Reproductive Health Project</i> 11.3	<ul style="list-style-type: none"> ▪ Improve awareness of population issues and promote adequate reproductive health practices ▪ Improve quality and utilization of reproductive and child health programs ▪ Strengthen institutional capacity to manage and coordinate population and reproductive health programs 	<ul style="list-style-type: none"> ▪ Emphasize prevention of STI and HIV infection among youth cohorts and high risk groups ▪ Finance regional STI/HIV screening and counseling services
Guinea 1994-2001	<i>Health and Nutrition Project</i> 24.6	<ul style="list-style-type: none"> ▪ Expand coverage and improve quality of low cost health services ▪ Improve sector organization, management, and resource mobilization in order to build sustainable programs 	<ul style="list-style-type: none"> ▪ Finance local training and short-term specialist services, equipment, drugs, materials, and operating means to control AIDS
Guinea 1987-1995	<i>Health Services Development Project</i> 19.7	<ul style="list-style-type: none"> ▪ Develop planning and management capabilities within the MSAS and introduce policy and administrative reforms to improve quality and efficiency of basic health services ▪ Improve basic health care in the region of Middle Guinea ▪ Strengthen financial and operational management in the region ▪ Develop and evaluate cost recovery activities 	<ul style="list-style-type: none"> ▪ Target AIDS prevention messages to high-risk groups through media networks
Guinea-Bissau 1997-2003	<i>National Health Development Program</i> 11.7	<ul style="list-style-type: none"> ▪ Improve health and well-being of women and children ▪ Strengthen national health system overall 	<ul style="list-style-type: none"> ▪ Develop and implement a strategy to influence attitudes and practices through operational research, pilot projects, and interpersonal and mass media communication
Guinea-Bissau 1993-1998	<i>Social Sector Project</i> 8.8	<ul style="list-style-type: none"> ▪ Assist Government in improving delivery capacity and quality of primary health care for wider base of the population, with special focus on most vulnerable groups ▪ Finance high priority investments through coordinating efforts with donor agencies ▪ Improve health and social indicators 	<ul style="list-style-type: none"> ▪ HIV/AIDS counseling ▪ Increase awareness through education and integration of primary health care and community ▪ Improve knowledge of epidemiological status

<i>Country Board approval and closing dates^a</i>	<i>Project Total loan amount US\$ m^a</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Guinea-Bissau 1989-1993	<i>Social and Infrastructure Relief Project 5.0</i>	<ul style="list-style-type: none"> ▫ Increase income and employment opportunities among low income and unemployed urban and rural workers through support of activities having high economic and social rates of return 	<ul style="list-style-type: none"> ▫ Support AIDS program through provision of drugs for AIDS-related diseases, provision of logistical support, equipment, and supplies to National Hospital Blood Donor Bank
Kenya 2001 pipeline	<i>District AIDS and Reproductive Health Project 50.0</i>	<ul style="list-style-type: none"> ▫ Slow increase in HIV prevalence rates ▫ Improve mother and child health through more integrated delivery of HIV/AIDS, child survival and reproductive health services ▫ Create enabling environment for decentralized managed delivery of HIV/AIDS, child survival and reproductive health-related services 	<ul style="list-style-type: none"> ▫ Increase advocacy and awareness through behavior change interventions, condom use, blood safety, school education programs, voluntary counseling and testing ▫ Mitigate impact of HIV/AIDS by supporting infected and affected persons ▫ Procure condoms, drugs for opportunistic infections and HIV testing materials
Kenya 2000-2005	<i>Kenya AIDS Disaster Response Project 50.0</i>	<ul style="list-style-type: none"> ▫ Reduce the spread of HIV/AIDS ▫ Mitigate the socio-economic impact of HIV/AIDS ▫ Increase access to care and support for people infected or affected by the HIV/AIDS epidemic in Kenya 	<ul style="list-style-type: none"> ▫ Build capacity and develop institutions such as National AIDS Control Council and related coordinating entities and activities ▫ Provide support to build capacity for managing effective response to the epidemic ▫ Allocate funds to the financing of work-plans of implementing agencies
Kenya 1995-2001	<i>Sexually Transmitted Infections Project 40.0</i>	<ul style="list-style-type: none"> ▫ Strengthen institutional capacity to manage HIV/AIDS ▫ Promote preventive measures to reduce risks of STI transmission ▫ Enhance both health sector and community provision of physical and psychological care ▫ Develop strategies to mitigate socioeconomic consequences of STIs 	<ul style="list-style-type: none"> ▫ Provide assistance to infants of pregnant women with an STI, dependents of sexually active adults, and families of persons with HIV/AIDS ▫ Strengthen districts' capacity to plan, coordinate, implement, monitor and evaluate integrated HIV/AIDS related activities ▫ Support district-based NGO and CBO home-based health care and counseling for people with HIV/AIDS and others who suffer related costs and losses
Kenya 1990-1999	<i>Fourth Population Project 35.0</i>	<ul style="list-style-type: none"> ▫ Increase availability, accessibility and quality of family planning ▫ Strengthen demand for family planning services ▫ Strengthen capacity of National Council for Population and Development 	<ul style="list-style-type: none"> ▫ Support research for AIDS care

