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# Users Guide to USAID/Washington Health Programs

Fiscal Year 2015

June 2015



# **Users Guide to USAID/Washington Health Programs**

*June 2015*

This document was produced for the Bureau for Global Health of the United States Agency for International Development (USAID) by CAMRIS International under the Global Health Support Initiative II (Contract No. AID-OAA-C-10-00049).



# User Information

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## **Locating the Electronic Copy of the Users Guide**

This guide is also available on the USAID website at the GH homepage.

Many of the most recent updates to the information in this guide can be found on the GH homepage.

## **Who to Contact for Additional Information on the Users Guide:**

Please contact Clairmont Austin (caustin@usaid.gov) in the Bureau for Global Health for additional information on the Users Guide.

## **Accessing the Services in the Global Health Programs**

This Users Guide includes the preferred method for USAID operating units to access the awards described in the Project Directory.

Most projects that show “Field Support” as the preferred method of access may also be accessed using Operating Year Budget (OYB) transfers. This alternate method generally is available to provide additional, flexible ways that accommodate unique or unusual Mission circumstances. For further information about these alternatives, kindly contact the respective project COR/AORs.

Two types of awards that are especially designed for field mission use are Indefinite Quantity Contracts (IQC) and Leader with Associates Cooperative Agreements (LWA). Both methods are designed to provide quick and simple access to technical services in health by providing an “umbrella” of pre-selected sets of contractors or recipients of cooperating agreements. Under both mechanisms, missions initiate and manage the awards. Missions should contact the project COR/AORs for assistance in initiating task orders under IQCs or for negotiating associate awards under LWAs. For general information on IQCs and LWAs, please visit the Global Health intranet section for field missions.

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# Introduction to the Bureau for Global Health

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*Bethanne Moskov, Deputy Director*

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*Kendra Phillips, Deputy Director*

*Lin Liu, Deputy Director*

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## Global Health Offices and Functions

The Bureau for Global Health (GH) staff manages an array of technical projects, providing technical support to USAID missions and field programs, garnering support for our programs with stakeholders, and nurturing and galvanizing stronger partnerships with the development community. This global leadership is influencing the worldwide health agenda, increasing the likelihood of successful health programs, encouraging the wider global community to adopt new technologies and approaches, and to pursuing USAID priorities and goals.

### **Office of the Assistant Administrator (AA/GH)**

*Assistant Administrator: Ariel Pablos-Méndez*

*Senior Deputy Assistant Administrator: Wade Warren*

*Deputy Assistant Administrator: Jennifer Adams*

*Deputy Assistant Administrator: Katherine Taylor*

*U.S. Global Malaria Coordinator: Timothy Ziemer*

The Office of the Assistant Administrator provides oversight to GH and leadership for the Global Health Initiative (GHI), creating support for GHI, and helping to mainstream GHI principles into all GH activities and programs. The Office has ultimate responsibility for the quality of GH's programs and the capacity of its workforce. It provides leadership on the design, implementation, review, coordination, and evaluation of GH initiatives, programs, and activities. The Office, through the Center for Accelerating Innovation and Impact (CII), is the focal point for accelerating the introduction and scale up of innovative GH interventions. In addition, the Office promotes coordination between U.S. government agencies and departments providing assistance to vulnerable children in low- and middle-income countries.

### **Center for Accelerating Innovation and Impact (CAII)**

*Director: Wendy Taylor*

The Center for Accelerating Innovation and Impact (CII) promotes and reinforces the application of innovative, business-minded approaches to address key bottlenecks in the development, introduction, and scale-up of global health technologies and interventions; thereby accelerating impact against some of the world's most important health challenges. CII engages luminaries across sectors to identify best practices and push the boundaries of current thinking; catalyzes transformational innovation and partnerships; and applies cutting-edge market tools and practices to support the rapid introduction of, access to, and uptake of priority health innovations.

### **Office of Health Systems (OHS)**

*Director: Karen Cavanaugh*

Strengthening health systems is critical to enabling countries to effectively address the complex health challenges they face in an evidence-based and sustainable way. In September 2012, USAID's Global Health Bureau established the Office of Health Systems (OHS) as USAID's center of excellence and focal point to provide worldwide leadership and technical expertise in health systems strengthening (HSS). OHS retains a team of multi-disciplinary experts across all areas of HSS, including financing, governance, human resources for health, quality improvement, pharmaceutical systems and information management. This team

leads USAID's health systems work and supports USAID's field programs through technical assistance to missions and through four large global HSS projects. The Bureau for Global Health has formed a new Office of Health Systems. The Office of Health Systems increases the visibility and consistency of the long-standing work to help developing countries strengthen their health systems to improve health outcomes. OHS provides a critical mass of multi-disciplinary health systems expertise to lead USAID's health systems work and support its colleagues in the field.

### **Office of Health, Infectious Diseases and Nutrition (GH/HIDN)**

*Director: Elizabeth Fox*

*Deputy Director: Kelly Saldaña*

*Deputy Director: Bethanne Moskov*

The Office of Health, Infectious Diseases, and Nutrition (HIDN) manages GH's activities in child survival health, maternal health, and infectious diseases, which include tuberculosis, malaria, global health security and development, neglected tropical diseases, water and sanitation, and provides technical leadership in each of these areas.

**Infectious Diseases Division (GH/HIDN/ID)** is responsible for technical leadership and direction in tuberculosis (TB) and neglected tropical disease (NTD) issues. The TB team works to provide support through prevention and care programs in 23 countries by accelerating detection and treatment of TB for all people, scaling-up TB/HIV integration, expanding prevention and treatment of multi-drug resistant (MDR) TB, and overall strengthening of health care systems. The NTD Team collaborates with a range of partners to support 25 host country governments to implement nation-wide programs towards the prevention, and the control/elimination of seven neglected diseases through the effective delivery of cost-effective treatments.

**Maternal and Child Health Division (GH/HIDN/MCH)** provides technical and policy leadership in maternal, newborn, and child health, as well as environmental health, in support of the Agency priority of Ending Preventable Child and Maternal Deaths (EPCMD). MCH staff focus on maternal and newborn health immunization, including support to Gavi, the Vaccine Alliance and work on polio eradication; and the prevention and treatment of pneumonia and diarrhea. The MCH environmental health team focuses on safe water, sanitation, and hygiene to support not only EPCMD but also USAID's Water and Development Strategy, with a strong emphasis on behavior and household-level interventions, as well as the systems which support these.

