



UNCLASSIFIED

April 25, 2022

**MEMO FOR DAVID RENZ, U.S. AMBASSADOR TO SOUTH SUDAN**

**FROM:** S/GAC – George Alemnji, S/GAC Chair  
S/GAC – Ayibatari Burutolu, PEPFAR Program Manager

**THROUGH:** S/GAC – Dr. Angeli Achrekar, Acting U.S. Global AIDS Coordinator

**SUBJECT:** PEPFAR South Sudan Country Operational Plan 2022 Approval

This memo represents the successful completion of the PEPFAR South Sudan Operational Plan COP 2022 planning, development and submission. PEPFAR South Sudan, together with the partner government, civil society and multilateral partners, has planned and submitted a COP 2022 in alignment with the directives from the COP 2022 planning letter, data-driven decisions made during the in-country retreat, and agreements made during the planning meeting.

This memo serves as the approval for the PEPFAR South Sudan Operational Plan (COP) 2022 with a total approved budget of \$40,120,000, 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:

	New Funding (All Accounts)	Pipeline	Total Budget FY2023 Implementation
<b>TOTAL</b>	<b>39,465,971</b>	<b>654,029</b>	<b>40,120,000</b>
<b>Bilateral</b>	<b>39,465,971</b>	<b>654,029</b>	<b>40,120,000</b>

The total FY 2023 outlay for COP 2022 implementation shall not exceed the total approved COP 2022 budget of \$40,120,000 without additional written approval. Any prior year funds that are not included within this COP 2022 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 2023 without additional written approval. The new FY 2022 funding and prior year funds approved within this memo as a part of the total COP 2022 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 2023– must be submitted to and approved by S/GAC, and documented in FACTSInfo NextGen via the Operational Plan Update process.

Approved funding will be made available to agencies for allocation to country platform to implement COP 2022 programming and priorities as outlined below and in the appendix.

### **ARPA/ESF Funds**

All ARPA ESF funds from COP21 must be obligated by September 30, 2022. ARPA funds obligated by this date can continue to be outlayed for their approved purposes in COP22/FY2023 on top of the approved COP22 envelope.

### **Background**

This approval is based upon: the discussions that occurred between the country team, agency headquarters, S/GAC, partner government, local and global stakeholders and partners during the March 7-10, 2022 virtual planning meetings and participants in the virtual approval meeting; the final COP 2022 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

### **Program Summary**

Funding and targets for South Sudan's COP 2022 are approved to support PEPFAR South Sudan's vision to increase national Antiretroviral (ART) coverage through improving the quality of HIV care and treatment services across all ages and sexes and retaining clients on life-long ART along with viral load suppression. There are an estimated 180,960 persons living with HIV (PLHIV) in South Sudan, with only 26% of all PLHIV nationwide on treatment in FY2021. PEPFAR will assist the Republic of South Sudan (RSS) to move towards epidemic control, with the goal of having 15,224 new HIV patients on ART and 64,893 total patients on ART by the end of FY 2023 in 23 PEPFAR-supported counties and the military. Efforts to improve adherence and retention will be undertaken with the goal of 95% of those on treatment virally suppressed by the end of FY 2023.

The PEPFAR South Sudan strategy for programming to be implemented in FY 2022 will focus on: (1) implementing a strategic mix of person-centered testing to close gaps across subpopulations; (2) improving data systems to make more use of Civil Society Organizations (CSOs) and Community volunteers (COVs) and minimize treatment interruption, and return clients to treatment; (3) reaching all populations with key HIV services, including full coverage of TB preventative therapy and scaling up work with key populations (KP); (4) tracking and retaining patients on ART, especially maintaining high coverage of six-month multi-month antiretroviral medication (ARV) dispensation and community drug dispensation achieved in COP 2020 and COP 2021; (5) continued scale-up of viral load testing, 2 months early infant diagnosis and improvement in viral load suppression rates across all populations; (6) identification of children and adolescents living with HIV for linkage to the Orphans and Vulnerable Children (OVC) program to support ART adherence, retention in services and viral load suppression; (7) strengthened community engagement to improve patient literacy, retention, viral load suppression and community-led monitoring; (8) strengthened coordination and collaboration with stakeholders.

