



United States Department of State

Washington, D.C. 20520

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April 3, 2020

MEMO FOR AMBASSADOR CRAIG CLOUD, U.S. AMBASSADOR TO BOTSWANA

SUBJECT: PEPFAR Botswana Country Operational Plan 2020 Approval

This memo represents the successful completion of the PEPFAR Botswana Country Operational Plan (COP) 2020 planning, development and submission. PEPFAR Botswana, 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 Botswana Country Operational Plan (COP) 2020 with a total approved budget of \$73,705,000, 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:

Table 1: Funding Table

Botswana	New Funding (all accounts)	Pipeline	Total Budget FY 2021 Implementation
Total Budget	68,308,551	5,396,449	73,705,000
Bilateral	68,308,551	5,396,449	73,705,000
Central	-	-	-

Approve a total FY 2021 outlay for COP 2020 implementation that does not exceed the total approved COP 2020 budget of \$73,705,000. Any prior year funds that are not included within this COP 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 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

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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 February 24-28, 2020 in-person planning meetings and participants in the virtual approval meeting; the final COP 2020 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

Program Summary

Funding and targets for Botswana's Country Operational Plan (COP) 2020 are approved to support PEPFAR Botswana's vision of a "One Botswana" partnership with the Government of Botswana (GoB) and all stakeholders, positioning Botswana to achieve the 95-95-95 goals across all populations, sex and age bands. PEPFAR Botswana continues to concentrate its direct service delivery, implementing mechanisms, and resources on districts with the highest HIV burden and greatest need while working with the GoB and stakeholders to eliminate policy barriers and ensure that quality client-centered care, data systems, and data usage are adopted nationwide. COP 2020 is focused on sustaining the gains made and ensuring that newly diagnosed people living with HIV (PLHIV) are immediately linked to treatment, retained on treatment and are virally suppressed and that the fifth Botswana AIDS Impact Survey (BAIS V) is completed. The BAIS V survey data will define both the achievements to date and enable PEPFAR Botswana to pinpoint the specific gaps that need to be addressed. COP 2020 includes one-time conditional funding that will be used to pivot the program as needed once the BAIS is complete. The "One Botswana" strategy positions Botswana to accelerate toward epidemic control once the most current and up-to-date epidemiological data available.

The PEPFAR Botswana programming strategy to be implemented in FY 2021 is based on a thorough review of programmatic data and detailed transparent discussions with representatives from the host country government, civil society, community organizations, and implementing partners. The GoB has long demonstrated strong commitment in responding to its HIV epidemic and directly funds the majority of the country's HIV prevention, care and treatment costs, including free anti-retroviral therapy (ART). In FY 2019, the GoB made the decision to further strengthen the country-led response in Botswana through key policy shifts. As of FY 2020, the GoB had adopted all of the recommended PEPFAR minimum program requirements (MPRs) including: same-day and fast track ART initiation for all newly diagnosed patients; adoption of differentiated service delivery models, including three months of ART delivery for stable patients; better screening and more effective case identification strategies, including scale-up of self-testing and index testing with voluntary assisted partner notification; the re-introduction of TB Preventive Therapy (TPT) across the country; the transition to the World Health Organization (WHO)-recommended Tenofovir-Lamivudine-Dolutegravir (TLD) regimen, and removal of Nevirapine-based regimens; and improvement of patient-level data collection and integration of data systems. The GoB additionally adopted a policy for inclusion of non-citizens in the provision of free ART treatment to all PLHIV, and Botswana's High Court decriminalized same-sex consensual relationships. In COP 2019, PEPFAR Botswana continues to support the GoB to improve implementation of the MPRs at the site level in all districts to ensure that policies translate into programmatic gains nationwide in anticipation of accelerating toward 95-95-95.

The COP 2020 program will directly support more than 172,000 PLHIV on lifelong treatment by the end of FY 2021, and will integrate facility and community activities around

the client and their family so that quality services are provided at all stages of their care. PEPFAR Botswana will strengthen and sustain the gains made in linkage, retention and adherence for the general population with a focus on men and youth and improve programming designed to reach and prevent infections among adolescent girls and young women (AGYW) and in key populations (KP) including increased access to PrEP. COP 2020 leverages the strengths of all stakeholders and is centered on the client. Community-based organizations will serve as monitors of program activities; GoB District Health Management Teams will monitor the implementation of the MPRs across the country; GoB facilities will standardize data reporting across the cascade; U=U (Undetectable = Untransmittable) messaging will improve client customer service, reduce stigma and increase treatment literacy especially within public and private facilities serving KP; supply chain management will be enhanced; and community health workers will engage clients at the household level to ensure that all PLHIV are linking to treatment.