**Nutrition Division (GH/HIDN/NUT)** is responsible for technical leadership and direction to implement USAID's Multi-sectoral Nutrition Strategy 2014-2025. Nutrition experts on the team focus on maternal, newborn, infant and young child nutrition, micronutrient supplementation, food fortification, and innovative approaches to improve nutritional status and diet quality for sustainable nutrition and food security programming. The division includes Health Research and Technology activities, where HIDN's premier implementation science portfolio is managed, and the Community Health Systems activities, which expand maternal and child health and nutrition services beyond health facilities through sustainable community systems.

**Malaria Division (GH/HIDN/MAL)** has primary responsibility for leading the planning and implementation of the President's Malaria Initiative (PMI), including supporting the US Global Malaria Coordinator's worldwide leadership efforts and ensuring the technical integrity of USG malaria

programming. MAL provides technical advice and management support to PMI focus and non-focus country programs on prevention and control of malaria in 22 countries in Africa and two regional programs in Southeast Asia and South America. MAL has primary responsibility for providing global technical leadership for malaria, manages numerous research and malaria field support programs, and is responsible for the Agency/USG monitoring, evaluation and reporting on results and impact of PMI programs

**GH Security and Development Unit's GH/HIDN/GHSD** goal is to minimize the global impact of existing pandemic influenza threats, e.g., Ebola, and pre-empt the emergence and spread of future pandemic threats. In partnership with the U.N. Food and Agricultural Organization (FAO), the World Health Organization (WHO), the U.S. Centers for Disease Control and Prevention (CDC) and government and non-government counterparts, USAID has strengthened the capacities in countries for monitoring the spread of H5N1 avian influenza to mount a rapid and effective containment of the virus, and to assist countries' operational capacities to mount a comprehensive response in the event a pandemic-capable virus emerges. With technical assistance from the CDC, the EPT Program draws on expertise from across the animal and human health sectors to build regional, national, and local "One Health" capacities for early disease detection, laboratory-based disease diagnosis, rapid response and containment, and risk reduction.

### **Office of HIV/AIDS (GH/OHA)**

*Director: David Stanton*

*Deputy Director: Kendra Phillips*

*Deputy Director: Lin Liu*

The Office of HIV/AIDS (OHA) is the focus of HIV/AIDS technical leadership for the Agency and has primary responsibility for leading the Agency's efforts within the President's Emergency Plan for AIDS Relief (PEPFAR). In cooperation with the State Department Office of the Global AIDS Coordinator (OGAC), this responsibility entails ensuring the technical integrity of Agency and mission strategies; providing global technical leadership on the full range of issues related to HIV/AIDS prevention, care, and treatment; managing numerous research and field support programs; and monitoring and reporting on the impact of the Agency's HIV/AIDS program.

**Technical Leadership and Research Division (GH/OHA/TLR)** provides technical advice and support across the Agency and field missions and has primary responsibility for HIV/AIDS operational and biomedical research in areas relevant to PEPFAR goals and objectives.

**Implementation Support Division (GH/OHA/IS)** focuses on the provision of assistance to accelerate and scale-up HIV/AIDS programs in the field, with particular focus on orphans and vulnerable children, private sector engagement, and country ownership.

**Strategic Planning, Evaluation, and Reporting Division (GH/OHA/SPER)** provides programmatic expertise to help the Agency and its Missions develop programs that respond to USG, USAID, and Congressional policy and budget priorities; and incorporates innovations, best practices, and lessons learned in health systems strengthening, monitoring, and evaluation; and multilateral coordination.

**Supply Chain Management Division (GH/OHA/SCMS)** helps strengthen existing supply chains or establish new ones to ensure a safe, secure, reliable, and sustainable supply chain management system to procure pharmaceuticals and other products for people with HIV/AIDS and related infections.

### **Office of Population and Reproductive Health (GH/PRH)**

*Director: Ellen Starbird*

*Deputy Director: Aly Cameron*

*Deputy Director: vacant*

The Office of Population and Reproductive Health (PRH) provides strategic direction, technical leadership and support to field programs in population, voluntary family planning, and reproductive health. It manages programs that advance and apply state-of-the-art technologies, expand access to quality services, promote healthy behaviors, broaden contraceptive availability and choices, strengthen policies and systems to address family planning and reproductive health needs, and improve data collection and use.

**Commodities Security and Logistics Division (GH/PRH/CSL)** promotes the long-term availability of a range of high-quality contraceptives, condoms and other essential reproductive health supplies, and strengthens global and country systems from manufacturer to service sites.

**Policy, Evaluation, and Communication Division (GH/PRH/PEC)** creates the enabling environment for sexual and reproductive health. PEC works with partners within USAID and externally to:

- Promote effective sexual and reproductive health advocacy, policy, financing, and governance;
- Collect, analyze, and evaluate data for evidence-based decision making; and
- Develop and implement communication efforts to influence attitudes, norms, and behaviors of beneficiaries and providers.

**Research, Technology, and Utilization Division (GH/PRH/RTU)** provides technical leadership in building scientific and empirical knowledge, and ensures its use in the design and implementation of effective, efficient, high-quality family planning and reproductive health programs.

**Service Delivery Improvement Division (GH/PRH/SDI)** improves access to and quality of reproductive health and family planning services and information in USAID supported countries. SDI provides leadership in developing and applying innovative strategies and best practices that improve the performance of individuals, organizations, and systems for the sustainable delivery of quality family planning at scale.

### **Office of Professional Development and Management Support (GH/PDMS)**

*Director: Sharon Carney*

The Office of Professional Development and Management Support (PDMS) is responsible for three functional areas in the Bureau for Global Health: professional and organizational development, personnel, and administrative support.

**Professional Development Team (GH/PDMS)** manages professional and organizational development activities and training, which include the PHuNdamentals Course, eLearning, and State of the Art (SOTA) workshops for Washington and overseas Agency staff, and manages the Global Health

## Introduction to Global Health Bureau

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Professional and Organizational Development Program (GH-POD).

