

USAID Health Program



A community health worker counsels a woman on available health services.

Photo: USAID/Mali

Since 2003, USAID in Mali has supported increased access and improved quality of an integrated package of high impact health services to decrease child and maternal morbidity and mortality. An important element of this support includes the promotion of positive health behaviors in households to improve child survival and maternal health outcomes.

Key communications, social marketing, logistics strengthening, and campaign activities are implemented nationwide. Integrated packages of health services are realized through community and facility-based approaches in selected districts.

We also support HIV/AIDS prevention activities with the most-at-risk populations.

U.S. Government investments in Mali's health sector sustain improvements by increasing the use of high impact health services and healthy behaviors. This is achieved through programming in three component areas: 1) delivery of an integrated package of high-impact health services at the community level, 2) social and behavior change communication, and 3) health systems strengthening. These three essential areas have been shown through research and best practice, both internationally and in Mali, to be the most effective and efficient in delivering health interventions and in reducing the most common causes of preventable illness and death in Mali. Based on the epidemiology and conditions in Mali, interventions fall into these technical areas: maternal, neonatal, and child health; family planning and reproductive health; malaria; and infectious diseases.

Many USAID health activities in Mali concluded at the end of FY 2013. However, several field support activities are still in progress including three integrated nutrition projects and a recently awarded fistula activity. Efforts concentrate on development of two major bilateral activities for FY 2014 to be implemented in four regions and the District of Bamako. One is the Mali High Impact Health Services II Activity and the second is a complementary Social and Behavior Change Communications/Social Marketing Activity.

The Mali health program represents a scale-up and intensification of proven approaches to achieve greater impact on national health indicators. It also includes several ways that new interventions can achieve even greater impact. These include: a reduced number of partners and better programmatic integration to enhance coordination and efficiencies; consolidated geographic focus and implementation in every district in target regions; inclusion of the private sector providers at the community level; a greater emphasis on local-level governance, transparency, accountability; and a greater emphasis on health financing.



<i>Mali Health Indicators</i>	DHS 2001	DHS 2006	DHS 2012-13
Infant Mortality Rate per 1000 live births	113	96	58
Child Mortality Rate per 1000 live births	229	191	98
Maternal Mortality Rate per 100,000 live births	582	464	368
DPT3 Vaccination coverage (%)	40	68	63
Acute Malnutrition (Wasting) for children under five (%)	10.6	15	12.7
Chronic Malnutrition (Stunting) for children under five (%)	38.2	38	38.3
Modern contraceptive prevalence rate (women 15-49) (%)	5.7	6.9	9.9
HIV Prevalence rate (ages 15-49) (%)	1.7	1.3	1.2
Children under five sleeping under Insecticide Treated Mosquito Nets (ITNs) (%)		36	70

USAID Mali’s health program is aligned with Government Priorities and Development Partners:

- The GOM’s Strategy Framework for Growth and Poverty Reduction (CSCR) 2012-2017 includes maternal and child health, malaria, social development, nutrition, HIV/AIDS, and WASH with a long-term vision of improving the quality of life of Malians.
- All health sector activities in Mali by all implementers are governed by the MOH’s 10-year health strategy and 5-year implementation plan, called the Health and Social Development Plan (PDDSS) and Health Sector Development Program (PRODESS), respectively.

The latest Government of Mali ten-year plan for the health sector was validated in January 2014 and the more detailed five-year plan (2014-2018), PRODESS III, was technically completed and validated in June 2014– both were developed with USAID and other donors’ assistance. We worked with government partners to create these important documents enabling us to provide input into what activities are prioritized and implemented, and to identify opportunities for greater collaboration.

- Programs coordinate with a wealth of other development partners. Not limited to: 1.) Global Fund to Fight AIDS, TB, and Malaria (GFATM) (\$60 million/year) on HIV/AIDS and malaria, of which the USG contributes one third of the GFATM’s resources; and 2.) The United Nations Population Fund (UNFPA) and USAID together provide nearly the entire public sector supply of contraceptive commodities.