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MEMO FOR NINA FITE; U.S. AMBASSADOR TO ANGOLA

SUBJECT: PEPFAR Angola Country Operational Plan 2020 Approval

This memo represents the successful completion of the PEPFAR Angola Country Operational Plan (COP) 2020 planning, development and submission. PEPFAR Angola, together with the partner government, civil society and multilateral partners, has planned and submitted a COP 2020 in alignment with the directives from the COP 2020 planning letter, data-driven decisions made during the in-country retreat, and agreements made during the planning meeting.

This memo serves as the approval memo for the PEPFAR Angola Country Operational Plan (COP) 2020 with a total approved budget of \$15,710,000, 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:

Angola	New Funding (all accounts)	Pipeline	Total Budget FY 2021 Implementation
Total Budget	15,261,316	448,684	15,710,000
Bilateral	15,261,316	448,684	15,710,000
Central	-	-	-

Approve a total FY 2021 outlay for COP/ROP 2020 implementation that does not exceed the total approved COP/ROP 2020 budget of \$15,710,000. Any prior year funds that are not included within this COP/ROP 2020 budget and documented within this memo, its appendices and official PEPFAR data systems are not to be made available for execution and outlay during FY 2021 without additional written approval. The new FY 2020 funding and prior year funds approved within this memo as a part of the total COP/ROP 2020 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 2021– must be submitted to and approved by S/GAC.

Approved funding will be made available to agencies for allocation to country platform to implement COP 2020 programming and priorities as outlined below and in the appendix.

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 during the Feb 24-28, 2020 in-person planning meetings and feedback from the virtual COP e-approval process; and the final COP/ROP 2020 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

Program Summary

Funding and targets for Angola's Country Operational Plan (COP) 2020 will support PEPFAR Angola's vision -- in partnership with the Government and people of Angola -- to work towards epidemic control by focusing on testing to efficiently identify people living with HIV (PLHIV), ensuring newly diagnosed PLHIV are immediately linked to treatment, and PLHIV are retained on treatment and remain virally suppressed. While PEPFAR Angola intends to reach PLHIV across all ages and sexes, the program for COP 2020 will center on pregnant women, their children, and their sexual partners in four provinces. Angola's mother-to-child transmission (MTCT) rate is the second highest in the world according to the UNAIDS 2017 estimate, and fewer than half of all pregnant women needing HIV treatment to prevent MTCT received anti-retroviral therapy (ART) according to the 2016 Demographic and Health Survey (DHS). With COP 2020 funding, PEPFAR Angola will work toward ensuring 28,017 people are on life-saving treatment by the end of COP 2020; that an additional 5,332 people are enrolled on treatment; and that 25,645 patients are virally suppressed.

The PEPFAR Angola strategy for programming to be implemented during COP 2020 will focus on testing and retaining PLHIV on ART and continuing to prevent new HIV infections through: (1) Continued technical assistance (TA) with testing and linking to treatment all pregnant women living with HIV, and their children and sexual partners, if positive (2); Continued TA with supply chain quantification, forecasting, and distribution; (3) Continued TA for the implementation of policies like modernizing the ART regimen to TLD, rolling out multi-month dispensing (MMD), and ensuring test and start fidelity so that all PLHIV in the four provinces can begin the latest ART as soon as they are diagnosed; and (4) Further enhanced collaboration between facility and community efforts.

