

Cote d'Ivoire

Operational Plan Report

FY 2011



Operating Unit Overview

OU Executive Summary

Background

Côte d'Ivoire is slowly progressing toward political stability after an eight-year crisis that divided the country, impoverished the population, and decimated health and social services. About half the population of 20 million lives in rural areas with high illiteracy rates; a similar proportion survives on less than \$2 a day. According to the National Poverty Reduction Strategy (2009), "Côte d'Ivoire has been weakened by a break in social cohesion, increasing insecurity, a slowdown in economic development, massive youth unemployment, and the spread of poor governance." According to the World Bank Governance Matters 2009 report, Côte d'Ivoire fell from the 41st to the 7th percentile in government effectiveness and corruption control between 1998 and 2008. Despite these problems, the country remains a regional economic and migratory hub, and with long-delayed elections expected October 31, 2010, positive changes are possible.

Côte d'Ivoire has the highest adult HIV prevalence in West Africa, estimated at 3.9% (UNAIDS, 2008). Both HIV-1 and HIV-2 are prevalent. Among 480,000 adults and children with HIV/AIDS, about 190,000 are estimated to be in need of antiretroviral treatment (ART) (UNAIDS, 2008). HIV-related orphans and vulnerable children (OVC) are estimated to number 540,000, including 52,000 children living with HIV. Tuberculosis (TB) is the leading cause of AIDS-related deaths; about 30% of TB patients test positive for HIV.

Data from the National AIDS Indicator Survey (AIS, 2005) describe a generalized epidemic marked by striking differences in prevalence between men and women and among geographic areas. In all age groups, females are far more likely than males to have HIV (6.4% vs. 2.9% overall, 4.5% vs. 0.3% among ages 20-24). Prevalence peaks among women ages 30-34 at 14.9%. Lower male prevalence may be explained in part by near-universal (96%) circumcision. Adult prevalence is marginally higher in urban settings and markedly higher in the South and East (5.5% or higher) than in the Northwest (1.7%).

The epidemic is characterized by early sexual debut, multiple and concurrent sexual partnerships, transactional and intergenerational sex, weak knowledge about HIV, and low condom use in at-risk sex (occasional, transactional, etc.) reported by both men and women. Most-at-risk populations (MARPs) include sex workers and men who have sex with men (MSM); recent data on male sex workers at a clinic in Abidjan showed HIV prevalence of 50%. Other at-risk groups include sero-discordant couples, the uniformed services, economically vulnerable women and girls, transportation workers, migrants, prisoners, and OVC. Gender inequality and gender-based violence (GBV) heighten HIV risk across all socio-economic and cultural backgrounds. More than 35% of women ages 15-49 have undergone some form of female genital cutting, with rates above 80% in some regions (UNICEF MICS, 2006). A study in Abidjan found that 68% of women in relationships had experienced physical violence (UNFPA, 2007), and the 2005 AIS noted that 17% of women reported that their sexual debut was a rape.

While a mid-term review of the HIV/AIDS National Strategic Plan (2006-2010) indicates greatly expanded access to prevention, care, and treatment services, the national HIV/AIDS response is limited by poorly equipped and under-staffed health and social services, particularly at decentralized levels. The national budget allocation for health lingers below 5%. Human resources for health (HRH) remain a barrier to service scale-up. A series of HRH assessments found limited staff, high attrition (24% among nurses, 20% among physicians), limited public-sector ability to absorb and retain professionals, and limited HIV/AIDS services in the better-staffed private sector. There is no national health insurance scheme, and private contributions to health-care costs are higher than in neighboring countries. Access to and uptake of prevention of mother-to-child HIV transmission (PMTCT) and other gateway services remain

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insufficient, particularly in rural areas.

Despite these challenges, the national HIV testing and ART programs have grown substantially, with monthly ART enrollment rates increasing from 1,800 in May 2009 to 2,900 in May 2010. This stronger-than-expected growth has created a \$17.5 million gap in committed funding to cover national needs for ARVs through December 2011. Since the national quantification committee announced this shortfall in July 2010, PEPFAR has worked to inform the Government of Cote d'Ivoire (GoCI) of our limited ability to support additional ARV costs, to promote a sense of national responsibility to address the gap, and to eliminate obstacles to achieving efficiencies (discussed in the Treatment section). In response, the Ministry of AIDS (MLS) requested and received approval for a fourfold increase in ARV funding in 2011, from \$2 million to \$8.6 million. This does not fully cover the gap, and PEPFAR is concerned that in this time of political uncertainty, efforts to raise public funds and ensure procurement will not bear fruit soon enough to avoid stockouts beginning in July 2011. The ARV gap epitomizes Côte d'Ivoire's challenges (accurate and timely information, central leadership) and, in the Partnership Framework (PF) spirit, represents an important opportunity for joint action to address them.

Sustainability and Country Ownership

All PEPFAR investments are designed to provide technical and financial assistance to strengthen the capacity of the GoCI, civil society, and private sector actors to plan, implement, and monitor a continuum of HIV/AIDS prevention, care, and treatment services. This purpose is guiding and being refined in national strategic planning, PF negotiations, and COP 2011 plans, designed to progressively share oversight of USG programs and promote national leadership of the response. On July 30, 2010, the U.S. Ambassador and Côte d'Ivoire Minister of AIDS launched PF steering and technical committees representing all stakeholders. In parallel with ongoing HIV/AIDS National Strategic Plan (NSP) 2010-2015 development, the committees have drafted a five-year PF document outlining shared objectives, respective contributions, and policy priorities, which will be submitted soon for S/GAC review. While pending elections create considerable uncertainties, the committees intend to have a PF ready for approval by November 2010 and to complete a PF Implementation Plan by January 2011.

The PF will seek to support the GoCI, civil society, and the private sector to: 1) reduce new HIV infections; 2) increase access to quality care and treatment and improve the quality of life for people living with HIV/AIDS (PLWHA); 3) reduce the impact of HIV/AIDS on public and private sectors, communities, and families; and 4) ensure the strengthening of governance, financing, and health systems necessary for an optimal national response. The PF will seek to strengthen mutual USG-GoCI accountability and emphasize capacity building and sustainability at all levels, including strengthening of human, technological, and institutional capabilities of civil-society networks and local NGOs. The NSP and PF will emphasize key approaches and policies that promote effective health programs, including accountability, results-based programming, responsible fiscal management, and transparency in financial reporting. Both draft documents express the GoCI's intention to increase its financial contributions to the national response.

In PF development and COP planning, the USG team has made concerted efforts to support greater country ownership of the HIV/AIDS program. Aligning its PF timetable with NSP development, PEPFAR has provided financial and technical support for preparatory work that is enriching all planning documents. This includes a Demographic and Health + HIV Survey (DHS+, underway), a health systems assessment (June 2010), a National Health Accounts (NHA) exercise (July 2010), an HIV/AIDS policy analysis and agenda (January 2010), and task-shifting policy work (ongoing). To justify budget allocations, every partner in every technical area was required to describe in writing how proposed service-delivery and technical-assistance activities will contribute to systems strengthening and sustainability.

NSP and PF processes have also led to initiatives to improve high-level coordination. The existing Partners Forum (including the USG, Global Fund, World Bank, GoCI, civil society, and the private sector)



will function as a national planning and review forum, responsible for regular joint reviews of progress toward PF and NSP goals. The USG will continue to provide technical and financial support for national technical working groups (TWG). The NSP and PF processes also provide an opportunity for PEPFAR to work with the GoCI to track HIV/AIDS and health financing through the NHA, National AIDS Spending Assessments (NASA), the inclusion of PEPFAR budget data in the national information system for financial management, as well as improved auditing and control mechanisms. Changes in health financing pursued by the International Monetary Fund (IMF) and World Bank are also expected to contribute to improved financial monitoring and to free up funding for health programs instead of debt service.

PEPFAR Côte d'Ivoire is also investing significant effort and funding in the transition of Track 1.0 ART programs, representing a majority of its care and treatment program, to national ownership through five competitive new awards (two for Ivoirian implementers, three for technical assistance providers). PEPFAR will continue to support the MLS and Ministry of Health (MOH) to lead an effective national HIV/AIDS program and will continue to strengthen capacities of MOH monitoring and evaluation (M&E), maintenance, pharmacy, and other divisions to take over roles currently played by PEPFAR implementing partners.

By initiating a planned, purposeful transfer of responsibility for planning and oversight of the PEPFAR program, with clearly delineated benchmarks, the PF will strengthen the GoCl's ownership of the HIV/AIDS response and decrease the need for USG assistance over time. In process and content, the COP 2011 reflects USG efforts to advance that transfer. Expanded consultation with, and review by, the GoCl are part of the COP 2011 process, and objectives and priorities identified through NSP and PF strategic discussions have guided COP 2011 content.

Integration across the USG

The U.S. Centers for Disease Control and Prevention (CDC), U.S. Agency for International Developmetn (USAID), and U.S. Department of Defense (DOD) operate a fully integrated PEPFAR Côte d'Ivoire program, which collaborates with the U.S. Department of State (Pol/Econ and Public Affairs sections). Other opportunities are limited due to continued sanctions against Côte d'Ivoire.

Health Systems Strengthening and Human Resources for Health (HRH)

Based on a health system assessment and consultations with the GoCI, the USG is targeting the following key elements of the health system for strengthening: a) health information systems; b) HRH; c) coordination, governance, and management; d) supply chain; e) lab services; and f) civil-society capacity. Rising ARV costs necessitated postponing other needs until additional PF funding becomes available. FY 2011 funds will support:

a) Strengthening the national monitoring and evaluation (M&E) system with a focus on data quality and improved architecture, surveillance, and training. The USG will work to integrate new indicators into the national set and to improve data quality by upgrading collection systems and continuing data audits. Second-generation surveillance will be complemented by antenatal clinic (ANC) and other studies. Support will help develop national health management information systems (HMIS) architecture, including inter-operability of HIV electronic databases and supply-chain software. The strategic information (SI) team will support forums for joint data review to inform decision-making at central and decentralized levels. M&E and biostatistics capacities will be strengthened through the integration of courses at the School of Statistics and Applied Economics, which ministry and civil society staff will be invited to attend. Support will continue to the Ministry of Family, Women, and Social Affairs (MFFAS) and the Ministry of Education (MEN) for collection and use of data on OVC and HIV-related activities in schools, as well as to the MOH and MLS. USG support will help the Ministry of Defense to implement an HIV management policy and to conduct an HIV bio-behavioral survey. In alignment with the NSP and PF, partners are being asked to propose indicators to measure progress in health systems strengthening and multi-sector

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support as well as the Global Health Initiative (GHI) principles of country ownership, strategic coordination, integration, and the use of woman- and girl-centered approaches. Efforts to better understand the epidemic through studies and improved data collection are continuing, including the now-underway DHS+, distribution of harmonized paper-based tools, applying data management procedures to guide partner support to sites, and ensuring staff support for a stable, functioning patient-tracking system (SIGVIH). The 2008 national ANC surveillance results are being used for a prevalence estimate, and studies focused on military and MSM populations are ongoing.

b) Increasing the number and improving the expertise of health and social workers. Key activities in the MOH Human Resources Strategic Plan (2008-2011) will continue to be supported, including human resource planning for care and treatment scale-up, appropriate recruitment and deployment, and evaluation of pilot incentive and retention schemes. The USG will provide assistance to the University School of Medicine and five nursing school branches for advanced courses in HIV/AIDS service delivery and management. The USG will continue to support pre- and in-service training, with an emphasis on nurses and midwives, who are in short supply. Efforts to ensure the inclusion of the latest HIV information in pre- and in-service training curricula will continue, as will support for practical internships.

c) Management and leadership training, including training for regional and district health officers. Implementing partners will reinforce the "district approach" with support for local planning, coordination, and M&E in collaboration with district health teams. Reinforcing effective decentralization through policy advocacy and a plan that articulates benchmarks for decentralization over the next two years will be a focus. Capacity building of regions and districts is key as the GoCI begins results-based planning inspired by IMF and World Bank recommendations.

d) Strengthening of the supply-chain system. PEPFAR will continue to support integration of the SAGE and MACS information systems at the national pharmacy (PSP), the roll-out of harmonized logistics management information systems (ARV and lab) to improve tracking and ordering, and upgrading of PSP warehouses to meet international norms. Support for the national distribution system and PSP decentralization strategies will help ensure availability of ARV drugs and lab commodities throughout the health pyramid.

e) Capacity and infrastructure strengthening under the new national laboratory policy and strategic plan. Support will continue for a quality initiative that aims for a five-star rating and eventual WHO accreditation for 26 laboratories, as well as for the transfer of responsibility for routine HIV/AIDS testing activities from CDC/Retro-CI to the national reference laboratory (LNSP), with CDC/Retro-CI providing technical assistance and reference lab testing for the network. Implementation of lab quality management systems will continue, and a new public-private partnership (PPP) will work to develop a national transport system for lab samples. Support will continue for improved and decentralized pre- and in-service training, for the development and implementation of an open-source lab information system as well as for building incountry capacity to maintain the system. Key MOH structures will be strengthened, including the division responsible for developing and implementing a national program for lab equipment maintenance. New lab infrastructure will support early infant diagnosis at two regional hospitals. Microbiology services, including testing for sexually transmitted and opportunistic infections, will be decentralized to six regional laboratories through a new cooperative agreement with a Ministry of Higher Education and Research institution. Point-of-care tests and equipment will be evaluated to support the care and treatment program.

f) Organizational capacity building. Support will strengthen local NGOs as well as national civil-society networks working to promote HIV-related human rights and stigma reduction. PF negotiations are identifying specific activities to grow civil-society capacity to play a more important role in advocacy efforts.



Coordination With Other Donors and the Private Sector

Côte d'Ivoire has four active Global Fund grants for TB and malaria with more than \$350 million in approved funding. The country is anticipating signature of a Round 9 HIV grant budgeted at \$76 million for the first two years, about half of which will go to the MOH for public-sector services, and has submitted a Round 10 HIV proposal focusing on PMTCT and health systems strengthening. Côte d'Ivoire also benefits from small-scale support from a regional Global Fund project targeting truck drivers and sex workers between Abidjan and Accra, Ghana. Other donors in HIV/AIDS are the World Bank, whose \$5 million-per-year project focuses on four of 19 health regions; the European Union, which supports strengthening of the national pharmacy and essential medicines procurement; and the Clinton Foundation, which has provided pediatric and PMTCT-related drugs and commodities but will end its support by December 2011. UNAIDS, WHO, UNICEF, and UNFPA provide technical support and have small-scale projects in the field. The USG is working with the WHO and other partners to set up a pharmacovigilance system for ARV drugs.

The USG holds one of two development-partner seats on the Global Fund Country Coordinating Mechanism (CCM) and participates in all major coordination efforts, including HIV/AIDS technical working groups, the GoCI Partners Forum, and a monthly donor coordination group for which UNAIDS serves as the secretariat. PEPFAR and WHO advocacy led to the recent creation of a donor forum with the MOH that will allow regular discussion around strategic plans for the supply chain, HRH, and the national laboratory network.

PEPFAR will continue to collaborate with the U.S. Embassy's Pol/Econ Section to engage private companies and seek opportunities to leverage support and create links with local NGO partners. Efforts to operationalize a free national HIV/AIDS hotline with the cell-phone company MTN will continue, as will efforts to reach cocoa and cashew growers in collaboration with Cargill and OLAM. The USG is exploring the possibility of a national HIV/AIDS Expo, in collaboration with the Ivoirian and American chambers of commerce, and will explore additional partnerships 2011 with assistance from the PPP team at S/GAC.