**Personnel Team (GH/PDMS)** maintains the Bureau manage-to-budget records; assists Bureau managers in developing workforce analyses and plans, position descriptions, and statements of work (SOWs); coordinates the annual evaluation processes and Awards programs for the Bureau; processes recruitment requests and selection approvals through SDAA/GH; coordinates with the Office of Human Resources (OHR), with the Office of Acquisition and Assistance (OAA), and directly with Institutional Contractors of GH/PDMS to provide for both direct and non-direct hire staff for the GH Bureau, other Washington bureaus and offices, and overseas missions; and chairs the GH Personnel Working Group with representation from each GH Bureau Office.

**Administrative Support Team (GH/PDMS)** manages the GH Operating Expense budget, in collaboration with GH/OPPP/Controller, and associated procurement activities. It also provides all logistic and systems support to Bureau staff, including space planning and assignments; network, remote, and telephone access; equipment and supplies; interface with the Office of Security (SEC) for security clearances and badges; and maintenance of Vital Records, Emergency Contact Information, Continuity of Operations Planning (COOP) and Emergency Procedures.

### **Office of Policy, Programs, and Planning (OPPP)**

*Director: Michael Zeilinger*

The Office of Policy, Programs, and Planning (OPPP) has primary responsibility for GH's strategic planning, budgeting, programming, and procurement functions. OPPP provides leadership, guidance, and support for overall strategic direction, resource allocation, and procurement planning. It supports efforts to monitor and promote the effectiveness of programs and the achievement of GH objectives and is integrally involved in performance monitoring and program evaluation. Additionally, OPPP houses the team that takes the lead in GH donor coordination activities.

**Strategy, Analysis, Evaluation, and Outreach Division (GH/OPPP/SAEO)** undertakes strategic planning, which includes overall sector and program planning, policy, monitoring and evaluation, and services to coordinate such activities within GH and with other units within the Agency. SAEO serves as the primary GH resource for USAID evaluation policies and practices; oversees implementation of the GH evaluation plan, and analyzes and disseminates evaluation findings, conclusions, recommendations, and best practices as appropriate. SAEO leads GH in liaising with, coordination of, and communication with bilateral donors, other U.S. Government agencies and foundations, and provides Bureau-wide communications and knowledge management services.

**Program Implementation and Budget Management Division (GH/OPPP/PIBM)** is responsible for providing programmatic support to GH technical office staff, from activity design through implementation. It also takes the lead in procurement planning, monitoring, and tracking of all procurement actions. PIBM staff prepares and monitors GH's budgets, which includes the management of GH program and operating expenses, operating year budget, and the monitoring of GH's pipeline.

### **Office Of Country Support (OCS)**

*Director: Bradley Cronk*

The Office of Country Support (OCS) is GH's front line to provide broad, strategic assistance and support to missions. With changing initiatives and priorities, OCS facilitates communication between missions and

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headquarters to manage Agency and field challenges. As a critical nexus, OCS interfaces with missions, GH technical offices, regional bureaus, and other pillar bureaus to ensure coordinated strategic and programmatic assistance to countries. OCS leads the Global Health Country Team System, drawing on GH staff expertise across offices, fostering country support from a “whole of health” program perspective.

# Project Listing

*Bureau for Global Health*

This section of the Users' Guide includes descriptions of three kinds of activities:

1. Contracts and cooperative agreements that have an explicit mandate to address technical needs that cut across Global Health and mission health Strategic Objectives, such as data collection, monitoring and evaluation, and communication for behavior change.
2. Mechanisms to access non-direct hire technical and administrative personnel.
3. Mechanisms that provide systems support, such as database management, indicator tracking, and report preparation.

Some of these activities are managed by inter-office teams from the Bureau for Global Health's three technical offices. Others are managed within the Office of Professional Development and Management Support and the Office of Strategic Planning, Budgeting, and Operations on behalf of the Bureau for Global Health as a whole.

# **Bureau-wide Projects**

*Bureau for Global Health*

## Knowledge Management Services II (KMS II)

**Agreement Type:**  
Contract

**Agreement Number:**  
OAA-M-14-00011

**Project Number:**  
936-9100

**Duration:**  
9/14 - 9/19

**Geographic Scope:**  
Worldwide

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### Purpose

The purpose of the KMS II task order is to provide Knowledge Management Services that enhance USAID capacity to manage and evaluate its programs, and to demonstrate and to document the importance and impact of its global health portfolio.

The Task Order has two main functional areas:

1) Data Analysis, Management, and Reporting; Information Dissemination; and Evaluation Planning and Analysis: analysis of health program and financial data and the production of related reports to support senior-management decisions and investments, to comply with Congressional reporting requests and requirements, to inform external audiences of USAID health programs, and to provide support in designing complex program and impact evaluations.

2) Systems Development, Operation, and Maintenance: maintenance of existing data bases and other IT-based resources including the Global Health Bureau's content on internet and intranet sites, the development of new systems and/or data bases, the introduction and application of new IT tools, and the promotion of practices to provide better access to and sharing of information and knowledge to help guide the design and management of USAID health programs.

### Services Provided

KMS II provides services to all offices of the Bureau for Global Health and is able to accept funds from all GH Elements and all GHCS funds from other USAID operating units. This activity can also accept non-health funding for support to a range of services in conjunction with Health programs. Services include:

- Use of a broad range of data sources and advanced analytic methods to ensure accurate, robust analyses;
- Systematic examination of links between health indicators and socioeconomic and governance data that help explain indicator trends and identify program gaps;
- Information system designs that allow for the integration and accessibility of information sources;
- Information dissemination products, such as "Success Stories" and Best Practices" that incorporate analysis results;
- Educational and public information functions such as conferences and briefings

### Means of Access

Core

# Global Health Program Cycle Improvement Project (GH Pro)

## Purpose

The GH Pro contract provides USAID operating units working on health-related activities in headquarters and the field with the short- and medium-term technical services. It is a follow-on contract to the 5-year GH Tech Project and GH Tech Bridge contracts I-V. For more information please visit our USAID Google Site: <https://sites.google.com/a/usaaid.gov/gh-pro/>

## Services Provided

GH Pro provides consultants with expertise pertaining to the following five health components:

1. Program and project evaluation  
This component provides high quality, transparent, independent, and collaborative assessment, design, and evaluation services in compliance with the USAID Evaluation Policy and ADS 203. The contractor will implement both performance evaluations and impact evaluations.
2. Technical assistance  
This component provides individual and team experts for strategic planning and project design, and technical assistance support in specific areas including monitoring, coordination, and assessment within the GH Bureau, Regional Bureaus, missions, and other operating units.
3. GH program and research management  
This component provides technical support primarily to the GH Bureau to augment staff member capacity in specialized fields to design and implement technical and research programs and strategies, carry-out policy analysis and develop, coordinate with USAID partners, and engage USAID Missions in program development in-country.
4. Mission support  
This component provides managerial and technical support for short-term and medium term assignments to fill gaps from temporary absences and provide surge capacity as required by USAID Missions.
5. Logistical support for meetings/conferences  
This component provides assistance to the GH bureau, regional bureaus, missions, and other parts of the agency in the planning, organizing, implementing, and documenting of health-related meetings, conferences, workshops, and other events.