PEPFAR South Sudan's Community-led monitoring (CLM) in COP22 will build on prior activities in COP21 and be designed to help PEPFAR programs and health institutions pinpoint persistent problems, challenges, barriers, and enablers to effective client outcomes at the site level. In addition to being data-driven and action-oriented, CLM in COP22 will ensure indicators are defined by communities and health service users. CLM will endeavor to produce additive and not a duplicate collection of routine data already available to PEPFAR through MER or SIMS. New in COP22, the PEPFAR-supported community-led monitoring program will include an explicit focus on key populations. CLM will be utilized to advance equity and to support improvement in programs, especially for populations which have not yet fully experienced the benefits of HIV epidemic control. The OU will consider utilizing CLM to track and ensure accountability for child, adolescent, and family-centered care.

In COP22, South Sudan will maintain Orphans and Vulnerable Children (OVC) comprehensive services, and continue prioritizing enrollment of newly initiated on ART C/ALHIV, especially those aged 15-18. Expand OVC services to cover all facilities Juba town with high volumes of C/ALHIV and poor pediatric (children and adolescents') clinical outcomes, to provide targeted support for C/ALHIV and their families, with the goal of improving their clinical outcomes. Alignment of OVC packages of services and enrollment to provide comprehensive prevention and treatment services to OVC ages 0-17, with particular focus on 1) actively facilitating testing for all children at risk of HIV infection, 2) facilitating linkage to treatment and providing support and case management for vulnerable children and adolescents living with HIV, 3) reducing risk for adolescent girls in high HIV-burden areas and for 10-14 year-old girls and boys in regard to primary prevention of sexual violence and HIV. In Juba, the OVC program enrolled almost all CALHIV for follow up. All children in beneficiary households are being actively supported to test and those found positive linked to treatment. The program will continue to reach to all CALHIV in Juba in COP22.

In COP22, PEPFAR South Sudan will expand targets to reach additional AGYW and expand DREAMS to other sites within Juba County to work towards reaching saturation in the following COPs. In COP21, The AGYW-PREV target is 2300 and in COP22, it will be increased to 4,023. The project will continue to provide basic literacy and financial trainings to the AGYW and prepare them for long term trainings in different areas of their choices including, but not limited to: Tailoring, Beauty Therapy, Liquid Soap and Sandals making.

PEPFAR South Sudan's PrEP and HIVST programs commenced in late COP21. In COP22, DREAMS will support referrals to PrEP, while key populations that test negative will have the opportunity to enroll on PrEP to mitigate new HIV infection. In COP22, 1,287 new PrEP initiations and 900 continuing PrEP from quarter 4 of COP21 will be targeted. In COP22, PEPFAR South Sudan plans to conduct over 9,000 HIVST using a phased approach in selected areas, before scaling up to other areas of the country

Additionally in COP22 the Voluntary Medical Male Circumcism (VMMC) program will expand beyond the current facility-based delivery model to provide targeted mobile outreach services in select locations.

**Funding Summary**

All COP 2022 funding summarized in the charts 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 PEPFAR systems.

	Total	of which, Bilateral New Funding										Applied Pipeline
		Total	FY 2022			GAP	FY 2021 GHP-State	FY 2020 GHP-State				
			GHP-State	GHP-USAID	Total							
TOTAL	40,120,000	39,465,971	39,265,971	-	200,000	-	-	654,029				
DOD Total	3,422,917	3,422,917	3,422,917	-	-	-	-	-				
DOD	3,422,917	3,422,917	3,422,917	-	-	-	-	-				
HHS Total	24,897,430	24,897,430	24,897,430	-	200,000	-	-	-				
HHS/GDC	24,897,430	24,897,430	24,897,430	-	200,000	-	-	-				
STATE Total	750,000	750,000	750,000	-	-	-	-	-				
State	413,868	413,868	413,868	-	-	-	-	-				
State/AF	336,132	336,132	336,132	-	-	-	-	-				
USAID Total	11,049,653	10,395,624	10,395,624	-	-	-	-	-			654,029	
USAID, non-WCF	11,049,653	10,395,624	10,395,624	-	-	-	-	-			654,029	