<i>Country Board approval and closing dates*</i>	<i>Project Total loan amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Kenya 1988-1996	<i>Third Population Project 12.2</i>	<ul style="list-style-type: none"> ▫ Strengthen capacity of the National Council for Population and Development to plan, program, finance, coordinate and monitor population program activities ▫ Create acceptance of and demand for family planning services ▫ Increase availability, accessibility and quality of family planning services provided by the government and NGOs 	<ul style="list-style-type: none"> ▫ Finance STI/HIV drugs ▫ Support activities related to the treatment, prevention and research of STI/HIV
Lesotho 2000-2009	<i>Health Sector Reform Project 6.5</i>	<ul style="list-style-type: none"> ▫ Achieve sustainable increase in access to quality health care services ▫ Establish institutional capacity required to enable MOHSW to develop, implement and monitor a comprehensive Sector Reform Program ▫ Expand public sector's capacity to respond to AIDS 	<ul style="list-style-type: none"> ▫ Reduce burden of AIDS on households by addressing health and poverty consequences
Lesotho 1989-1998	<i>Second Population, Health, and Nutrition Project 12.1</i>	<ul style="list-style-type: none"> ▫ Slow pace of population growth ▫ Continue to strengthen health care system in both rural and urban areas ▫ Reduce spread of TB and STIs/AIDS ▫ Lower rate of malnutrition in children and mothers ▫ Strengthen support systems for sector planning, financial, personnel, and HIS 	<ul style="list-style-type: none"> ▫ Deliver treatment and counseling services to STD patients ▫ Enhance MOH laboratories by providing STD/AIDS diagnostic equipment
Madagascar 2000-2006	<i>Second Health Sector Support Project 40.0</i>	<ul style="list-style-type: none"> ▫ Improve primary health care, focusing on rural areas ▫ Support infectious disease, reproductive health and nutrition programs ▫ Strengthen sector management and administrative capacity within the MOH 	<ul style="list-style-type: none"> ▫ Stress safe blood transfusions and sero-surveillance ▫ Build capacity ▫ Support prevention campaigns and HIV screening
Madagascar 1991-1999	<i>National Health Sector Improvement Project 31.0</i>	<ul style="list-style-type: none"> ▫ Achieve significant decreases in morbidity and mortality rates by strengthening priority disease control programs and epidemiological surveillance ▫ Increase availability and affordability of essential drugs ▫ Improve quality of district health services and promote community-managed cost recovery ▫ Strengthen management and planning capacity of MOH 	<ul style="list-style-type: none"> ▫ Develop a comprehensive communicable disease program to control and monitor STDs/AIDS
Madagascar 1988-1996	<i>Economic Management and Social Action Project 22.0</i>	<ul style="list-style-type: none"> ▫ Initiate a program of emergency actions for disadvantaged and vulnerable groups ▫ Reinforce capacity of the Government to monitor social conditions and design social policies and programs ▫ Facilitate implementation of the adjustment program by strengthening key institutions 	<ul style="list-style-type: none"> ▫ Strengthen operational research, surveillance, evaluation and monitoring ▫ Provide food and protection for vulnerable children

