



United States Department of State

Washington, D.C. 20520

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February 15, 2023

ACTION MEMO FOR:

AMBASSADOR THOMAS L. VAJDA, BURMA  
AMBASSADOR W. PATRICK MURPHY, CAMBODIA  
CHARGÉ D’AFFAIRES A. ELIZABETH JONES, INDIA  
AMBASSADOR SUNG Y. KIM, INDONESIA  
AMBASSADOR DANIEL N. ROSENBLUM, KAZAKHSTAN  
AMBASSADOR LESSLIE C. VIGUERIE, KYRGYZ REPUBLIC  
AMBASSADOR PETER M. HAYMOND, LAOS  
AMBASSADOR DEAN R. THOMPSON, NEPAL  
CHARGÉ D’AFFAIRES JOSEPH E. ZADROZNY, PAPUA NEW GUINEA  
AMBASSADOR MARYKAY LOSS CARLSON, PHILIPPINES  
AMBASSADOR JOHN M. POMMERSHEIM, TAJIKISTAN  
AMBASSADOR ROBERT F. GODEC, THAILAND

FROM: S/GAC – U.S. Global AIDS Coordinator,  
Ambassador Dr. John Nkengasong

THROUGH: S/GAC – Erin Eckstein, Co-Chair  
S/GAC – Sarah Dominis, Co-Chair  
S/GAC – Nicole Espy, PEPFAR Program Manager  
S/GAC – Kashmira Kale, PEPFAR Program Manager

SUBJECT: Fiscal Year (FY) 2024 PEPFAR Planned Allocation

Dear Ambassadors and Chargés D’Affaires:

To end HIV/AIDS as a global public health threat by 2030, it is critical that PEPFAR supported HIV-response investments and activities are aligned with the unique situation of the partner countries we are supporting. This will also require that

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together, we chart a successful course for operationalizing the PEPFAR Five-year Strategy that will help our partner countries achieve or exceed the 95/95/95 HIV treatment target by 2025, as well as provide a strong public health infrastructure that can be leveraged to tackle current and emerging disease threats.

In response to stakeholder input and to make the COP/ROP process more fit-for-purpose, there are many improvements to this year's process: a) transitioning from an annual planning process to 2-year operational planning to facilitate longer-term thinking. The shift to a 2-year cycle will begin in fiscal year 2024 (FY24) for COP and in fiscal year 2025 (FY25) for ROP; b) a redesigned COP/ROP Guidance Document that is a shorter, more strategic, and more useful resource to support country teams as they work with stakeholders to develop country and/or regional operating plans; c) Technical Considerations, formerly a section within the Guidance, has been moved to an annex document and have only been revised from COP/ROP22 Guidance where necessary; and d) Minimum Program Requirements have been reframed as Core Standards to better reflect PEPFAR's role as a respectful partner helping to enable the goals of national HIV efforts.

The function and purpose of the COP/ROP process remains unchanged. We need to maintain an inclusive process, use data for decision making, maximize partnership and interagency collaboration, and pursue program and policy priorities efficiently for maximum impact. All COP/ROP changes are intended to preserve accountability, impact, and transparency, and to redesign or eliminate things no longer fit-for-purpose.

There is a lot of anticipation leading up to this year's ROP and I have full confidence in our highly skilled team and in our ability to guide the process as our partner countries play a leadership role; with communities, civil society, faith-based organizations, and other partners continuing to assume a more active role as well. Convening with our partners to plan country operations is our most important collaborative act. You set the tone in this critical planning process, and I am calling on each of you to ensure that the PEPFAR family adheres to the new PEPFAR Code of Conduct. Our shared goal to end the HIV/AIDS epidemic in our respective PEPFAR partner countries should be the overarching motivation. As we proceed with the COP process, we should strive to uphold PEPFAR Guiding Principles: respect/humility, equity, accountability/transparency, impact, and sustained engagement.

We ask that teams carefully consider which discussants from the country are invited to join the co-planning meeting, ensuring that both the technical needs (health, finance) and political needs (foreign affairs, private sector) are well represented. Stakeholder engagement is essential for a productive and impactful planning process, and civil society engagement will continue to be an integral part of this planning process.

