## Facts & Figures 1998

**Health Sector** 



Department for Democracy and Social Development Health Division

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#### **Preface**

This document reports on where and how much Swedish Health Sector Assistance was provided during 1998 via Sida's different departments and other Government channels. For questions on how and why, we refer to other documents related to various programme areas in the health sector cooperation. Regarding information on country cooperation we refer to project documents and reports. Concerning programme contents we refer to policy documents, technical reports and other documents available at the responsible departments of Sida.

At Sida five departments are involved in the health sector;

- Health Division within the department for Democracy and Social Development, DESO
- Department for Research Cooperation, SAREC
- Department for Cooperation with NGOs and Humanitarian Assistance, SEKA
- Department for Infrastructure and Economic Cooperation, INEC, and
- Department for Central and Eastern Europe

The Swedish Government's contributions to multilateral organisations such as UNFPA, UNICEF, UNAIDS and WHO are also reported.

The figures provided are based on disbursements and not on allocations. It should be noted that a deviation in the support to a specific project/programme may be explained by delayed disbursements. It does not, therefore, necessarily signify a reduced or an increased allocation in comparison to previous years.

Anders Nordström Head of Health Division Department for Democracy and Social Development, DESO

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#### 1. SUMMARY

#### 1. Introduction

This document "Facts and Figures" provides an overview of disbursements made by Sida for Health Sector Cooperation during 1998. This first chapter gives an overview and summarises the more detailed information presented in tables and graphs in the following chapters.

The overall objectives for Sida's Health Sector Cooperation are to promote:

- a sustainable and effective health system
- a nation-wide coverage of health services of acceptable quality, according to principles of social equity and gender equality
- a strengthened role for the health sector in influencing other sector policies towards better health

The development cooperation aims at strengthening the capacity of national health systems and institutions and at providing financial and technical assistance for the implementation of different health programmes.

The main partners in the health sector co-operation are Ministries of Health. Other partners are UN agencies and international and national non-governmental organisations.

During 1998 Sida Health Division co-ordinated the finalisation of a Swedish Stragegy for HIV/AIDS and Development Assistance "Investing in Future Generations"

## 2. Volume of Swedish Development Cooperation disbursed for Health Sector Cooperation 1998

The total Swedish Development Assistance in the health sector constitutes approximately 12% of the total Swedish Development Cooperation or  $1\ 146\ MSEK$ 

Sida disbursed 887 MSEK of the total amount while the Ministry for Foreign Affairs and the Ministry for Health and Social Welfare disbursed 259 MSEK, mainly constituting core multilateral assistance to UN agencies.

In relation to the total Sida Health Sector Cooperation;

- Bilateral and Regional programmes as well Programme Development Funds constituted 465 MSEK or 52% and where administrated by Embassies and the Health Division at the Department for Democracy and Social Development, DESO
- Health Sector Cooperation through Swedish NGOs and Disaster Relief amouted 253 MSEK or 29% and was administered by the Department for Cooperation with NGOs and Humanitarian Assistance, SEKA.
- Health Research Cooperation amounted 114 MSEK or 13% and was administered by the Department for Research Cooperation, SAREC.
- Health Sector Cooperation with Central and Eastern European Countries amounted 34 MSEK or 4% and was administered by the Department for Central and Eastern Europe.

 Development Credits and International Courses amounted 19 MSEK or 2% and was administered by the Sida Department for Infrastructure and Economic Cooperation, INEC.

#### 3. Programme Areas

Chapter 3 presents health sector cooperation by programme areas according to Sida's system for classification of programmes and activities. The presentations include disbursements made by Embassies, DESO, SAREC, INEC as well as Sida-EAST. Disbursement made by SEKA are not included.

The following, brief description of the programme areas refers mainly to the Bilateral and Regional Programmes and Programme Development Funds;

#### Health Systems Development (table 3.2)

The Sida assistance to promote development of national health policies and systems has been a part of comprehensive health reforms in a number of countries. The reforms aim at e.g. decentralisation to province/district levels, new development of financing approaches and restructuring of Ministries of Health.

Cooperation is this field is taking place in eight countries. In Zambia Sida has contributed to the creation of a Central Board of Health with regulative responsibility for the health services.

In several other countries development of new models of financing, including user fees and health insurances have been promoted. Of special importance to Sida has been to develop measures to protect the poor and increase their access to health services.

In Uganda, Sida financial and technical support has contributed to the establishment and strengtening of the financial and management systems at district level in Uganda. The central ministry has been supported in redefining its role in the decentralised system and in efforts to develop a financing strategy for the health sector.

As a contribution to the regional institutional capacity building, Sida has provided support to the Health Economics Masters Programme at the University of Cape Town. Furthermore, support has been given to different regional studies relating to health systems and health economics, among those a study of autonomous hospitals in Sub-Saharan Africa.

Sida has supported health sector reforms in four Central American countries; Guatemala, El Salvador, Honduras and Nicaragua. The reforms aim at decentralisation of responsibility for analysis, planning, decision, and implementation to the districts, as well as participation and involvement of different actors within the sector at district, muicipality and community level.

Global studies on "health and equity"; international conferences and seminars on issues like the role of the private sector and on health insurance were also funded.

#### District Health Care and Health Sector Budget Support (table 3.3)

The focus on the district level and the process of decentralisation are important features of the health reforms in many countries. Strengthening district health services, capacity building at district level and lower levels received substantial contributions in twelve countries.

Development of method for community participation and need assessment are important component in these groups.

Disbursements reported include both budget support for national district health service programmes as well as targeted PHC-projects at district level.

#### Pharmaceutical Sector Development (table 3.4)

Conditions within the pharmaceutical sector have changed rapidly in many countries, and access to drugs is often no longer under the control of the state. Price increases, inadequate knowledge among both professional staff and consumers, unethical promotion of drugs and a shift to a smaller number of essential drugs with higher profit margins are other major problems.

Sida's focus is on supporting national drug policies and the rational use of drugs through the development of appropriate legislative, regulatory, and controls mechanisms through training and education. Cooperation has taken place in four countries during 1998.

Method development and promotion of the essential drug concept was financed through WHO, and the Health Action International, and Swedish institutions.

#### Sexual and Reproductive Health and Rights, SRHR (table 3.5)

The importance of sexual and reproductive health is acknowledged by Sida in its "Strategy for Promotion of Sexual and Reproductive Health and Rights in Development Cooperation". This strategy addresses such key issues as abortion, fertility regulation, the prevention and control of STDs including HIV, gender-based inequalities and violence and maternal health care. Specific emphasis is placed on the role of men in reproductive health matters as well as on adolescent's sexual and reproductive health; adolescents are increasingly vulnerable to health risks as a result of the rapid pace of social change in many countries.

Programmes in the field of Sexual and Reproductive Health and Rights were supported in twelve programme countries. The bilateral cooperation comprised activities in the areas of maternal health, fertility regulation and safe abortions, sex education and protection against sexually transmitted diseases including HIV/AIDS, with a focus on adolescent health and gender issues. A network was set up in Africa in 1998, Sida Partnership on Adolescents' Network, SPAN.

Programmes including adolescent health were supported in Tanzania and Zambia through RFSU and in India through a State Government. Further methods of development through seminars and regional activities were in focus. WHO and UNFPA activities on adolescent health were also supported

Midwives are important for maternal and delivery services, counselling and to provide fertility regulation and other sexual and reproductive health services. Activities aiming at strengthening the midwifery function have been supported through WHO and AMRN (African midwives research network) and in the bilateral support for Ethiopia, Angola and Zambia.

Support to women's health networks; work against female genital mutilation and the elimination of discrimination, violence and abuse of women were new areas for special programme support. Follow-up to ICPD+5 has been the base for many new attempts.

Programmes were promoted through UN agencies such as WHO, UNICEF, UNF-PA and through NGOs such as IPPF, AMREF, RFSU in Sweden and its sister organisations in Tanzania and Zambia, and a state Government in India.

Sida support to censuses and demographic projects have continued in a smaller scale.

#### HIV/AIDS/STD Control (table 3.6)

During 1998, HIV transmission continued to increase in a number of countries, especially in the Africa region. Recent developments showed that the epidemic also would have more and more significant effects on various sectors in society, for example, health, education, agriculture, and infrastructure. During 1998 Sida Health Division co-ordinated the finalisation of a Swedish Stragegy for HIV/AIDS and Development Assistance "Investing in Future Generations"

During 1998, Sida provided assistance to thirteen national programmes for HIV/AIDS control and one regional programme (Central America). Also, Sida initiated a number of country studies in Southern Africa to improve the organisation's knowledge about the epidemic, and to provide inputs to forthcoming programme developments.

Method development, multisectoral strategic planning and activities aiming at increasing awareness and exchange of experiences on ways to reduce HIV transmission, was funded through, among others, UNAIDS and certain NGOs, such as, International HIV/AIDS Alliance, PANOS; SANASO; and AHRTAG and two successful pilot projects in India. Some of those NGOs aimed at enabling community participation to better respond to the epidemic. They also provided governments and other authorities, as well as the media with ready available analyses of issues related to HIV/AIDS.

Sida continued to effectively contribute to the organisations of regional conferences on HIV/AIDS. Reviews on the epidemic's socio-economic consequences on society as well as individual affected people were other areas supported by Sida.

#### Child Health, Breast-feeding and Nutrition (table 3.7&8)

In the area of child health Sida emphasises preventive measures such as breast-feeding and immunisation, and a shift from an approach based on single diseases to one based on the integrated management of childhood illnesses. Method development in the area of Integrated Management of Childhood Illnesses, IMCI; has been promoted through WHO.

A supportive environment for breastfeeding is essential for both infant and mother. The health services should support and promote breastfeeding through adequate routines, e g baby-friendly hospitals. In order to protect breastfeeding against commercial interests, the International Code of Marketing of Breast-milk Substitutes must be monitored and enforced in national and local settings. Exclusive breastfeeding for four to six months is advocated, but will require great effort to achieve. Working mothers lack conditions, including legal rights, to enable them to breastfeed.

The ILO-convention on Maternaty Protection is in a process of being revised. DESO has approached various international organisations and networks like WABA, IBFAN, IMCH and UNICEF to participate in the lobbying for making it

possible for mothers to exclusively breast-feed for 4-6 months. These organisations have also received continued support for activities aiming at promoting breast-feeding and the implementation of the ethical code for marketing of breast milk substitutes.

The national nutrition institutions in Tanzania and Zimbabwe have received continued support. A joint evaluation of both institutions took place during 1998.