<i>Country</i> <i>Board approval</i> <i>and closing dates*</i>	<i>Project</i> <i>Total loan</i> <i>amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Malawi 1998-2003	Secondary Education Project 48.2	<ul style="list-style-type: none"> ▫ Expand access to secondary education ▫ Improve educational quality ▫ Improve efficiency and effectiveness of secondary education system ▫ Stem spread of HIV/AIDS among teachers and students ▫ Strengthen project implementation capacity ▫ Support MOE's policy to encourage private secondary schools 	<ul style="list-style-type: none"> ▫ Reproduce and adapt HIV/AIDS instructional materials ▫ Finance training program with HIV/AIDS component for school-level managers
Malawi 1998-2003	Second Social Action Fund Project 66.0	<ul style="list-style-type: none"> ▫ Address need for socio-economic infrastructure development ▫ Support safety net programs through creation of temporary employment for the very poor ▫ Finance initiatives to assist most vulnerable groups 	<ul style="list-style-type: none"> ▫ Finance subprojects to assist orphans, street children, those affected by AIDS ▫ Improve communities' capacity to deal with HIV/AIDS by financing projects to rehabilitate facilities and providing services that will benefit those affected by HIV/AIDS
Malawi 1998-2002	Population and Family Planning Project 5.0	<ul style="list-style-type: none"> ▫ Test feasibility of a comprehensive and district-wide community-based distribution approach to Population/FP services ▫ Increase the contraceptive prevalence rate of modern methods through increased knowledge of and improved attitude towards family planning; and increased access to such services among men, women, and adolescents living in rural and under-served areas of Malawi 	<ul style="list-style-type: none"> ▫ Disseminate materials in local language on dangers of STDs/AIDS
Malawi 1991-2000	Population, Health and Nutrition Sector Credit Project 55.5	<ul style="list-style-type: none"> ▫ Strengthen basic programs – focussing on primary health care, maternal and child health, child spacing, malaria control, AIDS, nutrition, and women in development ▫ Strengthen support services, focussing on staffing issues and pharmaceuticals ▫ Improve efficiency of health programs, focussing on management strengthening, hospital decongestion, cost sharing and budget reform ▫ Support Government's Social Dimensions of Adjustment Initiative 	<ul style="list-style-type: none"> ▫ Accelerate efforts in education and prevention campaigns ▫ Acquire blood screening equipment
Mali 1998-2004	Health Sector Development Program 40.0	<ul style="list-style-type: none"> ▫ Expand access to sustainable quality health care, including reproductive health and nutrition services ▫ Strengthen institutional capacity for health system management ▫ Develop sustainable financing schemes for health sector development with safety nets for the poor 	<ul style="list-style-type: none"> ▫ Reorganize blood banks to ensure blood safety and screening of HIV among blood donors ▫ Train nurses and community health workers to inform and counsel clients and beneficiaries on prevention of HIV/AIDS