## Means of Access

Core, Field Support

**Agreement Type:**  
Contract  
**Agreement Number:**  
OAA-C-14-00067  
**Project Number:**  
936-3098a.19  
**Duration:**  
7/14 - 7/19  
**Geographic Scope:**  
Worldwide

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# Technical Assistance Support Contract 4, Information and Communication Technology for Health (TASC4 ICT)

**Agreement Type:**  
IDIQ  
**Agreement Number:**  
Multiple  
**Project Number:**  
936-3106  
**Duration:**  
5/14 - 5/19  
**Geographic Scope:**  
Worldwide

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The prime partners are:  
Dimagi, Inc  
Encompass, LLC  
FEi Systems  
Links Media, LLC

## Purpose

TASC4 ICT provides USAID missions and bureaus with an opportunity to acquire highly customized sets of skills to support the planning, development and application of relevant and sustainable technology for strengthening information systems within the health sector. It may also provide missions and bureaus with technical assistance in delivering effective solutions for health communication and social mobilization, including behavior change communication and public/media relations that support various health activities.

## Services Provided

TASC4 ICT provides service in the following areas:

- Computer Systems Design Services
- Data Management Services
- IT Infrastructure Management Services
- Health Communication Services
- Organizational Development and Change Management Support Service

Information on USAID Intranet:

- USAID Google Site: url below or search 'Health ICT' on Google Site. <https://sites.google.com/a/usaid.gov/tasc4-information-and-communication-technology-for-health/>
- My.USAID.gov: Find us on the new my.usaid.gov intranet by searching for 'Health ICT'.

## Means of Access

Task Orders (Core and Field Funds)

# Global Health Professional and Organizational Development (GHPOD)

## Purpose

The GHPOD program is focused on improving the effectiveness of USAID's health sector by developing and increasing capacity of its health professionals through high quality professional and organizational development services worldwide. GHPOD provides a variety of PD and OD activities that focus on technical, management, leadership, and personal and effectiveness. The prime contractor is Social Impact with sub-contractors Deloitte and Management Systems International (MSI). GHPOD is a base-year plus two option years Task Order under the Transparency, Accountability, and Performance (TAP) Indefinite Quantity Contract (IQC) (No. AID-OAA-10-00013).

## Services Provided

The program offers a broad range of tailored organizational and professional development assistance through training, teambuilding, strategic planning, and meeting facilitation. Services available through PDMS and GHPOD include:

- Management and leadership training for improved delegation, influencing, financial & project management, meeting management, leadership, and collaboration within alliances and initiatives.
- Personal effectiveness training in learning to use Myers Briggs Type Indicator (MBTI), emotional intelligence, managing change, and presentation skills.
- Orientation sessions providing new staff overviews of the global health sector, help in setting goals and individual development plans, as well as opportunities to learn from more experienced staff.
- Technical conferences, workshops, and other activities to support technical excellence and learning in key elements of the health sector.
- Team and organizational development retreats that focus on organizational structure, workforce analysis, work planning, improved communication or management practices, program redirection and strategy development.
- Performance management assessments, training, and systems to assist supervisors and staff in effective management of staff performance with and engagement of local partners in health programs.
- Professional leadership and management coaching to support skill acquisition for staff in need of personalized management support.

## Means of Access

Field Support, Core and OE

**Agreement Type:**  
Task Order  
**Agreement Number:**  
OAA-TO-12-00030  
**Project Number:**  
936-3105.12  
**Duration:**  
8/12 - 8/15  
**Geographic Scope:**  
Worldwide

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## Global Health Fellows Program II (GHFP-II)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-11-00025

**Project Number:**  
936-3105.10

**Duration:**  
10/11 - 9/16

**Geographic Scope:**  
Worldwide

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### Purpose

GHFP-II, led by the Public Health Institute (PHI), helps USAID address its immediate and emerging human capital needs by developing a diverse group of global health professionals to support and sustain the effectiveness of the Agency's current and future health programs. This cadre of global health talent is motivated, technically excellent, well-supported, representative of the diversity of the American people, and committed to contributing to USAID's success in key global health priority areas.

### Services Provided

The GHFP-II team identifies, recruits, hires and manages the performance and professional development of fellows and interns at all levels in areas such as maternal and child health, malaria, avian influenza and other emerging threats, HIV/AIDS, TB, family planning, and reproductive health, and other public health disciplines. Fellowships are generally limited to two years with the option to extend for an additional two years.

In the U.S., placements can occur in Washington DC, USAID Bureaus, other federal agencies, and USAID partner organizations. Outside the US, placements can occur in Missions, Ministries, NGOs, and USAID partner country offices. Innovations include rotations, Foreign Service National exchanges and professional development, and supporting new types of participants such as short-term, private sector fellowships (with GHFP-II partner CDS Solutions). Non-traditional participants and placements at a variety of sites provide added value in accomplishing the strategic objectives of the Agency and participating NGOs/PVOs/CBOs. Internships include a cohort summer program based in Washington DC, international placements and internships on-demand and upon-request.

GHFP-II provides advisory services to onsite managers who oversee fellows and interns to encourage efficient and effective oversight of fellows and interns. GHFP-II partner, Management Systems International (MSI), helps support an integrated performance-oriented approach to the fellows' professional development, setting their experience into a larger career strategy. Services include coaching and an active alumni program.

### Means of Access

Core, Field Support and OE

# Global Health Support Initiative-II (GHSI-II)

## Purpose

This is a USAID Direct Institutional Administrative Support Services Contract that provides human resource-based support services to USAID's health programs worldwide. Persons hired under this contract will be mid-career or senior professionals in technical areas, with support staff, and will supplement USAID's cadre of health professionals.