#### Rehabilitation of Disabled People (table 3.9)

Community based rehabilitation, CBR, programmes have been part of the health support to Kenya, Zimbabwe and the West Bank/Gaza. In India special attention to disabled children forms part of the ICDS programme. In Kenya, a disability sector study has been carried out. In South Africa a comprehensive disability programme is being prepared in which rehabilitation will be one part. A similar approach in Zimbabwe has been discussed during 1998.

The WHO Rehabilitation Programme has received continued support for promoting the CBR methodology and adapting it to various circumstances such as countries in a post war situation or areas with large numbers of refugees. A Swedish statement at the World Health Assembly 1997 initiated work on a WHO policy in relation to the UN Standard Rules for equal opportunities.

#### Disease Control (table 3.10)

Vertical programmes for the control of diseases are gradually being phased out, with a shift to integration in different preventive and curative health services at district level. The WHO "Roll Back Malaria" Programme received support during 1998. A general support to curative work at central hospitals in Vietnam is also shown under this heading.

Sida/SAREC supports the medical research, bilateral and through WHO, related to a large number of diseases in developing countries

#### Narcotics and other Substance Abuse (table 3.11)

During 1998 Sida has supported various strategic drug control projects via the UN System and Swedish Non-Governmental Organisations as well as monitored and advocated important Swedish policy issues. Currently Sida supports a series of international drug control projects in Peru, Latvia, Bosnia, Sri Lanka, Vietnam, Laos, Thailand, Burma and South Africa mainly in areas of demand reduction, institutional capacity building and studies.

Sida provides support to a series of NGO's (DIAKONIA, IOGT-NTO, NBV, RFHL) for drug control that are realistic from a bilateral perspective and where there is Swedish expertise. This is primarily in the field of demand reduction, that is, prevention, treatment and rehabilitation.

As to increasing awareness and knowledge about international drug control issues, Sida has supported the production of documentary films and organised seminars related to drugs and development issues, the media and society at large.

The question of tobacco control is an important policy issue. The health department has developed closer cooperation with institutions and experts in this area in order to obtain access to information/networks, support research and keep abreast of tobacco control events etc.

Currently Sida supports the WHO Tobacco Free Initiative and IDRC's Research for International Tobacco Control (RITC) that concentrates on research, capacity building, network development and the dissemination of information in order to strengthen public policy for tobacco control in developing countries.

Consequently Sida enjoys an agreement with the Swedish Institute for Public Health in order to monitor the progress of the RITC and keep abreast of latest developments in international tobacco control.

#### Environmental Health (table 3.11)

From a Public Health point of view it is important that the Health Sector can contribute to the prevention of diseases instead of spending all resources on cure and care of sick persons.

One important measure to prevent diseases is to improve the access and quality of water combined with sanitation and hygiene education. UNICEF estimates that the health effects of insufficient water and sanitation increases the costs for health care of 3 billion persons annually. Children are mainly affected as regards environmental-related diseases and the World Resource Institute assumes that 2.5 million children die annually in diarrhoeal diseases.

Sida/Health Division has supported water-related activities of health and hygiene in partner countries like Vietnam, Kenya and Zimbabwe and through UNICEF in Latinamerica.

Road accidents, accidents at home or in the workplace, careless handling of harmful chemicals like pesticides are other factors which increase the strain on the scarce health budgets of many of Sida´s partner countries. WHO estimates that more than 10% of the disease burden in the world are due injuries and accidents. Injury prevention and occupational health are examples of problem areas in which the experience and solutions of Swedish instituitions have acquired worldwide reputation and acknowledgement of their expertise.

Sida/Health Division supports i a WHO program for Chemical Safety and collaborates with Swedish institutions and their sister organizations in the third world regarding in injury and accident prevention, occupational health etc.

Sida continued to support the WHO Environmental Health programme and the Programme for Promotion of Chemical Safety.

Water and sanitation projects were part of the health cooperation in Kenya. These projects are usually handled by the Department of Natural Resources within Sida and not accounted for in the context of health cooperation. In Zimbabwe Sida supported methods development at the Blair Institute.

## 4. Bilateral and Regional Programmes and Programme development Funds, Health Division, Department of Democracy and Social Development, DESO (tables 4.1 - 4.17)

The largest share of the DESO/Health division Health Sector cooperation consists of support to Country Programmes. This includes bilateral health cooperation in 20 of Sida programme countries and a large regional programme in Central America.

The disbursements for 1998 by country programme and per programme area are provided in tables 4.2 to 4.16. The tables indicate the distribution of funds between programme areas and components based on the Sida system of classification of activities.

The Special Programme funds were channelled mainly to or through UN agencies, NGOs, and institutions and exceptionally to recipients in programme countries.

## 5. Health Sector Cooperation with Eastern European Countries through the Department for Central and Eastern Europe. (table 5.1)

One of four goals for Swedish cooperation with countries in Central and Eastern Europe, financed through Sida, is to support a socially sustainable economic transition. Support to the health sector is mainly aiming at reform of the health care system and development of public health activities.

## 6. Health Sector Cooperation through the Department for Cooperation with NGOs and Humanitarian Assistance, SEKA. (table 6.1)

Approximately 10% of the total disbursements from SEKA to development activities through NGOs aim at health sector related projects and programmes. The development support through Swedish NGOs is being channelled through 13 so-called frame- or umbrella- organisations that in turn distribute the Sida funds to more than 300 individual organisations.

The Sida support to Humanitarian Assistance (Disaster Relief) included support through national NGOs and through the UN system. Humanitarian Assistance, which often but not always can be categorised as disaster relief, is divided into support to health care projects, support to projects with health care as a secondary sector and support to projects with health components. The two latter types of projects are estimated to include 30% health support components.

## 7. Health Sector Cooperation through the Department for Infrastructure and Economic Cooperation, INEC. (table 7.1)

INEC offers a wide range of technical courses in the International Training Programmes. The dominating themes focused on sexual and reproductive health (SRHR) and occupational health. The SRHR programmes aim at the improvement of sexual and reproductive health and rights by actions in health care along with how SRHR can be improved by intersectorial action in society. The Occupational Health programmes aim at giving the participants the capacity to initiate and monitor systematic actions for improving occupational safety, health and work productivity to fit the conditions of the participants countries.

The Technical cooperation programme included minor projects in the health field. The INEC Development Credits in the health area consisted of two minor credits for hospital equipment to China.

## 8. Health Sector Research Cooperation through the Department for Research Cooperation, SAREC. (tables 8.1 - 8.2)

Swedish development cooperation in the area of research is mainly channelled through SAREC (previously a separate Government Agency). Health research is supported as part of bilateral programmes of research cooperation with a number of developing countries, mainly Vietnam, Mozambique, Tanzania, Zimbabwe, Ethiopia and Nicaragua. These programmes aim to contribute to the development of national research capacity.

SAREC also supports international and other special health research programmes of relevance for developing countries. This includes substantial contributions to the HRP - and TDR - and other research programmes within WHO as well as support to ICDDR, B in Bangladesh. SAREC also supports international initiatives (such as COHRED and Global Forum for Health Research) engaged in promoting essential national health research as well as international partnerships in research, addressing the health problems of developing countries.

Finally a small part of SARECs budget is devoted to health development research carried out by Swedish research institutions with a view to promote the involvement of Swedish scientists in research cooperation with Third World countries.

## 9. Swedish Contribution to the Health Sector through International Organisations. (tables 9.1 - 9.5)

Sweden has a long-standing involvement in the reform of the UN system. In the field of health, WHO is recognised as the main actor. In cooperation with the Swedish Ministry of Foreign Affairs and the Ministry of Health and Social Welfare a policy dialogue has been on-going in order to make Swedish aid more effective and to influence the reform process of WHO. The different contributions to WHO programmes are listed in table 9.2.

**UNICEF** has for many years been entrusted with a large core support from Sweden. Sida has also channelled funds through UNICEF for implementing bilateral programmes in seven countries (table 9.1). Special programme support to certain normative work is also provided

**WHO** (table 9.2)

The cooperation with **UNFPA** consists mainly of financial core support from Sweden and policy level meetings (table 9.3).

**UNAIDS**, the Joint United Nations Programme on HIV/AIDS, is a programme cosponsored by six UN organisations with the purpose to co-ordinate the UN efforts on HIV/AIDS prevention and care. The main focus of UNAIDS is to strengthen the capability of the countries to respond effectively to the AIDS epidemic. The six cosponsors are UNDP, UNESCO, UNFPA, UNICEF, WHO and the World Bank (table 9.4).

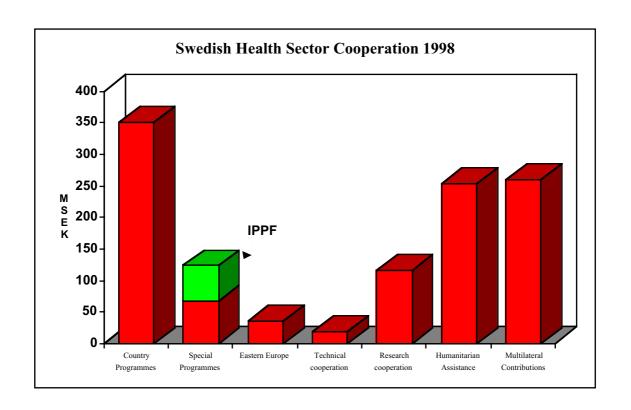
The World Bank is the largest actor on the global health assistance arena. The DESO/Health Division has cooperation with the World Bank both at global policy level and through co-financing projects at country level in four countries (table 9.5).