PEPFAR continues to aggressively fund HIV prevention activities in Botswana, particularly Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) services for AGYW, which will be strengthened and expanded in COP 2020. Through DREAMS, PEPFAR Botswana is offering a package of evidence-based combination prevention interventions that target vulnerable AGYW, their families, communities and sex partners with the ultimate goal of protecting AGYW from HIV infection. The program will expand from two districts to eight districts that have a high HIV incidence rate among AGYW and are currently not covered by the Global Fund or UNICEF programs. PEPFAR Botswana also will continue prevention efforts through its voluntary male medical circumcision (VMMC), orphans and vulnerable children (OVC), and cervical cancer programs. The VMMC program will perform more than 10,000 circumcisions as they strive to meet unmet need among adolescent boys and men over the age of 15. The OVC program will increase its focus on the girls and boys ages nine to 14, working through schools to provide primary prevention of sexual violence and HIV and other socio-economic interventions while intensifying the provision of comprehensive services especially for high risk sub-populations, especially HIV-positive mothers and their children, in turn providing care to more than 41,000 children and their caregivers. In COP 2020, PEPFAR Botswana will continue to build on the existing platforms and strategies to increase cervical cancer screening among women living with HIV ages 25 to 49 on ART, including female sex workers.

In COP 2020 PEPFAR Botswana will focus on what is required to set Botswana on a sustainable path towards closing the remaining gaps towards epidemic control. PEPFAR Botswana is supporting the GoB in adopting proven policies and in institutionalizing client-centered HIV care programs that are delivered to right people, at the right time, in the right places. Once the BAIS V survey data is available, this strategy will enable the scaling of case-based surveillance including recency testing in association with voluntary assisted partner notification across the facility and community interface to progress towards epidemic control in an accelerated and sustainable way. PEPFAR Botswana will work with the Ministry of Health and Wellness (MoHW) and the National AIDS and Health Promotion Agency (NAHPA) on appropriate course corrections to the national HIV/AIDS program to achieve policy implementation at all levels of the health system, ensure quality HIV service delivery to all Botswana and non-citizens living in Botswana, and move quickly towards achievement of the 95-95-95 goals.

Funding Summary

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All COP 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.

Table 2: Funding Summary

	Bilateral						Total Bilateral Applied Pipeline	Total Bilateral - New Funding	Total COP 20 Budget
	New Funding			Applied Pipeline					
	FY20			FY19		Unspecified			
	Total	GHP-State	GAP	Total	GHP-State				
Botswana									
DOD TOTAL	809,355	809,355	-	-	-	-	-	809,355	
HHS TOTAL	25,871,237	23,674,987	2,196,250	5,000,000	5,000,000	3,735,132	3,735,132	30,871,237	
HHS/CDC	25,171,237	22,974,987	2,196,250	5,000,000	5,000,000	3,735,132	3,735,132	30,171,237	
HHS/HRSA	700,000	700,000	-	-	-	-	-	700,000	
HHS/SAMHSA	-	-	-	-	-	-	-	-	
PEACE CORPS TOTAL	3,363,265	3,363,265	-	-	-	531,643	531,643	3,363,265	
STATE TOTAL	8,579,431	8,579,431	-	-	-	-	-	8,579,431	
State (State, S/EUR, S/EAP, and S/WHA)	629,431	629,431	-	-	-	-	-	629,431	
State/AF	-	-	-	-	-	-	-	-	
State/PRM	450,000	450,000	-	-	-	-	-	450,000	
State/SGAC	7,500,000	7,500,000	-	-	-	-	-	7,500,000	
USAID TOTAL	24,685,263	24,685,263	-	-	-	1,129,674	1,129,674	24,685,263	
USAID, non-WCF	24,392,893	24,392,893	-	-	-	1,129,674	1,129,674	24,392,893	
USAID, WCF	292,370	292,370	-	-	-	-	-	292,370	
TOTAL	63,308,551	61,112,301	2,196,250	5,000,000	5,000,000	5,396,449	5,396,449	68,308,551	

* 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 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 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 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 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 2020 total budget level and documented within COP 2020 partner budgets are not to be executed or outlayed without written approval from S/GAC.

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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.

Table 3: Earmark Funding Table

Earmarks	COP20 Funding			Total
	FY20	FY19	FY17	
Care & Treatment	29,359,939	1,747,688	-	31,107,627
Orphans and Vulnerable Children	15,625,000	2,125,000	-	17,750,000
Preventing and Responding to Gender-based Violence	1,126,729	250,000	-	1,376,729
Water	50,000	-	-	50,000

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Table 4: Initiatives by Agency Funding Table

