The Country Operational Plan

Every year, PEPFAR engages in a planning process to create a Country Operational Plan (COP) for each major country that receives funding.

The COP is an annual plan that sets out PEPFAR’s strategy for the following year—COP21 will decide what happens during the budget year October 2021 to September 2022.

What is in the COP?
— The goals and priorities for the country
— What strategies and interventions will be used by the implementing partners
— “Where” and “who” will be prioritised
— The targets
— A detailed budget
## COP Activist Calendar

<table>
<thead>
<tr>
<th>When?</th>
<th>What happens?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid January, 2021</td>
<td>Planning level letter released, Q4 POART slides released</td>
</tr>
<tr>
<td>Late January, 2021</td>
<td>Strategic in-country retreat</td>
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| Group 1: February 22 - 26, 2021  
Group 2: March 1 - 5, 2021  
Group 3: March 8 - 12, 2021  
Regional groups and country pairs: March 15 - 19, 2021 | COP21 Virtual Planning Meetings                                          |
| Group 1: March 15, 2021       | COP/SDS due to the Office of the Global AIDS Coordinator (PEPFAR’s Headquarters) in Washington, D.C. |
| Group 2: March 22, 2021       |                                                                             |
| Group 3: March 29, 2021       |                                                                             |
| Regional Groups & Country Pairs: March 29, 2021 |                                                                             |
| April 5th — 16th, 2021        | In-country COP approvals                                                  |
How to Win!

1. Start working on your recommendations early in the form of a “checklist” + send them to PEPFAR teams early.
2. Present your recommendations as many times as you can in the most detail you can so they know it is important. Before the planning meetings make sure PEPFAR knows your major priorities and ask that they be included in the agenda for the meeting.
3. Be as detailed as you can about the most critical request but no shopping lists.
4. Use data to inform your recommendations (global guidance, PEPFAR quarterly data, community-led monitoring data)
5. Have pre-meetings with all civil society organisations to make sure your representatives are well prepared to represent all of your priorities
6. Send your best, boldest advocates well prepared to push for your priorities; please email info@pepfarwatch.org to share the names of those who will be going!
7. Liaise with the international activists likely to be part of your planning meeting to strategise together. Send an email to info@pepfarwatch.org if you need help identifying them.
8. Ask the PEPFAR team to send you the data and presentations for the planning meetings in advance.
9. Consider inviting the PEPFAR team to a meeting hosted by civil society to discuss community priorities before the planning meetings.

<table>
<thead>
<tr>
<th>Area</th>
<th>CSO Priorities</th>
<th>What PEPFAR is doing in 2020 (see last year's COP20 + quarterly data)</th>
<th>What exactly should PEPFAR do in COP21? (include specific language for the COP + budget)</th>
<th>Target for COP21</th>
<th>Agreements in COP21</th>
</tr>
</thead>
</table>
| EXAMPLE | Establishing adherence clubs + stronger system for linkage and tracing those lost to follow up. This requires PEPFAR to fund community health workers for linkage and adherence. | Quarter 4 Data shows 80% retention rates have not changed since last year. Especially poor retention rates in KZN and Eastern Cape provinces. Language from COP18: "In COP19 PEPFAR will support CBO's, Ward Based Outreach Teams (WBOTs), community health workers (CHW), and (for KPs) peer navigators to serve as community linkage officers to assure PLHIV newly diagnosed in the community are successfully referred to the nearest facility, where the facility linkage and retention officers will ensure enrollment in care and treatment." (p49) In COP19 PEPFAR will promote a choice of ART delivery options such as facility-based fast track and community-led models of ART provision, including community adherence groups (CAGs), community-led adherence clubs, and community drug delivery through the CMDD where feasible. **No clear information: How many current support? Where are they based? What % are formally paid?** | We request the following be in the COP: In COP20, PEPFAR will partner directly with the government to fund a cadre of CHWs in line with the government's CHW Policy. Every PEPFAR-supported facility with more than 500 people on ART will be linked with a cadre of community health workers supported by PEPFAR through the public sector. These CHWs will be formally paid, trained, capacitated, and equipped with communications and transportation needed to be effective. PEPFAR will also fund a cadre of supervisors of the CHWs at ratios based on best practices. In addition, in COP20, 100% of PEPFAR-supported sites will have adherence clubs established and functioning that enable groups of PLHIV stable on ART to meet and pick up medicines together via short (no longer than 1.2 hours) trips to the clinic. PEPFAR will support the staffing needed to establish and maintain programs including community health workers and additional clinical staff. In addition, in each of the 27 PEPFAR-supported districts community-based adherence clubs will also be set up and staffed by PEPFAR supported clinical and community health workers. There are approximately 2,300 PEPFAR sites with more than 500 people on treatment. On average sites need 3-4 facility based CHWs and 4 or more based at the facility but who spend their time in communities to do outreach. So minimum numbers to be funded in COP19 should be 6,900 facility-based and 9,200 outreach CHWs. This is in addition to outreach team leaders. We anticipate the direct cost for salaries about R3,500/month, R42,000/year (US$3,600) per HCW plus US$1,500 in supplies and communications. So total cost is US$45 million additional for new outreach workers. | COP20 will fund 6,900 facility-based and 9,200 outreach CHWs in addition to outreach team leaders. 100% of PEPFAR sites will have an adherence club model for ART delivery as well as support groups running by end of COP21 and will report portion of patients in adherence groups. | **PEPFAR Watch**
PEPFAR Watch

Webinars 2021

Join us for a series of webinars to support you as you define community priorities for the PEPFAR COP 2021 planning cycle. Topics will include:

- 13 Jan: HIV Testing Strategies: Implications in Programs Now and in COP 21
- 14 Jan: Improving HIV Retention: Ensuring programs support people to start and stay on treatment
- 20 Jan: Improving pediatric diagnostic and treatment access
- 21 Jan: Promoting interventions for co-infections (TB, Hepatitis) and AIDS
- 27 Jan: Using Data for Advocacy: Accessing PEPFAR & other Data to strengthen your advocacy campaigns.
- 28 Jan: Strategies to improve access to HIV testing, treatment & care for Key Populations (MSM, FSW, PWUD, Transgender)
- 2 Feb: Prioritizing interventions for adolescent girls and young women (AGYW) including DREAMS programming
- 3 Feb: Improving the roll out, uptake and retention of PrEP
- 4 Feb: Finalizing your checklist and preparing for COP planning meetings

Join us for the webinars from 13 January to 4 February 2021
8am DC | 3pm Joburg | 4pm Nairobi

Sign up: bit.ly/PEPFARWatchWebinars2021
Join the PEPFAR Watch network!

Email info@pepfarwatch.org to join the global PEPFAR Watch listserv and the WhatsApp group.