Country <i>Board approval and closing dates*</i>	Project <i>Total loan amount US\$ m*</i>	Project Objectives	HIV/AIDS Components
Mali 1991-1998	<i>Second Health, Population and Rural Water Supply Project</i> 26.6	<ul style="list-style-type: none"> ▪ Support the Government's efforts to improve the health status and well-being of the population, notably women and children ▪ Implement emerging population policy ▪ Broaden access of deprived rural communities to health services and safe water 	<ul style="list-style-type: none"> ▪ Strengthen research and monitor evolution of HIV/AIDS
Mauritania 1998-2003	<i>Health Sector Investment Project</i> 24.0	<ul style="list-style-type: none"> ▪ Improve quality and coverage of health services ▪ Improve health sector's financing and performance ▪ Mitigate effects of major public health problems ▪ Promote social action and create an environment conducive to good health 	<ul style="list-style-type: none"> ▪ Strengthen HIV/AIDS IEC ▪ Support the national laboratory
Mauritania 1991-1998	<i>Health and Population Project</i> 15.7	<ul style="list-style-type: none"> ▪ Improve quality and accessibility of basic health and family planning services ▪ Assist Government in articulating a national population policy and defining a corresponding program of actions ▪ Enhance women's ability to participate in and contribute to the country's social and economic development 	<ul style="list-style-type: none"> ▪ Strengthen essential drugs program ▪ Develop training programs for regional health personnel
Morocco 1990-1998	<i>Health Sector Investment Project</i> 104.0	<ul style="list-style-type: none"> ▪ Assist Government in financing the first phase of a long-term effort to re-establish sustainable public health programs nationwide ▪ Strengthen first-level referral services and the administration and management of health services 	<ul style="list-style-type: none"> ▪ Strengthen national AIDS program ▪ Strengthen diagnostic and treatment strategies for AIDS
Mozambique 1996-2001	<i>Health Sector Recovery Program</i> 98.7	<ul style="list-style-type: none"> ▪ Resume and improve the quality of health services ▪ Improve sector institutions, support services and sub-national health management systems ▪ Develop human resource capacity 	<ul style="list-style-type: none"> ▪ Support studies and preliminary policy implementation for AIDS ▪ Set-up National AIDS Council
Niger 1996-2002	<i>Health Sector Development Program</i> 40.0	<ul style="list-style-type: none"> ▪ Improve quality and coverage of basic health services ▪ Improve availability and affordability of essential generic drugs ▪ Build capacity and build partnerships in support of health sector reform 	<ul style="list-style-type: none"> ▪ Support National STD/AIDS program ▪ Purchase equipment, materials, drugs, essential supplies ▪ Provide technical assistance in program design and management, training, service delivery, patient counseling, IEC, epidemiological surveillance, monitoring and evaluation

<i>Country</i> <i>Board approval</i> <i>and closing dates*</i>	<i>Project</i> <i>Total loan</i> <i>amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Niger 1992-1997	<i>Population</i> <i>Project</i> 17.6	<ul style="list-style-type: none"> ▫ Implement an effective national population program ▫ Strengthen delivery of maternal health and family planning services ▫ Promote family welfare and women's status ▫ Reinforce capacity for population policy analysis, research, monitoring and coordination 	<ul style="list-style-type: none"> ▫ Strengthen MCH/FP programs by increasing AIDS information and education
Niger 1986-1995	<i>Health Project</i> 27.8	<ul style="list-style-type: none"> ▫ Assist Government in introducing structural reform in health sector ▫ Assist Government in defining policies relating to population, family planning and nutrition ▫ Improve efficiency of priority health programs 	<ul style="list-style-type: none"> ▫ Support STD/AIDS program
Nigeria 2000-2004	<i>Second Primary</i> <i>Education</i> <i>Project</i> 55.0	<ul style="list-style-type: none"> ▫ Strengthen human resource capacity in primary schools ▫ Create a primary school environment conducive to teaching and learning ▫ Improve quality and availability of instructional materials and distance education ▫ Enhance information base to facilitate decision-making under Nigeria's Universal Basic Education Program ▫ Raise national awareness about AIDS 	<ul style="list-style-type: none"> ▫ Enhance AIDS awareness from primary school level ▫ Develop HIV/AIDS education, information and communication program
Nigeria 1991-1999	<i>Health System</i> <i>Fund</i> 70.0	<ul style="list-style-type: none"> ▫ Improve quality, coverage and efficiency of State and local government authorities' services for health and family planning ▫ Promote development of population programs ▫ Strengthen the institutional and financial capacity of States and local government authorities to plan, implement, monitor and evaluate their health, nutrition and family planning programs 	<ul style="list-style-type: none"> ▫ Establish disease surveillance and diagnostic service ▫ Support IEC activities
Nigeria 1991-1998	<i>National</i> <i>Population</i> <i>Project</i> 78.5	<ul style="list-style-type: none"> ▫ Strengthen institutional framework ▫ Expand capacity for undertaking large-scale, intersectoral, national population-related program 	<ul style="list-style-type: none"> ▫ Support study on HIV/AIDS knowledge and behavior of adolescents
Nigeria 1989-1997	<i>Imo Health and</i> <i>Population</i> <i>Project</i> 27.6	<ul style="list-style-type: none"> ▫ Assist Government in its effort to improve health and nutritional status of Imo State population ▫ Improve quality, effectiveness and utilization of State and local services for health and family planning 	<ul style="list-style-type: none"> ▫ Establish disease surveillance service ▫ Support blood-screening laboratory

