



United States Department of State

Washington, D.C. 20520

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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: Dominican Republic Country Operational Plan 2019 Approval

Recommendations

Approve the Dominican Republic Country Operational Plan (COP) 2019 with a total budget of **\$25,746,655** 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:

Total

Dominican Republic	New Funding (all accounts)*	Pipeline**	Total Budget FY2020 Implementation
Total Budget	22,615,748	3,130,907	25,746,655
COP 19 Bilateral	22,615,748	3,130,907	25,746,655

* 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 \$25,746,655. **Any prior year funds that are not included within this COP 2019 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 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.

PEPFAR Dominican Republic 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.

In addition to the COP 2019 funding approved for implementation in FY 2020 described in this memo, \$4,253,345 of FY 2019 GHP-State funding will be also be notified and transferred to implementing agencies in support of the second year of acceleration. This funding is to be held at agency headquarters (\$2,045,416 at HHS/CDC and \$2,207,929 at USAID) until approved for release by S/GAC and will be implemented with COP 2020 in FY 2021.

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 Washington, D.C. during the April 8-12, 2019 in-person planning meetings; the final COP 2019 submission, including all data submitted via official PEPFAR systems or within supplemental documents; and Dominican Republic's virtual COP 2019 approval with Ambassador Birx on May 7, 2019.

Program Summary

Funding and targets for Dominican Republic's Country Operational Plan (COP) 2019 are approved to support PEPFAR Dominican Republic's vision to achieve epidemic control and address the unmet need for HIV care and treatment services for individuals of Haitian descent living in Dominican Republic. This demographic, inclusive of both Haitian Migrants and Dominicans of Haitian descent and referred to as the target population (TP) for the PEPFAR Dominican Republic program, has a higher rate of HIV prevalence than the general population (3 - 4% prevalence in TP versus 0.9% in the general adult population). This demographic comprises 54% of all testing and 46.5% of all HIV-positive results. In FY 2018 Dominican Republic had only a 37.4% linkage rate and 35% retention rate for TP clients. COP 2019 will serve to close the significant gaps and unmet need to achieve the 90-90-90 goals within the target population. COP 2019 programming addresses a well-documented

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challenge on the island of Hispaniola that neither Haiti nor the Dominican Republic will achieve 90-90-90 without a direct cross-island HIV control plan.

Among the estimated 25,530 PLHIV among the TP, only 42% of those living with HIV (PLHIV) are diagnosed (10,382), and of those who know their status, 43% (4,480) are on treatment, while only 51% of those on treatment (2,295) are virally suppressed. Individuals not on treatment face a variety of significant barriers to care and treatment, including fear of detention or deportation, stigma and discrimination, as well as policy and legal barriers. Beginning immediately in COP 2018 during FY 2019 and continued in COP 2019 during FY 2020, PEPFAR Dominican Republic will focus its resources and shift its program to address the unmet need among PLHIV among the TP in Dominican Republic, and reduce the barriers to care and treatment.

In COP 2019, PEPFAR Dominican Republic will re-orient its program, with needed technical and managerial USG staff, and a partnership with the Haiti PEPFAR team, to focus on the five provinces, accounting for 60% of the identified unmet need among HIV positive TP in the Dominican Republic. These five provinces are Santo Domingo, Santiago, La Altagracia, Valverde and Puerto Plata, with the largest treatment coverage gap in Santo Domingo. In these five focus provinces, PEPFAR Dominican Republic will expand entry points to care from existing public and NGO sites to include community-based organizations, non-governmental sites, and create additional primary care sites that will be approved to provide HIV care and treatment on these health service platforms. Also new in COP 2019 will be community care teams that will be critical for linkage and outreach between communities and facilities.

Only 42% of HIV positive among the TP know their status. One of the key strategies to address this gap in case finding will be to scale up the use of index case testing. Currently, only 36% of clients accept index testing, and those who do accept elicit too few contacts (less than one on average). To address these challenges, PEPFAR Dominican Republic will improve training on index testing with providers, and include mentorship and supervision to ensure index testing is implemented with fidelity. The PEPFAR team will also involve Haitian consulates to promote index testing and introduce social network testing. In COP 2019, PEPFAR Dominican Republic will identify at least 20% of their total newly identified HIV-positive through index testing.

In COP 2019, PEPFAR Dominican Republic will also launch an Orphans and Vulnerable Children (OVC) program with HIV-positive TP clients to improve case finding and linkage to treatment, increase socio-economic support for children and families of HIV-positive TP, and prevent violence and HIV among OVC, particularly amongst adolescent girls.

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Among TP PLHIV in the five focus provinces, only 17.5% are currently on treatment. Along with stigma and discrimination, the TP face great financial burdens that often prevent them from accessing services, particularly men. To address these challenges, PEPFAR Dominican Republic will ensure same-day ART initiation, and transition patients to TLD regimens that have fewer side effects, ensuring ARV optimization. Facilities will expand hours to nights and weekends to better accommodate TP, increase community ART initiation and distribution, support community case monitoring and peer navigation, and provide guidelines and training to reduce stigma and discrimination particularly directed towards TP.