\*Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

	of which, Central										Applied Pipeline
	Total	New Funding									
		Total	FY 2022		FY 2021		FY 2020		GHP-State		
		Total	GHP-State	GHP-USAID	GAP	GHP-State	GHP-USAID	GAP	GHP-State	GHP-USAID	
TOTAL											
DOD Total											
DOD											
HHS Total											
HHS/CDC											
HHS/HRSA											
PC Total											
Peace Corps											
STATE Total											
State											
State/AF											
State/SGAC											
USAID Total											
USAID											
USAID/WCF											

\*Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

**GHP-State Funds:** Upon the clearance of a FY 2022 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 2023 at approved COP 2022 partner budget levels to achieve FY 2023 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 2023 at approved COP 2022 partner budget levels to achieve FY 2023 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 2023 at approved COP 2022 partner budget levels to achieve FY 2023 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 2022 total budget level and documented within COP 2022 partner budgets are not to be executed or outlaid without written approval from S/GAC.

**Earmarks:** South Sudan has planned for programming for FY 2022, FY 2021, and/or FY 2020 GHP-State 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 South Sudan. Upon approval of this memo, the amounts below will become the new earmark controls for South Sudan. Any changes to the amount of funding programmed for earmark-eligible activities must be approved via an OPU.

Earmarks	COP22 Funding Level			
	TOTAL	FY 2022	FY 2021	FY 2020
Care & Treatment	26,609,453	26,609,453		
Orphans and Vulnerable Children	2,534,799	2,534,799		
Preventing and Responding to Gender-based Violence	255,500	255,500		
Water				

\* Only GHP-State and GHP-USAID will count towards the Care and Treatment and OVC earmark

\*\* Only GHP-State will count towards the GBV and Water earmarks

AB/Y Earmark	COP22 Funding Level				Applied Pipeline
	TOTAL	FY 2022	FY 2021	FY 2020	
TOTAL Sexual Prevention Programming	2,027,135	2,027,135	-	-	-

Of which, AB/Y	1,473,135	1,473,135	-	-	-
% AB/Y of TOTAL Sexual Prevention Programming	72.7%	72.7%	N/A	N/A	N/A

\*Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

**AB/Y Earmark Budget Justification**

AB/Y Requirement Met.

**Initiatives by Agency**

	Total Bilateral - New Funding	Total Bilateral Applied Pipeline	Total Central - New Funding	Total Central Applied Pipeline	Total COP22 Budget
<b>TOTAL</b>	39,465,971	654,029	-	-	40,120,000
<i>of which, Community-Led Monitoring</i>	350,000	-	-	-	350,000
<i>of which, Core Program</i>	35,026,298	654,029	-	-	35,680,327
<i>of which, DREAMS</i>	1,760,000	-	-	-	1,760,000
<i>of which, OVC (Non- DREAMS)</i>	829,673	-	-	-	829,673
<i>of which, VMMS</i>	1,500,000	-	-	-	1,500,000
<b>DOD Total</b>	3,422,917	-	-	-	3,422,917
<i>of which, Core Program</i>	1,922,917	-	-	-	1,922,917
<i>of which, VMMS</i>	1,500,000	-	-	-	1,500,000
<b>HHS Total</b>	24,897,430	-	-	-	24,897,430
<i>of which, Core Program</i>	24,897,430	-	-	-	24,897,430
<b>STATE Total</b>	750,000	-	-	-	750,000
<i>of which, Core Program</i>	750,000	-	-	-	750,000
<i>of which, DREAMS</i>	-	-	-	-	-
<b>USAID Total</b>	10,395,624	654,029	-	-	11,049,653
<i>of which, Community-Led Monitoring</i>	350,000	-	-	-	350,000
<i>of which, Core Program</i>	7,455,951	654,029	-	-	8,109,980
<i>of which, DREAMS</i>	1,760,000	-	-	-	1,760,000
<i>of which, OVC (Non- DREAMS)</i>	829,673	-	-	-	829,673

## FY 2023 Target Summary

COP 2022 funds are approved to achieve the following results in FY 2023.