The First Lady of Angola's *Born Free to Shine* initiative is focused on eliminating the mother-to-child transmission of HIV and increasing child and maternal health. Through partnership with this initiative, PEPFAR Angola will continue its family-focused approach that relies on finding and treating pregnant women living with HIV, testing and treating all of their children and sexual partners, and then testing the partners' sexual partners, with the goal of eventually reaching nearly all PLHIV in four priority provinces in Angola. In COP 2020, funds will aim to reach saturation of antenatal care facilities, strengthen the link between facility and community testing and treatment, and ensure technical capacity for monitoring and evaluation at provincial and facility levels. PEPFAR Angola will also assist the Government of Angola (GRA) with quantification, forecasting, supply chain planning, and distribution of key commodities from the national to the sub-national levels. TA will also focus on scaling up viral load testing at the GRA lab to increase coverage and monitor viral load suppression. PEPFAR funds will be aimed at reducing stock outs of ART and testing supplies to 15% or less in four provinces (currently estimated at 34%). Implementation of key national policies at all sub-national levels provinces will demonstrate the success of PEPFAR Angola's TA. The policies include a modernized ART regimen, the expanded use of index case testing into the standard HIV cascade of care, and the implementation of MMD. PEPFAR Angola will provide health information system TA and financial support for training and supervision for test and start expansion, in the form of human resources for health training and mentoring to increase policy implementation. A successful prevention of mother-to-child transmission (PMTCT) program in Angola requires both facility and community components. With more than 50% of women giving birth at home in Angola, pregnant women must be supported at the community level, and tested and linked to the

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facility for treatment. PEPFAR Angola with its family-centered, community/facility integrated model will engage with community organizations in the catchment areas of the facilities to train individuals, and emphasizing pregnant and breastfeeding women (PBFW), in the community to mentor patients through the cascade of care, thereby increasing linkage to treatment, promoting adherence, and furthering retention in case.

In COP 2020, the PEPFAR Angola program will continue implementing the integrated facility/community-based PMTCT approach developed in COP 2019, in partnership with the First Lady’s *Born Free to Shine* Initiative. PEPFAR Angola will also continue to use a layered approach to TA, with an increased focus on system sustainability and national policy implementation, building on recent political will. To improve retention, PEPFAR Angola will increase efforts to identify all HIV-positive persons who failed to successfully link from testing to ART and those who missed appointments by using HIV testing and counseling services (HTS) registers, appointment registers, missed appointment lists, and tracking logs in collaboration with community-based activities to track those lost to follow up, identify positive partners of PBFW, their biological children, and at risk pregnant adolescent girls and young women in the community. A few notable changes from COP 2019 to COP 2020 include: (1) the funding of a Stigma Index 2.0, to collect baseline data for evaluating the future impact of interventions on reducing stigma and to inform future HIV program planning; (2) the funding of a civil society organization to monitor the quality of HIV services; and (3) the implementation of early infant diagnosis to ensure PEPFAR Angola can offer a holistic PMTCT program.

Funding Summary

All COP/ROP 2020 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.

	Bilateral				Total Bilateral Applied Pipeline	Total Bilateral - New Funding	Total COP 20 Budget
	New Funding			Applied Pipeline			
	Total	FY20		Unspecified			
		GHP-State	GAP	Total			
Angola							
DOD TOTAL	2,395,000	2,395,000	-	-	-	2,395,000	2,395,000
HHS TOTAL	7,647,799	7,246,549	401,250	-	-	7,647,799	7,647,799
HHS/CDC	7,647,799	7,246,549	401,250	-	-	7,647,799	7,647,799
HHS/HRSA	-	-	-	-	-	-	-
HHS/SAMHSA	-	-	-	-	-	-	-
PEACE CORPS TOTAL	-	-	-	-	-	-	-
STATE TOTAL	-	-	-	-	-	-	-
State (State, S/EUR, S/EAP, and S/WHA)	-	-	-	-	-	-	-
State/AF	-	-	-	-	-	-	-
State/PRM	-	-	-	-	-	-	-
State/SGAC	-	-	-	-	-	-	-
USAID TOTAL	5,218,517	5,218,517	-	448,684	448,684	5,218,517	5,667,201
USAID, non-WCF	3,479,453	3,479,453	-	448,684	448,684	3,479,453	3,928,137
USAID, WCF	1,739,064	1,739,064	-	-	-	1,739,064	1,739,064
TOTAL	15,261,316	14,860,066	401,250	448,684	448,684	15,261,316	15,710,000

* Pipeline refers to funding allocated in prior years, approved for implementation in FY 2021

GHP-State Funds: Upon the clearance of a FY 2020 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 2021 at approved COP/ROP 2020 partner budget levels to achieve FY 2021 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo’s appendix. Upon receipt from

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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 2021 at approved COP/ROP 2020 partner budget levels to achieve FY 2021 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 2021 at approved COP/ROP 2020 partner budget levels to achieve FY 2021 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/ROP 2020 total budget level and documented within COP/ROP 2020 partner budgets are not to be executed or outlayed without written approval from S/GAC.