Specifically, in Burma, we want to acknowledge the additional context through which the PEPFAR Burma team has persevered. On February 1, 2021, Burma's military regime usurped power from a democratically elected government. As a result of this military coup, the political, economic, health, and humanitarian crisis in Burma has worsened, with reports indicating nearly 3,000 killed, nearly 17,000 detained, and more than 1.5 million displaced. In addition, due to a significant number of healthcare providers joining the Civil Disobedience Movement, the workforce in the public sector has been reduced to 50% capacity, adversely affecting the regime's ability to execute its health sector mandate, including provision of routine health care services. The coup has prominently affected the health sector, including PEPFAR programming, across the country. Specifically, incidents targeting NGOs and CSOs have increased over the past two years resulting in arrests, deaths, clinic/office raids, and revoked medical licenses. Despite these major challenges, the PEPFAR team has persevered by working closely and carefully with partners, stakeholders, and communities ensuring continuation of life saving health services. We recognize the unique challenges PEPFAR Burma faces as we prepare for a productive and impactful planning process for ROP 2023/FY2024.

Consistent with the approach from years past, PEPFAR teams will be responsible for setting their own targets across PEPFAR program areas in consultation with stakeholders. PEPFAR targets are not PEPFAR's but flow directly from the commitments of the PEPFAR Asia Region countries to the U.N. Sustainable Development Goal (SDG) 3 target of ending the global AIDS epidemic as a public health threat by 2030 while also advancing interdependent SDGs.

In alignment with efforts by the U.S. government to support diversity, equity, inclusion, and accessibility as well as to advance equity for underserved communities and prevent and combat discrimination or exploitation on the basis of race, religion, age, gender identity, or sexual orientation, PEPFAR will work to

ensure that these principles are upheld, promoted, and advanced in all PEPFAR programs and in how we conduct business.

The PEPFAR COP/ROP23 notional budget for Asia Region is **\$116,705,000** inclusive of all new funding accounts and applied pipeline and includes funding for surveys as indicated in the country sections below. For PrEP, there are not formal controls in the system or in the tables below, but OUs are expected to program at least the amount that was programmed for COP22. Similarly, the tables below do not set a formal control for Community Led Monitoring (CLM), but OUs must continue to program appropriately for CLM.

**Table 1: Total Asia Regional ROP 2023 Funding**

Op Div	Bilateral GHP-State	Central GHP-State	Bilateral GHP-USAID	Central GHP-USAID	GAP	Total New	Applied Pipeline	Year 1 TOTAL
DOD	\$387,632	\$ -				\$387,632	\$362,368	\$ 750,000
HHS/CDC	\$29,648,100	\$ -			\$5,400,308	\$35,048,408	\$3,966,498	\$ 39,014,906
HHS/HRSA	\$1,728,621	\$ -				\$1,728,621	\$428,657	\$ 2,157,278
USAID	\$68,823,453	\$ -	\$ -	\$ -		\$68,823,453	\$4,612,213	\$ 73,435,666
USAID/WCF	\$596,275	\$ -		\$ -		\$596,275	\$98,758	\$ 695,033
State	\$520,295	\$ -				\$520,295	\$ -	\$ 520,295
State/EAP	\$ -	\$ -				\$ -	\$131,822	\$ 131,822
<b>TOTAL FUNDING</b>	<b>\$101,704,376</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>\$5,400,308</b>	<b>\$107,104,684</b>	<b>\$9,600,316</b>	<b>\$ 116,705,000</b>

**TABLE 1A: ROP 22 Planning Level Allocation by Country**

ROP23 Planning Level	Total ROP23 Funding, inclusive of applied pipeline
Asia Region	\$ 4,870,000
Burma	\$ 14,910,000
Cambodia	\$ 6,530,000
India	\$ 24,360,000
Indonesia	\$ 10,815,000
Kazakhstan	\$ 3,410,000
Kyrgyzstan	\$ 4,345,000
Laos	\$ 2,245,000
Nepal	\$ 10,225,000

Papua New Guinea	\$	5,095,000
Philippines	\$	13,170,000
Tajikistan	\$	3,900,000
Thailand	\$	12,830,000
Total	\$	116,705,000

**Table 2: Congressional Directive Controls, C&T**

	Appropriation Year	
	FY23	TOTAL
Asia Region	\$ 600,000	\$ 600,000
Burma	\$ 5,000,000	\$ 5,000,000
Cambodia	\$ 500,000	\$ 500,000
India	\$ 9,000,000	\$ 9,000,000
Indonesia	\$ 6,700,000	\$ 6,700,000
Kazakhstan	\$ 750,000	\$ 750,000
Kyrgyzstan	\$ 1,200,000	\$ 1,200,000
Laos	\$ 550,000	\$ 550,000
Nepal	\$ 4,700,000	\$ 4,700,000
Papua New Guinea	\$ 1,600,000	\$ 1,600,000
Philippines	\$ 4,200,000	\$ 4,200,000
Tajikistan	\$ 1,300,000	\$ 1,300,000
Thailand	\$ 3,900,000	\$ 3,900,000

