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July 12, 2019

**ACTION MEMO FOR DEBORAH L. BIRX, AMBASSADOR-AT-LARGE; COORDINATOR OF THE UNITED STATES GOVERNMENT ACTIVITIES TO COMBAT HIV/AIDS AND U.S. SPECIAL REPRESENTATIVE FOR GLOBAL HEALTH DIPLOMACY**

SUBJECT: South Sudan Country Operational Plan 2019 Approval

**Recommendations**

Approve the South Sudan Country Operational Plan (COP) 2019 with a total budget of \$20,282,496, including all initiatives and applied pipeline, to achieve the targets and outcomes as listed in this memo and all appendices. Total budget is reflective of the following programming:

South Sudan	New Funding (all accounts)*	Pipeline**	Total Budget FY2020 Implementation
<b>Total Budget</b>	<b>12,479,076</b>	<b>7,803,420</b>	<b>20,282,496</b>
<b>COP 19 Bilateral</b>	12,479,076	7,803,420	20,282,496
<b>Central TLS Funds</b>	-	-	-

\* New Funding may refer to FY 2019 or other FY appropriations newly allocated for implementation in FY 2020 with COP 2019; accounts indicated in detailed tables.

\*\* Pipeline refers to funding allocated in prior years and approved for implementation in FY 2020 with COP 2019

Approve a total FY 2020 outlay for COP 2019 implementation that does not exceed the total approved COP 2019 budget of \$20,282,496. **Any prior year funds that are not included within this COP 2019 budget and documented within this memo, its appendix and official PEPFAR data systems are not to be made available for execution and outlay during FY 2020 without additional written approval.** The new FY 2019 funding and prior year funds approved within this memo as a part of the total COP 2019 budget are allocated to achieve specific results, outcomes and impacts as approved. All requested Operational Plan Updates and shifting of funds – either between mechanisms and partners, or to add additional funding to mechanisms and partners for execution in FY 2020– must be submitted to and approved by S/GAC.

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Approved funding will be made available to agency headquarters for allocation to country platform to implement COP 2019 programming and priorities as outlined below and in the appendix.

South Sudan must fully achieve approved COP 2018 (FY 2019) treatment current (TX\_CURR) targets in order to execute the COP 2019 strategy. Suboptimal COP 2018 performance jeopardizes COP 2019 funding and may result in updates to this approval and a decrease to the COP 2019 funding.

## **Background**

This approval is based upon: the discussions that occurred between the country team, agency headquarters, S/GAC, indigenous and international stakeholders and implementing partners in Johannesburg, South Africa during the March 4-8, 2019 in-person planning meetings; the final COP 2019 submission, including all data submitted via official PEPFAR systems or within supplemental documents; and South Sudan's virtual COP 2019 approval with Ambassador Birx on April 15, 2019.

## **Program Summary**

Funding and targets for South Sudan's Country Operational Plan 2019 support PEPFAR South Sudan's vision to accelerate progress toward the achievement of the Joint United Nations Program on HIV/AIDS (UNAIDS) 90-90-90 goals. Working alongside the South Sudanese government, multilateral organizations, and international and local civil society organizations, funding will support the COP 2019 PEPFAR South Sudan programming to expand the provision of life-saving treatment to South Sudanese people living with HIV (PLHIV), while improving the rates at which these PLHIV are retained on treatment and virally suppressed. While deaths among South Sudanese PLHIV due to all causes have been on the decline in the last several years, primarily due to the expansion of treatment services, these gains are being eroded by the rate of new HIV infections in South Sudan, which continues to rise. Therefore, during the COP 2019 implementation period of FY 2020, PEPFAR South Sudan will focus its efforts on: implementing optimized testing strategies for diagnosing HIV positives; ensuring that PLHIV newly enrolled on treatment remain on treatment; and tracing and re-enrolling PLHIV that have fallen out of treatment, thereby mitigating the rate of new infections in the country. COP 2019 will accelerate progress to achieving epidemic control, ensuring that of the estimated 186,817 people living with HIV (PLHIV), treatment coverage is increased from the current 14% to 32% by enrolling an additional 24,066 PLHIV on treatment (totaling 60,811 currently on treatment), and 26,263 patients achieving viral

suppression (93% of those who have had a viral load test). Additionally, COP 2019 funds will go toward male circumcisions for 1,545 adult men, and TB preventative therapy toward 4,085 ART patients.