Earmarks: The OU has planned for programming for FY2020, FY2019 or/or FY2017 funding that it considered to meet a number of earmarks, as indicated in the table below. The amounts programmed during COP may exceed the original controls assigned to the OU. Upon approval of this memo, the amounts below will become the new earmark controls for the OU/Agency. Any changes to the amount of funding programmed for earmark-eligible activities must be approved via an OPU.

Earmarks	COP20 Funding Level			Total
	FY20	FY19	FY17	
Care & Treatment	8,001,078	-	-	8,001,078
Orphans and Vulnerable Children	-	-	-	-
Preventing and Responding to Gender-based Violence	-	-	-	-
Water	-	-	-	-

Initiatives By Agency:

	Total Central Applied Pipeline	Total Bilateral Applied Pipeline	Total Bilateral - New Funding	Total COP 20 Budget
Angola				
TOTAL	-	448,684	15,261,316	15,710,000
<i>of which, Ambition</i>	-	-	3,000,000	3,000,000
<i>of which, COP19 Performance</i>	-	-	3,500,000	3,500,000
<i>of which, Core Program</i>	-	448,684	8,761,316	9,210,000
DOD TOTAL	-	-	2,395,000	2,395,000
<i>of which, Ambition</i>	-	-	440,079	440,079
<i>of which, COP19 Performance</i>	-	-	700,000	700,000
<i>of which, Core Program</i>	-	-	1,254,921	1,254,921
HHS TOTAL	-	-	7,647,799	7,647,799
HHS/CDC	-	-	7,647,799	7,647,799
<i>of which, Ambition</i>	-	-	1,259,259	1,259,259
<i>of which, COP19 Performance</i>	-	-	1,960,000	1,960,000
<i>of which, Core Program</i>	-	-	4,428,540	4,428,540
HHS/HRSA	-	-	-	-
HHS/SAMHSA	-	-	-	-
PEACE CORPS TOTAL	-	-	-	-
STATE TOTAL	-	-	-	-
State (State, S/EUR, S/EAP, and S/WHA)	-	-	-	-
State/AF	-	-	-	-
State/PRM	-	-	-	-
State/SGAC	-	-	-	-
USAID TOTAL	-	448,684	5,218,517	5,667,201
USAID, non-WCF	-	448,684	3,479,453	3,928,137
<i>of which, Ambition</i>	-	-	924,948	924,948
<i>of which, COP19 Performance</i>	-	-	540,000	540,000
<i>of which, Core Program</i>	-	448,684	2,014,505	2,463,189
USAID, WCF	-	-	1,739,064	1,739,064
<i>of which, Ambition</i>	-	-	375,714	375,714
<i>of which, COP19 Performance</i>	-	-	300,000	300,000
<i>of which, Core Program</i>	-	-	1,063,350	1,063,350
TOTAL	-	448,684	15,261,316	15,710,000

* Pipeline refers to funding allocated in prior years, approved for implementation in FY 2021

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FY 2021 Target Summary

FY 2020 funds are released and COP/ROP 2020 applied pipeline is approved to achieve the following results in FY 2021.