Programmatic Focus

The USG team's COP 2011 programming is designed to support limited scale-up of high-quality ART and PMTCT service coverage within a balanced, well-targeted prevention, care, and treatment program emphasizing efficiency, coordination, systems strengthening, and evidence. The program will contribute to the achievement of the 4-12-12 PEPFAR Phase II targets and GHI principles through:

Prevention (25% of total budget)

Reducing the number of new HIV infections is a top GoCI and USG priority. USG prevention efforts will continue to be refined with the 2011 development of a National HIV/AIDS Prevention Strategy and a PFIP as well as prevention costing exercises. The prevention portfolio focuses on behavioral and biomedical approaches and structural interventions where appropriate.

Sexual transmission prevention partners share good practices and contribute to objectives of national HIV prevention TWGs led by the MLS, MOH, and Ministry of Defense (MOD). PEPFAR will continue technical assistance to the MLS for improved coordination of consistent messaging and social-behavior change communication (SBCC) on epidemic drivers such as transactional sex, condom use, and gender norms. All sexual transmission implementing partners will continue to improve synergies in decentralized SBCC and media planning, such as sharing thematic messaging through rural radio. Plans include leveraging the reach of the dominant Ivoirian television channel to address attitudes and norms regarding intergenerational relationships, violence, alcohol use, and other risky behavior through a soap opera and using cell phone and Web-based technologies to promote discussion and reinforce SBCC objectives.

Research findings will continue to inform interventions targeting MSM, sex workers and their clients, and people engaging in transactional sex. Technical assistance for operations research and capacity building



for MARPs and workplace programs will be provided as new partners take over direct services at MARPs clinic sites. Assistance will strengthen community mobilization for service uptake and reinforce MSM and sex worker health champions and civil society organizations that will serve as platforms for peer outreach.

Other interventions will complement Corridor Project, World Bank, and Global Fund coverage along transportation routes. Activities targeting the uniformed services and their families will include a survey with police; mobile and fixed-site testing and counseling along with condom social marketing, risk-reduction counseling, and reinforcement of personal responsibility through the Men as Partners initiative; training for military wives association members; a girls' leadership initiative near military bases; and other peer education, advocacy, and STI programs. All PEPFAR-supported health facilities will integrate HIV prevention for PLWHA and will target HIV-negative pregnant women and people accessing STI treatment, family planning, and other services with HIV prevention interventions.

Behavior-change efforts will promote HIV testing and counseling (TC), but testing targets will be carefully assigned and monitored in light of strained care and treatment budgets. The USG plans to moderately increase testing numbers through the expansion of routine opt-out TC in health facilities. Communityand home-based, mobile, couples, and family testing will prioritize high-prevalence regions and higherrisk populations. In collaboration with UNFPA, MOH, and Global Fund, emphasis will be placed on strengthening risk-reduction counseling as well as on ensuring that social workers at MFFAS servicedelivery sites are capable of screening for and addressing risks for GBV, including providing or referring GBV victims for post-exposure prophylaxis, care, and legal services. A multi-country study will examine models of provider-initiated TC.

The USG will improve the coverage and quality of its PMTCT program, which in the past year nearly doubled the number of pregnant women with known HIV status and increased the number of women provided with antiretroviral (ARV) prophylaxis by 65% (from 3,466 to 5,716). In 2011, the USG support will continue to support the MOH to strengthen policy and strategy development and national and district-level planning, coordination, and management of services, and will provide support in assessing the feasibility of implementing the new WHO PMTCT and pediatric care and treatment guidelines.

PEPFAR will support the GoCI with moderate expansion of PMTCT services from 500 to 550 sites (about 58% of all health facilities) by September 2011, with TC for 290,000 pregnant women at ANC sites and in labor and delivery services. Women of unknown serostatus will be offered testing during postnatal visits. All sites will apply strategies to involve and test the women's partners. Co-location of PMTCT and ART services will be promoted to provide ARV prophylaxis or treatment for 10,080 women (80% of those tested HIV-positive, up from the current 74%), with nutritional counseling and support and effective linkages to ART, TB, TC, and OVC services as well as psychosocial support through community workers and PLWHA. Community-level sub-grants will fund campaigns to decrease stigma and encourage women to seek ANC and PMTCT services. Linkages with the National Reproductive Health Program and UNFPA will be strengthened to increase uptake of reproductive health services and integration of TC in family-planning services.

FY 2011 programming will support effective follow-up of mother/infant pairs, early infant diagnosis (EID), and pediatric HIV testing, care, and treatment as high priorities. Building on results of pilot and transition phases, funds will support the expansion of early HIV testing using DBS and DNA PCR in pediatric facilities and other services (nutrition centers, social services, OVC programs). PCR lab capacity will be expanded to three more reference labs. HIV-infected children will be linked with follow-up, including immunization, social, and nutrition services. PEPFAR will also pilot point-of-care CD4 testing to improve access of HIV-infected women to lab monitoring to determine eligibility for ART.

The USG will continue financial and technical support to the National Blood Transfusion Service (CNTS), whose successes include screening all donated blood (for HIV, hepatitis B and C, and syphilis) and



recruiting and retaining unpaid, low-risk donors to provide 100% of collected blood, with less than 1% testing reactive for HIV. In 2011, the USG will continue support for training on safe use of blood products, infrastructure improvements, implementation of quality systems (with particular attention to lab quality), and improved hemovigilance. At least 145,000 units of blood will be collected and screened in 2011, representing 72.5% of national demand.

In the area of safe injection and medical waste management, activities and oversight have been fully integrated within the MOH's Division of Public Hygiene. The 2011 focus will be on ensuring quality through the installation of mid-capacity incinerators funded in COP 2010, supporting the MOH in mobilizing resources for decentralized non-infectious waste management, training, supervision, improving logistics management, and research to inform strategies for promoting use of safe syringes and locally produced safety boxes.

Care and Support (20% of total budget)

PEPFAR gives technical assistance and funding to GoCI and nongovernmental structures to provide basic health care and support for HIV-positive adults and children, integrated TB/HIV services, and OVC programs. FY 2011 programming will focus on improving service quality while clinical-care coverage continues to expand gradually, mainly to extend access to lower levels of the health pyramid in already-supported districts, with stronger linkages to community-based care and support.

Quality initiatives will include scaling up quality collaboratives at care, ART, PMTCT, and TB sites; training and supervision, especially for pediatric-care providers; improving nutritional assessment, counseling, and support (especially for infant feeding), including a Food by Prescription pilot at eight sites; integrating water and sanitation (WASH) counseling in care and support activities, along with provision of LifeStraw water systems, on a pilot basis, for PLWHA in areas with poor water quality; and diagnosing and treating opportunistic infections, including expansion of a successful cervical cancer prevention pilot. Cotrimoxazole (CTX) prophylaxis will be provided to adults and children based on newly revised national guidelines raising the CD4 threshold to <500 and will target at least 96% of infants born in health centers and 65% of all HIV-exposed children. Insecticide-treated bed nets will be provided by the Global Fund Malaria Project. Based on an evaluated pilot, Prevention With Positives services will be extended to reach 50% of adult PLWHA receiving clinical care in PEPFAR-supported sites, with adaptation of training manuals for community-lay counselors.

Efforts will continue to improve linkages between facility- and community-based services and between care, treatment, and other services. All PEPFAR-supported care, ART, PMTCT, and HIV/TB service providers will engage counselors (preferably PLWHA) who will provide HIV prevention interventions for all clients and effective support, follow-up, and referrals to community-based care and support for HIV-positive clients. Partners will continue to work with the MOH and stakeholders to implement supportive policies for the scale-up of EID, rollout of the new national HIV whole-blood finger-prick rapid-testing algorithm for children over 12 months, involvement of non-physicians in HIV clinical care, and strengthened integration and decentralization of pediatric care and treatment services in maternal-child health and other pediatric services.

USG support will continue at FY 2010 levels for the National TB Program (PNLT), and stronger TB/HIV integration will focus on decentralizing the coordination of joint TB/HIV activities, quality improvement with improved uptake of HIV testing among TB patients and TB diagnosis among HIV-infected patients, piloting infection control guidelines, and improved diagnosis and management of multi-drug-resistant TB. PEPFAR will support the PNLT in training staff at TB and HIV care sites in comprehensive TB/HIV comanagement and program implementation, as well as increasing opt-out provider-initiated HIV testing at all TB clinics. USG partners will work with the PNLT to roll out a clinical TB symptom screening tool with a goal of screening at least 50% of patients receiving HIV care and treatment services and to supervise newly trained lab technicians to ensure quality assurance of sputum smear microscopy at central,



regional, and district health centers. A new (2010) CDC partner will strengthen lab services in support of TB/HIV diagnosis and care.

To complement care efforts, and in support of the PF goal of reducing the impact of HIV on families and communities, care and support for orphans and vulnerable children (OVC) will continue to emphasize national coverage and decentralized coordination through regular MFFAS-led technical meetings and capacity-building and quality-assurance interventions targeting regional and site-level teams. National OVC guidelines developed in 2008-2009 outline standards for providing quality need-based care to OVC and their host families. Considerable progress has been made in the scale-up of direct support services to reach 95,000 OVC (March 2010).

Through support to the National OVC Program, the USG will replicate the OVC Coordination Platform Model in two additional regions and improve use of data collected in situation analyses and ongoing evaluations. PEPFAR will build on a successful pilot of 2009-2010 quality-assurance efforts by transitioning to MFFAS the leadership and implementation of training, coaching, and evaluation activities. Efforts will increase the focus on integrated family support using the same community counselor or health agent for home-based PMTCT, adult care, and OVC service delivery. PEPFAR will also continue to advocate for increased social welfare human resources deployment; document results-oriented practices and models for scaling up vocational training and economic strengthening for OVC; identify and promote sustainable strategies for improved nutrition outcomes; bolster community structures for OVC care and support; and support best practices for regulation of and transition from institutional care.

Treatment (34% of total budget)

Treatment is an area of notable progress and uncertainty. National targets will be set in current NSP development, against the backdrop of a gap in national ARV funding (discussed in the Background section), the transition of Track 1.0 programs to national ownership, and Cote d'Ivoire's preliminary adoption of new WHO guidelines. The PEPFAR ART portfolio grew by 15% in the first half of FY 2010 (from 49,697 to 56,850 patients) and is expected to exceed its September 2010 target of 59,000 adults and children receiving ART. This growth, mirrored in national numbers, is producing budgetary pressures (mainly higher ARV costs) that affect planning in all technical areas.

In COP 2011, the USG strategy is to support service providers and health managers to improve service quality while continuing a limited expansion of treatment services, mainly to lower levels of the health pyramid within already-supported districts, with September 2011 goals of providing direct ART support for 68,000 adults and children at 330 sites. The USG partners will continue to support sites to ensure systematic testing of HIV-exposed infants and children, more effective links with other child health and social services, and better retention to increase the number of pediatric ART patients from 3,249 (5.7% of all ART patients) to 5,440 (8%) by September 2011.

Complemented by the Global Fund, the World Bank, Clinton Foundation (CHAI), and the GoCI, PEPFAR will centrally procure 75% of ARVs (first and second line) used nationally, more than 76% of them generics, and will ensure that a rational distribution plan is predetermined for each site based on commodities consumption reports and validated at least quarterly using client data and physical inventory spot-checks. Substantial increases in funding will be dedicated to strengthening logistics management information and national distribution systems, including support for coordination and monitoring at regional and district levels, training, updating and integration of supply-chain software, and infrastructure improvements (discussed in the Health Systems Strengthening section). Additional indicators will be used to monitor supply-chain effectiveness, including the percentage of sites with stock-outs and the percentage of loss.

The USG is working with the MOH to plan the trajectory of treatment scale-up, including conducting a costing assessment of the new WHO guidelines for treatment and PMTCT, which the MOH has said it will



not implement until costs are understood and a phased implementation plan is in place. HAPSAT and CDC ART model costing analyses indicate that proposed funding for FY 2011 will be sufficient to meet immediate PEPFAR care and treatment targets (under existing national guidelines). Projections assume enrollment of 2,000 new ART patients per month at PEPFAR-supported sites (based on monthly rates of 1,983 in the past quarter and 2,010 from October 2009 to June 2010). PEPFAR and the Global Fund, which will support about 12,000 ART patients in 2011, will cover about 42% of national needs by the end of FY 2011.

PEPFAR is working with other donors to gain efficiencies and cost savings by 1) supporting the MOH with the timely registration of FDA-approved or tentatively approved drugs, including generic molecules, 2) reducing the number of adult and pediatric treatment protocols (there are currently more than 40), 3) promoting the use of fixed-dose combinations and of pills in place of syrups; 4) closely monitoring the monthly enrollment rate to make sure that it aligns with the target; and 5) improving compliance of clinicians at PEPFAR-supported sites with recommended ART guidelines.

A top programmatic priority for 2011 is service quality, including better retention. An evaluation of national ART outcomes and lost-to-follow-up rates will be conducted in early 2011. Recommendations from a CDC-led evaluation in June 2010 will be implemented to increase the provision of more efficacious ART regimens, pilot a chronic-care model for clinical HIV care and treatment services, improve access to CD4 counts to assess patient eligibility for ART, pilot approaches to increase the involvement of non-physicians in the care and treatment of HIV-infected clients, and strengthen adherence counseling through community-lay counselors and local NGOs in active follow-up of patients who miss appointments. A unique patient identifier system will be put in place to better track patients receiving clinical services, and standards-based management and quality collaborative will be scaled up.

The treatment program will benefit from investments in the health systems strengthening area to improve coordination, planning, supervision, accreditation, and training at site and district levels, as well as deployment and retention efforts to address HRH constraints. The evidence base will be strengthened through basic program evaluations and public health evaluations (PHE). Priorities include completing and disseminating the results of the ART program evaluation, conducting a multi-country PHE on reducing early mortality of ART patients and identifying care and treatment priorities for patients with HIV-2 infection. PEPFAR will also provide support to the MOH to improve the monitoring of ART toxicity and adverse events.

Woman- and Girl-Centered Approaches

Lessons from 2010 assessments will be applied to address gender-related vulnerabilities that cut across all programs. The Men as Partners approach will be continued with male teachers and other targeted groups, and programs will focus on engaging male partners in supporting PMTCT programs and family health. MFFAS will be supported to build the capacity of service providers to serve victims of sexual violence and ensure the availability of post-exposure prophylaxis. PEPFAR partners and the Global Fund are exploring income generation as an intervention to benefit vulnerable women and stabilize community-based prevention organizations. Targeted work will be expanded to change attitudes about gender equity through the African Transformation program and to reduce girls' and young women's vulnerability through the "SuperGirls" HIV campaign and Sports for Life (using soccer and volleyball to deliver HIV prevention messages).

PEPFAR is increasing its funding for PMTCT and will continue collaboration with the National Reproductive Health Program in strengthening access to family-planning and maternal and child health services for HIV-infected women. As a component of quality care and treatment, strategies to address gender will include positive-prevention interventions, especially for discordant couples; promotion of partner and family HIV testing; and stigma-reduction campaigns. All reported indicators will be disaggregated by sex to monitor achievements, including in the health systems strengthening area.