## Services Provided

Persons hired under this contract may serve in the Bureau for Global Health, Regional Bureaus in Washington, D.C., or in field missions around the world (excluding support staff), and they will complement USAID's cadre of health professionals in technical and professional specialties. Their duties will focus on supplementing health programs with their specific skills and experience. These professionals will be expected to contribute to Agency technical leadership in the health sector.

Specific goals that they are expected to embrace include:

- Improving global health, including child, maternal and reproductive health;
- Reducing disease, especially HIV/AIDS, malaria, tuberculosis, and polio; and
- Increasing access to improved drinking water and sanitation services.

## Means of Access

Field Support

### Agreement Type:

Contract

### Agreement Number:

OAA-C-10-00049

### Project Number:

936-3105.06

### Duration:

6/10 - 12/15

### Geographic Scope:

Worldwide

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# MEASURE Evaluation Phase IV

**Agreement Type:**

Leader with Associates  
Cooperative Agreement

**Agreement Number:**

OAA-L-14-00004

**Project Number:**

936-8300.01

**Duration:**

7/14 - 6/19

**Geographic Scope:**

Worldwide

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**Purpose**

The Monitoring and Evaluation to Assess and Use Results (MEASURE) Evaluation Phase IV is a five-year Leader with Associates Cooperative Agreement with a ceiling of \$180 million. The project builds on the decades-long effort supported by the Global Health Bureau to improve monitoring and evaluation (M&E) in the health sector. The objective of the MEASURE Evaluation Phase IV project is to enable countries to strengthen their systems to generate high quality health information that is used for decision-making at local, national and global levels. Progress toward this objective will contribute to improving health programs and policies, which ultimately will impact health outcomes.

The project will achieve this objective by concentrating on four results:

1. Strengthened collection, analysis and use of routine health data;
2. Improved country-level capacity to manage health information systems (HIS), resources and staff;
3. Methods, tools and approaches improved and applied to address health information challenges and gaps;
4. Increased capacity for rigorous evaluation.

**Services Provided**

MEASURE Evaluation Phase IV follows MEASURE Evaluation Phase III, which ended August, 2014. As was the case with Phase III, this is a GH Bureau-wide project and will cover measurement issues related to the full range of health issues. In this phase of the project, an increased emphasis will be placed on strengthening the collection, analysis and use of routine health information and on increasing local capacity for implementation of rigorous evaluation (including impact evaluation). MEASURE Evaluation Phase IV is not intended for the implementation of performance evaluation. The work of MEASURE Evaluation Phase IV incorporates the principle of sustainability into each results area and will strive to promote country ownership and to build capacity in host country institutions.

**Means of Access**

Field Support. Separate Associate Awards can be negotiated with the recipient of the Leader Award and with AOTR duties carried out by the requesting USAID/Washington Bureaus or Field Missions.

\*Sub-partners include: Futures Group, ICF International, John Snow Incorporated, Management Sciences for Health, and Tulane University School of Public Health and Tropical Medicine

# The Demographic and Health Surveys Program (DHS-7)

## Purpose

To improve the collection, analysis and presentation of population, health and nutrition data, and to facilitate use of these data in planning, policymaking, and program management. The project seeks to increase understanding of a wide range of health issues by improving the quality and availability of data on health status and services and enhancing the ability of local organizations to collect, analyze and disseminate such information. This phase will emphasize sustainability through capacity building and increased host-country ownership; as well as synthesis, analysis and triangulation of data.

## Services Provided

The DHS Program is USAID's major source of nationally representative and cross-nationally comparable population, health, and nutrition data. It addresses host country and global data needs to guide policies and programs. The Program provides technical assistance to local partners for implementing the following surveys:

- Standard Demographic and Health Survey (DHS), which is typically conducted at intervals of four to five years;
- AIDS Indicators Survey (AIS), which collects data for monitoring and evaluating HIV/AIDS programs;
- Malaria Indicator Survey (MIS), which collects data used for monitoring the performance of malaria programs;
- Service Provision Assessment (SPA), a facility-based survey that collects data on facilities' readiness to provide essential health services and quality of services.

The DHS Program also provides technical assistance for biomarker data collection to measure a range of conditions, including infectious and sexually transmitted diseases, chronic illnesses such as diabetes, micronutrient deficiencies, and exposure to environmental toxins.

Compared to previous iterations of the contract, The DHS Program will emphasize:

- Capacity strengthening across the survey continuum, including sampling, data processing, and data analysis;
- Deeper analyses utilizing DHS data in conjunction with other data sources or novel methodologies;
- Expansion of new technologies to facilitate data collection and use..

## Means of Access

Field Support

**Agreement Type:**  
Contract  
**Agreement Number:**  
OAA-C-13-00095  
**Project Number:**  
936-3083.15  
**Duration:**  
9/13 - 9/18  
**Geographic Scope:**  
Worldwide

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# World Health Organization Consolidated Grant

**Agreement Type:**  
Grant  
**Agreement Number:**  
GHA-G-00-09-00003  
**Project Number:**  
936-3100.51  
**Duration:**  
9/09 - 9/16  
**Geographic Scope:**  
Worldwide

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## Purpose

This grant provides support for collaborative activities with USAID and the World Health Organization (WHO) in a wide range of health-related activities, including infectious diseases, maternal and child health, family planning, safe motherhood, newborn health, reproductive health, environmental health, and HIV/AIDS.

## Services Provided

The consolidated grant to WHO consolidates most of the Bureau for Global Health's agreements with WHO under one mechanism. The grant supports broad USAID-WHO collaboration at WHO headquarters in Geneva as well as at regional and country offices, in tuberculosis, malaria and other vector borne diseases (e.g., dengue), disease surveillance, research, antimicrobial resistance, maternal and child health, family planning and reproductive health, and HIV/AIDS. This grant replaces the former Umbrella Grant (AAG-G-00-99-00005).

Specifically, support is provided to WHO's relevant technical and program divisions for technical input and assistance in the development, implementation and/or evaluation of health programs and studies including:

- Global strategy development
- Technical analyses
- Demonstration activities and feasibility studies
- Capacity building
- Policy reform
- Health Systems Strengthening
- Project evaluation and assessments
- Monitoring and evaluation
- Education/information strategies
- Maternal and neonatal health
- Infectious diseases
- Pandemic Influenza and other emerging threats
- Family Planning and Reproductive Health
- Implementing Best Practices in Family Planning
- Medical Eligibility Criteria (MEC)

Proposed programs should include a 13 percent program support fee and an environmental screening fee of \$2,500 per proposal.