The PEPFAR South Sudan strategy for programming to be implemented in FY 2020 is based on a thorough review of programmatic data, discussions with civil society and community organizations, and implementing partners. COP 2019 will support treatment expansion and improved retention in treatment by: using the most effective HIV testing and case-finding approaches; optimizing treatment regimens and scaling differentiated models of care; engaging with civil society to increasing treatment literacy among newly identified PLHIV; improving the support to and supervision of HIV treatment sites; and improved coordination across stakeholders in the HIV response in South Sudan, including work at the policy level to ensure patients who have not received ARVs within four weeks of their last missed drug pick-up are tracked and followed-up.

PEPFAR South Sudan will utilize specific strategies in FY 2020 in support of the COP 2019 priorities of treatment expansion and improved retention. With respect to testing and case-finding, PEPFAR South Sudan has revamped its approach and COP 2019 will support investments in the most effective and efficient case-finding modalities, namely index testing and assisted partner notification. This will build upon improved index testing in all partners in quarters 3 and 4 of COP 2018 implementation.

Additionally, PEPFAR South Sudan will aggressively transition PLHIV to Tenofovir/lamivudine/Dolutegravir (TLD) regimens, before August 2019, while simultaneously moving as many eligible patients as possible to multi-month scripting. Given the political fragility and ongoing conflict in South Sudan, which has resulted in a highly mobile population, a longer scripting time of six months for TLD regimens for stable patients would greatly improve retention by reducing: the total number of patient appointments; and adverse reactions to treatment since TLD is a better tolerated regimen than other treatment regimens.

In FY 2020, PEPFAR South Sudan will work with civil society to: ensure that clinical staff who are initiating PLHIV on treatment; spend adequate time and attention on treatment literacy; provide ongoing psycho-social support to new treatment enrollees in between clinic visits; and trace PLHIV who are lost and facilitate getting them back onto treatment. PEPFAR South Sudan will also ensure peer outreach workers, who are critical to the success of the program, are paid commensurately for their services.

At facilities, COP 2019 will support PEPFAR South Sudan's focus for COP 2019 on the use of granular, site-level data to triage interventions and make

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decisions in real-time to rapidly assess and course-correct performance of HIV treatment sites. The monitoring and evaluation of sites is being enhanced by a new field supervision model, whereas the monitoring and evaluation of implementing partners is being enhanced by more frequent and intensified engagement with partners. These site-level efforts will be enhanced by key above-site activities to strengthen health information and laboratory systems in South Sudan.

COP 2019 implementation will also feature improved coordination across the stakeholders in the HIV response in South Sudan, including the Government of South Sudan, South Sudanese civil society, and the Global Fund to fight AIDS, Tuberculosis, and Malaria, especially in the case of Global Fund for procuring 3- to 6-month packages of ARVs for HIV-positive patients. Expanding treatment and improving retention requires close collaboration among these stakeholders, particularly given the ongoing conflict and operational realities in South Sudan. It is imperative that both the PEPFAR and the Global Fund and its principal recipient, the United Nations Development Program (UNDP), are held to the same level of transparency and performance and program their limited resources for the most effective interventions.

PEPFAR South Sudan is expected to ensure that the following minimum program and policy requirements continue or are in place by the beginning of COP19 implementation (FY 2020) in order for funds to be disbursed. The minimum requirements for PEPFAR South Sudan include: continued implementation of Test and Start across all PEPFAR-supported sites; implementation of differentiated service delivery models, including aggressive roll out of six-month multi-month scripting; aggressive transition of TLD, ideally pushing before August 2019 and ensuring women of childbearing potential and adolescents are eligible with informed consent; scale up of index testing across all clinical partners and lay the policy groundwork for self-testing; aggressive scale up of TB preventive treatment for all PLHIV; immediate linkage of clients from testing to treatment across age, sex, and risk groups; completion of VL/EID optimization activities in all remaining PEPFAR-supported sites during COP 2019; monitoring and reporting of morbidity and mortality outcomes including infectious and non-infectious morbidity; scale up of OVC aligned to where new HIV positives are identified, including among older adolescent girls; and where continue to engage with local, indigenous partners as sub-awardees while strengthening local organizational and technical capacity, where possible.