Other Programs

In addition to priorities outlined in the Health Systems Strengthening section, the USG will strengthen policy dialogue structures and processes and will support civil-society and private-sector network leaders to play a larger role in seeking action from government leaders. The USG team is developing a policy agenda of major HIV-related issues, including efforts to promote decentralization, increase generic ARV procurements, gain free public media time for HIV messages, reduce HIV/AIDS stigma and discrimination, and promote GBV prevention. Management and operations (M&O) funding, which is being decreased in absolute and percentage terms (from 11.7% to 10.6% of the budget), will support the needed in-country staff of USAID, CDC, and DOD. A net decrease in proposed staffing is detailed in the M&O section.

New Procurements

Redacted

<u>Program Contact:</u> Jennifer Walsh, PEPFAR Coordinator (walshj@ci.cdc.gov) <u>Time Frame:</u> October 2011 to September 2012

Population and HIV Statistics

| Population and HIV | | | | Additional Sources | | | |
|----------------------|---------|------|---------------|--------------------|------|--------|--|
| Statistics | Value | Year | Source | Value | Year | Source | |
| Adults 15+ living | 380,000 | 2009 | UNAIDS Report | | | | |
| with HIV | | | on the global | | | | |
| | | | AIDS Epidemic | | | | |
| | | | 2010 | | | | |
| Adults 15-49 HIV | 03 | 2009 | UNAIDS Report | | | | |
| Prevalence Rate | | | on the global | | | | |
| | | | AIDS Epidemic | | | | |
| | | | 2010 | | | | |
| Children 0-14 living | 63,000 | 2009 | UNAIDS Report | | | | |
| with HIV | | | on the global | | | | |
| | | | AIDS Epidemic | | | | |
| | | | 2010 | | | | |
| Deaths due to | 36,000 | 2009 | UNAIDS Report | | | | |
| HIV/AIDS | | | on the global | | | | |
| | | | AIDS Epidemic | | | | |
| | | | 2010 | | | | |
| Estimated new HIV | | | | | | | |
| infections among | | | | | | | |
| adults | | | | | | | |
| Estimated new HIV | | | | | | | |



| · · · · · | | | | | |
|-----------|------------------------------|---|---|--|---|
| | | | | | |
| | | | | | |
| 687,000 | 2007 | UNICEF State of | | | |
| | | the World's | | | |
| | | Children 2009. | | | |
| | | Used "Annual | | | |
| | | number of births | | | |
| | | (thousands) as a | | | |
| | | proxy for number | | | |
| | | of pregnant | | | |
| | | women. | | | |
| 20,000 | 2009 | Towards | | | |
| | | Universal | | | |
| | | Access. Scaling | | | |
| | | up priority | | | |
| | | HIV/AIDS | | | |
| | | Intervention in | | | |
| | | the health sector. | | | |
| | | Progress Report, | | | |
| | | 2010. This mid- | | | |
| | | point estimate is | | | |
| | | calculated based | | | |
| | | on the range | | | |
| | | provided in the | | | |
| | | report. | | | |
| 450,000 | 2009 | UNAIDS Report | | | |
| | | on the global | | | |
| | | AIDS Epidemic | | | |
| | | 2010 | | | |
| 440,000 | 2009 | UNAIDS Report | | | |
| | | on the global | | | |
| | | AIDS Epidemic | | | |
| | | 2010 | | | |
| 260,000 | 2009 | Towards | | | |
| | | Universal | | | |
| | | Access. Scaling | | | |
| | | up priority | | | |
| | 20,000 450,000 440,000 | 20,000 2009 450,000 2009 440,000 2009 | 440,0002009the World's440,0002009Used "Annual number of births (thousands) as a proxy for number of pregnant women.20,0002009Towards Universal Access. Scaling up priority HIV/AIDS Intervention in the health sector. Progress Report, | 440,0002009the World's440,0002009Towards440,0002009Inher selection420,0002009Towards1001000000000000000000000000000000000000 | the World'sinChildren 2009.Used "Annual number of birthsnumber of birthsin(thousands) as a proxy for numberinof pregnantinwomen.in20,0002009TowardsUniversalinAccess. Scalinginup priorityinHIV/AIDSinHIV/AIDSinintervention ininthe health sector.inProgress Report,in2010. This mid- point estimate is calculated basedinin the range provided in the report.in450,0002009UNAIDS Report on the global AIDS Epidemic 2010in440,0002009UNAIDS Report on the global AIDS Epidemic 2010in260,0002009Towards Universal AIDS Epidemic 2010in260,0002009Towards Universal Access. Scalingin |



| infection (in need of ART) | | | HIV/AIDS Intervention in | | |
|-------------------------------|---------|------|-----------------------------|--|--|
| , | | | the health sector. | | |
| | | | Progress Report, | | |
| | | | 2010. | | |
| Women 15+ living | 220,000 | 2009 | UNAIDS Report | | |
| with HIV | | | on the global | | |
| | | | AIDS Epidemic | | |
| | | | 2010 | | |

Partnership Framework (PF)/Strategy - Goals and Objectives

(No data provided.)

Engagement with Global Fund, Multilateral Organizations, and Host Government Agencies

Redacted

Public-Private Partnership(s)

| Partnership | Related Mechanism | Private-Sector Partner(s) | PEPFAR USD Planned Funds | Private-Sector USD Planned Funds | |
|---|----------------------|------------------------------|--------------------------------|--|---|
| Becton, Dickinson & Co. / PEPFAR Lab Strengthening Partnership | | Becton Dickinson | 250,000 | 250,000 | The Becton Dickinson Lab Strengthening Partnership aims to work with PEPFAR Cote d'Ivoire, the Cote d'Ivoire Ministry of Health and AIDS (MSLS) and local stakeholders to improve the technical |



| l | i i i | | |
|---|-------|--|------------------------|
| | | | competence and |
| | | | increase number of |
| | | | laboratory |
| | | | technicians, to |
| | | | improve TB |
| | | | specimen referral, to |
| | | | provide TA to |
| | | | extend experience |
| | | | at the national level, |
| | | | and to strengthen |
| | | | laboratory quality |
| | | | assurance, in |
| | | | support of Cote |
| | | | d'Ivoire's National |
| | | | Strategic Plan for |
| | | | Laboratory |
| | | | Services. Activities |
| | | | will include training |
| | | | lab personnel in |
| | | | quality |
| | | | management, |
| | | | conducting needs |
| | | | assessments, |
| | | | developing |
| | | | specimen |
| | | | management and |
| | | | referral curricula, |
| | | | and training trainers |
| | | | to promote an |
| | | | integrated specimen |
| | | | referral program. |
| | | | Mapping of existing |
| | | | lab site will be done |
| | | | using GPS Due to |
| | | | violence in 2011, |
| | | | this activity was |
| | | | delayed and will be |



| | | | launched in 2012. |
|-------------------|---|--------|------------------------|
| Expanded Use of | | | |
| Audiovisual | 1 | 55,000 | |
| Materials | | | |
| | | | FY11 funding and |
| | | | TA provided by |
| | | | PEPFAR through |
| | | | the State |
| | | | Department was |
| | | | used to rehabilitate |
| | | | the National |
| | | | HIV/AIDS Hotline, |
| | | | and secure a free |
| | | | phone number. |
| | | | Now, the MTN |
| | | | Foundation |
| | | | (foundation of the |
| | | | cell-phone |
| | | | company) will be |
| MTN Foundation / | | | providing |
| National HIV/AIDS | | | telecommunications |
| Hotline | | | materials installation |
| | | | to support the newly |
| | | | rehabilitated hotline |
| | | | headquarters, |
| | | | where 4-6 operators |
| | | | will work to provide |
| | | | the latest accurate |
| | | | information about |
| | | | HIV/AIDS |
| | | | prevention, testing, |
| | | | care and treatment |
| | | | services. MTN is |
| | | | providing |
| | | | communications |
| | | | and marketing |
| | | | materials to help |



| | | | promote the National Hotline, and will continue to provide maintenance for all telecommunications equipment. "Vacances Santé" is a vacation program for girls who participate in Sports for Life (HIV prevention in conjunction with soccer) in which issues of sexual |
|----------------|--|--------|---|
| Vacances Santé | United Natio Children's Fund, Unite Nations Population Fund | 21,664 | health, HIV prevention, etc., are addressed. FY 2010 was the first year of this partnership, whose duration is undetermined. Contributions by UNFPA and UNICEF are in-kind (school kits, T- shirts, printed materials). JHU/CCP planned contributions were \$20,000, while other donors and partners were to contribute materials in the value of just over \$21,000. This camp |



| | | was not held due to |
|--|--|--------------------------|
| | | the civil crisis, but is |
| | | planned to take |
| | | place in 2012. |

Surveillance and Survey Activities

| Name | Type of Activity | Target Population | Stage |
|--|---|----------------------|----------------|
| ANADER Program Evaluation Study | Evaluation | General Population | Development |
| ANC Evaluation sentinel survey using PMTCT routine data in place of unlinked | Evaluation of ANC and PMTCT | Pregnant Women | Development |
| anonymous testing (UAT) Assessment of Hygiene, Injection Safety and Waste-management | transition Other | Other | Planning |
| Behavioral survey among Most At Risk Population | Behavioral Surveillance among MARPS | Injecting Drug Users | Planning |
| Epidemiology of HIV-2 or HIV-1/HIV-2 infected patients | Evaluation | Other | Development |
| Evaluation of National Testing Day Activities (mobilization and KAP) | Evaluation | Other | Implementation |
| Evaluation of National testing Day Impact | Evaluation | General Population | Planning |
| Evaluation of Nurse-led HIV Care and Treatment Services - Pilot in Côte d'Ivoire | Evaluation | Other | Development |
| Evaluation of Sport for Life program evaluation study | Evaluation | Youth | Planning |
| Evaluation of the impact of Economic Strengthening Interventions on OVC Well- being | Evaluation | Other | Planning |
| Evaluation of the impact of psychosocial Support Interventions on OVC Well- being | Evaluation | Other | Planning |
| Evaluation study of HOPE CI program | Evaluation | General Population | Planning |
| Gender analysis | Other | Street Youth | Planning |



| | L | | | |
|--|--|----------------------------------|-------------|--|
| HIV and Associated Risk Factors Survey | Behavioral Surveillance among | Men who have Sex with Men | Data Review | |
| HIV/AIDS Infected Population Situation | MARPS Population size estimates | Other | Development | |
| Analysis | | Other | Development | |
| HIV/AIDS Situation analysis in prisons | Other | Other | Development | |
| How to Optimize PMTCT Effectiveness - 2 | Evaluation | Other | Planning | |
| KABP of young in HIV/AIDS | Other | General Population | Planning | |
| KAP assessment survey related to blood donation | Other | Other | Development | |
| KAP Survey | Other | Other | Development | |
| KAP Survey among clubs of young girls | Evaluation | Youth | Planning | |
| Literature review of adult risk behaviors | Other | General Population | Planning | |
| Monitoring of CCP programs effects | Evaluation | Street Youth | Planning | |
| Perception of Faithfulness among couples | Other | General Population | Development | |
| Review and development of Save the Children's Economic Strengthening Strategy for OVC and their families | Evaluation | Other | Development | |
| Seroprevalence and Behavioral Epidemilogy Risk Survey among armed forces | Behavioral Surveillance among MARPS | Uniformed Service Members | Planning | |
| Sero-prevalence and Behavioral Epidemiology Risk Survey | Other | Uniformed Service Members | Planning | |
| Situation analysis of the involvement of men in their partners' health issues | Evaluation | Other | Planning | |
| Situational Analysis | Evaluation | Migrant Workers | Planning | |
| Situational Analysis "Men As Partners (MAP)" | Evaluation | Uniformed Service Members | Planning | |
| STI/HIV/AIDS Sentinel Surveillance | Sentinel Surveillance (e.g. ANC Surveys) | Female Commercial Sex Workers | Development | |
| Strengthening the care of HIV-2 infected | Evaluation | Other | Development | |



| patients. The construction of a clinical platform in Cote d'Ivoire (PHE N° | | | |
|--|--|------------------------------|----------------|
| CI.09.0223) Third Demographic and Health Survey | Population-based Behavioral Surveys | General Population | Data Review |
| TRaC Survey (Tracking Results Continuously) | Evaluation | Uniformed Service Members | Development |
| TRaC Survey 2 (Tracking Results Continuously) | Evaluation | Migrant Workers | Development |
| Transactional Sex Survey | Other | Other | Development |
| Transmitted HIV Drug Resistance | HIV Drug Resistance | Pregnant Women | Implementation |



Budget Summary Reports

Summary of Planned Funding by Agency and Funding Source

| | | Funding Source | | | | |
|----------|-------------------------|----------------|--------------|-----------------|-------------|--|
| Agency | Central GHCS (State) | GAP | GHCS (State) | GHCS (USAID) | Total | |
| DOD | | | 205,000 | | 205,000 | |
| HHS/CDC | 6,722,257 | 5,153,000 | 43,186,243 | | 55,061,500 | |
| HHS/HRSA | | | 700,000 | | 700,000 | |
| HHS/NIH | | | 0 | | 0 | |
| State/AF | | | 0 | | 0 | |
| USAID | | | 49,213,808 | | 49,213,808 | |
| Total | 6,722,257 | 5,153,000 | 93,305,051 | 0 | 105,180,308 | |

Summary of Planned Funding by Budget Code and Agency

| | Agency | | | | | | | |
|-------------|---------|------------|----------|---------|----------|------------|----------|------------|
| Budget Code | DOD | HHS/CDC | HHS/HRSA | HHS/NIH | State/AF | USAID | AllOther | Total |
| НВНС | | 5,382,800 | | | | 3,915,000 | | 9,297,800 |
| нкір | | 5,539,000 | | | | 3,550,308 | | 9,089,308 |
| HLAB | | 1,480,000 | | | | 705,000 | | 2,185,000 |
| HMBL | | 2,225,000 | | | | 100,000 | | 2,325,000 |
| HMIN | | 324,000 | | | | 76,000 | | 400,000 |
| HTXD | | | | | | 25,625,000 | | 25,625,000 |
| нтхѕ | | 10,468,000 | | | | 3,210,000 | | 13,678,000 |
| HVAB | | 3,546,000 | | | | 150,000 | | 3,696,000 |
| нуст | | 3,427,000 | | | | 2,938,000 | | 6,365,000 |
| HVMS | 65,000 | 6,985,500 | | | | 529,500 | | 7,580,000 |
| HVOP | | 3,870,000 | | | | 1,325,000 | | 5,195,000 |
| HVSI | 140,000 | 400,000 | 400,000 | 0 | | 2,390,000 | | 3,330,000 |
| нутв | | 3,000,000 | | | | | | 3,000,000 |
| МТСТ | | 4,660,000 | | | | 2,757,000 | | 7,417,000 |



| OHSS | | 550,000 | 300,000 | | 0 | 310,000 | | 1,160,000 |
|------|---------|------------|---------|---|---|------------|---|-------------|
| PDCS | | 1,245,200 | | | | 1,083,000 | | 2,328,200 |
| PDTX | | 1,959,000 | | | | 550,000 | | 2,509,000 |
| | 205,000 | 55,061,500 | 700,000 | 0 | 0 | 49,213,808 | 0 | 105,180,308 |

Budgetary Requirements Worksheet

(No data provided.)



National Level Indicators

National Level Indicators and Targets

Redacted



Policy Tracking Table

(No data provided.)