## Means of Access

Field Support

# Technical Assistance Support Contract 4, Africa (TASC4 AFRICA)

## Purpose

The purpose of TASC4-Africa is to contribute to improvements in the health of people, especially women, children and other vulnerable populations in countries in the developing world, through expansion of basic health services, including family planning, strengthening national health systems, and addressing global issues. Depending on their scope, task order (TO) awards under TASC4-Africa will contribute to one or more of the nine global health program elements of the Investing in People program area.

## Services Provided

As it contributes to the overall outcome of EPCMD and achieving an AIDS-free generation, TASC4- Africa will:

- Engage in long-term, in country coordination and implementation of population, health, nutrition, and infectious disease activities;
- Provide short-term technical consultations and program implementation support;
- Disseminate information through seminars, workshops, conferences, and working papers;
- Increase capacity of host-country decision makers and technical personnel to design and implement population, health nutrition, and infectious disease interventions;
- Augment technical and programmatic capacity available to USAID/Washington and Missions;
- Conduct and/or oversee implementation of operations, applied research and development activities.

## Means of Access

Direct Task Order, Field Support. Task orders with a total estimated cost of \$1 million or less will be set-aside for small businesses. All task orders are expected to embody USAID Forward principles by placing a greater emphasis on innovation, encouraging new partnerships (especially local partnerships).

### Agreement Type:

IDIQ

### Agreement Number:

Multiple

### Project Number:

936-3106

### Duration:

6/14 - 6/19

### Geographic Scope:

Africa

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Cardno Emerging Markets

Chemomics

Encompass (S)

FHI 360

Futures Group

Initiatives Inc. (S)

IntraHealth International

John Snow Inc.

Midigo Inc. (S)

Management Sciences for

Health

Panagora Group (S)

PSI

RTI

University Research Co.,

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# Office of Population and Reproductive Health

*Bureau for Global Health*

Office Director

*Ellen Starbird*

Deputy Director

*Irene Koek*

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*Beverly Johnston, Chief*

Research, Technology & Utilization Division (RTU)

*Mihira Karra, Chief*

Services Delivery Improvement Division (SDI)

*Ann Hirschey, Chief*

# Central Contraceptive Procurement (CCP)

**Agreement Type:**  
Contract  
**Agreement Number:**  
Various  
**Project Number:**  
936-3057  
**Duration:**  
1990 - 2018  
**Geographic Scope:**  
Worldwide

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Female Health Company;  
Unidus Corporation; Innolates  
Sdn. Bhd.; Qingdao Double  
Butterfly Group, Co.;  
Karex Industries Sdn. Bhd.; Thai  
Nippon Rubber Industry Co.,  
LTD; Suretex Limited,  
Merck MSD; Injeflex Industria e  
Comercio Ltda; Pregna Interna-  
tional Ltd.; Cycle Technologies,  
Inc.;UPS and Logenix

**Purpose**

To serve as the central procurement mechanism for missions to purchase high quality contraceptives and condoms.

**Services Provided**

CCP utilizes the field support mechanism for the transfer, obligation, and disbursement of all USAID funds designated for contraceptives, male and female condoms. CCP is currently implemented through the USAID | DELIVER PROJECT Task Order 5 (TO5), to provide procurement, warehousing and freight services. CCP provides a mechanism for independent testing to monitor the quality of products donated to USAID programs. The quality control and testing of products is implemented by FHI360.

Condom availability and use in most countries is inadequate and funding for the procurement of condoms in PEPFAR non-focus countries is often unavailable. To fill this important gap, CCP administers the Commodity Fund (CF). The CF aims to increase condom availability for HIV and AIDS prevention by providing condoms free of charge to non-focus countries.

Additional resources are available for missions and the programs they support who plan to order commodities including USAID Contraceptive and Condom Catalog and Ordering Essential Public Health Supplies: Guidelines for USAID missions and country programs. For more information and to view these publications, please visit our website: [http://www.usaid.gov/our\\_work/global\\_health/pop\\_techareas/contraprocedure.html](http://www.usaid.gov/our_work/global_health/pop_techareas/contraprocedure.html)

\*Contractors may change annually due to competitive contract procedures.

**Means of Access**

Field Support

# DELIVER Project (Deliver II) Task Order 4

## Purpose

DELIVER Task Order 4's objective is to increase the availability of essential health supplies in public and private services through strengthened supply chains and supportive environments for commodity security. Task Order 4 will continue to implement best practices and provide technical services that were offered under the DELIVER Task Order 1, while further aligning its work to support the Global Health Initiative, BEST, and other health initiatives.

## Services Provided

Improve and strengthen in-country supply chains: TO4 supports research, assessments, analyses, supply chain designs, and capacity building to ensure that in-country supply chains are able to meet the basic health commodity requirements of public health programs, and accommodate the growing need for, and influx of, supplies across multiple disease and health areas. Areas of expertise include product selection, forecasting, financing, procurement, quality assurance, distribution, inventory management, storage, logistics management information systems, and disposal. TO4 places renewed focus on end-to-end supply chain strengthening, and addressing key bottlenecks throughout the supply chain, particularly procurement, infrastructure, transport, and last mile distribution.

Strengthen environments for commodity security: To strengthen country environments for commodity security, TO4 focuses on financing and resource mobilization, policies and regulations, market segmentation and market development, and advocacy and leadership. An overarching emphasis is to build local capacities to gather, analyze, and use quality data for decision making. While much of this work will directly focus on in-country environments, TO4 will also collaborate with and support partners at the global and regional levels to strengthen evidence-based global/regional advocacy for commodity security.

Across all technical areas, TO4 will place new or expanded focus on capacity and skills transfer, research and innovation, leveraging partners, and knowledge management and communications.

## Means of Access

Field Support—TO4 accepts funding from all health directives.

**Agreement Type:**

Contract

**Agreement Number:**

OAA-TO-10-00064

**Project Number:**

936-3089.Ad

**Duration:**

9/10 - 9/15

**Geographic Scope:**

Worldwide

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# Global Health Supply Chain- Technical Assistance

**Agreement Type:**

IDIQ

**Agreement Number:**

Multiple

**Project Number:**

REQ-GH-14-000066

**Duration:**

2015 - 2020

**Geographic Scope:**

Worldwide

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## Purpose

These awards aim to strengthen country management of health commodities, providing the full range of technical assistance needed to ensure the long-term availability of health commodities in public and private services worldwide. These awards will serve all health elements (HIV, family planning, malaria, MCH, TB, etc.)