To improve viral load coverage, ensure eligible clients receive a viral load test, and that clients on ART are virally suppressed, PEPFAR Dominican Republic will ensure clients can access 6-month multi-month dispensing, increase the number of days and clinic hours for viral load sample collection, and ensure that 100% of sites are utilizing biometric data safely to better track patients and avoid loss to follow up. Support for viral suppression in partnership with the Government of the Dominican Republic will help support the Dominican Republic's national efforts to achieve 90-90-90.

To facilitate these changes, and ensure successful execution, the Government of the Dominican Republic has agreed to release a ministerial decree eliminating policy constraints. These include changing the viral load testing policy to align with World Health Organization guidance; and approving select community and primary care sites to offer full HIV testing, care, and treatment services as additional entry points for TP PHLIV.

The plans outlined in COP 2019 meet the PEPFAR minimum program requirements for the Dominican Republic. The PEPFAR Dominican Republic team will ensure facilities appropriately scale up index testing and self-testing, as well as aggressive scale up of TB preventative treatment for all PLHIV. All facilities will adopt and implement test and start, with multi-month dispensing and transition to TLD regimens, and the immediate linkage of clients from testing to treatment. In COP 2019, PEPFAR Dominican Republic will monitor and report on morbidity and mortality outcomes including infectious and non-infectious morbidity; launch an OVC program for HIV positive TP; and continue to engage with local, indigenous partners as sub-awardees while strengthening local organizational and technical capacity, where possible.

Funding Summary

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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.

Dominican Republic	FY 2019 New			Total New Funds	Applied Pipeline*	Total COP 19 Bilateral Budget
	GHP-State	GHP-USAID	GAP			
DOD TOTAL	313,665	-	-	313,665	1	313,666
HHS TOTAL	8,380,438	-	387,500	8,767,938	3,077,772	11,845,710
HHS/CDC	8,380,438	-	387,500	8,767,938	3,077,772	11,845,710
<i>of which, Acceleration</i>	4,879,485	-	-	4,879,485	-	4,879,485
USAID TOTAL	13,534,145	-	-	13,534,145	53,134	13,587,279
USAID, non-WCF	13,534,145	-	-	13,534,145	53,134	13,587,279
<i>of which, Acceleration</i>	5,867,170	-	-	5,867,170	-	5,867,170
TOTAL	22,228,248	-	387,500	22,615,748	3,130,907	25,746,655
<i>of which, Acceleration</i>	10,746,655	-	-	10,746,655	-	10,746,655

* 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 outlayed without written approval from the Global AIDS Coordinator.

FY 2020 Target Summary

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

Dominican Republic		SNU Prioritizations					Total *
		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	
HTS_INDEX	<15			4			4
	15+			9,985			9,985
	Total	-	-	9,989	-	-	9,989
HTS_TST	<15			331			331
	15+			192,739			192,739
	Total	-	-	193,070	-	-	193,070
HTS_TST_POS	<15			24			24
	15+			13,406			13,406
	Total	-	-	13,430	-	-	13,430
TX_NEW	<15			172			172
	15+			11,939			11,939
	Total	-	-	12,111	-	-	12,111
TX_CURR	<15			265			265
	15+			28,224			28,224
	Total	-	-	28,489	-	-	28,489
TX_PVLS	<15			286			286
	15+			25,081			25,081
	Total	-	-	25,367	-	-	25,367
CXCA_SCRN	Total (15+)			-			-
OVC_SERV	<18			9,639			9,639
	18+			3,109			3,109
	Total	-	-	12,748	-	-	12,748
OVC_HIVSTAT	Total (<18)			9,639			9,639
PMTCT_STAT	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
PMTCT_STAT_POS	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
PMTCT_ART	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
PMTCT_EID	Total			-			-
PP_PREV	<15			92			92
	15+			152,372			152,372
	Total	-	-	152,464	-	-	152,464
KP_PREV	Total			-			-
KP_MAT	Total			-			-
VMMC_CIRC	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
HTS_SELF	Total			-			-
PrEP_NEW	Total			700			700
PrEP_CURR	Total			810			810
TB_STAT (N)	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
TB_ART (N)	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
TB_PREV (N)	<15			126			126
	15+			10,160			10,160
	Total	-	-	10,286	-	-	10,286
TX_TB (N)	<15			334			334
	15+			28,089			28,089
	Total	-	-	28,423	-	-	28,423
GEND_GBV	Total			3,000			3,000

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

Budgetary Requirements

Dominican Republic has programmed FY 2019 funding in support of required earmarks as follows:

Earmarks	FY 2019 COP19 Funding Level*
Care & Treatment	10,166,117
HKID Requirement	3,204,939
Preventing and Responding to Gender-based Violence	400,000
Water	-
* 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 Dominican Republic's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.