Technical Areas

Technical Area Summary

Technical Area: Adult Care and Treatment

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| НВНС | 9,297,800 | |
| HTXS | 13,678,000 | |
| Total Technical Area Planned Funding: | 22,975,800 | 0 |

Summary:

(No data provided.)

Technical Area: ARV Drugs

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| HTXD | 25,625,000 | |
| Total Technical Area Planned Funding: | 25,625,000 | 0 |

Summary:

(No data provided.)

Technical Area: Biomedical Prevention

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| HMBL | 2,325,000 | |
| HMIN | 400,000 | |
| Total Technical Area Planned Funding: | 2,725,000 | 0 |

Summary:

(No data provided.)

Technical Area: Counseling and Testing

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|-------------|----------------------------|----------------|
| HVCT | 6,365,000 | |



| Total Technical Area Planned | C 205 000 | | |
|------------------------------|-----------|---|--|
| Funding: | 6,365,000 | 0 | |

Summary:

(No data provided.)

Technical Area: Health Systems Strengthening

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| OHSS | 1,160,000 | |
| Total Technical Area Planned Funding: | 1,160,000 | 0 |

Summary:

(No data provided.)

Technical Area: Laboratory Infrastructure

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| HLAB | 2,185,000 | |
| Total Technical Area Planned Funding: | 2,185,000 | 0 |

Summary:

(No data provided.)

Technical Area: Management and Operations

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| HVMS | 7,580,000 | |
| Total Technical Area Planned Funding: | 7,580,000 | 0 |

Summary:

(No data provided.)

Technical Area: OVC

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| HKID | 9,089,308 | |
| Total Technical Area Planned Funding: | 9,089,308 | 0 |



Summary:

(No data provided.)

Technical Area: Pediatric Care and Treatment

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| PDCS | 2,328,200 | |
| PDTX | 2,509,000 | |
| Total Technical Area Planned Funding: | 4,837,200 | 0 |

Summary:

(No data provided.)

Technical Area: PMTCT

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| МТСТ | 7,417,000 | |
| Total Technical Area Planned Funding: | 7,417,000 | 0 |

Summary:

(No data provided.)

Technical Area: Sexual Prevention

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| HVAB | 3,696,000 | |
| HVOP | 5,195,000 | |
| Total Technical Area Planned Funding: | 8,891,000 | 0 |

Summary:

(No data provided.)

Technical Area: Strategic Information

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| HVSI | 3,330,000 | |
| Total Technical Area Planned Funding: | 3,330,000 | 0 |



Summary:

(No data provided.)

Technical Area: TB/HIV

| Budget Code | Budget Code Planned Amount | On Hold Amount |
|--|----------------------------|----------------|
| НУТВ | 3,000,000 | |
| Total Technical Area Planned Funding: | 3,000,000 | 0 |

Summary: (No data provided.)



Technical Area Summary Indicators and Targets

Redacted



Partners and Implementing Mechanisms

Partner List

| Mech ID | Partner Name | Organization Type | Agency | Funding Source | Planned Funding |
|---------|---|-------------------------|---|----------------|-----------------|
| 6651 | Tulane University | University | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 400,000 |
| 7210 | University of North Carolina at Chapel Hill, Carolina Population Center | University | U.S. Agency for International Development | GHCS (State) | 1,650,000 |
| 7379 | US National Institutes of Health | Other USG Agency | U.S. Department of Health and Human Services/National Institutes of Health | GHCS (State) | 0 |
| 7383 | Central Contraceptive Procurement | Private Contractor | U.S. Agency for International Development | GHCS (State) | 600,000 |
| 7620 | Macro International | Private Contractor | U.S. Agency for International Development | GHCS (State) | 50,000 |
| 9383 | World Food Program | Multi-lateral Agency | U.S. Agency for International Development | GHCS (State) | 0 |
| 9386 | U.S. Department of State | Implementing Agency | U.S. Department of State/Bureau of African Affairs | GHCS (State) | 0 |



| 9390 | University Research | Private Contractor | U.S. Agency for International | GHCS (State) | 1,655,000 |
|------|--|--------------------------------------|---|--|------------|
| | Corporation | | Development | | |
| 9395 | Program for Appropriate Technology in Health | NGO | U.S. Agency for International Development | GHCS (State) | 0 |
| 9396 | Partnership for Supply Chain Management | Private Contractor | U.S. Agency for International Development | GHCS (State) | 39,429,000 |
| 9401 | Ministry of National Education, Côte d'Ivoire | Host Country Government Agency | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 250,000 |
| 9409 | Social Sector Development Strategies, Zambia | NGO | U.S. Agency for International Development | GHCS (State) | 0 |
| 9414 | TBD | TBD | U.S. Agency for International Development | Redacted | Redacted |
| 9415 | Family Health International | NGO | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 1,375,000 |
| 9416 | Elizabeth Glaser Pediatric AIDS Foundation | NGO | U.S. Department of Health and Human Services/Centers for Disease | GHCS (State), Central GHCS (State) | 7,610,000 |



| | | | Control and | | |
|------|---|---------------------|---|--------------|-----------|
| | | | Prevention | | |
| 9418 | Columbia University | University | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 2,661,000 |
| 9419 | CDC International Lab Coalition | Other USG Agency | U.S. Department of Health and Human | GHCS (State) | 850,000 |
| 9423 | Alliance Nationale Contre le SIDA | NGO | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 0 |
| 9424 | ACONDA | NGO | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 0 |
| 9425 | Academy for Educational Development | NGO | U.S. Agency for International Development | GHCS (State) | 800,000 |
| 9431 | Engender Health | Private Contractor | U.S. Agency for | GHCS (State) | 750,000 |



| 10141 | Pasteur Institute of Ivory Coast | Implementing Agency | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 970,000 |
|-------|--|------------------------|---|--------------|-----------|
| 10276 | Health Alliance International | NGO | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 2,480,000 |
| 10791 | JHPIEGO | NGO | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 737,000 |
| 11489 | US Department of Defense, In- Support | Implementing Agency | U.S. Department of Defense | GHCS (State) | 140,000 |
| 11491 | HHS/Centers for Disease Control & Prevention | Implementing Agency | U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | GHCS (State) | 1,199,000 |
| 12543 | The Futures Group International | NGO | U.S. Agency for International Development | GHCS (State) | 250,000 |
| 12557 | Population Services | NGO | U.S. Department of Health and | GHCS (State) | 1,750,000 |



| | International | | Human | | |
|----------|------------------------------|--------------------|-------------------------------|--------------|-----------|
| | International | | Services/Centers | | |
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | | | |
| | | | U.S. Department of Health and | | |
| | National Aganay | | | | |
| 12631 | National Agency of Rural | Private Contractor | Human | | 2 628 000 |
| 12031 | | | for Disease | GHCS (State) | 2,628,000 |
| | Development | | Control and | | |
| | | | Prevention | | |
| | | | | | |
| | | | U.S. Department of Health and | | |
| | Centre National | | of Health and Human | | |
| 12655 | de Transfusion | Implementing | | GHCS (State) | 2,225,000 |
| 12000 | Sanguine de Cote d'Ivoire | Agency | for Disease | GHCS (State) | 2,223,000 |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | Ministry of Health | Host Country | Human | | |
| 12673 | and Public | Government | | GHCS (State) | 2,104,000 |
| 12070 | Hygiene, Cote | Agency | for Disease | | 2,101,000 |
| | d'Ivoire | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | Ministry for | Host Country | Human | | |
| 12679 | Women, Families, | Government | | GHCS (State) | 550,000 |
| 12010 | and Social Affairs | Agency | for Disease | | |
| | - Mozambique | 0 | Control and | | |
| | | | Prevention | | |
| <u> </u> | | | U.S. Department | | |
| 12803 | Heartland Alliance | Implementing | of Health and | GHCS (State) | 1,722,000 |
| | | Agency | Human | | ,, |
| L | 1 | 1 | | 1 | |



| | | | | | 1 |
|-------|-------------|-----|------------------|--------------|-----------|
| | | | Services/Centers | | |
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | | | Human | | |
| 12962 | TBD | TBD | Services/Centers | Redacted | Redacted |
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Agency for | | |
| 12990 | TBD | TBD | International | Redacted | Redacted |
| | | | Development | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | | | Human | | |
| 13008 | твр | TBD | Services/Centers | Redacted | Redacted |
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | | | Human | | |
| 13046 | Habitat for | FBO | Services/Centers | GHCS (State) | 1,180,000 |
| | Humanity | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | | | Human | | |
| 13048 | твр | TBD | Services/Health | Redacted | Redacted |
| | | | Resources and | | |
| | | | Services | | |
| | | | Administration | | |
| 13074 | твр | TBD | U.S. Department | Redacted | Redacted |
| • | | | | | |



| | 1 | | | |
|------------------|--|--|---|--|
| | | of Health and | | |
| | | Human | | |
| | | Services/Centers | | |
| | | for Disease | | |
| | | Control and | | |
| | | Prevention | | |
| | | U.S. Agency for | | |
| твр | TBD | International | Redacted | Redacted |
| | | Development | | |
| | | U.S. Department | | |
| | | of Health and | | |
| | | Human | | |
| | University | Services/Centers | GHCS (State) | 50,000 |
| University | | for Disease | | |
| | | Control and | | |
| | | Prevention | | |
| | | U.S. Department | | |
| | | of Health and | | |
| Elizabeth Glaser | | Human | | |
| Pediatric AIDS | NGO | Services/Centers | GHCS (State) | 1,585,000 |
| Foundation | | for Disease | | |
| | | Control and | | |
| | | Prevention | | |
| | | U.S. Department | | |
| | | of Health and | | |
| | | Human | | |
| TBD | TBD | Services/Centers | Redacted | Redacted |
| | | for Disease | | |
| | | Control and | | |
| | | Prevention | | |
| Associazione | | | | |
| Volontari per il | | U.S. Agency for | | |
| Servizio | NGO | International | GHCS (State) | 1,570,308 |
| Internazionale, | | Development | | |
| Italy | | | | |
| TBD | TBD | U.S. Department | Redacted | Redacted |
| | Columbia University Elizabeth Glaser Pediatric AIDS Foundation TBD TBD Associazione Volontari per il Servizio Internazionale, Italy | Columbia UniversityUniversityElizabeth Glaser Pediatric AIDS FoundationNGOTBDTBDAssociazione Volontari per il Servizio Internazionale, ItalyNGO | Human Services/Centers for Disease Control and PreventionTBDTBDU.S. Agency for International DevelopmentColumbia UniversityU.S. Department of Health and Human Services/Centers for Disease Control and | Human Services/Centers for Disease Control and PreventionRedactedTBDTBDU.S. Agency for International DevelopmentRedactedColumbia UniversityUniversityU.S. Department of Health and Human Services/Centers for Disease Control and PreventionGHCS (State)Elizabeth Glaser Pediatric AIDS FoundationNGOU.S. Department of Health and Human Services/Centers for Disease Control and PreventionGHCS (State)TBDTBDNGOServices/Centers for Disease Control and PreventionGHCS (State)TBDTBDTBDServices/Centers for Disease Control and PreventionGHCS (State)TBDTBDTBDServices/Centers for Disease Control and PreventionGHCS (State)TBDTBDNGOU.S. Department of Health and Human Services/Centers for Disease Control and PreventionGHCS (State)Associazione Volontari per il Servizio Internazionale, ItalyNGOU.S. Agency for International Development |



| | | 1 | | | |
|-------|-------------------|--------------|------------------|--------------|-----------|
| | | | of Health and | | |
| | | | Human | | |
| | | | Services/Centers | | |
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Agency for | | |
| 13331 | TBD | TBD | International | Redacted | Redacted |
| | | | Development | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | | | Human | | |
| 13440 | твр | TBD | Services/Centers | Redacted | Redacted |
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Agency for | | |
| 13462 | Save the Children | NGO | International | GHCS (State) | 1,830,000 |
| | UK | | Development | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | HHS/Centers for | | Human | | |
| 13488 | Disease Control & | Implementing | Services/Centers | GHCS (State) | 0 |
| | Prevention | Agency | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | | | Human | | |
| 13516 | твр | TBD | Services/Centers | Redacted | Redacted |
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| 13525 | Hope Cote | Implementing | of Health and | GHCS (State) | 1,970,000 |
| | d'Ivoire | Agency | Human | | |
| | | 1 | | | |



| | | | Services/Centers | | |
|-------|---------------|-----|------------------|--------------|-----------|
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | International | | Human | | |
| 13539 | Rescue | NGO | Services/Centers | GHCS (State) | 1,475,000 |
| | Committee | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |
| | | | U.S. Department | | |
| | | | of Health and | | |
| | | | Human | | |
| 13541 | твр | твр | Services/Centers | Redacted | Redacted |
| | | | for Disease | | |
| | | | Control and | | |
| | | | Prevention | | |



Implementing Mechanism(s)

Implementing Mechanism Details

| Mechanism ID: 6651 | Mechanism Name: UTAP-Tulane University | | | |
|---|---|--|--|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | | | |
| Prime Partner Name: Tulane University | | | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | | | |
| TBD: No | Global Fund / Multilateral Engagement: No | | | |

| Total Funding: 400,000 | | | | |
|------------------------|----------------|--|--|--|
| Funding Source | Funding Amount | | | |
| GHCS (State) | 400,000 | | | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Education | 145,000 |
|----------------------------|---------|
| Human Resources for Health | 158,240 |

Key Issues

Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services



Budget Code Information

| Mechanism Name: | Mechanism ID: 6651 echanism Name: UTAP-Tulane University e Partner Name: Tulane University | | | | |
|-----------------|--|----------------|----------------|--|--|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount | | |
| Other | HVSI | 400,000 | | | |
| Narrative: | | | | | |
| None | | | | | |

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 7210 | Mechanism Name: MMAR III GHA-00 8 | | |
|---|---|--|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Contract | | |
| Prime Partner Name: University of North Carolina at Chapel Hill, Carolina Population Center | | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | | |
| TBD: No | Global Fund / Multilateral Engagement: No | | |

| Total Funding: 1,650,000 | | | | |
|--------------------------|----------------|--|--|--|
| Funding Source | Funding Amount | | | |
| GHCS (State) | 1,650,000 | | | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)



| Human Resources for Health | 251,139 |
|----------------------------|---------|

Key Issues

(No data provided.)

Budget Code Information

| | 7210 MMAR III GHA-00 8 University of North Carolina at Chapel Hill, Carolina Population Center | | | |
|----------------|--|----------------|----------------|--|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount | |
| Other | HVSI | 1,650,000 | | |
| Narrative: | | | | |
| None | | | | |

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 7379 | Mechanism Name: NIH Fogarty M&E Fellowship | | | |
|--|--|--|--|--|
| Funding Agency: U.S. Department of Health and Human Services/National Institutes of Health | Procurement Type: Contract | | | |
| Prime Partner Name: US National Institutes of Health | | | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | | | |
| TBD: No | Global Fund / Multilateral Engagement: No | | | |

| Total Funding: 0 | | | | |
|------------------|----------------|--|--|--|
| Funding Source | Funding Amount | | | |
| GHCS (State) | 0 | | | |

Sub Partner Name(s)

(No data provided.)



Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Budget Code Information

| | ism ID: 7379 Name: NIH Fogarty M&E Fellowship Name: US National Institutes of Health | | | | |
|----------------|--|---|--|--|--|
| Strategic Area | Budget Code Planned Amount On Hold Amount | | | | |
| Other | HVSI | 0 | | | |
| Narrative: | | | | | |
| lone | | | | | |

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 7383 | Mechanism Name: Contraceptive Commodities Fund |
|--|---|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Contract |
| Prime Partner Name: Central Contraceptive Procurement | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |



| Total Funding: 600,000 | | |
|-------------------------------|---------|--|
| Funding Source Funding Amount | | |
| GHCS (State) | 600,000 | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Military Population Family Planning

Budget Code Information

| | 7383 Contraceptive Commodities Fund Central Contraceptive Procurement | | |
|--------------------|---|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 600,000 | |
| Narrative: None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

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Implementing Mechanism Details

| Mechanism ID: 7620 | Mechanism Name: Macro DHS |
|--|---|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Contract |
| Prime Partner Name: Macro International | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 50,000 | |
|-----------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 50,000 |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Impact/End-of-Program Evaluation

| Mechanism ID: | 7620 | | |
|---------------------|---------------------|----------------|----------------|
| Mechanism Name: | Macro DHS | | |
| Prime Partner Name: | Macro International | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |



| Other | HVSI | 50,000 | |
|------------|------|--------|--|
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9383 | Mechanism Name: WFP USAID CoAg |
|--|---|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Grant |
| Prime Partner Name: World Food Program | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 0 | |
|------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 0 |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources

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Child Survival Activities Safe Motherhood

Budget Code Information

| | 9383 WFP USAID CoAg World Food Program | | |
|----------------|--|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 0 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9386 | Mechanism Name: State #GPO-A-11-05-00007-00 |
|--|---|
| Funding Agency: U.S. Department of State/Bureau of African Affairs | Procurement Type: Cooperative Agreement |
| Prime Partner Name: U.S. Department of State | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 0 | | |
|------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 0 | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

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Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Addressing male norms and behaviors Increasing gender equity in HIV/AIDS activities and services

Budget Code Information

| | 9386 State #GPO-A-11-05-00007-00 U.S. Department of State | | |
|----------------|---|--|--|
| Strategic Area | Budget Code Planned Amount On Hold Amount | | |
| Other | OHSS 0 | | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9390 | Mechanism Name: Healthcare Improvement Project QA/WD Follow-On | |
|--|---|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: University Research Corporation | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |



| Total Funding: 1,655,000 | | |
|-------------------------------|-----------|--|
| Funding Source Funding Amount | | |
| GHCS (State) | 1,655,000 | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Human Resources for Health | 1,524,500 |
|----------------------------|------------|
| | 1,02 1,000 |

Key Issues

Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services Child Survival Activities Mobile Population TB Workplace Programs

| | 9390 Healthcare Improvement Project QA/WD Follow-On University Research Corporation | | |
|----------------|---|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 200,000 | |
| Narrative: | | | |
| None | | | |



| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
|----------------|-------------|----------------|----------------|
| Care | HTXS | 680.000 | |
| | HIX5 | 680,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 125,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | МТСТ | 400,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HLAB | 250,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9395 | Mechanism Name: Infant and Young Child Nutrition (IYCN) Project |
|--|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement |
| Prime Partner Name: Program for Appropriate Techr | nology in Health |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

Total Funding: 0



| Funding Source | Funding Amount |
|----------------|----------------|
| GHCS (State) | 0 |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Increasing gender equity in HIV/AIDS activities and services Child Survival Activities Safe Motherhood

| Mechanism ID: | 9395 | | |
|---------------------|---|------------------------|----------------|
| Mechanism Name: | Infant and Young Child Nutrition (IYCN) Project | | |
| Prime Partner Name: | Program for Appropriate | e Technology in Health | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 0 | |
| Narrative: | | | |
| None | - | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | 0 | |
| Narrative: | | | |



| None | | | |
|----------------|-------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | MTCT | 0 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9396 | Mechanism Name: Supply Chain Management System | |
|--|---|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Partnership for Supply Chain Management | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 39,429,000 | | |
|-------------------------------|------------|--|
| Funding Source Funding Amount | | |
| GHCS (State) | 39,429,000 | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 300,000 |
|----------------------------|-----------|
| Human Resources for Health | 1,200,000 |



| Water | 160.000 |
|--------|---------|
| vvaler | 100,000 |
| | |

Key Issues

Child Survival Activities Military Population Mobile Population Safe Motherhood TB

| Mechanism ID: 9396 | | | |
|--|--------------------------|------------------|----------------|
| Mechanism Name: Supply Chain Management System | | | |
| Prime Partner Name: | Partnership for Supply (| Chain Management | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | 3,415,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | 2,530,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 2,938,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | 783,000 | |



| Narrative: | | | |
|----------------|-------------|----------------|----------------|
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | 550,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | HVSI | 690,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | 60,000 | |
| Narrative: | | | |
| None | | 1 | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HMBL | 100,000 | |
| Narrative: | | | |
| None | | 1 | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HMIN | 76,000 | |
| Narrative: | | | |
| None | | 1 | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 150,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |



| Prevention | MTCT | 2,057,000 | |
|----------------|-------------|----------------|----------------|
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HLAB | 455,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HTXD | 25,625,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9401 | Mechanism Name: CoAg Ministry of Education #U62/CCU24223 |
|---|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: Ministry of National Education, Côte d'Ivoire | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 250,000 | | |
|------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 250,000 | |

Sub Partner Name(s)

(No data provided.)



Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 2,000 |
|---|---------|
| Education | 120,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 12,000 |
| Gender: Reducing Violence and Coercion | 10,000 |
| Human Resources for Health | 85,000 |

Key Issues

Addressing male norms and behaviors Increasing gender equity in HIV/AIDS activities and services Workplace Programs Family Planning

| Mechanism ID: 9401 | | | |
|--|--------------------------|-----------------------|----------------|
| Mechanism Name: CoAg Ministry of Education #U62/CCU24223 | | | |
| Prime Partner Name: | Ministry of National Edu | cation, Côte d'Ivoire | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | 40,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 50,000 | |
| Narrative: | | | |



| None | | | |
|----------------|-------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 100,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 60,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9409 | Mechanism Name: IQC AIDSTAR | |
|--|---|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Social Sector Development Strategies, Zambia | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

Total Funding: 0

| Funding Source | Funding Amount | |
|----------------|----------------|--|
| GHCS (State) | 0 | |

Sub Partner Name(s)

| Conseil d'Actions Humanitaires et Musulmanes de Côte d'Ivoire | loouvernementales de lutte contre | Forum des ONG et associations d'aide à l'enfance en difficulte |
|--|-----------------------------------|--|
| | 1 , | Reseau des Professionnels des Media et des Arts engages pour la |



| | en Côte |
|----------|---------|
| d'Ivoire | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Budget Code Information

| Mechanism ID: Mechanism Name: Prime Partner Name: | | | | |
|---|---|---|--|--|
| Strategic Area | Budget Code Planned Amount On Hold Amount | | | |
| Other | OHSS | 0 | | |
| Narrative: | | | | |
| None | | | | |

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9414 | Mechanism Name: NPI-Geneva Global GHH-A-A- 00-07-00005-00 |
|--|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement |
| Prime Partner Name: TBD | |



| Agreement Start Date: Redacted | Agreement End Date: Redacted |
|--------------------------------|---|
| TBD: Yes | Global Fund / Multilateral Engagement: No |
| | |

| Total Funding: Redacted | | |
|-------------------------------|----------|--|
| Funding Source Funding Amount | | |
| твр | Redacted | |

Sub Partner Name(s)

| Africa Christian Television | Alliance Biblique de Cote D'Ivoire | Alliance pour le Developpement Integral et l'Action Sociale |
|---|---|--|
| Amepouh | Espoir Cote d'Ivoire | Femme Action Developpement |
| Groupe Biblique des Hopitaux | Groupe Biblique Universitaire pour l'Afrique Francophone | Lumiere Action, Côte d'Ivoire |
| Mutuelle pour le Developpement de la Sante, de la Securite et de la Sante Alimentaire | New Life Project | Ruban Rouge |
| SAREPTA | | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Addressing male norms and behaviors
Increasing gender equity in HIV/AIDS activities and services
Increasing women's access to income and productive resources
Increasing women's legal rights and protection
Child Survival Activities
Mobile Population
Family Planning
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Budget Code Information

| Mechanism ID: Mechanism Name: Prime Partner Name: | : NPI-Geneva Global GHH-A-A-00-07-00005-00 | | |
|---|--|----------------|---------------------------------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | Redacted | Redacted |
| Narrative: | | | · · · · · · · · · · · · · · · · · · · |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9415 | Mechanism Name: CoAg FHI/ITM (HVP) #U62/CCU324473 | |
|---|--|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Family Health International | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 1,375,000 | | |
|--------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 1,375,000 | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

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Cross-Cutting Budget Attribution(s)

| Human Resources for Health | 250.000 |
|----------------------------|---------|
| | 200,000 |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Increasing women's legal rights and protection Mobile Population Workplace Programs Family Planning

| Mechanism ID: 9415 | | | |
|---|---------------------------------|----------------|----------------|
| Mechanism Name: CoAg FHI/ITM (HVP) #U62/CCU324473 | | | |
| Prime Partner Name: | ne: Family Health International | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC 150,000 | | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 200,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | 250,000 | |
| Narrative: | | | |
| None | | | |



| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
|----------------|-------------|----------------|----------------|
| Prevention | HVOP | 775,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9416 | Mechanism Name: | |
|---|---|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Elizabeth Glaser Pediatric AIDS Foundation | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 7,610,000 | | |
|--------------------------|----------------|--|
| Funding Source | Funding Amount | |
| Central GHCS (State) | 6,722,257 | |
| GHCS (State) | 887,743 | |

Sub Partner Name(s)

| Agnintie Nitche | IAmi des Hommes | Association Centre Integre de Recherche Bioclinique d'Abidjan |
|---|---|--|
| Association de Cooperation Internationale pour le Developpement | Association de Soutien a l'Autopromotion Sanitaire Urbaine | Association des Eglises Chretiennes en Cote d'Ivoire - Centre PIM Abengourou |
| Association des Jeunes Patriotes pour la Sante et le Developpement | • | Association pour la Promotion de la Santé Maternelle |
| Bouake Eveil | Centre de Santé El Rapha | Centre de Sante Sainte Therese de l'Enfant Jesus |



| Centre de Sante Soeur de la | Centre de Sante Urbain | Centre de Sante Urbain |
|---|--|--|
| Charite Kotobi | Communautaire d'Agban | Communautaire de Angre |
| Centre de Sante Urbain | Centre de Sante Urbain | Centre de Sante Urbain |
| Communautaire de Anono | Communautaire de Gonzagville | Communautaire de Williamsville |
| Centre de Sante Urbain de | Centre de Sante Urbain Notre | Centre de Sante Wale |
| Komborodougou | Dame des Apotres de Dimbokro | Yamoussoukro |
| Centre Hospitalier et Universitaire de Treichville | Centre Medical Maria Elisa Riviera | Centre Saint Camille de Bouake |
| Centre Socio-Sanitaire Ange Gardien | Centre Solidarite Action Sociale | Club Espoir d'Abengourou |
| Cocody Espoir | Cote d'Ivoire Prosperite | Direction de l'Information de la Planification et de l'Evaluation (MSHP) |
| Dispensaire Rural Baptiste de Torgokaha | Dispensaire Sainte Anne de Bocanda | District de Yamoussoukro |
| Elan d'Amour | Espace Confiance | Esperance |
| Femmes Actives | Fondation Djigui | Formation Sanitaire Urbaine Communautaire Sagbe |
| Fraternite | Groupe Biblique des Hopitaux | Groupe de Formation Medicale en IST, VIH/sida, maladies Infectieuses |
| Hope Worldwide Cl | Hopital Baptiste de Ferkessedougou | Hopital General d'Ayame |
| Initiative Plus | Inspection Generale de la Sante et de l'Hygiene Publique (MSHP) | InSTITUT National de Formation de Sciences Sociales |
| Institut Pasteur Cote d'Ivoire | | Ko'Khoua |
| La Manne du Jour | | M'Bade Victoire |
| Notre Grenier | Programme National de la Sante et de la Reproduction (MSHP) | REEL Sante Cote d'Ivoire |
| Renaissance Sante Bouake | Ruban Rouge | SEL EL NYAM ETCHI |
| Sidalert, Côte d'Ivoire | Societe Ivoirienne de Pediatrie | Soeurs de la Providence |
| Solidarite Plus Abidjan | Tous pour le Taukpe | Union Nationale des Donneurs de Sang Benevole de Cote d'Ivoire |
| Unite de Formation des Sciences | Unite de Formation et de | University of California at San |



| Pharmaceutiques et Biologiques | Recherche des SCiences | Francisco |
|--------------------------------|----------------------------|-----------|
| | Medicales d'Abidjan Cocody | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Food and Nutrition: Policy, Tools, and Service Delivery | 20,000 |
|---|---------|
| Human Resources for Health | 197,275 |

Key Issues

Addressing male norms and behaviors Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Malaria (PMI) **Child Survival Activities** Safe Motherhood ΤВ Family Planning

| Mechanism ID: 9416 Mechanism Name: Prime Partner Name: Elizabeth Glaser Pediatric AIDS Foundation | | | |
|---|-------------------------------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | 750,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Custom | Page 62 of 139 FACTS Info v3.8.3.30 | | |



| Care | HKID | 330,000 | |
|----------------|-------------|----------------|----------------|
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | 3,760,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 545,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | 200,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | 500,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 125,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | МТСТ | 900,000 | |
| Narrative: | | | |
| None | | | |



| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
|----------------|-------------|----------------|----------------|
| Treatment | HVTB | 500,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9418 | Mechanism Name: International Center for AIDS, Care and Treatment Program (ICAP) |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: Columbia University | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 2,661,000 | | |
|--------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 2,661,000 | |

Sub Partner Name(s)

| · | Caisse Nationale de prevoyance sociale de Divo | Cellule Centrale de Gestion Fiduciaire et de Suivi Programmatique-MSHP |
|--|---|---|
| Centre de Protection Maternelle et Infantile Catholique de Guitry | Dame de la Consolata | Centre Medico-Social de Gbagbam |
| Zuenoula | Paix de Vavoua | Dispensaire Medico social Notre Dame du Calvaire de Guiberoua Formation sanitaire de la Police de |



| Sinfra | | Daloa |
|--------------------------------|----------------------------|-------|
| | Service d'Assistance | |
| Sante Espoir Vie Cote d'Ivoire | Pharmaceutique et Medicale | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 25,000 |
|---|-----------|
| Economic Strengthening | 26,000 |
| Food and Nutrition: Commodities | 53,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 106,000 |
| Human Resources for Health | 1,050,000 |
| Water | 13,000 |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) Child Survival Activities Safe Motherhood TB Family Planning

| Mechanism ID: | 9418 | | |
|---------------------|--------------------------|-------------------------|-------------------|
| Mechanism Name: | International Center for | AIDS, Care and Treatmer | nt Program (ICAP) |
| Prime Partner Name: | Columbia University | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |



| Care | HBHC | 251,000 | |
|----------------|-------------|----------------|----------------|
| Narrative: | | · · · | |
| None | | - | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 150,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | 750,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 200,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | 100,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | 250,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 150,000 | |
| Narrative: | | | |
| None | | | |



| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
|----------------|-------------|----------------|----------------|
| Prevention | MTCT | 600,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | 210,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9419 | Mechanism Name: CDC Lab Coalition | |
|---|---|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: CDC International Lab Coalition | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 850,000 | | |
|------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 850,000 | |