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

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

**Table 2: Congressional Directive Controls, OVC**

	Appropriation Year	
	FY23	TOTAL
India	\$ 2,200,000	\$ 2,200,000

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

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

**Table 3A: Programmatic/Initiative Controls, Asia Region**

	Bilateral	Central	TOTAL
Total Funding	\$ 4,870,000	\$ -	\$ 4,870,000
Core Program	\$ 4,870,000	\$ -	\$ 4,870,000

**Table 3B: Programmatic/Initiative Controls, Burma**

	Bilateral	Central	TOTAL
Total Funding	\$ 14,910,000	\$ -	\$ 14,910,000
Core Program	\$ 14,910,000	\$ -	\$ 14,910,000

**Table 3C: Programmatic/Initiative Controls, Cambodia**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 6,530,000	\$ -	\$ 6,530,000
Core Program	\$ 6,530,000	\$ -	\$ 6,530,000

**Table 3D: Programmatic/Initiative Controls, India**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 24,360,000	\$ -	\$ 24,360,000
Core Program	\$ 22,573,342	\$ -	\$ 22,573,342
OVC (Non-DREAMS)	\$ 1,786,658	\$ -	\$ 1,786,658

**Table 3E: Programmatic/Initiative Controls, Indonesia**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 10,815,000	\$ -	\$ 10,815,000
Core Program	\$ 10,815,000	\$ -	\$ 10,815,000

**Table 3F: Programmatic/Initiative Controls, Kazakhstan**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 3,410,000	\$ -	\$ 3,410,000
Core Program	\$ 3,410,000	\$ -	\$ 3,410,000

**Table 3G: Programmatic/Initiative Controls, Kyrgyzstan**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 4,345,000	\$ -	\$ 4,345,000
Core Program	\$ 4,045,000	\$ -	\$ 4,045,000
KP Survey	\$ 300,000	\$ -	\$ 300,000

Includes \$300,000 for a CDC KP Survey.

**Table 3H: Programmatic/Initiative Controls, Laos**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 2,245,000	\$ -	\$ 2,245,000
Core Program	\$ 2,245,000	\$ -	\$ 2,245,000

**Table 3I: Programmatic/Initiative Controls, Nepal**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 10,225,000	\$ -	\$ 10,225,000
Core Program	\$ 9,925,000	\$ -	\$ 9,925,000
KP Survey	\$ 300,000	\$ -	\$ 300,000

Includes \$300,000 for a USAID KP Survey.

**Table 3J: Programmatic/Initiative Controls, Papua New Guinea**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 5,095,000	\$ -	\$ 5,095,000
Core Program	\$ 4,395,000	\$ -	\$ 4,395,000
KP Survey	\$ 700,000	\$ -	\$ 700,000

Includes \$700,000 for a USAID KP Survey.

**Table 3K: Programmatic/Initiative Controls, Philippines**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 13,170,000	\$ -	\$ 13,170,000
Core Program	\$ 13,170,000	\$ -	\$ 13,170,000

**Table 3L: Programmatic/Initiative Controls, Tajikistan**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 3,900,000	\$ -	\$ 3,900,000
Core Program	\$ 3,900,000	\$ -	\$ 3,900,000

**Table 3M: Programmatic/Initiative Controls, Thailand**

	Bilateral	Central	TOTAL
<b>Total Funding</b>	\$ 12,830,000	\$ -	\$ 12,830,000
Core Program	\$ 12,830,000	\$ -	\$ 12,830,000

As in previous years, OUs may request limited changes to these controls working with their Chair/PPM and Management and Budget, who will work with S/GAC leadership. Details of the control change request parameters and process will be distributed prior to the co-planning meetings.

Please note that within the next few days our S/GAC Chairs and PEPFAR Program Managers (PPMs), working closely with our headquarters support teams, will review this planning letter and details contained herein, with your wider PEPFAR country team.

Once again, thank you for your continued leadership and engagement during the COP/ROP23 process.

Sincerely,

John Nkengasong

CC: S/GAC – Erin Eckstein, Co-Chair  
S/GAC – Sarah Dominis, Co-Chair  
S/GAC – Nicole Espy, PEPFAR Program Manager  
S/GAC – Kashmira Kale, PEPFAR Program Manager  
S/GAC - Irum Zaidi, Deputy Coordinator  
S/GAC - Mamadi Yilla, Acting Principal Deputy Coordinator