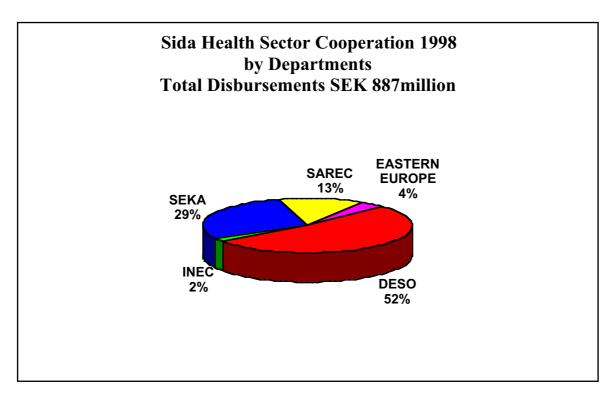
## 2. An Overview of Swedish Health Sector Cooperation

<b>Total Swedish Health Sector</b>		95/96	1997	1998
Cooperation		(12 months)	Disburse-	Disburse-
•		,	ments	ments
Sida – Bilateral Support				
Dept for Democracy and Social	Country Programmes	416,2	420,2	347,1
Development, DESO/Health Division				
	Special Programmes	85,0	62,6	62,0
	$IPPF^1$	72,0	59,9	56,1
Subtotal DESO/Health Division		573,2	542,7	465,2
Dept for Central and Eastern	Eastern Europe	17,7	29,9	34,6
Europe				
Dept for Infrastructure and	Techn coop, Intl.	76,5	20,2	19,2
Economic Cooperation. INEC	Training, Dev Credits			
Dept for Research Cooperation.	Country based Research		44,4	42,0
SAREC	Cooperation		44.7	57.4
	International Research	/-	44,1	57,4
	Programmes Health Research at		0.6	15 4
		,	9,6	15,4
C-1-4-4-1 CADEC	Swedish Institutions		00.1	1140
Subtotal SAREC		78,0	98,1	114,8
Dant for Coordination with NCOs	Swedish NGOs	126.4	160.0	122.1
Dept for Cooperation with NGOs and Humanitarian, SEKA	Swedish NGOs	136,4	169,0	132,1
and Humamtanan, SEKA	Humanitarian Assistance	134,5	136,4	121,3
Subtotal SEKA	Humanitarian Assistance	318,9	305,4	253,4
Subtotal SEKA		310,9	303,4	433,4
Total Sida		1 028,3	996,3	887,2
Multilateral Contributions <sup>1</sup>	Contributions to WHO,		251,0	259,0
	UNICEF, UNAIDS and			
	UNFPA (Core funding)			
Total Swedish Health Cooperation		1 250,1	1 247,3	1 146,2
(MSEK)				

 $<sup>^{\</sup>rm 1}$  Part of IPPF 1998 core funding (MSEK 39,5) was paid out in Jan 1999.

<sup>&</sup>lt;sup>1</sup> Core funding to WHO via Ministry of Health and Social Welfare and to UNICEF and UNFPA via the Ministry of Foreign Affaires. Note: In addition, extra-budgetary programme support to WHO is provided by Sida as described under Sida Special Programme and Research Cooperation (Table 9.2).

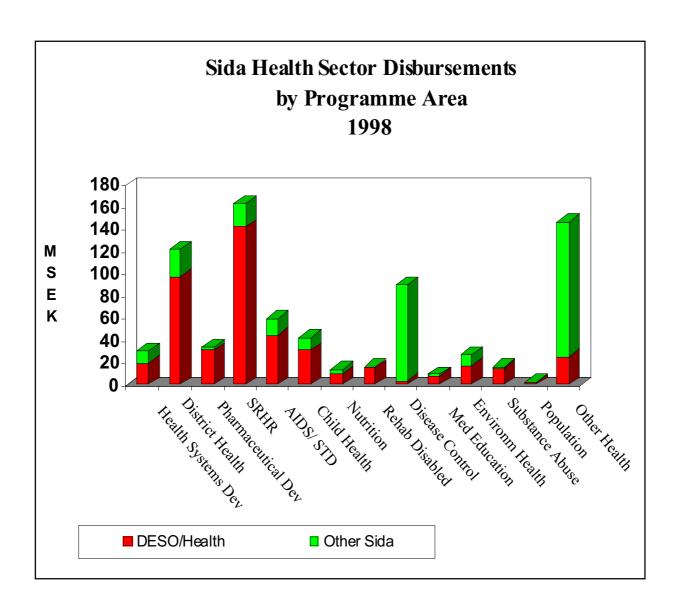




## 3. Programme Areas

## 3.1 Sida Health Sector Disbursements 1998 by Programme Area

Programme Area		Health	Total	Sida
	1998	1997	1998	1997
Health Systems Development	19,7	28,9	30,1	89,6
District Health and Sector Programme Development	98,1	147,9	122,1	147,9
Pharmaceutical Sector Development	30,9	45,6	33,7	46,4
Sexual and Reproductive Health and Rights, SRHR	142,6	173,6	163,8	189,5
AIDS/STD	44,7	32,9	60,0	52,5
Child Health	31,1	61,4	42,1	66,9
Breast-feeding and Nutrition	9,5	8,8	13,2	9,2
Rehabilitation of Disabled	15,5	10,0	16,3	11,9
Disease Control	3,0	3,0	85,9	37,4
Medical Education and Training	8,3	0	9,0	0
Environmental Health	17,9	0	27,1	0
Substance Abuse and Drug Control	15,0	2,9	16,2	0
Population Related Issues	1,9	0	1,9	0
Other Health	27,0	48,5	126,9	76,8
Total (MSEK)	465,2	542,7	748,3	728,1



## 3.2 Health Systems Development

	1998	1997
DESO/Health Division		
Country Programmes		
Kenya, Planning/coordination, Manpower Training	4,1	3,5
Uganda, Policy development, PHSP	1,9	0,5
Zambia, Health Policy and Economics, Project co-ordination	6,4	11,4
Vietnam, Health Policy, Training systems,	3,5	8,5
Special Programmes		
WHO/ Health Systems Development, NHP/ARA	2,0	2,0
WHO/Intersectoral Action for Health		0,3
WHO/Strengthening Country Health Info., SCI		0,9
Health Systems, ICHAR	0,3	
Master Programme, Regional Africa	0,9	
Other project support	0,6	1,8
Total DESO/Health Division	19,7	28,9
Sida-EAST, Health Management (Russia, Estonia)	2,2	2,5
INEC, Technical Cooperation, Health and Social Security	1,1	0,4
SAREC, Research Cooperation, Health Syst, Global Forum for Health,		
Programme prep.(Vie)	2,7	4,5
SEKA, WHO (BIH, TJK)	4,4	
Total Sida Cooperation (MSEK)	30,1	36,3

## 3.3 District Health Care and Health Sector Budget Support

	1998	1997
DESO/Health Division		
Country Programmes		
Kenya, Primary Health Care	4,7	2,3
Uganda, Capacity Building PHC, UNICEF,		
District Health Service Project, World Bank	14,9	19,0
Zambia, District Health Care, Budget support	15,0	18,4
<b>Zimbabwe</b> , Farm Health Workers	3,1	1,5
Vietnam, PHC, Disadvantaged Areas	7,2	6,8
Gaza/West Bank, PHC, Palestine Groups	4,0	5,0
Bolivia, POANDES, UNICEF	6,5	
Nicaragua, Health Syst Reform, PROSILAIS II, PAHO and UNICEF,		
Rural Development, PROSERBI, UNICEF	33,1	47,9
Central America, Health Sector Reform, Guatemala, Honduras,		
El Salvador, PAHO	9,6	47,0
Total DESO/Health Division	98,1	147,9
SEKA, (RWA,LBR,BDI,BIH,SOM,SDN,EST)	24,0	
Total Sida Cooperation	122,1	147,9

## 3.4 Pharmaceutical Sector Development

	1998	1997
DESO/Health Division		
Country Programmes		
Angola, Essential Drugs Programme	14,5	17,0
Zambia, Drugs policy and procurement	1,2	16,0
Laos, National Drug Policy, ICHAR programme	3,0	2,4
Vietnam, National Drug control	9,7	6,4
Special Programmes		
WHO/ Drug Action Programme, DAP	2,0	2,5
Health Action International, HAI	0,4	0,5
Other project support	0,1	0,8
Total DESO/Health Division	30,9	45,6
INEC, Technical Cooperation, Ess Drugs System(Indonesia)(Jordan)	0,1	0,8
SEKA, (GNB, LBR)WHO, UNICEF	2,7	2,0
Total Sida Cooperation	33,7	46,4

## 3.5 Sexual and Reproductive Health and Rights

DESO/Health Division	1998	1997
Country Programmes		
Angola, Maternal Health Care, CAOL	17,7	13,8
Ethiopia, Maternal and Child Health, Training of Midwifes	0,1	5,6
Kenya, Reproductive Health, Adolescent Health, Contraceptives	9,8	8,7
South Africa, Video on abortion		0,5
Uganda, Adolescent Health, UNICEF	1,3	5,6
Zambia, SRHR Policy development and adolescent health	1,9	6,1
Zimbabwe, MCH, (World Bank)		1,0
Bangladesh, MRTSP, Mohammadpur Fertility Centre,		
4 ht Population and Health Project, BAPSA, BRAC, BWHC	24,6	45,9
India, CSSM II, Preparation for Reproductive and Child Health Progr	9,9	3,3
Vietnam, Maternal Health Care		0,3
Bolivia, Women and Health, UNICEF	2,7	
Nicaragua, Demographic and Health Service, DHS		2,9
Central America, Women's Health, PAHO, Maya women, PAHO	2,2	2,8
~		
Special Programmes		
IPPF, Core funding <sup>1</sup>	56,1	59,9
WHO/ Reproductive Health Techn Support, RHT	8,0	3,0
WHO/ Women's Health and Development., WHD		3,8
IWHC, International Women's Health Coalition		1,5
AMRN, African Midwifes Research Network	0,4	
Arrow, Women's Health Network, Asia	0,5	0,6
Population Council, Male participation	0,5	0,5
Q-WEB, Women's Network, Sweden	0,3	0,3
Rainbow, Female genital mutilation, FGM	0,6	1,1
UNICEF, Eritrea, Female Genital Mutilation, FGM		0,6
WHO/ Adolescent Health and Development, AHD		1,0
RFSU/ Umati, Adolescent Health	0,4	0,9
UNFPA, Regional meeting on adolescent health		0,4
SODECO (PROP), Population studies		0,9
Safe Motherhood, ESCAP,CAFS, ESEA, Hera	3,3	
KMWA, Haag Forum and other project support	2,3	2,6
Total DESO/Health Division	142,6	173,6
Sida-EAST, SRHR(Rus, Est, Central Europe)	1,3	1,3
INEC, International Training Progr. SRHR and Study visit Jinglun(China)	4,8	2,4
SAREC, Research Cooperation, SRHR(TZA, ZMB, ZWE, NIC, WHO)	14,5	12,2
SEKA, Yug, BIH	0,6	
Total Sida Cooperation	163,8	189,5

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 $<sup>^{\</sup>rm 1}$  Part of IPPF 1998 core funding (MSEK 39,5) was paid out in Jan 1999.