Sub Partner Name(s)

| American Public Health Laboratories | American Society for Microbiology | American Society of Clinical Pathology |
|--|-----------------------------------|---|
| Clinical and Laboratory Standards Institute | | |



Overview Narrative

Cross-Cutting Budget Attribution(s)

| Human Resources for Health | 510,000 | |
|----------------------------|---------|--|
|----------------------------|---------|--|

Key Issues

TB Family Planning

Budget Code Information

| Mechanism Name: | Mechanism ID: 9419 Mechanism Name: CDC Lab Coalition Prime Partner Name: CDC International Lab Coalition | | |
|-----------------|--|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HLAB | 750,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | 100,000 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

| Implementing Mechanism Details | | |
|--------------------------------|-----------------|---------------------------|
| Mechanism ID: 9423 | Mechanism Name: | CoAg PS000633-01 Alliance |
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| | National CI Expansion of Community-Led | | |
|---|---|--|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | | |
| Prime Partner Name: Alliance Nationale Contre le SIDA | | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | | |
| TBD: No | Global Fund / Multilateral Engagement: No | | |

| Total Funding: 0 | | |
|------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 0 | |

Sub Partner Name(s)

| Action Evangelique de la Lutte Contre le SIDA | Association Feminine pour le Bien-Etre de l'Enfant a Cote D'Ivoire | Centre de Depistage Volontaire de Dabou | |
|--|--|--|--|
| Centre de depistage volontaire Yacoli | Centre d'Ecoute et Depistage Volontaire Port Bouet | Cercle d'Amitie et Progres | |
| Conseil General Agboville | Conseil General Boundiali | Conseil General Daloa | |
| Conseil General de Bongouanou | Conseil General Soubre | Cote d'Ivoire Prosperite | |
| Croix Bleue | Departement Methodistede Lutte contre le SIDA | ESPOIR 3000 | |
| Fromager Stop SIDA | Groupe Biblique des Hopitaux | Lumiere Action Abobo | |
| Ma Virginite jusqu'au Mariage | Mairie d'Agnibilekro | Mairie d'Anyama | |
| Mairie de Grand-Lahou | Mairie de Sinfra | Mairie Mafere | |
| M'PETE | Notre Dame de l'Incarnation | Notre Grenier | |
| Notre Terre Nourriciere | Organisation pour l'assistance en Milieu Urbain et Rural | Rose Blanche | |
| Ruban Rouge | Union pour la Gestion de la Formation Sanitaire de Base | Vivre, Informer et Fraterniser | |
| Wawadou | | | |

Overview Narrative

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Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Budget Code Information

| | 9423 CoAg PS000633-01 Alliance National CI Expansion of Community-Led Alliance Nationale Contre le SIDA | | |
|----------------|---|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 0 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9424 | Mechanism Name: ACONDA CoAg |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: ACONDA | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

Total Funding: 0



| Funding Source | Funding Amount |
|----------------|----------------|
| GHCS (State) | 0 |

Sub Partner Name(s)

| Afrique Espoir | Amepouh | Association pour la Promotion de la Santé Maternelle | |
|---|--|--|--|
| Centre de Prise en Charge, de Recherche et de Formation | Centre d'Eveil et d'Encadrement pour le Developpement a la Base | Centre Nazareen | |
| Cercle d'Amitie et Progres | Chigata | Cote d'Ivoire Prosperite | |
| Espoir FANCI | Famille en Action en Cote d'Ivoire | Femmes Egale Vie | |
| Group d'auto assistance de Personnes vivant avec le VIH/SIDA et Promotion Sociale | Hopital Protestant de Dabou | Initiative Developpement Afrique Libre | |
| Manne du Jour | Mouvement Estudiant pour la Sensibilisation | Organisation pour l'assistance en Milieu Urbain et Rural | |
| Pierre Angulaire | SELETCHI | Service d'Eradication de la Mobilisation et d'Hygiene en Cote D'Ivoire | |
| Sidalert, Côte d'Ivoire | Soeur de la Providence, Formation Sanitaire Urbaine | Soeurs de la Sainte Famille, Dispensaire Pietro Bonilli | |
| | Communautaire Anonkoua Koute | | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)



| Mechanism ID: 9424 Mechanism Name: ACONDA CoAg Prime Partner Name: ACONDA | | | |
|---|-------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | 0 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 0 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | 0 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 0 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | 0 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | 0 | |



| Narrative: | | | |
|----------------|-------------|----------------|----------------|
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 0 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | MTCT | 0 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | 0 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

| Mechanism ID: 9425 | Mechanism Name: FANTA-2 GHN-A-00-08- 00001-00 | |
|--|--|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Academy for Educational Development | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 800,000 | | |
|-------------------------------|---------|--|
| Funding Source Funding Amount | | |
| GHCS (State) | 800,000 | |



(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Food and Nutrition: Policy, Tools, and Service Delivery | 800,000 |
|--|---------|
|--|---------|

Key Issues

Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services Child Survival Activities Safe Motherhood TB

| Mechanism ID: | | | |
|---------------------|-------------------------------------|----------------|----------------|
| | FANTA-2 GHN-A-00-08-00001-00 | | |
| Prime Partner Name: | Academy for Educational Development | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC 500,000 | | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | 300,000 | |
| Narrative: | | | |



(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 9431 | Mechanism Name: EngenderHealth GH-08-2008 RESPOND | |
|--|--|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Engender Health | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 750,000 | | |
|------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 750,000 | |

Sub Partner Name(s)

| Association Ivoirienne pour le | |
|--------------------------------|--|
| Bien-Etre Familial | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Gender: Reducing Violence and Coercion | 85,000 |
|--|---------|
| Human Resources for Health | 107,000 |

Key Issues



Addressing male norms and behaviors Increasing gender equity in HIV/AIDS activities and services Increasing women's legal rights and protection Child Survival Activities Safe Motherhood Family Planning

Budget Code Information

| Mechanism ID: 9431 | | | |
|---|-------------------------|----------------|----------------|
| | | | |
| Mechanism Name: EngenderHealth GH-08-2008 RESPOND | | | |
| Prime Partner Name: | Engender Health | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | 150,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | evention HVAB 150,000 | | |
| Narrative: | Narrative: | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | Prevention HVOP 150,000 | | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | МТСТ | 300,000 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information



(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 10141 | Mechanism Name: Institut Pasteur | |
|---|---|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Pasteur Institute of Ivory Coast | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 970,000 | |
|------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 970,000 |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 150,000 |
|----------------------------|---------|
| Human Resources for Health | 405,000 |

Key Issues

ΤВ

Budget Code Information

Mechanism ID: 10141



| Mechanism Name: | Institut Pasteur Pasteur Institute of Ivory Coast | | |
|-----------------|--|----------------|----------------|
| | · · · · · | | On Hold Amount |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HLAB | 170,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | 800,000 | |
| Narrative: | · | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 10276 | Mechanism Name: Health Alliance International |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: Health Alliance International | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 2,480,000 | | |
|--------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 2,480,000 | |

Sub Partner Name(s)

| Assistance Internationale a | Association Ivoirienne pour la | Association Ivoirienne pour le |
|-----------------------------|----------------------------------|--------------------------------|
| l'Enfance Coeur et Action | Promotion de la Sante, du Social | Developpement Social et |
| | et du Developpement | Communautaire |



| Bouake Eveil | Cente Ste Marie Bondoukou | Centre Catholique de Djebonoua |
|---|---|--|
| Centre Catholique de Korhogo | Centre d'Animation Sanitaire et d'Etude Sociale | Clinique Sans Frontiere Bouake |
| CMS Flamboyant | Cote d'Ivoire Prosperite | Eden Lumiere Action |
| Entente et Developpement | Hopital Materno Infantile Akwaba | Initiative Developpement, Environnement Afrique Libre |
| La Colombe Ivoirienne pour le Bien Etre Social | La Famille pour les Enfants en Difficultes | Notre Terre Nourriciere |
| ONG Arc Fores | ONG Beny Haly | ONG Notre Ecole |
| ONG Solidarite Beoumi | ONG Victoire | ONG Wobeh |
| Programme de Sante Communautaire et de | | |
| developpement | | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 100,000 |
|---|---------|
| Economic Strengthening | 43,000 |
| Education | 162,000 |
| Food and Nutrition: Commodities | 120,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 143,000 |
| Gender: Reducing Violence and Coercion | 65,000 |
| Human Resources for Health | 985,000 |
| Water | 45,000 |

Key Issues

Addressing male norms and behaviors Impact/End-of-Program Evaluation



Increasing gender equity in HIV/AIDS activities and services Increasing women's legal rights and protection Malaria (PMI) Child Survival Activities Safe Motherhood TB Family Planning

| Mechanism ID: | | | |
|---------------------|---|----------------|----------------|
| | | lanal | |
| | Mechanism Name: Health Alliance International | | |
| Prime Partner Name: | Health Alliance Internat | ional | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | 236,000 | |
| Narrative: | | | |
| None | _ | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 200,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | 872,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 283,000 | |
| Narrative: | | · | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |



| | | Í | |
|----------------|-------------|---------------------------------------|----------------|
| | | | |
| Care | PDCS | 143,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | 193,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 60,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | MTCT | 293,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | 200,000 | |
| Narrative: | | · · · · · · · · · · · · · · · · · · · | |
| None | | | |

(No data provided.)

| Mechanism ID: 10791 | Mechanism Name: New CDC TA Mech JHPIEGO |
|--|---|
| Funding Agency: U.S. Department of Health and | |
| Human Services/Centers for Disease Control and | Procurement Type: Cooperative Agreement |
| Prevention | |
| Prime Partner Name: JHPIEGO | |



| Agreement Start Date: Redacted | Agreement End Date: Redacted |
|--------------------------------|---|
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 737,000 | |
|------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 737,000 |

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Food and Nutrition: Policy, Tools, and Service Delivery | 15,000 |
|--|---------|
| Gender: Reducing Violence and Coercion | 20,000 |
| Human Resources for Health | 685,000 |
| Water | 10,000 |

Key Issues

Addressing male norms and behaviors Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services

| Mechanism ID: | 10791 | | |
|---------------------|-------------------------|----------------|----------------|
| Mechanism Name: | New CDC TA Mech JHPIEGO | | |
| Prime Partner Name: | me: JHPIEGO | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |



| Care | HBHC | 422,000 | |
|----------------|-------------|----------------|----------------|
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | 75,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | 50,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | МТСТ | 190,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

| Mechanism ID: 11489 | Mechanism Name: Department of Defense | |
|--|---|--|
| Funding Agency: U.S. Department of Defense | Procurement Type: USG Core | |
| Prime Partner Name: US Department of Defense, In-Support | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 140,000 | | |
|-------------------------------|---------|--|
| Funding Source Funding Amount | | |
| GHCS (State) | 140,000 | |



(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Human Resources for Health | 25,000 |
|----------------------------|--------|
|----------------------------|--------|

Key Issues

| Military Population | | |
|---------------------|--|--|
| ТВ | | |
| Workplace Programs | | |

Budget Code Information

| | 11489 Department of Defense US Department of Defense, In-Support | | |
|----------------|--|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | HVSI | 140,000 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

| Mechanism ID: 11491 | Mechanism Name: CDC-RETRO-CI GHAI |
|---------------------|-----------------------------------|
| | |



| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and | Procurement Type: USG Core | |
|---|---|--|
| Prevention | | |
| Prime Partner Name: HHS/Centers for Disease Control & Prevention | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

Total Funding: 1,199,000

| Funding Source | |
|----------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 1,199,000 |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

| Cross-Cutting Budget Attribution(s) | |
|-------------------------------------|---------|
| Human Resources for Health | 291,000 |

Key Issues

Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services TB

| Mechanism ID: | 11491 | | |
|---------------------|--|--|--|
| Mechanism Name: | CDC-RETRO-CI GHAI | | |
| Prime Partner Name: | HHS/Centers for Disease Control & Prevention | | |
| Strategic Area | Budget Code Planned Amount On Hold Amount | | |



| Care | HBHC | 572,000 | |
|----------------|-------------|---------------------------------------|----------------|
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | 150,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | 82,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | MTCT | 135,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HLAB | 260,000 | |
| Narrative: | | · · · · · · · · · · · · · · · · · · · | |
| None | | | |

(No data provided.)

| Mechanism ID: 12543 | Mechanism Name: Health Policy Project (HPP), TBD GH-01-2010 (Futures Group International) |
|--|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Contract |
| Prime Partner Name: The Futures Group International | |



| Agreement Start Date: Redacted | Agreement End Date: Redacted |
|--------------------------------|---|
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 250,000 | |
|------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 250,000 |

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

Increasing gender equity in HIV/AIDS activities and services

| Mechanism ID: Mechanism Name: | Health Policy Project (HPP), TBD GH-01-2010 (Futures Group | | | |
|----------------------------------|--|--|--|--|
| Strategic Area | Budget Code Planned Amount On Hold Amount | | | |
| Prevention | HVOP 250,000 | | | |
| Narrative: | | | | |
| None | | | | |



(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 12557 | Mechanism Name: PSI 2010 Co-Ag |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: Population Services Internation | nal |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 1,750,000 | |
|--------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 1,750,000 |

Sub Partner Name(s)

| ° | Association des Epouses de Militaires de Côte d'Ivoire | Bouake Eveil |
|----------------------------------|---|--------------|
| Croix Rouge Cote d'Ivoire | Eden Lumiere Action | Espoir FANCI |
| Syndicat National des | | |
| Transporteurs et Marchandises de | | |
| Côte d'Ivoire | | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 20,000 |
|---|--------|
| Food and Nutrition: Policy, Tools, and Service Delivery | 8,000 |
| Gender: Reducing Violence and Coercion | 94,930 |



| Human Resources for Health | 509,000 |
|----------------------------|---------|
| Water | 6,000 |

Key Issues

Addressing male norms and behaviors Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services Increasing women's legal rights and protection Malaria (PMI) Child Survival Activities Military Population Mobile Population TB Workplace Programs Family Planning

| | ID: 12557 me: PSI 2010 Co-Ag me: Population Services International | | |
|----------------|--|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC 150,000 | | |
| Narrative: | Narrative: | | |
| None | None | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT 280,000 | | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |



| Prevention | HVAB | 560,000 | |
|----------------|-------------|----------------|----------------|
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 760,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 12631 | Mechanism Name: ANADER 2010 CoAg |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: National Agency of Rural Development | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 2,628,000 | |
|--------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 2,628,000 |

Sub Partner Name(s)

| IACONDA | Johns Hopkins University Center for Communication Programs | Population Services International |
|-----------------------------------|---|-----------------------------------|
| Reseau des Professionnels des | | |
| Media et des Arts engages pour la | | |
| lutte contre le Sida en Côte | | |
| d'Ivoire | | |



Overview Narrative

Cross-Cutting Budget Attribution(s)

| Economic Strengthening | 39,063 |
|--|---------|
| Education | 367,111 |
| Food and Nutrition: Commodities | 195,926 |
| Food and Nutrition: Policy, Tools, and Service | 84,526 |
| Delivery | 01,020 |
| Gender: Reducing Violence and Coercion | 11,317 |
| Human Resources for Health | 66,652 |
| Water | 7,470 |