<i>Country Board approval and closing dates*</i>	<i>Project Total loan amount US\$ m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Rwanda 2000-2006	<i>Human Resources Development Project 35.0</i>	<ul style="list-style-type: none"> ▫ Increase access to primary and secondary education ▫ Improve quality of basic education ▫ Promote healthy sexual practices ▫ Build capacity of education sector ▫ Assess education areas in need of investment 	<ul style="list-style-type: none"> ▫ Educate children, youth and teachers (both in and out of school) about HIV/AIDS ▫ Conduct sensitization activities ▫ Develop AIDS curriculum and teacher training ▫ Produce and disseminate AIDS-related materials ▫ Strengthen AIDS program management ▫ Assist students and teachers through AIDS counseling, caring and testing
Rwanda 1993-1997	<i>Food Security and Social Action Project 19.1</i>	<ul style="list-style-type: none"> ▫ Improve food security and social welfare of the poorest population groups ▫ Induce policy changes with regard to the use of the most important asset of the poor - their labor force ▫ Improve poverty assessments ▫ Monitor implementation of national social policy 	<ul style="list-style-type: none"> ▫ Target vulnerable groups (orphans, AIDS afflicted households, malnourished mothers and children) ▫ Use cash generated from AIDS and orphans program to finance school tuition for children of AIDS-afflicted families
Rwanda 1991-2000	<i>Health and Population Project 19.6</i>	<ul style="list-style-type: none"> ▫ Support implementation of national population policy ▫ Assist MOH to implement National Health Policy ▫ Assist in formulating and implementing AIDS control policy ▫ Rehabilitate health system 	<ul style="list-style-type: none"> ▫ Support AIDS control activities
Senegal 1998-2002	<i>Integrated Health Sector Development Program 50.0</i>	<ul style="list-style-type: none"> ▫ Improve management and financial viability of public health system ▫ Improve access to quality health care for majority of underserved and vulnerable groups ▫ Contribute to fertility decline and reduce high population growth 	<ul style="list-style-type: none"> ▫ Support integrated package of primary health care which includes STD/AIDS prevention
Senegal 1991-1997	<i>Human Resources Development Project 35.0</i>	<ul style="list-style-type: none"> ▫ Control fertility and reduce rate of population growth ▫ Restructure health sector to enable it to provide basic health services of improved quality and wider accessibility 	<ul style="list-style-type: none"> ▫ Support National AIDS Control program through condom promotion, operational research, surveillance, evaluation and monitoring
Sierra Leone 1996-2001	<i>Integrated Health Sector Investment Project 20.0</i>	<ul style="list-style-type: none"> ▫ Increase access to health services ▫ Improve quality, management and delivery of health services through a decentralized system 	<ul style="list-style-type: none"> ▫ Raise awareness of HIV ▫ Incorporate AIDS and other STDs to priority preventive services ▫ Laboratory staff training and provision of safe blood