## 3.6 HIV/AIDS/STD Control

	1998	1997
DESO/Health Division		
Country Programmes		
Angola, HIV testing of blood		0,5
Botswana, AIDS projects, UNDP and UNICEF	3,8	3,5
Ethiopia, National AIDS Programme		2,2
Guinea Bissau, HIV/AIDS	0,4	0,4
Kenya, FOPOGAP	0,1	
Tanzania, National AIDS Conference	0,3	
Uganda, The AIDS Support Organisation, TASO, STI World Bank	15,2	3,5
Namibia, Adolescent HIV/AIDS, UNICEF		2,2
South Africa, studies	0,4	
Zambia, National AIDS Programme	4,0	2,6
Zimbabwe, National AIDS Control Programme	1,5	3,6
Central America, Guatemala AIDS Programme, PAHO		2,0
India, NGO support, Bombay	1,8	
Special Programmes		
AMREF - Adolescent Health		2,5
ICMER	0,4	
UNAIDS - Strategic Planning, country level	10,0	5,1
AHRTAG - Appropriate Health Resources and Technologies Action Group	0,1	0,4
IHAA, Internanional HIV/AIDS Alliance - core support	2,5	2,5
SANASO - Southern African Network of AIDS Services Organisation	0,8	0,8
Reg Africa	1,5	
Other project support (Malawi, etc.)	1,9	1,1
Total DESO/ Health Division	44,7	32,9
SAREC, Research Cooperation,		19,6
HIV/AIDS (TZA,Regional Africa,Chile,Guinea Bissau,Global),	11,3	
STD(ZWE, Global)	4,0	
Total Sida Cooperation	60,0	52,5

## 3.7 Child Health incl. Immunisation

	1998	1997
DESO/Health Division		
Country Programmes		
Angola, Immunisations, UNICEF and Child Health Care, CAPEL	11,3	1,4
Bangladesh, Immunisations, UNICEF	0,1	9,6
India, Child Survival and Safe Motherhood II, UNICEF,		
Integrated Child Development Services, Tamil Nadu, ICDS III	15,7	43,7
Laos, MCH, UNICEF		1,6
Special Programmes		
WHO/Child Health, CHD	4,0	3,9
ECPAT, End Child Prostitution, Pornography and Trafficking		0,2
ESCAP, Sexual exploitation of children		1,0
Total DESO/Health Division	31,1	61,4
	,	,
Sida-EAST, Mother/Child Care (Russia, Belarus, Latvia)	0,6	1,6
INEC Technical Cooperation,, Child Hospital, BHC(China)	0,2	0,3
Global, International courses	0,9	
SAREC, Research Cooperation, ARI(Costa Rica), CHD, VRD(WHO)	7,0	3,6
SEKA, Sierra Leone CEDC	2,3	
Total Sida Cooperation	42,1	66,9

## 3.8 Breast-feeding and Nutrition

	1998	1997
DESO/Health Division		
Country Programmes		
Tanzania, Tanzania Food and Nutrition Centre, TFNC	2,5	2,1
Zimbabwe, Nutrition Unit, Ministry of Health, World Bank	4,1	3,7
Special Programmes		
ACC/SCN	0,2	
WABA, working women and breast-feeding	0	0,4
IBFAN, Code for Breast Milk Substitutes, monitoring	0,5	0,6
IBFAN, Africa	0,2	
UNICEF, Code for Breast Milk Substitutes, legal aspects	1,2	1,7
Other project support, World Alliance on Breatfeeding, ICH	0,8	0,3
Total DESO/ Health Division	9,5	8,8
INEC, Technical Cooperation, Iodine Deficiency(China)	1,8	0,1
SAREC, Research Cooperation, TFNC(Tanzania)	0	0,4
SEKA, Rwanda	1,9	
Total Sida Cooperation	13,2	9.2

#### 3.9 Rehabilitation of the Disabled

	1998	1997
DESO/Health Division		
Country Programmes		
<b>Zimbabwe</b> , Community Based Rehabilitation, CBR	1,4	4,2
Namibia, Orthoptist	0,5	
South Africa, Study on rehabilitation of disabled	0,4	0,1
Kenya, (CBR included in PHC-project)		
West Bank/Gaza, CBR, Diakonia	9,7	4,0
India, (ICDS, Identification and integration of disabled children included in Child Health Support)		
Special Programmes	1	
WHO/Rehabilitation Unit, RHB	2,0	1,5
CBR Training, ICH		0,2
MAS, ICH, Hearing		0,2
DPI, funding		1,0
AMREF, CBR	1,5	
Total DESO/Health Division	15,5	10,0
Sida-EAST, Rehab Training(Baltic countries)	0,8	1,9
Total Sida Cooperation	16,3	11,9

#### 3.10 Disease Control

	1998	1997
DESO/Health Division		
Country Programmes		
Guinea Bissau, Public Health Laboratory (TB, Parasitology, Malaria)	3,0	3,0
Total DESO/ Health Division	3,0	3,0
Sida-EAST, Cancer(Latvia),TB(Baltic countries)	0,2	0,6
SAREC, Research Cooperation,	45,3	33,8
ICDDR,B (Regional Asia)	4,5	
Armauer Hansen Research Institute, AHRI(Ethiopia)	9,0	
Malaria, Schistosomiasis(Tanzania),	1,3	
Cholera vaccine(Vietnam),	0,2	
Chagas, Rotavirus(Chile),	0	
Molecular biology(Mexico), Microbiology(Nicaragua),	2,0	
Networking(Regional Latin America),	0,3	
WHO/TDR	20,0	
WHO/GTB	4,0	
WHO/Other progr	0,8	
Reg Afr, IBFC	3,0	
Cuba	0,2	
SEKA, CHN, YUG, SOM, Reg Afr,WHO,Centr Am,Mitch, Afg	37,4	
Total Sida Cooperation	85,9	37,4

# 3.11 Health Education, Mental Health, Medical Education and Training, Environmental Health, Substance Abuse and Drug Control and Population related Issues.

DESO/Health Division		1998	1997
<b>Kenya,</b> Continuing Education, Moi/Linköpng		4,5	
Ethiopia, Training		0,6	
Guinea Bissau, Nurses training, SMI/LNSP		1,3	
Zambia, Training		1,9	
	ubtotal	8,3	
Nicultar Education and Training	แบเบเลา	0,5	
WHO/ Rural Environmental Health, PEH/REH			1,5
WHO/Chemical Safety, IPCS			1,0
WHO/Integrated Environmental Health, EHG			0,9
IMM, Injury Prevention, Costa Rica, Bangladesh			0,5
<b>KEMI</b> , Swedish National Chemical Inspection			0,6
Angola, Youth and environment JEA, consultant		0,7	.,.
<b>Kenya,</b> Rift Valley		11,6	
Zimbabwe, Water and sanitation		2,1	
Regional Africa, NGO support		0,2	
Central America, MASICA/ROAGUA, PAHO		3,3	
	Subtotal	17,9	4,5
		,	,
WHO/Substance Abuse, PSA			1,0
WHO/PEH, IPCS, International Tobacco		4,2	
WHO/PSA		2,0	
UNDCP, Africa study and Illicit drug control		2,0	1,9
Zambia, Study tour		0,1	
Sri Lanka, Prevention, UNDCP		0,8	
Laos, Capacity Building, UNDCP		1,8	
Vietnam, IOGT		1,5	
Thailand, Burma, DIAKONIA		0,7	
Latvia Treatment UNDCP		0,7	
Bosnia, NBU		1,2	
Substance Abuse and Drug Control	Subtotal	15,0	2,9
Botswana, National population council		0,1	
Nicaragua, CEPS		1,8	
*	Subtotal	1,9	0
Total DESO/Health Division		42,8	7,4
Sida-EAST, District nurses training(EST), Narcotics (RUS)	.4	2,3	
SAREC, Medical Faculty (NIC), Butajira (ETH), Environmental Heal	th	7,1	
INEC, Training, Med equipm(BGD)		4,9	
SEKA, IRQ,LVA,Reg Afr, SLE,		6,7	
Total Sida Cooperation		63,8	7,4