Key Issues

Addressing male norms and behaviors Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Increasing women's legal rights and protection Mobile Population TB

| Mechanism ID: | 12631 | | |
|---------------------|---|---------|--|
| Mechanism Name: | ANADER 2010 CoAg | | |
| Prime Partner Name: | National Agency of Rural Development | | |
| Strategic Area | Budget Code Planned Amount On Hold Amount | | |
| | | | |
| Care | HBHC | 200,000 | |



| None | | | |
|----------------|-------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 1,000,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 325,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 525,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 425,000 | |
| Narrative: | | | |
| None | | 1 | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | MTCT | 153,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

| Mechanism ID: 12655 | Mechanism Name: CNTS 2010 CoAg 1U2GPS002713-01 |
|---|---|
| Funding Agency: U.S. Department of Health and | Procurement Type: Cooperative Agreement |



| Human Services/Centers for Disease Control and | |
|--|---|
| Prevention | |
| Prime Partner Name: Centre National de Transfusion Sanguine de Cote d'Ivoire | |
| Agreement Start Date: Redacted Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 2,225,000 | |
|--------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 2,225,000 |

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Human Resources for Health | 450,000 |
|----------------------------|---------|
|----------------------------|---------|

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) Safe Motherhood

| Mechanism ID: | 12655 | | |
|---------------------|--|----------------|----------------|
| Mechanism Name: | CNTS 2010 CoAg 1U2GPS002713-01 | | |
| Prime Partner Name: | Centre National de Transfusion Sanguine de Cote d'Ivoire | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |



| Prevention | HMBL | 2,225,000 | |
|------------|------|-----------|--|
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 12673 | Mechanism Name: Ministry of Health 2010 CoAg | |
|--|--|--|
| Funding Agency: U.S. Department of Health and | | |
| Human Services/Centers for Disease Control and | Procurement Type: Cooperative Agreement | |
| Prevention | | |
| Prime Partner Name: Ministry of Health and Public Hygiene, Cote d'Ivoire | | |
| Agreement Start Date: Redacted Agreement End Date: Redacted | | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 2,104,000 | | |
|-------------------------------|-----------|--|
| Funding Source Funding Amount | | |
| GHCS (State) | 2,104,000 | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 20,000 |
|---|---------|
| Education | 20,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 200,000 |
| Human Resources for Health | 700,000 |



| W | /at | er |
|---|-----|----|

10,000

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) Child Survival Activities Safe Motherhood TB Family Planning

| Mechanism ID: 12673 | | | |
|--|--------------------------|----------------|----------------|
| Mechanism Name: Ministry of Health 2010 CoAg Prime Partner Name: Ministry of Health and Public Hygiene, Cote d'Ivoire | | | |
| | Winnstry of Health and F | | ire |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | 780,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | 700,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | HVSI | 0 | |
| Narrative: | | | |
| Reprogrammed \$100,000 July 2010 to FHI. | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | 0 | |



| Narrative: | | | |
|------------------------|-------------------|----------------|----------------|
| Reprogrammed \$200,000 | to FHI July 2010. | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HMIN | 324,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HLAB | 300,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | 0 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

| Mechanism ID: 12679 | Mechanism Name: MFFAS-PNOEV CoAg 2010 | |
|---|---|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Ministry for Women, Families, and Social Affairs - Mozambique | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 550,000 | | | |
|-------------------------------|---------|--|--|
| Funding Source Funding Amount | | | |
| GHCS (State) | 550,000 | | |



(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 45,000 |
|--|---------|
| Food and Nutrition: Commodities | 20,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 40,000 |
| Gender: Reducing Violence and Coercion | 50,000 |
| Human Resources for Health | 200,000 |
| Water | 10,000 |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Increasing women's legal rights and protection Child Survival Activities Family Planning

| Mechanism ID: | 12679 | | |
|---------------------|---|----------------|----------------|
| Mechanism Name: | MFFAS-PNOEV CoAg 2010 | | |
| Prime Partner Name: | Ministry for Women, Families, and Social Affairs - Mozambique | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 500,000 | |



| Narrative: | | | |
|----------------|-------------|----------------|----------------|
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 50,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 12803 | Mechanism Name: Heartland HVP 2010 CDC CoAg | |
|---|--|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Heartland Alliance | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 1,722,000 | | |
|-------------------------------|-----------|--|
| Funding Source Funding Amount | | |
| GHCS (State) | 1,722,000 | |

Sub Partner Name(s)

| Association pour la Promotion de la Sante de la Mere, l'Enfant et la Famille | Espace Confiance | Initiative Developpement Afrique |
|--|--------------------------|----------------------------------|
| Initiative Développement et Environnement Afrique Libre | Renaissance Sante Bouake | Ruban Rouge |
| SAPHARM | | |



Overview Narrative

Cross-Cutting Budget Attribution(s)

| Food and Nutrition: Policy, Tools, and Service Delivery | 10,000 |
|---|---------|
| Gender: Reducing Violence and Coercion | 120,000 |
| Human Resources for Health | 750,000 |

Key Issues

Addressing male norms and behaviors Increasing gender equity in HIV/AIDS activities and services Increasing women's legal rights and protection Mobile Population Safe Motherhood TB Family Planning

| Mechanism ID: Mechanism Name: | 12803 Heartland HVP 2010 CDC CoAg | | |
|----------------------------------|--------------------------------------|----------------|----------------|
| Prime Partner Name: | Heartland Alliance | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC 300,000 | | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 197,000 | |



| Narrative: | | | |
|----------------|-------------|----------------|----------------|
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 1,225,000 | |
| Narrative: | | • | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 12962 | Mechanism Name: TBD Columbia international TA follow-on 2011 | |
|---|---|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: TBD | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: Yes | Global Fund / Multilateral Engagement: No | |

| Total Funding: Redacted | | |
|-------------------------------|--|--|
| Funding Source Funding Amount | | |
| Redacted Redacted | | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)



| Construction/Renovation | Redacted |
|--|----------|
| Economic Strengthening | Redacted |
| Food and Nutrition: Commodities | Redacted |
| Food and Nutrition: Policy, Tools, and Service Delivery | Redacted |
| Human Resources for Health | Redacted |
| Water | Redacted |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) **Child Survival Activities** Safe Motherhood ΤВ Family Planning

| Mechanism ID: 12962 Mechanism Name: TBD Columbia international TA follow-on 2011 Prime Partner Name: TBD | | | |
|--|-----------------|----------------|----------------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Custom | Page 101 of 139 | | FACTS Info v3.8.3.30 |



| Care | HVCT | Redacted | Redacted |
|----------------|-------------|----------------|----------------|
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | МТСТ | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | Redacted | Redacted |
| Narrative: | | | |
| None | | | |

(No data provided.)

| Mechanism ID: 12990 | Mechanism Name: TBD-JHU-CCP 2011 follow-on |
|--|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement |
| Prime Partner Name: TBD | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |



| TBD: Yes | Global Fund / Multilateral Engagement: No | |
|-------------------------|---|--|
| Total Funding: Redacted | | |
| Funding Source | Funding Amount | |
| Redacted | Redacted | |

| Action pour la Promotion Sante et | Association Ivoiriennne pour le | Bureau International Catholique |
|-----------------------------------|---------------------------------|---------------------------------|
| Education | Bien Etre Familial | de l'enfance |
| Chigata | Children's Rural Area | Cote d'Ivoire Prospérite |
| Federation des Femmes | Force Jeune Universelle | Fraternite St Jean de la |
| d'Abengourou | | Misericorde |
| Groupe Biblique des Hopitaux | International Sante pour Tous | Lumiere Action |
| Lumière San-Pedro | Mairie Abengourou | Mairie d'Adjame |
| Mairie de Port-Bouet | Mairie de Treichville | Mouvement Action Jeunes |
| Mouvement Estudiantin pour la | Omni Vinci Amor | |
| Sensibilisation au Sida | | ONG Ngouan |
| Reseau de la Jeunesse pour la | | |
| Promotion de l'Aphabetisation et | Ruban Rouge | Save Our Soul |
| la Lutte contre le VIH/sida | | |
| | | Union des Centres de Formation |
| SECOURS PLUS | SIDALERTE Cote d'Ivoire | de Football de Yopougon |
| Univers Sante | | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

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Addressing male norms and behaviors Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Family Planning

Budget Code Information

| Mechanism ID: Mechanism Name: Prime Partner Name: | TBD-JHU-CCP 2011 follow-on | | |
|---|----------------------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB Redacted Redacted | | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

| Mechanism ID: 13008 | Mechanism Name: TBD EGPAF international T follow-on 2011 | |
|---|---|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: TBD | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: Yes | Global Fund / Multilateral Engagement: No | |

| Total Funding: Redacted | |
|-------------------------|----------------|
| Funding Source | Funding Amount |
| Redacted | Redacted |



(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | Redacted |
|---|----------|
| Economic Strengthening | Redacted |
| Food and Nutrition: Commodities | Redacted |
| Food and Nutrition: Policy, Tools, and Service Delivery | Redacted |
| Human Resources for Health | Redacted |
| Water | Redacted |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) Child Survival Activities Safe Motherhood TB Family Planning

| Mechanism ID: Mechanism Name: Prime Partner Name: | : TBD EGPAF international TA follow-on 2011 | | |
|---|---|----------|----------|
| Strategic Area | Budget Code Planned Amount On Hold Amount | | |
| Care | HBHC | Redacted | Redacted |



| Narrative: | | | |
|----------------|-------------|----------------|----------------|
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | Redacted | Redacted |
| Narrative: | | | |
| None | | 1 | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | MTCT | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | Redacted | Redacted |
| Narrative: | | | |
| None | | | |



(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 13046 | Mechanism Name: Habitat OVC-AB 2010 CDC CoAg |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: Habitat for Humanity | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 1,180,000 | |
|--------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 1,180,000 |

Sub Partner Name(s)

| Centre Régional Pour l'Eau | Khulisa Management Services | |
|-----------------------------|-----------------------------|--|
| Potable et l'Assainissement | (Pty) Ltd | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 126,000 |
|--|---------|
| Economic Strengthening | 21,000 |
| Education | 30,000 |
| Food and Nutrition: Commodities | 30,000 |
| Gender: Reducing Violence and Coercion | 30,000 |
| Human Resources for Health | 250,000 |



Key Issues

Addressing male norms and behaviors Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Child Survival Activities

Budget Code Information

| | 13046 Habitat OVC-AB 2010 CDC CoAg Habitat for Humanity | | |
|----------------|---|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 800,000 | |
| Narrative: | | | |
| None | | 1 | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 380,000 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

| Mechanism ID: 13048 | Mechanism Name: (TBD) University of Washington I-TECH follow-on |
|---|--|
| Funding Agency: U.S. Department of Health and Human Services/Health Resources and Services | Procurement Type: Cooperative Agreement |
| Administration Prime Partner Name: TBD | |



| Agreement Start Date: Redacted | Agreement End Date: Redacted |
|--------------------------------|---|
| TBD: Yes | Global Fund / Multilateral Engagement: No |

| Total Funding: Redacted | |
|-------------------------|----------------|
| Funding Source | Funding Amount |
| Redacted | Redacted |

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Human Resources for Health | Redacted | |
|----------------------------|----------|--|

Key Issues

(No data provided.)

| Mechanism ID: Mechanism Name: Prime Partner Name: | (TBD) University of Washington I-TECH follow-on | | |
|---|---|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | HVSI | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | Redacted | Redacted |



| Narrative: | | |
|------------|--|--|
| None | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 13074 | Mechanism Name: TBD EGPAF local follow-on 2011 |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: TBD | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: Yes | Global Fund / Multilateral Engagement: No |

| Total Funding: Redacted | | |
|-------------------------|----------------|--|
| Funding Source | Funding Amount | |
| Redacted | Redacted | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | Redacted |
|---|----------|
| Economic Strengthening | Redacted |
| Food and Nutrition: Commodities | Redacted |
| Food and Nutrition: Policy, Tools, and Service Delivery | Redacted |



| Human Resources for Health | Redacted |
|----------------------------|----------|
| Water | Redacted |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) **Child Survival Activities** Safe Motherhood ΤВ Family Planning

| Mechanism ID: 13074 Mechanism Name: TBD EGPAF local follow-on 2011 Prime Partner Name: TBD | | | |
|--|-------------------------------------|----------------|----------------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Custom | Page 111 of 139 FACTS Info v3.8.3.3 | | FACTS Info v3.8.3.30 |



| Care | PDCS | Redacted | Redacted |
|----------------|-------------|----------------|----------------|
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | Redacted | Redacted |
| Narrative: | | | |
| None | | | , |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | МТСТ | Redacted | Redacted |
| Narrative: | | | |
| None | | | _ |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | Redacted | Redacted |
| Narrative: | | | |
| None | | | |

(No data provided.)

| Mechanism ID: 13084 | Mechanism Name: TBD Abt Associates 20:20 GHS-A-00-06-00010-00 (extension or follow-on) |
|--|---|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement |
| Prime Partner Name: TBD | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: Yes | Global Fund / Multilateral Engagement: No |

| Total Funding: Redacted | |
|-------------------------|----------------|
| Funding Source | Funding Amount |
| Redacted | Redacted |



(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Budget Code Information

| Mechanism ID: Mechanism Name: Prime Partner Name: | TBD Abt Associates 20: | 20 GHS-A-00-06-00010-00 |) (extension or follow- |
|---|------------------------|-------------------------|-------------------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

| Mechanism ID: 13137 | Mechanism Name: Columbia UTAP |
|--|---|
| Funding Agency: U.S. Department of Health and | Producement Type: Cooperative Agreement |
| Human Services/Centers for Disease Control and | Procurement Type: Cooperative Agreement |



| Prevention | |
|---|---|
| Prime Partner Name: Columbia University | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 50,000 | |
|-----------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 50,000 |

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Human Resources for Health 50,000 | Human Resources for Health | 50,000 |
|-----------------------------------|----------------------------|--------|
|-----------------------------------|----------------------------|--------|

Key Issues

Increasing gender equity in HIV/AIDS activities and services

| 13137 | | |
|---------------------|---|--|
| Columbia UTAP | | |
| Columbia University | | |
| Budget Code | Planned Amount | On Hold Amount |
| OHSS | 50,000 | |
| | | |
| | | |
| | Columbia UTAP Columbia University Budget Code | Columbia UTAP Columbia University Budget Code Planned Amount |



(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 13272 | Mechanism Name: EGPAF OVC-AB 2010 CDC Coag Keneya | |
|---|--|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Elizabeth Glaser Pediatric AIDS Foundation | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 1,585,000 | |
|--------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 1,585,000 |

Sub Partner Name(s)

| Centre Solidarite Action Sociale | | |
|----------------------------------|--|--|
|----------------------------------|--|--|

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Education | 18,600 |
|---|---------|
| Food and Nutrition: Commodities | 11,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 23,000 |
| Gender: Reducing Violence and Coercion | 39,000 |
| Human Resources for Health | 370,000 |



| Water | |
|-------|--|
|-------|--|

4,000

Key Issues

Addressing male norms and behaviors Increasing gender equity in HIV/AIDS activities and services Child Survival Activities

| Mechanism ID: | 13272 | | |
|---------------------|--------------------------|---------------------|----------------|
| Mechanism Name: | EGPAF OVC-AB 2010 C | DC Coag Keneya | |
| Prime Partner Name: | Elizabeth Glaser Pediati | ric AIDS Foundation | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | НВНС | 250,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 860,000 | |
| Narrative: | | | |
| None | - | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 350,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 125,000 | |
| Narrative: | | | |
| None | | | |



(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 13278 | Mechanism Name: TBD 2011 CoAg Ministry of AIDS |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: TBD | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: Yes | Global Fund / Multilateral Engagement: No |

| Total Funding: Redacted | |
|-------------------------|----------------|
| Funding Source | Funding Amount |
| Redacted | Redacted |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

(No data provided.)