South Sudan		SNU Prioritizations		
		Scale-up: Aggressive	Sustained	Total
TX_NEW	<15	976	240	1,252
	15+	9,354	3,519	13,833
	<b>Total</b>	<b>10,330</b>	<b>3,759</b>	<b>15,085</b>
TX_CURR	<15	4,906	653	5,633
	15+	47,011	8,298	59,091
	<b>Total</b>	<b>51,917</b>	<b>8,951</b>	<b>64,724</b>
TX_PVLS	<15	1,732	441	2,219
	15+	30,983	5,797	39,496
	<b>Total</b>	<b>32,715</b>	<b>6,238</b>	<b>41,715</b>
HTS_SELF	<15	633	-	664
	15+	4,531	-	8,359
	<b>Total</b>	<b>5,164</b>	<b>-</b>	<b>9,023</b>
HTS_TST	<15	42,642	8,748	52,429
	15+	352,315	116,443	507,641
	<b>Total</b>	<b>394,957</b>	<b>125,191</b>	<b>560,070</b>
HTS_TST_POS	<15	869	222	1,109
	15+	9,379	3,706	14,045
	<b>Total</b>	<b>10,248</b>	<b>3,928</b>	<b>15,154</b>
HTS_INDEX	<15	7,772	816	8,807
	15+	19,986	7,544	28,262
	<b>Total</b>	<b>27,758</b>	<b>8,360</b>	<b>37,069</b>
PMTCT_STAT	<15	104	34	238
	15+	58,833	6,041	67,509
	<b>Total</b>	<b>58,937</b>	<b>6,075</b>	<b>67,747</b>
PMTCT_STAT_POS	<15	3	1	7
	15+	4,177	372	4,744
	<b>Total</b>	<b>4,180</b>	<b>373</b>	<b>4,751</b>
PMTCT_ART	<15	3	1	7
	15+	4,177	372	4,744
	<b>Total</b>	<b>4,180</b>	<b>373</b>	<b>4,751</b>
PMTCT_EID	<b>Total</b>	<b>4,286</b>	<b>386</b>	<b>4,883</b>
TB_STAT	<15	546	60	612
	15+	5,740	582	6,449
	<b>Total</b>	<b>6,286</b>	<b>642</b>	<b>7,061</b>
TB_ART	<15	29	5	35
	15+	1,111	147	1,299
	<b>Total</b>	<b>1,140</b>	<b>152</b>	<b>1,334</b>
TB_PREV	<15	1,751	220	2,018
	15+	13,857	3,154	19,048
	<b>Total</b>	<b>15,608</b>	<b>3,374</b>	<b>21,066</b>
TX_TB	<15	4,932	650	5,663
	15+	46,540	8,221	58,621
	<b>Total</b>	<b>51,472</b>	<b>8,871</b>	<b>64,284</b>
VMMC_CIRC	<b>Total</b>	<b>-</b>	<b>-</b>	<b>10,847</b>
KP_PREV	<b>Total</b>	<b>11,328</b>	<b>387</b>	<b>11,715</b>
PrEP_NEW	<b>Total</b>	<b>2,887</b>	<b>201</b>	<b>3,588</b>
PrEP_CT	<b>Total</b>	<b>1,106</b>	<b>56</b>	<b>1,292</b>
PP_PREV	<15	-	-	-
	15+	8,351	271	8,622
	<b>Total</b>	<b>8,351</b>	<b>271</b>	<b>8,622</b>
OVC_SERV	<18	4,215	-	4,215
	18+	696	-	696
	<b>Total</b>	<b>4,911</b>	<b>-</b>	<b>4,911</b>
OVC_HIVSTAT	<b>Total</b>	<b>2,941</b>	<b>-</b>	<b>2,941</b>
GEND_GBV	<b>Total</b>	<b>1,859</b>	<b>26</b>	<b>1,885</b>
AGYW_PREV	<b>Total</b>	<b>2,414</b>	<b>-</b>	<b>2,414</b>

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



**Partner Management and Stakeholder Engagement:**

Agreements made during COP 2022 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 percent of target achievement at 3 months or (2) less than 40 percent of target achievement at 6 months must have a complete review of performance data (including trends in performance) and outlays to date, 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 percent and 100 percent 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 percent 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 percent of their target at Q2 performance review should be initiated. 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 percent. If the issue is retention it should be net new on treatment equal to 90 percent 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 2022 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 South Sudan's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.