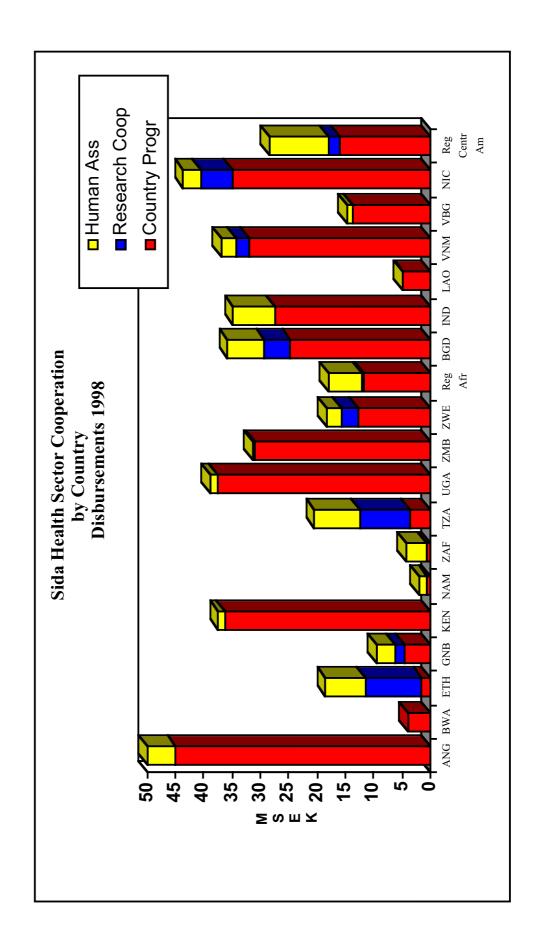
#### 3.12 Other Health

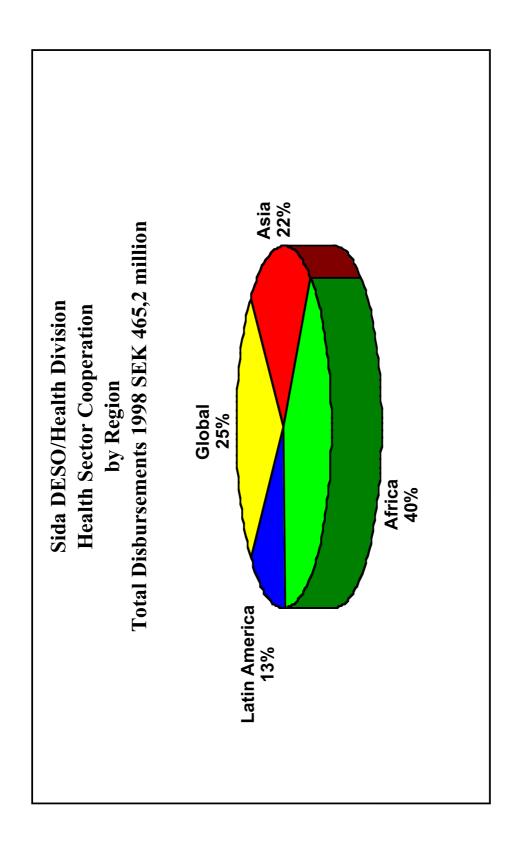
	1998	1997
DESO/Health Division		
Country Programmes		
Angola, Planning, Mental Health study	0,7	1,0
Ethiopia, Health Planning and follow-up	0,8	1,4
Kenya, Ouma-Kemri	0,3	1,8
Gaza/West Bank, Mental Health, Palestine Groups	0,7	0,7
Regional Africa, Regional Advisor, AMREF, core support	5,5	6,2
Uganda, UNICEF, monitoring ,gender	4,2	
Zambia, coordination	0,7	
Vietnam, Central Hospitals, Project management etc.	10,9	5,7
Sri Lanka, Jaffna Health	1,9	
Special Programmes		
Other project support	0,3	3,4
Total DESO/Health Division	27,0	14,5
Sida-EAST, Eastern Europe Committee, IEK		
Mental Health, Occupational Health (Central and Eastern Eur),		
Alcohol policy (Rus, Baltic countries), Health Cooperation(Bosnia)	26,8	22,0
INEC, International Training Programmes,	20,0	6,0
Development Credits (China)	5,4	10,2
SAREC, Research Cooperation,	Ξ, .	10,2
Environmental Health(ETH,ZWE,CUB), COHRED		
Medicine Faculty Support, Occupational and Mental Health(NIC),		
Microbiology(ZWE), MUCHS(TZA)	8,0	11,1
Swedish Research Institutions and Conferences	15,6	13,0
SEKA, WHO,SDN,HRV,RWA,IRQ,SLE,LKA,BDI,YUG,GUI	44,1	
Total Sida Cooperation	126,9	76,8

## 4. DESO/Health Division

## 4.1 Health Sector Cooperation 1998 by Country

Country Programmes	Disbur	Disbursements	
	1998	1997	
Angola	44,9	33,7	
Botswana	3,9	3,5	
Ethiopia	1,5	9,2	
Guinea Bissau	4,7	3,4	
Kenya	34,8	17,2	
Namibia	0,5	2,2	
South Africa	0,8	0,6	
Tanzania	3,2	3,0	
Uganda	37,5	28,6	
Zambia	31,2	54,5	
Zimbabwe	12,8	16,6	
Regional Africa	10,5		
Subtotal Africa	186,3	173,7	
Bangladesh	24,7	55,5	
India	27,4	47,5	
Laos	3,0	4,0	
Vietnam	32,1	27,7	
West Bank/Gaza	14,4	9,7	
Subtotal Asia	101,6	143,9	
Bolivia	9,2		
Nicaragua	34,9	50,8	
Regional Central America	15,1		
Subtotal Latin America	59,2		
Total Country Programmes	347,1	420,2	
Sida/DESO Global Health Sector funding, International			
NGOs and the UN system (Special Programmes)	118,1	122,5	
a voos and the orv system (opecial riogrammes)	110,1	122,3	
Total DESO/Health Division	465,2	542,7	





## 4.2 Angola

	Disburse	ements
	1998	1997
Pharmaceutical Sector Development		
Essential Drugs	14,5	17,0
Sexual and Reproductive Health		
Maternal Health Care, CAOL	17,7	13,8
AIDS/STD		
Blood testing, HIV		0,5
Child Health		
Immunisations, UNICEF	9,4	1,3
Child Health Care, CAPEL	1,9	0,1
Environmental Health		
JEA Youth for the environment	0,7	
Other Health		
Planning, follow-up		1,0
Mental Health, Monitoring study(Special programmes)	0,7	
Total DESO/Health Division	44,9	33,7

Cooperation started; 1979
Agreement Period; 97 - 99
Agreed Amount; 100 MSEK

Technical Assistance; Medical Advisor, Midwife Advisor,

Programme Coordinator, Pharmaceutical Advisor

#### **SEKA**

Health Sector Support through Swedish NGOs

Total SEKA	5,1	3,4
	,	/

### 4.3 Ethiopia

	Disburse	Disbursements	
	1998	1997	
Sexual and Reproductive Health			
Maternal Health		2,2	
Training of Midwifes		2,2 3,4	
Seminar	0,1		
AIDS/STD			
National AIDS Programme		2,2	
Medical Education and training			
Training	0,6		
Other Health			
Health Planning and follow-up	0,8	1,4	
Total DESO/Health Division	1,5	9,2	

Cooperation started; 1970

Agreement Period; 1992 - 1999 Agreed Amount; 37 MSEK

Technical Assistance; Medical Advisor, Midwife

#### **SEKA**

Health Sector Support through Swedish NGOs

Total SEKA 7	,0	9.2
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#### **SAREC**

Bilateral Health Research Cooperation,

mainly directed to research on Environmental control

Total SAREC	10,0	2.6
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#### 4.4 Guinea Bissau

	Disburse	Disbursements	
	1998	1997	
AIDS/STD			
HIV/AIDS	0,4	0.4	
Disease Control			
Public Health Laboratory, LNSP, TB (Parasitology, Malaria)	1,0	3.0	
SMI/LNSP	1,0		
Planning, follow-up, study tour	1,0		
Medical Education and Training			
Training of nurses at ICH	0,4		
SMI/LNSP training	0,1		
SMI/LNSP equipment	0,8		
Total DESO/Health Division	4,7	3.4	

Cooperation started; 1977
Agreement Period; 95 – 99
Agreed Amount; 22.5 MSEK

Technical Assistance; Institutional Collaboration SMI-LNSP

#### **SEKA**

Health Sector Support through Swedish NGOs

Swedish NGO	0,9	
Drugs through WHO and UNICEF	2,2	
Total SEKA	3,1	1.9

#### **SAREC**

AIDS in Guinea Bissau 1,6	
Total SAREC 1,6	0

### 4.5 Kenya

		Disbursements	
	1998	1997	
Health Systems Development			
Planning/coordination, Technical Assistance	4,1	3,5	
District Health Care			
Primary Health Care	4,7	2,3	
Sexual and Reproductive Health			
Reproductive Health, pilot project	3,1	8,7	
Contraceptives	6,7	,	
HIV/AIDS			
FOPOGAP	0,1		
Medical Training			
Manpower Training (Continuing education)	3,3	0,9	
Moi Univ/Linköping Univ	0,9	,	
Environmental Health			
Environmental Health		1,8	
Direct support Rift Valley, Eastern	11,6	-,-	
Rehabilitation of the Disabled			
(CBR programme in PHC-project)			
Other Health			
Ouma-Kemri	0,3		
Cuma iximi	0,5		
Total DESO/Health Division	34,8	17.2	

Cooperation started; 1969
Agreement Period; 95 – 99
Amount Agreed; 125 MSEK

Technical Assistance; Programme coordinator

#### **SEKA**

Health Sector Support through Swedish NGOs

Total SEKA	1,1	4.8

## 4.6 Tanzania

	Disbursements	
	1998	1997
Sexual and Reproductive Health (Special Programmes) Umati, Adolescent Health	(0,4)	0.9
HIV/AIDS Multisectoral AIDS conference	0,3	
Nutrition and Breast-feeding Tanzania Food and Nutrition Centre, TFNC	2,5	2.1
Total DESO/Health Division	2,8	3.0

Cooperation started; (TFNC) 1973 Agreement Period; 94-99 Amount Agreed; 21 MSEK

### **SEKA**

Health Sector Support through Swedish NGOs

Total SEKA	7,9	7.5

#### **SAREC**

Bilateral Health Research Cooperation, mainly directed to research on HIV/AIDS, Malaria, Schistosomiasis and Reproductive Health.

Total SAREC	9,4	13.1
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## 4.7 Uganda

Disburs 1998		
Health Systems Developemnt		
Policy development		0,5
DHSP Technical Ass	1,9	
District Health Care and Health Sector Budget Support		
Primary Health Care PHC, UNICEF		15,9
District Health Service Project, World Bank	14,9	3,1
Sexual and Reproductive Health		
Adolescent Health, UNICEF	1,3	5,6
AIDS/STD		
The AIDS Support Organisation, TASO,	5,2	3,5
Sexual Transmitted Infections (STI), World Bank	10,0	
Other Health		
UNICEF, Health Programme	3,0	
Monitoring, Short term Consultants, gender	1,2	
Total DESO/Health Division	37,5	28.6

Cooperation started; 1995 Agreement Period; 95-99 Agreed Amount; 185 MSEK

Technical Assistance; Financial Managment Advisor, Managment Advisor

## **SEKA**Health Sector Support through Swedish NGOs

Total SEKA	1,4	2.4

## 4.8 Zambia

	Disburs	
	1998	1997
Health Systems Development		
Health Policy and Health Economics	1,2	11.4
Central Board of Health	4,0	11.4
Health Planning	0,9	
	0,7	
District Health Care		
District Health Care-budget support	15,0	18.4
Pharmaceutical Sector Development	0	
Drug Policy and Procurement	1,2	16.0
HIV/AIDS		
National AIDS Programme	4,0	2.6
Sexual and Reproductive Health		
Policy development and Adolescent Health	1,9	6.1
Substance Abuse		
Study tours, conferences	0,1	
	·,1	
Medical Education		
Training, Institutional Development	1,9	
Other Health		
Coordination and follow-up	1,0	
1	-,-	
Total DESO/Health Division	31,2	54.5

Cooperation started; 1970 Agreement Period; 95 – 98 Agreed Amount; 170 MSEK

Technical Assistance; Inst Collaboration: IHCAR (SRHR/Training)

IHE (Health Economics), Senior Advisor to the Director General for Health, Assistant Advisor

#### **SEKA**

Health Sector Support through Swedish NGOs

Total SEKA	0,3	1.4
SAREC		
Bilateral Health Research Cooperation		
Total SAREC	0	0.1