Key Issues

(No data provided.)

Budget Code Information

Mechanism ID: 13278



| Mechanism Name: Prime Partner Name: | TBD 2011 CoAg Ministry TBD | / of AIDS | |
|--|-------------------------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 13296 | Mechanism Name: AVSI 2010 USAID CoAg |
|--|---|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement |
| Prime Partner Name: Associazione Volontari per il S | ervizio Internazionale, Italy |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 1,570,308 | |
|--------------------------|----------------|
| Funding Source | Funding Amount |
| GHCS (State) | 1,570,308 |

Sub Partner Name(s)

| Amepouh | Association Ivoirienne pour la Promotion de la santé, du Social et du Développement | Association Jeunesse et Enfance de Côte d'Ivoire |
|---------------------------------|---|---|
| Bayewa | Caritas St Martin | Centre de Santé la Providence |
| Chigata | Club des Amis | Fangou'an |
| Laikagnon | Nouv de Vie | Organisation Grâce Divine Eternelle |
| Tends Moi la Main Côte d'Ivoire | | |



Overview Narrative

Cross-Cutting Budget Attribution(s)

| Economic Strengthening | 190,000 |
|--|---------|
| Education | 322,000 |
| Food and Nutrition: Commodities | 45,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 36,000 |
| Human Resources for Health | 40,000 |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Increasing women's legal rights and protection Child Survival Activities

Budget Code Information

| | 13296 AVSI 2010 USAID CoAg Associazione Volontari | per il Servizio Internazior | nale, Italy |
|----------------|---|-----------------------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 1,570,308 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)



Implementing Mechanism Details

| Mechanism ID: 13297 | Mechanism Name: TBD MoH (therapeutic food) CoAg |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: TBD | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: Yes | Global Fund / Multilateral Engagement: No |

| Total Funding: Redacted | |
|-------------------------|----------------|
| Funding Source | Funding Amount |
| Redacted | Redacted |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

|--|

Key Issues

Child Survival Activities

Budget Code Information

Mechanism ID: 13297 Mechanism Name: TBD MoH (therapeutic food) CoAg Prime Partner Name: TBD



| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
|----------------|-------------|----------------|----------------|
| Care | HBHC | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | Redacted | Redacted |
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 13331 | Mechanism Name: TBD (TA to CCM and Leadership) |
|--|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement |
| Prime Partner Name: TBD | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: Yes | Global Fund / Multilateral Engagement: No |

| Total Funding: Redacted | | |
|-------------------------|----------------|--|
| Funding Source | Funding Amount | |
| ТВД | Redacted | |

Sub Partner Name(s)

(No data provided.)

Overview Narrative



Cross-Cutting Budget Attribution(s)

| | Human Resources for Health | ТВО |
|--|----------------------------|-----|
|--|----------------------------|-----|

Key Issues

Malaria (PMI) TB

Budget Code Information

| Mechanism ID: Mechanism Name: Prime Partner Name: | TBD (TA to CCM and Le | adership) | |
|---|-----------------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Other | OHSS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

| Mechanism ID: 13440 | Mechanism Name: TBD Columbia local follow- on 2011 |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: TBD | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: Yes | Global Fund / Multilateral Engagement: No |

| Total Funding: Redacted | | |
|-------------------------|--|--|
| | | |



| Funding Source | Funding Amount | |
|----------------|----------------|--|
| Redacted | Redacted | |

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | Redacted |
|---|----------|
| Economic Strengthening | Redacted |
| Food and Nutrition: Commodities | Redacted |
| Food and Nutrition: Policy, Tools, and Service Delivery | Redacted |
| Human Resources for Health | Redacted |
| Water | Redacted |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) Child Survival Activities Safe Motherhood TB Family Planning

Budget Code Information

Mechanism ID: 13440 Mechanism Name: TBD Columbia local follow-on 2011 Prime Partner Name: TBD



| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
|----------------|-------------|----------------|----------------|
| Care | НВНС | Redacted | Redacted |
| Narrative: | | Reddoled | Reducted |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | Redacted | Redacted |
| Narrative: | | • | • |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDCS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | MTCT | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | Redacted | Redacted |
| Narrative: | | | |



(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 13462 | Mechanism Name: Save UK 2010 USAID CoAg | |
|--|---|--|
| Funding Agency: U.S. Agency for International Development | Procurement Type: Cooperative Agreement | |
| Prime Partner Name: Save the Children UK | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

| Total Funding: 1,830,000 | | |
|--------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 1,830,000 | |

Sub Partner Name(s)

| Afrique Espoir | Amepouh | Cavoequiva |
|----------------------------------|--|-----------------------|
| Cote d'Ivoire Prosperite | Droit à l'education et au developpement | Horizon Vert Sante |
| Initiative Developpement Afrique | Noutous | Prevention Sans Tabou |
| Save the Children Sweden | | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | 23,000 |
|-------------------------|--------|
| Economic Strengthening | 98,000 |
| Education | 58,000 |



| Food and Nutrition: Policy, Tools, and Service Delivery | 27,000 |
|---|---------|
| Gender: Reducing Violence and Coercion | 34,000 |
| Human Resources for Health | 334,600 |

Key Issues

Addressing male norms and behaviors Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Increasing women's legal rights and protection Child Survival Activities

Budget Code Information

| Mechanism ID: 13462 Mechanism Name: Save UK 2010 USAID CoAg Prime Partner Name: Save the Children UK | | | |
|--|-------------|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 1,780,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 50,000 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)



| Mechanism ID: 13488 | Mechanism Name: CDC-RETRO-CI GHAI for Retro-CI Security | |
|---|--|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: USG Core | |
| Prime Partner Name: HHS/Centers for Disease Control & Prevention | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No | |

Total Funding: 0

| Funding Source | Funding Amount |
|----------------|----------------|
| GHCS (State) | 0 |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation 0 |
|---------------------------|
|---------------------------|

Key Issues

(No data provided.)

| Mechanism ID: | 13488 | | |
|---------------------|--|---------------------|----------------|
| Mechanism Name: | CDC-RETRO-CI GHAI fo | r Retro-CI Security | |
| Prime Partner Name: | HHS/Centers for Disease Control & Prevention | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |



| Treatment | HLAB | 0 | |
|------------|------|---|--|
| Narrative: | | | |
| None | | | |

(No data provided.)

Implementing Mechanism Details

| Mechanism ID: 13516 | Mechanism Name: TBD ACONDA follow-on 2011 |
|--|---|
| Funding Agency: U.S. Department of Health and | |
| Human Services/Centers for Disease Control and | Procurement Type: Cooperative Agreement |
| Prevention | |
| Prime Partner Name: TBD | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: Yes | Global Fund / Multilateral Engagement: No |

| Total Funding: Redacted | |
|-------------------------|----------------|
| Funding Source | Funding Amount |
| Redacted | Redacted |

Sub Partner Name(s)

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Construction/Renovation | Redacted |
|--|----------|
| Economic Strengthening | Redacted |
| Education | Redacted |
| Food and Nutrition: Commodities | Redacted |
| Food and Nutrition: Policy, Tools, and Service | Redacted |



| Delivery | |
|----------------------------|----------|
| Human Resources for Health | Redacted |
| Water | Redacted |

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) Child Survival Activities Military Population Safe Motherhood TB Family Planning

| Mechanism ID: 13516 Mechanism Name: TBD ACONDA follow-on 2011 | | | |
|--|-------------|----------------|----------------|
| Prime Partner Name: | TBD | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HBHC | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HTXS | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | Redacted | Redacted |
| Narrative: | | | |
| None | | | |
| | D 10 | | |



| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
|----------------|-------------|----------------|----------------|
| Care | PDCS | Redacted | Redacted |
| Narrative: | | <u> </u> | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | PDTX | Redacted | Redacted |
| Narrative: | | | |
| None | | - | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | МТСТ | Redacted | Redacted |
| Narrative: | | • | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Treatment | HVTB | Redacted | Redacted |
| Narrative: | | • | |
| None | | | |

(No data provided.)

| Mechanism ID: 13525 | Mechanism Name: Hope CI OVC-AB 2010 CDC CoAg |
|---|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement |
| Prime Partner Name: Hope Cote d'Ivoire | - |
| Agreement Start Date: Redacted | Agreement End Date: Redacted |
| TBD: No | Global Fund / Multilateral Engagement: No |



| Total Funding: 1,970,000 | | |
|--------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 1,970,000 | |

| Association pour la Promotion de | |
|------------------------------------|--|
| la Sante de la Mere, de la famille | |
| et de l'enfant | |

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Economic Strengthening | 10,000 |
|---|---------|
| Education | 443,000 |
| Food and Nutrition: Commodities | 50,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 20,000 |
| Gender: Reducing Violence and Coercion | 100,000 |
| Human Resources for Health | 558,000 |
| Water | 5,000 |

Key Issues

Addressing male norms and behaviors Impact/End-of-Program Evaluation Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Increasing women's legal rights and protection Malaria (PMI) **Child Survival Activities** ΤВ Custom

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Family Planning

Budget Code Information

| | D: 13525 e: Hope CI OVC-AB 2010 CDC CoAg e: Hope Cote d'Ivoire | | |
|----------------|--|----------------|----------------|
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 1,199,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 771,000 | |
| Narrative: | | | |
| None | | | |

Implementing Mechanism Indicator Information

(No data provided.)

| Mechanism ID: 13539 | Mechanism Name: IRC 2010 CDC Coag |
|--|---|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and | Procurement Type: Cooperative Agreement |
| Prevention | |
| Prime Partner Name: International Rescue Committee | ee |
| Agreement Start Date: Redacted Agreement End Date: Redacted | |
| TBD: No | Global Fund / Multilateral Engagement: No |

| Total Funding: 1,475,000 | | |
|--------------------------|----------------|--|
| Funding Source | Funding Amount | |
| GHCS (State) | 1,475,000 | |



| Association de Soutien a l'Autopromotion Sanitaire Urbaine | Care International | Initiative Developpement Afrique |
|---|--------------------|----------------------------------|
|---|--------------------|----------------------------------|

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Economic Strengthening | 4,000 |
|--|---------|
| Education | 2,000 |
| Food and Nutrition: Policy, Tools, and Service Delivery | 2,000 |
| Gender: Reducing Violence and Coercion | 100,000 |
| Human Resources for Health | 60,000 |
| Water | 1,000 |

Key Issues

Addressing male norms and behaviors Increasing gender equity in HIV/AIDS activities and services Increasing women's access to income and productive resources Increasing women's legal rights and protection

| Mechanism ID: | 13539 | | |
|---------------------|-------------------------|----------------|----------------|
| Mechanism Name: | IRC 2010 CDC Coag | | |
| Prime Partner Name: | International Rescue Co | ommittee | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | НВНС | 50,000 | |



| Narrative: | | | |
|----------------|-------------|----------------|----------------|
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HKID | 50,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Care | HVCT | 50,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVAB | 700,000 | |
| Narrative: | | | |
| None | | | |
| Strategic Area | Budget Code | Planned Amount | On Hold Amount |
| Prevention | HVOP | 625,000 | |
| Narrative: | | | |
| None | | | |

(No data provided.)

| Mechanism ID: 13541 | Mechanism Name: TBD Task Order MOH TA for ART transition | | |
|---|---|--|--|
| Funding Agency: U.S. Department of Health and Human Services/Centers for Disease Control and Prevention | Procurement Type: Cooperative Agreement | | |
| Prime Partner Name: TBD | | | |
| Agreement Start Date: Redacted | Agreement End Date: Redacted | | |



| TBD: Yes | Global Fund / Multilateral Engagement: No |
|-------------------------|---|
| Total Funding: Redacted | |
| Funding Source | Funding Amount |
| Redacted | Redacted |

(No data provided.)

Overview Narrative

Cross-Cutting Budget Attribution(s)

| Human Resources for Health | Redacted |
|----------------------------|----------|
|----------------------------|----------|

Key Issues

Increasing gender equity in HIV/AIDS activities and services Malaria (PMI) TB Family Planning

| Mechanism ID: 13541 Mechanism Name: TBD Task Order MOH TA for ART transition Prime Partner Name: TBD | | | | | | |
|--|---|--|--|--|--|--|
| Strategic Area | Budget Code Planned Amount On Hold Amount | | | | | |
| Other | OHSS Redacted Redacted | | | | | |
| Narrative: | | | | | | |
| None | | | | | | |



(No data provided.)



| USG | Management | and | Operations |
|-----|------------|-----|------------|
|-----|------------|-----|------------|

Redacted
 Redacted
 Redacted
 Redacted
 Redacted
 S.

Redacted

Agency Information - Costs of Doing Business U.S. Agency for International Development

| Agency Cost of Doing Business | Central GHCS (State) | DHAPP | GAP | GHCS (State) | GHCS (USAID) | Cost of Doing Business Category Total |
|---------------------------------------|-------------------------|-------|-----|--------------|-----------------|---|
| Institutional Contractors | | | | 200,000 | | 200,000 |
| USG Staff Salaries and Benefits | | | | 329,500 | | 329,500 |
| Total | 0 | 0 | 0 | 529,500 | 0 | 529,500 |

U.S. Agency for International Development Other Costs Details

U.S. Department of Defense

| Agency Cost of Doing Business | Central GHCS (State) | DHAPP | GAP | GHCS (State) | GHCS (USAID) | Cost of Doing Business Category Total |
|-------------------------------------|-------------------------|-------|-----|--------------|-----------------|---|
| USG Staff Salaries and | | | | 65,000 | | 65,000 |



| Benefits | | | | | | |
|----------|---|---|---|--------|---|--------|
| Total | 0 | 0 | 0 | 65,000 | 0 | 65,000 |

U.S. Department of Defense Other Costs Details

U.S. Department of Health and Human Services/Centers for Disease Control and Prevention

| Agency Cost of Doing Business | Central GHCS (State) | DHAPP | GAP | GHCS (State) | GHCS (USAID) | Cost of Doing Business Category Total |
|---|-------------------------|-------|-----------|--------------|-----------------|---|
| Computers/IT Services | | | | 148,530 | | 148,530 |
| Management Meetings/Profes sional Developement | | | | 370,050 | | 370,050 |
| Non-ICASS Administrative Costs | | | 755,453 | 481,524 | | 1,236,977 |
| Staff Program Travel | | | | 513,950 | | 513,950 |
| USG Renovation | | | | 318,446 | | 318,446 |
| USG Staff Salaries and Benefits | | | 4,397,547 | | | 4,397,547 |
| Total | 0 | 0 | 5,153,000 | 1,832,500 | 0 | 6,985,500 |

U.S. Department of Health and Human Services/Centers for Disease Control and Prevention Other Costs Details

| Category | Item | Funding Source | Description | Amount |
|--------------|------|----------------|-------------|-----------|
| Computers/IT | | GHCS (State) | | 4 40 5 20 |
| Services | | | | 148,530 |



| Management Meetings/Profession al Developement | GHCS (State) | 370,050 |
|--|--------------|---------|
| Non-ICASS Administrative Costs | GAP | 755,453 |
| Non-ICASS Administrative Costs | GHCS (State) | 481,524 |
| USG Renovation | GHCS (State) | 318,446 |