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Tanzania 2000-2004	<i>Health Sector Development Program</i> 22.0	<ul style="list-style-type: none"> ▫ Improve access, utilization, quality, and financing of health services through increased efficiency and effectiveness in use and allocation of resources ▫ Maximize impacts on health outcomes, especially among the poor, women and children 	<ul style="list-style-type: none"> ▫ Target people affected by AIDS ▫ Establish multi-sectoral HIV/AIDS fund to finance high impact activities to be implemented by government and NGOs to mitigate impact of HIV/AIDS
Tanzania 1990-1999	<i>Health and Nutrition Project</i> 47.6	<ul style="list-style-type: none"> ▫ Strengthen institutional capacity for planning, policy formulation and implementation ▫ Strengthen manpower development and training ▫ Finance pharmaceuticals and medical supplies ▫ Support micro-nutrient deficiency programs ▫ Support implementation of national population policy ▫ Reform and rehabilitate rural and urban primary health care services 	<ul style="list-style-type: none"> ▫ Support STD treatment
Togo 1991-1996	<i>Health and Population Sector Adjustment Program</i> 14.2	<ul style="list-style-type: none"> ▫ Support implementation of a program of reforms in health and population sector 	<ul style="list-style-type: none"> ▫ Intensify STD/AIDS prevention education
Uganda 2001 pipeline	<i>HIV/AIDS Control Project</i> 50.0	<ul style="list-style-type: none"> ▫ Support the goals of the National Strategic Framework for HIV/AIDS activities ▫ Scale up existing HIV/AIDS Control Program 	<ul style="list-style-type: none"> ▫ Improve access to prevention, care and treatment programs ▫ Improve quality and efficiency of care provided to patients ▫ Improve Country's capacity to cope with HIV/AIDS pandemic
Uganda 1996-2000	<i>District Health Services Pilot and Demonstration Project</i> 45.0	<ul style="list-style-type: none"> ▫ Pilot-test and demonstrate feasibility of delivering an essential health services package to district populations ▫ Strengthen management and planning capacity at district levels ▫ Restructure MOH to build capacity to provide health policy leadership and support Government's decentralization policy 	<ul style="list-style-type: none"> ▫ Increase availability of quality preventive essential health services in HIV/AIDS control and prevention
Uganda 1990-1995	<i>Program for Alleviation of Poverty and Social Costs of Adjustment Project</i> 28.0	<ul style="list-style-type: none"> ▫ Address urgent social concerns of Uganda's most vulnerable groups through collaborative and integrated development interventions between communities, NGOs and the Government ▫ Strengthen the institutional capacity of the Government to identify, formulate and maintain interventions for assisting vulnerable groups 	<ul style="list-style-type: none"> ▫ Support Orphan Program (AIDS and war orphans) ▫ Assist foster families with agricultural inputs ▫ Assist orphans with tuition support ▫ Establish and equip rural vocational training centers

<i>Country Board approval and closing dates^o</i>	<i>Project Total loan amount US\$ m^a</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Uganda 1994-2000	<i>Sexually Transmitted Infection Project 50.0</i>	<ul style="list-style-type: none"> ▫ Prevent spread of STDs and HIV infection ▫ Mitigate personal impact of AIDS ▫ Support institutional development 	<ul style="list-style-type: none"> ▫ Identify and provide social and health support to families (including child-headed households) who care for AIDS-infected relatives ▫ Promote safer sexual behavior by providing condoms, promoting STD care-seeking behavior, and providing effective STD care ▫ Train staff and provide drugs for opportunistic infections ▫ Provide protective supplies for health facilities ▫ Strengthen districts' capacity to plan, coordinate, implement, monitor and evaluate integrated AIDS activities ▫ Strengthen national capacity to provide adequate technical support on AIDS-related issues
Uganda 1988-1996	<i>First Health Project 42.5</i>	<ul style="list-style-type: none"> ▫ Rehabilitate selected hospitals and health centers ▫ Promote health status by strengthening preventive health programs ▫ Ensure long-term sustainability and viability of health care delivery systems 	<ul style="list-style-type: none"> ▫ Develop AIDS counseling and patient management programs ▫ Rehabilitate blood transfusion center
Zambia 2000-2004	<i>Mine Township Services Project 37.7</i>	<ul style="list-style-type: none"> ▫ Facilitate completion of privatization of Zambia Consolidated Copper Mines by supporting provision of efficient and reliable water supply services, wastewater services, and solid waste management in five mine townships during a transitional period following privatization 	<ul style="list-style-type: none"> ▫ Finance assessment, data gathering, and development of HIV/AIDS prevention and mitigation strategy ▫ Establish links between Government's HIV/AIDS program and the private sector to create a model for developing partnerships for HIV/AIDS prevention and mitigation
Zambia 1994-1998	<i>Health Sector Support Project 56.0</i>	<ul style="list-style-type: none"> ▫ Improve access to and the quality of a national package of essential health services in a decentralized health care delivery system 	<ul style="list-style-type: none"> ▫ Address HIV/AIDS priority area in reform process
Zambia 1991-1998	<i>Social Recovery Project 20.0</i>	<ul style="list-style-type: none"> ▫ Fund community initiatives to help mitigate the negative effects on the poor of the economic crisis 	<ul style="list-style-type: none"> ▫ Provide financing for school infrastructure, textbooks, and bursaries, in large part to serve AIDS orphans ▫ Fund student survey on knowledge and attitudes about HIV/AIDS