## 4.9 Zimbabwe

	Disburse	
	1998	1997
W. M. C. A. D. J.		
Health Systems Development		
Planning and evaluation	0,6	
District Health Care		
Farm Health Workers	3,1	1,5
Sexual and Reproductive Health		
MCH, (World Bank)		1,0
AIDS/STD		
National AIDS Control Programme	1,5	3,6
Breast-feeding and Nutrition		
Nutrition Unit, (World Bank)	4,1	3,7
Rehabilitation of disabled		
Community based Rehabilitation, CBR	1,4	4,2
Environmental Health		
Water and Sanitation	2,1	2,6
Total DESO/Health Division	12,8	16,6

Cooperation started; 1980 Agreement Period; 97 – 99 Agreed Amount; 50 MSEK

#### SEKA

Health Sector Support through Swedish NGOs

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<b>Total SEKA</b>			2,6	1.7

#### **SAREC**

Bilateral Health Research Cooperation mainly to Sexual and Reproductive Health

Total SAREC	2.3	2,8
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## 4.10 Botswana, Malawi, Mozambique, Namibia, South Africa and Regional Africa

	Disbursements 1998   199	
Botswana	1770	1///
AIDS projects, UNDP	3,8	3,5
National Council of Population	0,1	-,-
Malawi		
HIV/AIDS study	0,2	
Mozambique		
AMME, girls' health	0,2	
Namibia		
Adolescent HIV/AIDS, UNICEF		2,2
Orthoptist/Prosthesis	0,5	
South Africa		
Video on abortion		0,5
HIV/AIDS studies	0,4	
Study on rehabilitation of disabled, study tour	0,4	0,1
Regional Africa		
ICASA conference, Regional expert, SANASO, SAFAIDS	2,3	
AMRN, consultancy (Special Programmes)	0,4	
IBFAN/Africa (Special Programmes)	0,2	
Master programme in Health Economics etc (Spec Progr)	0,9	
NGO support	0,2	
Regional Health Advisor	1,5	1,2
Core Support to AMREF	5,0	5,0
Total DESO/Health	16,1	12,5

#### **SEKA**

Continuing Education, WHO	1,0	
South Africa, Namibia, Mozambique, NGO support	11,0	
Total SEKA	12,0	6,1

## **SAREC**

Total SAREC, Regional 0,2	3.6
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#### **INEC**

Total INEC, Regional	3,1	0

## 4.11 Bangladesh

	Disbursements	
	1998	1997
Sexual and Reproductive Health		
Mohammadpur Fertility Centre	0,9	1,6
4 ht Population and Health Project, World Bank	19,4	40,9
Menstrual Regulation Technical Support Project, MRTSP	3,4	3,4
BAPSA, Bangladesh Association for Prevention of Septic Abortions	0,2	0,5
BRAC STP, Bangladesh Rural Activity Committee	0,7	4,6 2,5
BWHC, Bangladesh International Women's Coalition		2,5
Child Health		
Immunisations, UNICEF	0,1	9,6
	ŕ	
Total DESO/Health Division	24,7	63,1

Cooperation started; 1970

Agreement Periods; Agreed Amount; 92-98 121 MSEK 98-03 260 MSEK

**SEKA** 

Health Sector Support through NGOs

Total SEKA	6,6	9.2

#### **SAREC**

Health Research Cooperation mainly to research on Cholera,

Shigella and vaccines, (ICDDR,B)

Total SAREC	4,5	1.6
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## **INEC**

Total INEC	0,3	0

## 4.12 India

	Disbursements	
	1998	1997
Sexual and Reproductive Health		
Child Survival and Safe motherhood, CSSM II	9,5	2,9
Preparation for Reproductive and Child Health Progr in Rajastan	0,4	0,4
AIDS/STD		
AIDS activities in Bombay, BMC	0,3	0,5
NGO support to HIV/AIDS drug users in Manipur and Nagaland	1,5	
Child Health		
Child Survival and Safe motherhood, CSSM II, UNICEF		26,0
Integrated Child Development Services, Tamil Nadu, ICDS III.	15,7	17,7
Total DESO/Health Division	27,4	47,5

CSSM ICDS
Cooperation started; 1992 1989
Agreement Period: 95-98 95-99
Agreed Amount; 175 MSEK 60 MSEK

**SEKA**Health Sector Support through NGOs

Total SEKA	7,4	11.4
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## 4.13 Laos

	Disburse	Disbursements	
	1998	1997	
Pharamceutical Sector Development National Drug Policy, Implementation NPD ICHAR Programme	0,9 2,1	2,4	
<b>Child Health</b> MCH, UNICEF		1,6	
Substance Abuse Capacity building, UNDCP(Special Programmes)	(1,8)		
Total DESO/Health Division	3,0	4,0	

Cooperation started; 1989

Agreement Period; 96 - 98, UNICEF 95 - 98 Agreed Amount; 15 and 5.5 MSEK resp

Technical Assistance; Institutional Collaboration – IHCAR/NDP

#### **SEKA**

Health Sector Support through NGOs

Total SEKA	0. 2	0, 6
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## 4.14 Vietnam

	Disbursements	
	1998	1997
Health Systems Development		
Health Policy, World Bank and IMF	3,5	1,5
Training systems		1,8
District Health Care		
PHC		1,7
Disadvantaged Areas	7,2	5,1
Pharmaceutical Sector Development		
Drug control	9,7	6,4
Sexual and Reproductive Health		
Maternal Health Care		0,3
Disease Control		
Central Hospitals, IPCH, UBGH	5,1	5,7
Other Health		
Proj management, IPO etc.	5,2	5,2
Monitoring	0,3	
Monitoring, Thai bin (Special Programmes)	0,3	
Total DESO/Health Division	32,1	27,7

Cooperation started; 1974
Agreement Period; 94-99
Agreed Amount; 250 MSEK

Technical Assistance; Chief Advisor, Financial Advisor,

Public Health Advisor, Pharmaceutical Advisor,

2 Training Advisors

#### **SEKA**

Health Sector Support through Swedish NGOs

Total SEKA	2,7	3,1

#### **SAREC**

Bilateral Health Research Cooperation in the fields of cholera vaccine and health systems.

Total SAREC	2,2	3,1

## 4.15 West Bank/Gaza

	Disburse 1998	ements <i>1997</i>
District Health Care PHC,Union of Palestinian Medical Relief Comm/ Palestine Groups	4,0	5,0
<b>Rehabilitation of disabled</b> CBR, Diakonia	9,7	4,0
Other Health Mental Health, Gaza Comm Mental Health Progr/Palestine Groups	0,7	0,7
Total DESO/Health Division	14,4	9,7

Cooperation started; Diakonia 1989, UPMRC/PGS 1986, GCMHP/PGS 1997

Agreement Periods; Agreed Amounts;

 Diakonia 96 –98
 26,9 MSEK

 PGS 96 – 98
 16 MSEK

 PGS 97 –98
 1.4 MSEK

#### **SEKA**

Health Sector Support through Swedish NGOs

Total SEKA	1,0	2.1
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## 4.16 Nicaragua

	Disbursements	
	1998	1997
District Health Care		
Health System Reform, PROSILAIS II, PAHO	4,0	25,2
Health System Reform, PROSILAIS II, UNICEF	12,8	8,0
Follow-up	0,5	
Rural Development, PROSERBI, UNICEF	15,5	14,7
Monitoring	0,3	
Population related Issues		
Demographic and Health Service, DHS		2,9
CEPS	1,8	
Total DESO/Health Division	34,9	50,8

	PROSILAIS PROSI	
Cooperation started;	1996	1986
Agreement Period;	96-99	97-98
Agreed Amount;	80 MSEK	14.5 MSEK

#### **SEKA**

Health Sector Support through NGOs

Total SEKA 3,1 0.9
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#### **SAREC**

Bilateral Health Research Cooperation concerning i.a. parasitology, reproductive health and occupational health.

## 4.17 Central America

	Disburse	ments
	1998	1997
District Health Care and Health Sector Reform		
Health Sector Reform, PAHO (Guatemala, El Salvador, Honduras)	9,5	47,0
Follow-up	0,1	
Sexual and Reproductive Health		
Women's Health, Women and Violece, PAHO	2,2	1,2
Maya women, PAHO		1,6
AIDS/STD		
HIV/AIDS, PAHO (Guatemala) (Special Programmes)		2,0
Environmental Health		
MASICA/PROAGUA, PAHO	3,3	
Total DESO/Health Division	15,1	51,8

**PAHO** 

Cooperation started; 1986 Agreement Period; 95-98

Agreed Amount; 129.8 MSEK

#### **SEKA**

Mitch emergency intervention, SRK/IFRC	8,0	
NGO support, El Salavador, Guatemala	2,3	
Total SEKA	10,3	3,4

## **SAREC**

Regional Health Research Training Programme

Total SAREC 2,0
-----------------

## 5. Health Sector Cooperation with Eastern Europe Department for Central and Eastern Europe

Central and Eastern Europe		Fiscal year Disbursements	
		1998	ments 1997
Health Systems Development	Subtotal:	2,2	2,4
Health Management, Estonia	Subtotai.	0,8	2, 1
Health Administration, Severomorsk		0,3	
Health Management, Latvia		1,2	
Child Health	Subtotal	0,6	1,6
Mother and Child Care, Russia		0,6	,
Disease Control	Subtotal	0,2	0,6
TB, Baltic countries		0,2	,
Sexual and Reproductive Health	Subtotal	1,3	1,2
Sex Education, Russia		1,2	
Family Planning, Estonia		0,1	
Rehabilitation of disabled	Subtotal	0,8	1,9
Rehab centres, Lithuania		0,8	
Medical Equipment	Subtotal	0,3	
Poland		0,3	
Training	Subtotal	0,3	
Training of district nurses, Estonia		0,3	
Environmental Health	Subtotal	0,7	
Aral Sea Conference and project devel	lopment	0,3	
Occupational Health, Estonia		0,2	
Labor protection, Russia		0,2	
Substance Abuse	Subtotal	1,3	
Drug box, Russia		1,0	
Exibition, Russia		0,2	
Alcohol Policy, Moskow, Russia		0,1	
Other Health	Subtotal	26,5	22,2
East European Committee, ÖEK		14,7	
Health Programme, Karakalpak		3,3	
NPA, Bosnia		1,0	
Health sector cooperation, Bosnia		7,2	
IRCT, Zagreb, Croatia		0,3	
Total Disbursement Eastern Europe	Health	34,6	29,9