## Services Provided

- Strategic Planning – Provide strategic planning and design assistance.
- In-Country Logistics – Improve delivery of health commodities to service sites (including forecasting, supply planning, procurement TA, warehousing, inventory management, distribution, logistics management information systems, data collection, etc.)
- Capacity-Building – Effective transfer of skills, knowledge, and technology for improved and sustained performance.
- Enabling Environments – Strengthen enabling environments (financing, human resource, policy, governance and leadership) to improve supply chain performance.
- Global Strategic Engagement – Global strategic engagement with partners for planning and implementation. Support global partners to utilize lessons learned and share best practices.
- Advocacy – Continued awareness-raising and advocacy to improve availability of health commodities.
- Coordination – Effective coordination with all USAID funded supply chain activities and within the IDIQ.

## Means of Access

USAID Missions will develop their own country-specific scopes of work and compete them among the four holders. Task orders will then be issued against this mechanism and managed by Mission Contracting Officers and CORs, providing Missions with the ability to customize and closely manage the assistance they receive.

# Health Communication Capacity Collaborative (HC3)

## Purpose

HC3 is the flagship project for behavior change in the Global Health Bureau. It is designed to complement and add value to behavior change activities supported by USAID Missions worldwide by responding to critical needs in technical leadership, capacity strengthening, research, and innovation. It focuses on the technical areas of family planning/reproductive health, HIV/AIDS, malaria, emerging pandemic threats/Ebola, and maternal and child health.

## Services Provided

HC3 will focus on strengthening in-country capacity to implement state-of-the-art health communication, including mass media, community-level activities, interpersonal communication, and new media. The project will provide tailored capacity strengthening to a range of indigenous partners, including governments, NGOs, creative professionals, and academics, with activities to develop individuals, organizations, and national systems. HC3 will also provide technical leadership in health communication that includes professional exchange, analysis of emerging trends, and development and dissemination of technical and operational guidance. The project will be characterized by a strong focus on implementation science, emphasizing rigorous evaluation, documentation, and diffusion of effective practices.

The five core strategies employed by HC3 are:

- Improving and sustaining health communication through a defined capacity improvement cycle based upon current best practices;
- Facilitating increased capacity at the graduate and undergraduate levels among universities in Africa, Asia and elsewhere;
- Supporting collaborative learning, exchange and capacity strengthening through in-person and virtual communities, including the Springboard (<http://www.healthcomspringboard.org/>) and the Health COMpass (<http://www.thehealthcompass.org/>);
- Harnessing new media and igniting innovation to improve behavioral impact; and,
- Building the evidence base for health communication through rigorous research and evaluation.

## Means of Access

Field Support

HC3 Partners: Management Sciences for Health (MSH), NetHope, Ogilvy Public Relations, PSI, and Internews.

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-12-00058  
**Project Number:**  
936-3091.05  
**Duration:**  
09/12 - 09/17  
**Geographic Scope:**  
Worldwide

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# Health, Environment, Livelihood, Population and Security (HELPS) Project

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00010

**Project Number:**  
936-3109.03

**Duration:**  
9/10 - 9/15

**Geographic Scope:**  
Worldwide

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## Purpose

The Woodrow Wilson International Center for Scholars (Wilson Center) HELPS project educates and informs U.S. and developing country decision-makers about the benefit of effective population policies, as well as health programs that link population, health, and the environment in the field, by expanding dialogue and disseminating information on population's multiple links to environment, global health, development, and security.

## Services Provided

The HELPS project synthesizes and disseminates research and practical lessons on the intersections between health, population, environment and security through two major avenues:

- Instigating practical dialogues about population topics and their links to environment, health, development, and security among researchers, implementers, decision-makers and the media at the Wilson Center. HELPS holds events at the Wilson Center's facilities in the Ronald Reagan Building that will showcase new research, compelling case studies, lessons learned, data analysis, and future challenges presented by leaders in the field. Attendees come from the more than 4,000 D.C. area contacts representing a diverse mix of U.S. government agencies, NGOs, policymakers, universities, think tanks, donors and the media.
- Synthesizing and disseminating information, analysis, and lessons learned on linkages between population, health, development, environment, and security issues in multiple formats to relevant policy and practice audiences. The HELPS project produces written publications and audio/visual multimedia and disseminates them to target audiences. Innovative dissemination approaches to reach today's audiences, especially those outside the D.C. area, include using online formats such as websites, blogs, e-newsletters, listservs, podcasts, and videos, as well as social media platforms.

## Means of Access

Field Support

# Health Policy Project (HPP)

## Purpose

HPP will help USG country teams and national counterparts translate the goals of GHI into policies, plans, and actions, and will directly support GHI implementation by strengthening in-country capacity for policy and governance, financing, leadership and advocacy, multisectoral coordination, and use of data for decision-making, and promoting country ownership of programs and initiatives. HPP also will support capacity development to address gender, socioeconomic, and stigma-based inequitable access to health services and to improve measurement of policy impacts on health outcomes.

## Services Provided

Transferring skills to and building systems for the next generation of in-country policy leaders and champions will be the highest priority of HPP. Capacity building under HPP is seen as a process of jointly planned and focused support to identify, improve, and sustain institutional and individual competence and structures for effective policy, advocacy, and governance. HPP offers assistance to:

- Support capacity building for development, costing, financing, and implementation of country-led plans, policies and/or partnership frameworks;
- Strengthen partner country undergraduate, graduate, and continuing professional development programs in policy and governance;
- Conduct regional and in-country trainings and provide technical assistance to develop data use, analysis, and modeling, as well as advocacy and communication, skills; and,
- Create a grants mechanism to fund the implementation and scale-up of locally developed innovations and approaches.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00067

**Project Number:**  
936-3109.01

**Duration:**  
9/10 - 9/15

**Geographic Scope:**  
Worldwide

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## Inform Decision-Makers to Act (IDEA) - ASPEN

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00062

**Project Number:**  
936-3109.04

**Duration:**  
09/10 - 09/15

**Geographic Scope:**  
Worldwide

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### Purpose

Recognizing the fundamental role of population and health to sustain development and the critical need for new, influential spokespersons from diverse sectors to educate various audiences about reproductive health and development, the IDEA-Aspen project will mobilize and equip select high-level policymakers to serve as champions, expand dialogues through new cross-sectoral global forums, and collaborate with partners to increase knowledge, policy action, and resources for reproductive health.