**COP21-COP22 Budget Shifts by Funding Agency and Program Area**

COP 21 Budget by Funding Agency and Program Area																		
Funding Agency	GRAND TOTAL	% of TOTAL	ASP	ASP as % of Total	C&T	C&T as % of Total	HTS	HTS as % of Total	M&O	M&O as % of Total	PM	PM as % of Total	PREV	PREV as % of Total	SE	SE as % of Total	Not Specified	Not Specified as % of Total
Total	42,000,000	100%	1,172,984	4%	11,901,504	45%	3,908,158	10%	-	0%	12,617,819	30%	3,514,154	8%	1,177,554	3%	-	0%
DOO	3,574,389	9%	-	0%	1,043,230	29%	181,734	5%	-	0%	849,425	24%	1,500,000	41%	-	0%	-	0%
HHS	36,906,124	84%	1,690,294	6%	15,008,505	56%	2,182,910	8%	-	0%	7,997,415	30%	27,000	0%	-	0%	-	0%
STATE	750,000	2%	-	0%	-	0%	-	0%	-	0%	586,500	78%	163,500	21%	-	0%	-	0%
USAD	10,769,487	25%	100,000	1%	3,850,169	16%	1,633,841	15%	-	0%	3,184,489	30%	1,823,654	27%	1,177,554	11%	-	0%

COP 22 Budget by Funding Agency and Program Area																		
Funding Agency	GRAND TOTAL	% of TOTAL	ASP	ASP as % of Total	C&T	C&T as % of Total	HTS	HTS as % of Total	M&O	M&O as % of Total	PM	PM as % of Total	PREV	PREV as % of Total	SE	SE as % of Total	Not Specified	Not Specified as % of Total
Total	40,100,000	100%	1,407,047	3%	17,728,971	44%	3,786,180	9%	-	0%	11,778,384	29%	3,620,135	9%	1,764,673	4%	-	0%
DOO	3,422,517	9%	-	0%	1,027,737	30%	252,416	7%	-	0%	702,754	21%	1,425,000	41%	-	0%	-	0%
HHS	24,897,430	62%	1,332,047	5%	13,793,489	55%	2,182,910	9%	-	0%	7,561,384	30%	27,000	0%	-	0%	-	0%
STATE	750,000	2%	-	0%	477,368	64%	-	0%	-	0%	272,632	36%	-	0%	-	0%	-	0%
USAD	11,049,653	28%	70,000	1%	2,417,907	22%	1,350,844	12%	-	0%	3,239,984	29%	2,206,135	20%	1,764,673	16%	-	0%

COP 21-22 Budget Shifts by Funding Agency and Program Area																	
Funding Agency	Total Change	Change in ASP	% Change in ASP	Change in C&T	% Change in C&T	Change in HTS	% Change in HTS	Change in M&O	% Change in M&O	Change in PM	% Change in PM	Change in PREV	% Change in PREV	Change in SE	% Change in SE	Change in Not Specified	% Change in Not Specified
Total	(1,860,000)	(618,347)	-2%	(1,175,403)	-6%	(212,055)	-5%	(139,483)	-7%	(147,843)	-7%	(577,639)	-5%	506	0%	-	0%
DOO	(151,472)	-	-	(5,493)	-1%	70,652	39%	(145,671)	-17%	(71,000)	-17%	(58)	-5%	-	-	-	-
HHS	(2,008,694)	(158,147)	-21%	(1,215,016)	-6%	(2,182,910)	-6%	(435,491)	-5%	(833,888)	-5%	(163,500)	-100%	-	-	-	-
STATE	-	-	-	477,368	100%	-	-	(313,868)	-64%	(313,868)	-64%	(163,500)	-100%	-	-	-	-
USAD	280,166	(30,000)	-30%	(432,262)	-15%	(282,697)	-17%	55,505	2%	382,481	21%	587,139	21%	506	90%	-	-