Angola		SNU Prioritizations					Total *
		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	
HTS_INDEX	<15					3,412	3,412
	15+					1,842	3,686
	Total	-	-	-	-	5,254	7,098
HTS_TST	<15					29,389	29,389
	15+					73,486	97,607
	Total	-	-	-	-	102,875	126,996
HTS_TST_POS	<15					850	850
	15+					2,631	4,737
	Total	-	-	-	-	3,481	5,587
TX_NEW	<15					1,037	1,037
	15+					2,249	4,295
	Total	-	-	-	-	3,286	5,332
TX_CURR	<15					8,105	8,105
	15+					9,633	19,912
	Total	-	-	-	-	17,738	28,017
TX_PVLS	<15					7,564	7,564
	15+					8,701	18,081
	Total	-	-	-	-	16,265	25,645
CXCA_SCRN	Total (15+)						-
OVC_SERV	<18						-
	18+						-
	Total	-	-	-	-	-	-
OVC_HIVSTAT	Total (<18)						-
PMTCT_STAT	<15					236	236
	15+					48,530	48,530
	Total	-	-	-	-	48,766	48,766
PMTCT_STAT_POS	<15					9	9
	15+					1,960	1,960
	Total	-	-	-	-	1,969	1,969
PMTCT_ART	<15					9	9
	15+					1,884	1,884
	Total	-	-	-	-	1,893	1,893
PMTCT_EID	Total					1,888	1,888
PP_PREV	<15						215
	15+						21,262
	Total	-	-	-	-	-	21,477
KP_PREV	Total						-
KP_MAT	Total						-
VMMC_CIRC	Total						-
HTS_SELF	<15						-
	15+						-
	Total	-	-	-	-	-	-
PrEP_NEW	Total						-
PrEP_CURR	Total						-
TB_STAT (N)	<15						-
	15+					2,475	4,855
	Total	-	-	-	-	2,475	4,855
TB_ART (N)	<15						-
	15+						541
	Total	-	-	-	-	-	541
TB_PREV (N)	<15					6,500	6,500
	15+					7,722	15,962
	Total	-	-	-	-	14,222	22,462
TX_TB (D)	<15					8,273	8,273
	15+					9,827	20,315
	Total	-	-	-	-	18,100	28,588
GEND_GBV	Total						-

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

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COP 2019 Performance Funds:

All partners must be managed throughout the implementation year as indicated in the COP guidance. Overall performance including activities tied to COP19 performance will be reviewed at Q3FY20 to determine if the programs are on track to access all funds at the start of COP20. This communication will come through the S/GAC Chair and POART process.

Faith and Communities Initiative (FCI) / Faith Based Organization (FBO) Surge Programming (applicable to Malawi, Eswatini, Lesotho, Haiti, Botswana, Zimbabwe, Zambia, Uganda, Tanzania, Kenya):

In light of the delays in FCI programming associated with delayed arrival of funds for FCI and/or new subs for FCI funding received in COP19, FCI funds from COP19 will be protected and can be outlayed in COP20, in excess of the new COP20 total budget amount indicated in this memo, without being considered an over-outlay. Activities related to FCI/FBO surge activities must be fully implemented in COP20/FY21.

Partner Management and Stakeholder Engagement:

Agreements made during COP/ROP 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 this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner with EITHER (1) <15% of target achievement at 3 months or (2) less than 40% of target achievement at 6 months must have a complete review of performance data (including trends in performance) and expenditures to date by program area, implement remediation, and conduct intensive follow-up. In the HIV treatment program, most clients are continuing on treatment year after year and current on treatment (TX_CURR) performance should be between 98% and 100% of the target. This can be adjusted in country context where HIV treatment services are still scaling up and the treatment new target is greater than 10% of treatment current. OVC programs are also similar in that there are clients continuing services from the previous year; if the IP is less than 80% of their target at Q2 performance review should be triggered. These elements (i.e. review, remediation, and follow-up) should be incorporated into the existing IP work plans. A second quarter of consistently poor performance by the IP should also result in implementation of a documented Performance Improvement Plan (PIP) or Correction Action Plan (CAP), in accordance with implementing agency policy. PIP indicators should reflect the core issue. If the issue is linkage of test positive to treatment the indicator measured should be test positive to new in treatment of greater than 85%. If the issue is retention it should be net new on treatment equal to 90% of new on treatment. After two quarters of intensive oversight and remediation for underperformance, partners should be close to full achievement of targets expected at quarter three. With a third quarter of consistently poor performance by the IP, implementing agencies should notify S/GAC the options the agency is implementing to address partner non-performance, including options for a shift to new partners. The country team should notify the S/GAC Chair and PPM immediately of the improvement plan.

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

Pending Congressional Approval

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