# 6. Sida Health Sector Cooperation through NGOs and the UN System, SEKA

Country	Swedish NGOs 1998	Humanitarian Assistance 1998	Total Disbursements 1998	Total 1997
Africa	61,7	57,8	119,5	115,1
Burundi	1,6	10,9	12,5	
Guinea	0	1,0	1,0	
Guinea Bissau	0	2,2	2,2	
Liberia	0,1	4,0	4,1	
Rwanda	0,5	20,7	21,2	
Sierra Leone	0	4,2	4,2	
Somalia	0,6	7,3	7,9	
Sudan	0,6	4,5	5,1	
Regional Africa	0	3,0	3,0	
Other Africa	58,3	0	58,3	
Asia	40,6	34,8	75,4	122,5
Afganistan	2,3	5,0	7,3	
China	1,7	8,0	9,7	
Iraq	0,6	18,6	19,2	
Sri Lanka	1,3	2,7	4,0	
Tadjikistan	0	0,5	0,5	
Other Asia	34,7	0	34,7	
Latin America	20,1	8,0	28,1	33,6
Other Latin America	20,1	8,0	28,1	
Europe	0,8	18,9	19,7	23,1
Bosnia		5,9	5,9	
Croatia		1,2	1,2	
Latvia		0,2	0,2	
Yugoslavia		11,6	11,6	
Other Europe	0,8	0	0,8	
Global	8,9	1,8	10,7	11,1
Total SEKA	132,1	121,3	253,4	305,4

## 7. International Training Programmes, Technical Cooperation and Development Credits, INEC

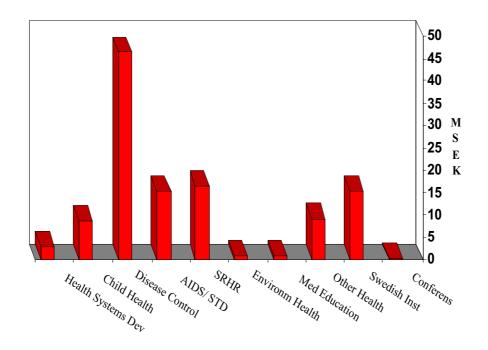
		Disbursements	
		1998	1997
Technical (	Cooperation and Credits	8,4	15,5
Egypt:	Study on Health Sector	0,1	
Bangladesh	: Medical Services (Credit)	0,3	
Jordan:	Nurse training	0,3	
	Drug Industry	0,1	
China:	BCH Virology	0,2	
	Life Education, SRHR	0,1	
	Iodine Deficiency	1,8	
	Medical Equipment (Credit)	5,1	
Thailand:	Health and Social Security	0,4	
Internation	al Training programmes	10,8	4,7
Global:	Sexual and Reproductive Health	0,7	
	Child Health	0,9	
	Occupational Safety	0,7	
	Health Education	0,4	
	Health Managment	0,1	
Africa:	Adolescent Health	1,1	
	Occupational Health in Practice	2,1	
Asia:	Sexual and Reproductive Health	1,8	
Latin Ame	rica: Occupational Safety	1,9	
Europe:	Sexual and Reproductive Health	1,1	
Total INEC		19,2	20,2

## 8. Sida Health Research Cooperation, SAREC

## 8.1 Programme Areas

Programme Area	Disburse	ements
	1998	1997
Health Systems Development	2,7	4,5
Child Health and immunisations	8,6	3,6
Disease Control	46,5	33,8
AIDS/STD	15,3	19,6
Sexual and Reproductive Health	16,5	12,2
Nutrition	0	0,4
Other Health	9,1	11,1
Environmental Health	0,9	
Medical Education and Training	0,8	0
Health Research/Swedish Institutions	15,4	9,6
Research Conferences and Courses	0,2	3,4
Total SAREC	116,0	98.1

## **Health Research Disbursements 1998**



## 8.2 Sida Health Research Cooperation by Country

Countries	Disburse 1998	ments 1997
Asia Vietnam, Health Systems, Oral Cholera Vaccine Regional Asia, ICDDR,B core support and collaborative projects	2,2 4,5	
Total Asia	6,7	7,7
A.C. *		
Africa Ethiopia Diomodical Descarah SDUD Environmental Health AUDI	10.0	
<b>Ethiopia</b> , Biomedical Research, SRHR, Environmental Health, AHRI <b>Guinea Bissau</b> , AIDS Control	10,0 1,6	
Mozambique, Reproductive Health	0,2	
Tanzania, Malaria, HIV/AIDS, SRHR, Medical Faculty support	9,4	
Zimbabwe, SRHR,	2,8	
Total Africa	24,0	22,7
	,	,
Latin America		
Cuba, Biomedicine	0,2	
Nicaragua, Medical Faculty Support, Microbiology, SRHR, Bacterial	6,1	
antigens, Occupational Health, Mental Health		
Regional Central America, Biomedical Research and Training	2,0	
Regional Latin America, Research training and networking, parasitic	3,0	
diseases		
Total Latin America	11,3	14,0
Global		
WHO/GTB	4,0	
WHO/VRD	4,0	
WHO/Other Programmes	0,8	
WHO/Tropical Disease Research, TDR	20,0	
WHO/Human Reproduction Programme, HRP	10,0	
WHO/Child Health, tuberculosis, vaccine development	3,0	
Council on Health Research for Development, COHRED	4,5	
Global Forum for Health Research	2,5	
HIV/AIDS, STD	7,6	
Special Programmes and Projects and International Research Conferences	2,0	
Total Global Programmes	58,4	44,1
Allocations to Health Sector Research in Sweden	15,4	9,6
Research conferenses and courses	0,2	3,4
Total Health Research Cooperation, SAREC	116,0	98,1

## 9. Health Sector Cooperation through International Organisations

## 9.1 United Nations Children's Fund, UNICEF

	1998	1997
Swedish Contribution to Regular Budget <sup>1</sup>	63,0	71,0
Country Programme - Health	0.4	1.2
Angola, Immunisation	9,4	1,3
Botswana, AIDS	2,1	
Namibia, Adolescent HIV/AIDS	0	2,2
Uganda, Capacity Building, PHC	3,0	15,9
Uganda, Adolescent Health	1,3	5,6
Bangladesh, Immunisations	0,1	9,6
India, Reproductive/Child Health	9,9	28,9
Laos, Mother and Health	0	1,6
Bolivia, PROANDES	6,5	
Bolivia, Women and Health	2,7	
Nicaragua, PROSERBI	16,8	14,7
Nicaragua, PROSILAIS	12,8	8,0
Total Country Programmes (DESO/Health Division)	64,6	87,8
Special Programmes		
Eritrea, Female Genital Mutilations		0,6
Code of Marketing of Breast Milk Substitutes	1,2	1,6
Code of Marketing of Breast Mink Substitutes	1,2	1,0
Total Special Programmes (DESO/Healt Division)	1,2	2,2
Humanitarian Assistance (SEKA)	5,5	48,4
TOTAL Contributions	134,3	209,4

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 $<sup>^{1}</sup>$  Out of the total Swedish contribution to UNICEF in 1998, SEK 250 million, approximately 25%, or 63 million is directed to Health.

## 9.2 World Health Organisation, WHO

	DESO/Health 1998	SAREC 1998	T 1998	otal <i>1997</i>
	1770	1770	1990	177/
Swedish Contribution to Regular Budget			34,0	39,0
Extra Budgetary Contributions				
Health Policy and Management				
Health Systems Development Progr, HSDP/ARA	2.0		2.0	2,0
Health Information, Intersectoral Action			0	1,2
Child Health			0	0
Child Health and Development, CHD	4,0	3,0	7,0	5,4
Global Programme on Vaccines, VRD		4,0	4,0	1,6
Essential Drugs			0	0
Action Programme on Essential Drugs, DAP	2,0		2,0	2,5
Disease Control			0	0
Tropical Diseases Reasearch Programme, TDR		20,0	20,0	15,0
Global Programme on Tuberculosis, GTB		4,0	4,0	1,7
Other Programmes		0,8	0,8	0
Sexual and Reproductive Health			0	0
Reproductive Health Technical Support, RHT	8,0		8,0	3,0
Human Reproductive Programme, HRP		10,0	10,0	7,0
Womens Health, Adolescent Health			0	4,8
Environmental Health			0	0
Rural Environmental Health, PEH	2,0		2,0	1,5
Chemical Safety, IPCS	1,0		1,0	1,0
Intergrated Environmental health, EHG			0	0,9
Combating Narcotics			0	0
PSA	2,0		2,0	1,0
Rehabilitation	•		0	O
Rehabilitation Unit, RHB	2,0		2,0	1,5
Total	23,0	41,8	64,8	50,1
Regional Support through PAHO, Central Ameri	ca			
PAHO, Nicaragua	4,0		4,0	
PAHO, Central America	0,1		0,1	
MASICA/PROAGUA	3,3		3,3	
Health Sector Reform, Guatemala, El Salvador	9,3		9,3	
Women and violence	2,2		2,2	
HIV/AIDS, Honduras	1,0		1,0	
Total Regional Support	19,9		19,9	77,0
Total Humanitarian Assistance, SEKA	,		19,3	7,5
Junior Professional Officers			2,7	1,8
Total Sida Cooperation			106,7	136,3
TOTAL SWEDISH CONTRIBUTION			140,7	175,4

## 9.3 United Nations Population Fund, UNFPA

	1998	1997
Swedish Contribution to	125,0	116,0
Regular Budget	ŕ	
Extra Budgetery, Adolescent Health, Central America		0,4
	125.0	11/1
TOTAL CONTRIBUTION	125,0	116,4

## 9.4 Joint United Nations Programme on HIV/AIDS, UNAIDS

	1998	1997
Swedish Contribution to		
Regular Budget	37,0	25,0
Extra Budgetary contribution,		
Multisectoral strategic planning	10,0	5,0
TOTAL CONTRIBUTION	47,0	30,0

## 9.5 World Bank, (IDA)

	1998	1997
Co-financing of World Bank programmes through		
Country Programme Support		
Bangladesh, 4th Population Project	19,0	40,9
Uganda, District Health Service Project	14,9	3,1
Uganda, STD	10,0	
Zimbabwe, Family Health Project		4,7
Vietnam, Health financing	0,7	
TOTAL CONTRIBUTION	44,6	48,7