<i>Country Board approval and closing dates*</i>	<i>Project Total loan amount US\$m*</i>	<i>Project Objectives</i>	<i>HIV/AIDS Components</i>
Zimbabwe 2002 pipeline	<i>National Health Strategy Support Project 50.0</i>	<ul style="list-style-type: none"> ▪ Support national health strategy to improve financing and delivery of health services through a sector-wide approach 	<ul style="list-style-type: none"> ▪ Strengthen capacity through creation and support of a National AIDS Council and AIDS Secretariat
Zimbabwe 1993-1998	<i>STI Prevention and Care Project 64.5</i>	<ul style="list-style-type: none"> ▪ Ensure adequate supply of condoms for disease prevention ▪ Ensure implementation of National STD Prevention and Control Program ▪ Enhance Government capacity to identify and treat STDs that facilitate transmission of HIV ▪ Treat selected HIV-related infections, especially TB ▪ Facilitate HIV testing and counseling of persons seeking to know their HIV status ▪ Ensure continued safety of blood supply ▪ Protect health care workers ▪ Facilitate home-based care for AIDS patients 	<ul style="list-style-type: none"> ▪ Finance supply of condoms ▪ Strengthen STD Program ▪ Provide drugs to treat TB and other AIDS-opportunistic infections ▪ Support tests and supplies for HIV diagnosis and blood screening ▪ Provide protective supplies for health care givers ▪ Strengthen data collection, reporting and epidemiological surveillance ▪ Establish and strengthen diagnostic capabilities and ensure safety of blood transfusions
Zimbabwe 1991-1998	<i>Second Family Health Project 25.0</i>	<ul style="list-style-type: none"> ▪ Promote family planning ▪ Improve maternal health and child nutrition programs ▪ Build and equip rural health facilities ▪ Boost output and quality of health workers 	<ul style="list-style-type: none"> ▪ Carry out HIV/AIDS IEC program

**Anticipated Freestanding HIV/AIDS Projects
and Projects with HIV/AIDS Components
in Africa**
as of October, 2000

Country	Project Name	Proposed Loan Amount US\$ m
Benin	Labor Force Development – Vocational Training Project	5.0
Benin	HIV/AIDS Multi-Sectoral Project	20.0
Burkina Faso	Health Sector Investment Project	30.0
Cameroon	HIV/AIDS Multi-Sectoral Project	50.0
Chad	Population / AIDS Project	15.0
Chad	National Transport Support Project	50.0
Côte d'Ivoire	HIV/AIDS Disaster Response Project	40.0
Ethiopia	Population/HIV/AIDS Project	30.0
Malawi	Health and Nutrition, HIV/AIDS Project	30.0
Malawi	AIDS Project	4.0
Niger	HIV/AIDS Disaster Response Project	15.0
Nigeria	HIV/AIDS Program Development Project	60.0
Rwanda	AIDS / Health / Population Project	30.0
South Africa	Hospital Revitalization and Quality of Care Project	50.0
Tanzania	HIV/AIDS Project	20.0
Togo	HIV/AIDS Disaster Response Project	15.0
Zambia	Zambia National Response to AIDS Project	30.0
Zimbabwe	HIV/AIDS/Health Project	100.0



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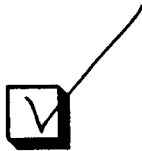


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