	Total Central Applied Pipeline	Total Bilateral Applied Pipeline	Total Bilateral - New Funding	Total COP 20 Budget
Botswana				
TOTAL	-	5,396,449	68,308,551	73,705,000
<i>of which, Cervical Cancer</i>	-	-	1,000,000	1,000,000
<i>of which, Core Program</i>	-	5,396,449	37,608,551	43,005,000
<i>of which, DREAMS</i>	-	-	19,000,000	19,000,000
<i>of which, HKID Requirement</i>	-	-	1,600,000	1,600,000
<i>of which, One-time Conditional Funding</i>	-	-	7,500,000	7,500,000
<i>of which, VMMC</i>	-	-	1,600,000	1,600,000
DOD TOTAL	-	-	809,355	809,355
<i>of which, Core Program</i>	-	-	677,355	677,355
<i>of which, VMMC</i>	-	-	132,000	132,000
HHS TOTAL	-	3,735,132	30,871,237	34,606,369
HHS/CDC	-	3,735,132	30,171,237	33,906,369
<i>of which, Cervical Cancer</i>	-	-	1,000,000	1,000,000
<i>of which, Core Program</i>	-	3,735,132	22,551,589	26,286,721
<i>of which, DREAMS</i>	-	-	5,151,648	5,151,648
<i>of which, VMMC</i>	-	-	1,468,000	1,468,000
HHS/HRSA	-	-	700,000	700,000
<i>of which, Core Program</i>	-	-	700,000	700,000
HHS/SAMHSA	-	-	-	-
PEACE CORPS TOTAL	-	531,643	3,363,265	3,894,908
<i>of which, Core Program</i>	-	531,643	1,808,221	2,339,864
<i>of which, DREAMS</i>	-	-	1,479,000	1,479,000
<i>of which, HKID Requirement</i>	-	-	76,044	76,044
STATE TOTAL	-	-	8,579,431	8,579,431
State (State, S/EUR, S/EAP, and S/WHA)	-	-	629,431	629,431
<i>of which, Core Program</i>	-	-	534,074	534,074
<i>of which, DREAMS</i>	-	-	95,357	95,357
State/AF	-	-	-	-
State/PRM	-	-	450,000	450,000
<i>of which, Core Program</i>	-	-	450,000	450,000
State/SGAC	-	-	7,500,000	7,500,000
<i>of which, One-time Conditional Funding</i>	-	-	7,500,000	7,500,000
USAID TOTAL	-	1,129,674	24,685,263	25,814,937
USAID, non-WCF	-	1,129,674	24,392,893	25,522,567
<i>of which, Core Program</i>	-	1,129,674	10,594,942	11,724,616
<i>of which, DREAMS</i>	-	-	12,273,995	12,273,995
<i>of which, HKID Requirement</i>	-	-	1,523,956	1,523,956
USAID, WCF	-	-	292,370	292,370
TOTAL	-	5,396,449	68,308,551	73,705,000

* 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 2020 applied pipeline is approved to achieve the following results in FY 2021.

Botswana		SNU Prioritizations					Total *
		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	
HTS_INDEX	<15				440		440
	15+				15,886		15,886
	Total	-	-	-	16,326	-	16,326
HTS_TST	<15				455		455
	15+				43,410		44,347
	Total	-	-	-	43,865	-	44,802
HTS_TST_POS	<15				22		22
	15+				4,555		4,555
	Total	-	-	-	4,577	-	4,577
TX_NEW	<15				54		54
	15+				4,405		4,405
	Total	-	-	-	4,459	-	4,459
TX_CURR	<15				1,844		1,844
	15+				171,111		171,111
	Total	-	-	-	172,955	-	172,955
TX_PVLS	<15				1,792		1,792
	15+				164,893		164,893
	Total	-	-	-	166,685	-	166,685
CXCA_SCRN	Total (15+)				32,393		32,393
OVC_SERV	<18				39,280		39,280
	18+				2,433		2,433
	Total	-	-	-	41,713	-	41,713
OVC_HIVSTAT	Total (<18)				39,277		39,277
PMTCT_STAT	<15				15		15
	15+				23,900		23,900
	Total	-	-	-	23,915	-	23,915
PMTCT_STAT_POS	<15						-
	15+				5,639		5,639
	Total	-	-	-	5,639	-	5,639
PMTCT_ART	<15						-
	15+				5,637		5,637
	Total	-	-	-	5,637	-	5,637
PMTCT_EID	Total				5,374		5,374
PP_PREV	<15						-
	15+				33,305		33,305
	Total	-	-	-	33,305	-	33,305
KP_PREV	Total				7,480		7,480
KP_MAT	Total						-
VMMC_CIRC	Total				9,010		10,010
HTS_SELF	<15				81		81
	15+				15,350		15,350
	Total	-	-	-	15,431	-	15,431
PrEP_NEW	Total				6,266		6,366
PrEP_CURR	Total				6,742		6,842
TB_STAT (N)	<15						-
	15+				1,646		1,646
	Total	-	-	-	1,646	-	1,646
TB_ART (N)	<15						-
	15+				953		953
	Total	-	-	-	953	-	953
TB_PREV (N)	<15				1,508		1,508
	15+				140,855		140,855
	Total	-	-	-	142,363	-	142,363
TX_TB (D)	<15				1,857		1,857
	15+				173,861		173,861
	Total	-	-	-	175,718	-	175,718
GEND_GBV	Total				7,646		7,646

* 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 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.

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

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quarterly results and achievement and findings from community-led monitoring. This continued engagement will ensure all parties' understanding of Botswana'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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