## **Abbreviations and Acronyms**

ADH - Adolescent Health Programme, WHO

AHRTAG - Appropriate Health Resources and Technologies Action Group

AIDS - Acquired Immunity Defence Syndrome

AMREF - Africa Medical and Research Foundation

Arrow - Asian-Pacific Resource & Research Centre for Women

BAPSA - Bangladesh Association for Prevention of Septic Abortion

BRAC - Bangladesh Rural Advancement Committee

BWHC - Bangladesh International Women's Health Coalition

CAOL - Coordination of Obstetric Attendance in Luanda, Angola

CAPEL - Coordination of Pediatric Attendance in Luanda, Angola

CBR - Community Based Rehabilitation

CHD - Child Health and Development Programme, WHO

COHRED - Council on Health Research for Development

CSSM - Child Survival and Safe Motherhood Programme

DAP - Drug Action Programme, WHO

DESO - Department for Democracy and Social Development, Sida

DHS -Demographic and Health Survey

DPI - Disabled People International

EAST - Department for Central and Eastern Europe

ECPAT - End Child Prostitution, Pornography and Trafficking for

sexual Exploitation

EDP - Essential Drugs Programme

EHG - Integrated Environmental Health

**EPI - Expanded Programme of Immunisation** 

ESCAP - Economic and Social Committee for Asia and the Pacific

FRH - Family and Reproductive Health Division, WHO

FP - Family Planning

GPV - Global Programme for Vaccines, WHO

GTB - Global Programme on Tuberculosis, WHO

HAI - Health Action International

HI - Swedish Handicap Institute

HIV - Human Immunodeficiency Virus

HRP - Human Reproductive Programme, WHO

HSDP - Health Systems Development Programme, WHO

IBFAN - International Baby Food Action Network

ICDDR, B- International Centre for Diarrhoeal Diseases Research, Bangladesh

**ICDS- International Child Development Services** 

ICH - International Child Health Department, University of Uppsala

IHCAR - Department of International Health Care Research, Karolinska

IHE - Institute for Health Economics, Lund

IMM - Institute for Environmental Medicine, Karolinska Institute

INCAP - Institute of Nutrition of Central America and Panama

INEC - Department for Infrastructure and Economic Cooperation

IPAS - Women's Health Initiative

IPCS - International Programme for the Promotion of Chemical Safety

IPPF - International Planned Parenthood Federation

IMCI - Integrated Management of Childhood Illnesses

IUSSP - International Union for the Scientific Study of Population

IWHC - International Women's Health Coalition

**IPO - Junior Professional Officer** 

KEMI - The Swedish National Chemical Inspection

LNSP - National Public Health Laboratory, Guinea-Bissau

MFSTC - Muhammadpur Fertility Services and Training Centre

MHC - Mother Health Care

MOH - Ministry of Health

MRTSP - Menstrual Regulation Training and Services Programme

MUCHS - Muhibili University College of Health Sciences

MWIA - Medical Women's International Association

NGO - Non-Governmental Organisation

NHP - National Health Policies

PAHO - Pan-American Health Organisation

PEH - Programme for Environmental Health, WHO

**PGS** - Palestine Groups

PHC - Primary Health Care

PROP - Programme on Population and Development, University of Lund

PROSERBI - Integrated Rural Development Programme, Nicaragua

PROSILAIS - Local Health Systems Project, Nicaragua

PSA - Programme on Substance Abuse, WHO

Q-WEB - Women's Network, Sweden

RAINBOW - Research Action Information Network for Bodily Integrity of

REH - Rural Environmental Health

RFSU - Swedish Association for Sexual Education

RHB - Rehabilitation Unit, WHO

RHT - Reproductive Health Technical Support

SAI - Anthropological Department, Stockholm University

SANASO - Southern African Network of AIDS Services Organisations

SAREC - Swedish Agency for Research Co-operation with Developing

SCI - Strengthening Country Health Information, WHO

SEK - Swedish Crowns

SEKA - Department for Cooperation with NGOs and Humanitarian Assistance, Sida

SHIA - Swedish Organisation of Handicapped International Aid Foundation

SHS - Strengthening Health Systems Department, WHO

SIDA - Swedish International Development Authority

Sida - Swedish International Development Cooperation Agency

SILAIS - Local Health Systems Development

SMI - Swedish Institute of Infectious Diseases

SODECO - Social Development Consultants, Ldt

SRHR - Sexual and Reproductive Health and Rights

STD - Sexually Transmitted Diseases

STIP - Sexual Transmitted Infection Project

TASO - The AIDS Support Organisation, Uganda

TB - Tuberculosis

TDR - Tropical Diseases Research, WHO

TFNC - Tanzania Centre for Food and Nutrition

UMATI- Family Planning Association of Tanzania

UNAIDS - Joint United Nations Programme on HIV/AIDS

UNDCP - United Nations Drug Control Programme

UNDP - United Nations Development Programme

UNFPA - United Nations Population Fund

UNICEF - United Nations Children's Fund

WABA - World Alliance for Breast-feeding Action

WB - World Bank

WHD- Women's Health and Development, WHO

WHO - World Health Organisation

WIF - WorldView International Foundation

ZEPI - Zimbabwe Extended Programme on Immunisation

## **List of Health Division Documents**

	Strategies/Policies		Issue Papers
1997:1	Policy for Development Cooperation Health Sector	1998:1 1998:2	Maternal Health Care, by Staffan Bergström Supporting Midwifery, by Jerker Liljestrand
1997:2	Política para la Cooperación para el Desarrollo Sector Salud	1998:3	Contraception, by Kajsa Sundström
1997:3	Position Paper Population, Development and Cooperation	1998:4	Abortion, by Kajsa Sundström
1997:4	Positionspapper Befolkning, utveckling och samarbete	1998:5	Female Genital Mutilation, by Beth Maina-Ahlberg
.997:5	Marco de Referencia para la Cooperación para	1998:6	Adolescent Sexuality Education, Counselling and Services, by Minou Fuglesang
	el Desarrollo Población, Desarrollo y Cooperación	1998:7	Discrimination and Sexual Abuse Against Gir and Women, by Mary Ellsberg
1997:6	Strategy for Development Cooperation Sexual and Reproductive Health and Rights	1998:8	Health Care of the Newborn, by Ragnar Thunell
1997:7	Estrategia para la Cooperación para el Desarrollo Salud y Derechos Sexuales y Reproductivos	1998:9	Men, Sexuality and Reproductive Health, by Beth Maina-Ahlberg, Minou Fuglesang and Annika Johansson
1997:8	Handbook for mainstreaming A Gender Perspective in the Health Sector	1998:10	Illicit Drugs and Development Cooperation, by Niklas Herrmann - Replaced by 2000:2 -
1999	Investing for future generations. Sweden's International Response to HIV/AIDS	1999:3	Socio-economic Causes and Consequences of HIV/AIDS
2000:2	Guidelines for Action – Illicit Drugs and Swedish International Development Cooperation Hälsa & Utveckling,	2000:1	by Stefan de Vylder  HIV/AIDS in the World Today – a Summary of Trends and Demographic Implications
	Fattigdom & Ohälsa – ett folkhälsoperspektiv by Göran Paulsson, Ylva Sörman Nath and	2001:2	by Bertil Egerö and Mikael Hammarskjöld Health and Environment
	Björn Ekman		by Marianne Kjellén
		2001:3	Improving Access to Essential Pharmaceuticals, by IHCAR
		2001:5	A Development Disaster: HIV/AIDS as a Cause and Consequence of Poverty by Stefan de Vylder
		2001:6	National Health Accounts – Where are we today? by Catharina Hjortsberg
		2001:7	Ideas work better than money in generating reform – but how? by Alf Morten Jerve
		2002:2	Health and Human Rights by Birgitta Rubenson

	Facts and Figures		Fact Sheets
1995/96	Facts & Figures 95/96	1997	Hälso och sjukvård
	Health Sector Cooperation	1997	Reformer inom hälsosektorn
1997	Facts & Figures 1997	1997	Rätten till sexuell och reproduktiv hälsa
	Health Sector	1997	Befolkning och utveckling
1999:2	Facts & Figures 1998	1997	Ungdomshälsa
	Health Sector	1997	Handikappfrågor
2000:3	Facts & Figures 1999	1999	Aidsbekämpning i Uganda
2000.0	Health Sector	1999	Förebyggande insatser mot drogmissbruk
2001:4	Facts & Figures 2000	1999	Insatser mot familjevåld i Centralamerika
	Health Sector	1999	Bättre mödrahälsovård i Angola
2002:1	Facts & Figures 2001	1999	Utbildningssamarbete Kenya-Linköping
	Health Sector	2001	Sveriges stöd till Hiv/Aids-insatser – 2001
		2002	Fler välutbildade barnmorskor ger tryggare förlossningar
Cour	itry and Regional Health Profiles	2002	Femina skapar het debatt om sex och hiv
1995	Angola	2002	Rent vatten ger bättre hälsa och ökad jämställdhet
1995	Bangladesh		•
1995	El Salvador		Sida Evaluations
1995	Ethiopia		Siua Evaluations
1995	Guatemala	98/14	Expanded Programme on Immunization in Zimbabwe
1995	Guinea Bissau		
1995	Honduras	99/10	Working with Nutrition. A comparative study of the Tanzania Food and Nutrition Centre and the
1995	India		National Nutrition Unit of Zimbabwe
1995	Kenya	99/11	Apoyo de Asdi al Sector Salud de Nicaragua.
1995	Laos		Prosilais 1992-1998
1995	Nicaragua	99/36	Support to Collaboration between Universities.  An evaluation of the collaboration between MOI
1995	Vietnam		University, Kenya, and Linköping University,
1995	West Bank/Gaza		Sweden
1995	Zambia	01/03	Tackling Turmoil of Transition. An evaluation of
1995	Zimbabwe'		lessons from the Vietnam-Sweden health cooperation 1994 to 2000
2000:4	Uganda	01 /20	
2000:5	West Africa	01/32	Review of PAHO's project. Towards an integrated model of care for family violence in Central America. Final report
		02/13	Sida's Support to the Reproductive Health and TANSWED HIV Research Programmes in Tanzania

#### Other documents

1999:1 Report on: **World Youth Conferences in Portugal** August 1998, by Wanjiku Kaime-Atterhög and Anna Runeborg Framtid Afrika -2000:6A Huvudrapport 2000:6B Annex to Framtid Afrika -Health Support in Africa - Country Reports 1998 **Gender and Tuberculosis** 2000 **Webs Women Weave** 2001 Hälsa - en nyckel till utveckling 2001 Jord för miljarder 2001 Aids: The Challenge of this Century

**Health Sector Reforms: What about Hospitals?** 

2002



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