Additional funds in the amount of up to \$15 million to be notified, but held at the respective U.S. government agencies based on COP 2018 quarter 3 and 4 performance, will support the potential of high-performing partners and sites to

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increase HIV services to the people of South Sudan should the country's recent revitalized peace agreement hold and be realized by the Government and citizens of South Sudan.

## Funding Summary

All COP 2019 funding summarized in the chart below is approved at the agency and account levels as indicated. Funds are to be utilized to achieve the targets and outcomes and to fund implementing partners and Management and Operations costs (U.S. Government Costs of Doing Business) as documented in all PEPFAR systems and summarized in the appendix.

South Sudan	FY 2019 New			Total New Funds	Applied Pipeline*	Total COP 19 Bilateral Budget
	GHP-State	GHP-USAID	GAP			
DOD TOTAL	312,051	-	-	312,051	991,010	1,303,061
HHS TOTAL	9,128,013	-	200,000	9,328,013	3,580,146	12,908,159
HHS/CDC	9,128,013	-	200,000	9,328,013	3,580,146	12,908,159
USAID TOTAL	2,839,012	-	-	2,839,012	3,232,264	6,071,276
USAID, non-WCF	2,839,012	-	-	2,839,012	3,232,264	6,071,276
of which, USAID LES	282,496	-	-	282,496	-	282,496
TOTAL	12,279,076	-	200,000	12,479,076	7,803,420	20,282,496
of which, USAID LES	282,496	-	-	282,496	-	282,496

\* Pipeline refers to funding allocated in prior years, approved for implementation in FY 2020

**GHP-State Funds:** Upon the clearance of a FY 2019 PEPFAR GHP-State Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. Funds are made available for outlay in FY 2020 at approved COP 2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon receipt from S/GAC, agency headquarters will move the funds to the country platform via each agency's internal process.

**CDC GAP Funds:** With the receipt of this signed memo, CDC is approved to use CDC GAP funds, as indicated in the above funding chart. Funds are to be made available for outlay in FY 2020 at approved COP 2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. With this approval, CDC GAP funding may be made available to country teams per CDC internal processes and following agency requirements.

**Applied Pipeline Funds:** With the receipt of this signed memo, respective agencies are approved to use applied pipeline funds as indicated in the above funding chart. Funds are to be made available for outlay in FY 2020 at approved COP 2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Additional or remaining pipeline from previous year's

activities that are not currently captured in the COP 2019 total budget level and documented within COP 2019 partner budgets are not to be executed or outlaid without written approval from the Global AIDS Coordinator.

**FY 2020 Target Summary**

FY 2019 funds are released and COP 2019 applied pipeline is approved to achieve the following results in FY 2020.

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South Sudan		SNU Prioritizations					Total *
		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	
HTS_INDEX	<15			6,732	668		7,400
	15+			21,440	7,618		29,058
	<b>Total</b>	-	-	<b>28,172</b>	<b>8,286</b>	-	<b>36,458</b>
HTS_TST	<15			33,540	2,392		35,932
	15+			357,023	87,899		444,922
	<b>Total</b>	-	-	<b>390,563</b>	<b>90,291</b>	-	<b>480,854</b>
HTS_TST_POS	<15			1,250	118		1,368
	15+			18,931	6,269		25,200
	<b>Total</b>	-	-	<b>20,181</b>	<b>6,387</b>	-	<b>26,568</b>
TX_NEW	<15			1,298	121		1,419
	15+			17,243	5,404		22,647
	<b>Total</b>	-	-	<b>18,541</b>	<b>5,525</b>	-	<b>24,066</b>
TX_CURR	<15			2,967	377		3,344
	15+			45,563	11,901		57,464
	<b>Total</b>	-	-	<b>48,530</b>	<b>12,278</b>	-	<b>60,808</b>
TX_PVLS	<15			1,398	194		1,592
	15+			23,036	6,255		29,291
	<b>Total</b>	-	-	<b>24,434</b>	<b>6,449</b>	-	<b>30,883</b>
CXCA_SCRN	<b>Total (15+)</b>			-	-		-
OVC_SERV	<18			2,114	-		2,114
	18+			503	-		503
	<b>Total</b>	-	-	<b>2,617</b>	-	-	<b>2,617</b>
OVC_HIVSTAT	<b>Total (&lt;18)</b>			-	-		-
PMTCT_STAT	<15			107	-		107
	15+			40,941	6,804		47,745
	<b>Total</b>	-	-	<b>41,048</b>	<b>6,804</b>	-	<b>47,852</b>
PMTCT_STAT_POS	<15			5	-		5
	15+			3,148	286		3,434
	<b>Total</b>	-	-	<b>3,153</b>	<b>286</b>	-	<b>3,439</b>
PMTCT_ART	<15			4	-		4
	15+			3,000	276		3,276
	<b>Total</b>	-	-	<b>3,004</b>	<b>276</b>	-	<b>3,280</b>
PMTCT_EID	<b>Total</b>			<b>2,996</b>	<b>271</b>		<b>3,267</b>
PP_PREV	<15			-	-		-
	15+			7,596	-		7,596
	<b>Total</b>	-	-	<b>7,596</b>	-	-	<b>7,596</b>
KP_PREV	<b>Total</b>			<b>7,248</b>	-		<b>7,518</b>
KP_MAT	<b>Total</b>			-	-		-
VMMC_CIRC	<15			177	-		177
	15+			1,368	-		1,368
	<b>Total</b>	-	-	<b>1,545</b>	-	-	<b>1,545</b>
HTS_SELF	<b>Total</b>			-	-		-
PrEP_NEW	<b>Total</b>			-	-		-
PrEP_CURR	<b>Total</b>			-	-		-
TB_STAT (N)	<15			704	96		800
	15+			5,648	648		6,296
	<b>Total</b>	-	-	<b>6,352</b>	<b>744</b>	-	<b>7,096</b>
TB_ART (N)	<15			40	4		44
	15+			596	66		662
	<b>Total</b>	-	-	<b>636</b>	<b>70</b>	-	<b>706</b>
TB_PREV (N)	<15			224	22		246
	15+			2,903	936		3,839
	<b>Total</b>	-	-	<b>3,127</b>	<b>958</b>	-	<b>4,085</b>
TX_TB (N)	<15			1,482	205		1,687
	15+			23,470	7,308		30,778
	<b>Total</b>	-	-	<b>24,952</b>	<b>7,513</b>	-	<b>32,465</b>
GEND_GBV	<b>Total</b>			<b>2,357</b>	-		<b>2,357</b>

\* Totals may be greater than the sum of categories due to activities outside of the SNU prioritization areas outlined above

\* PEPFAR South Sudan must comply with PEPFAR MER indicator definitions; reporting against the 2019 Treatment Current Indicator (that went into effect on October 1, 2018) is late.

### **Budgetary Requirements**

South Sudan has programmed FY 2019 funding in support of required earmarks as follows:

Earmarks	FY 2019 COP19 Funding Level*
Care & Treatment	7,626,812
HKID Requirement	574,545
* Does not include central funds	

### **Partner Management and Stakeholder Engagement**

Agreements made during COP discussions, including those regarding geographic focus, targets, budgets, SIMS, use of pipeline, partner implementation and partner management will be monitored and evaluated on a regular basis via both ad hoc check-ins and discussions as well as the joint HQ and country team POART discussions. It is expected that teams closely monitor partner performance and engage with each implementing partner on a regular basis to ensure achievement of targets, outcomes and impact in a manner consistent with the this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner found not to be on track to achieve 80% of its approved targets or outcomes by the end of the second quarter must be placed on an improvement plan with clear benchmarks to measure improvement. The country team should notify the S/GAC Chair and PPM immediately of the improvement plan.

Continued engagement with all stakeholders, including civil society and community members, multilateral partners and bilateral partners, is to continue throughout COP implementation. Core to this critical engagement is the sharing of and discussion surrounding quarterly results and achievement. This continued engagement will ensure all parties' understanding of South Sudan's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.