### Services Provided

The IDEA-Aspen project uses the following approach:

- Use high-level strategic access to national and global leaders to dramatically amplify new messages about the centrality of reproductive health to development;
- Utilize select policymakers as champions and standard setters for their peers;
- Link reproductive health more centrally to broader development goals including the environment, security, health, and economic development;
- Engage new influential audiences and establish ongoing linkages with diverse non-health sectors; and,
- Emphasize the power of personal narrative through the voices of influential policy spokespersons from developing and developed nations.

Aspen engages these high-level policymakers primarily through three forums: the Population, Health and Development Track at the annual Aspen Ideas Festival; the Aspen Population and Health Roundtable Series in Washington, DC; and the Population Policy Dialogue Series in collaboration with the WHO in Geneva at the time of the World Health Assembly.

### Means of Access

Core Funding

# Inform Decision-Makers to Act (IDEA) - PRB Population Reference Bureau

## Purpose

The IDEA project educates and informs U.S. and developing country decision-makers about the benefit to development of health and population programs. The principal activities for the IDEA project are gathering, synthesizing, and translating data and research into digestible formats for a variety of policy audiences. More broadly, IDEA helps the USG achieve its foreign assistance goals by helping to improve country health systems through improved information, leadership and governance, and policy dialogue around the delivery of health care services.

## Services Provided

The Population Reference Bureau IDEA project engages government organizations, NGOs, development networks, and other local institutions to build their capacity to design and implement effective FP/RH advocacy strategies. Under this award, PRB produces its World Population Data Sheets. It develops country-specific and global multimedia presentations to engage decision-makers on the benefits of FP/RH using advanced data-visualization technologies such as the Trendalyzer (bubble graph) software. It works with journalists to improve the quality and quantity of FP/RH issues in the media and to link FP/RH issues to population growth and development.

Priority areas include:

- Health and population data and information analyzed, synthesized and disseminated to engage relevant policy and advocacy audiences;
- Capacity of media to provide quality coverage of key health and population issues strengthened;
- Individual and institutional capacity to use information to influence policymakers improved; and,
- Dialogue among population and health researchers, program implementers and policymakers expanded.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-10-00009  
**Project Number:**  
936-3109.02  
**Duration:**  
7/10 - 8/15  
**Geographic Scope:**  
Worldwide

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# Knowledge for Health II (K4Health)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-13-00068

**Project Number:**  
936-7200.01

**Duration:**  
9/13 - 9/18

**Geographic Scope:**  
Worldwide

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## Purpose

Program managers and service providers rely on accurate, relevant health information, knowledge and expertise to do their jobs most effectively. K4Health addresses impediments to accessing, using and adapting health knowledge and information and facilitates knowledge and information use and exchange by developing and improving knowledge management (KM) practices and services. Project partners include Johns Hopkins Center for Communication Programs, FHI360, Management Sciences for Health, and IntraHealth International.

## Services Provided

K4Health provides global leadership in health knowledge management and supports health knowledge and information synthesis, exchange, adaptation and use to support quality programs and services and improve health outcomes. The project's major components include:

A comprehensive global web portal at <http://www.k4health.org> that offers:

- Self-directed eLearning courses for just-in-time learning;
- Toolkits featuring key materials on priority health topics, designed to be practical collections of trusted public health resources;
- Virtual discussions and webinars that provide access to a community of experts from around the world;
- Printed copies of the Global Family Planning Handbook and Wallchart;
- An online library of health images for editorial use; and,
- A searchable health research database focused on family planning/reproductive health and related topics.

Regional-and country-level technical assistance in building KM capacity and providing health-related KM services, including assistance in:

- Assessing and identifying knowledge and information needs of health providers and program managers, and developing strategies to better meet those needs;
- Supporting collaborative knowledge exchange and sharing among providers and program managers through local communities of practice, blended or eLearning tools and both face-to-face and virtual collaborations; and,
- Establishing country or regional online repositories or physical resource centers, and developing local capacity to manage and sustain them.

## Means of Access

Field Support

# MEASURE|US Census Bureau IAA

## Purpose

The Interagency Agreement (IAA) with the U.S. Census Bureau (USCB) seeks to increase the quality, quantity, and utility of country-level data. This IAA strengthens the capability of statistical offices in developing countries to collect, analyze, disseminate, and use data to increase understanding of population structure and demographic trends and their implications for development planning and policy-making. Emphasis is placed on capacity building; technical assistance provided through this IAA can be in support of the census, surveys, or general institutional capacity building.

## Services Provided

This interagency agreement with the USCB will focus on:

- Country-specific technical assistance to build the capacity of national statistical organizations to implement censuses and other surveys, including technical consultations and training in census design, management procedures, data collection and processing, demographic data analysis, dissemination, and use of census data;
- In-country, regional and U.S.-based workshops and study tours including training activities to strengthen capacity to design and manage census and survey implementation and to analyze, disseminate and use demographic data; and,
- Centrally coordinated activities that support worldwide efforts to improve collection, analysis and use of census and survey data, including maintenance and dissemination of the Census and Survey Processing System (CSPPro), a public domain software package for entering, editing, tabulating, and disseminating census and survey data.

## Means of Access

Field Support

**Agreement Type:**

IAA

**Agreement Number:**

GHA-T-00-08-00002

**Project Number:**

936-3083.05

**Duration:**

9/08 - 9/16

**Geographic Scope:**

Worldwide

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# Transform

**Agreement Type:**  
IDIQ  
**Agreement Number:**  
Multiple  
**Project Number:**  
936-3091  
**Duration:**  
2014 - 2019  
**Geographic Scope:**  
Worldwide

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## Purpose

Transform, a five-year, multiple-award IDIQ, was designed to infuse innovative practices from a range of disciplines into USAID-supported health communication. Transform contractors include organization experts in marketing, advertising, human-centered design, social psychology, and behavioral economics, among other fields.

Transform emphasizes creative thinking, exceptional design, and high-quality production and implementation. It builds upon USAID's past and current work in health communication, marrying implementers' long-standing focus on country context, strategy development, capacity strengthening; and scale, with novel and effective approaches from the private sector and creative fields.

## Services Provided

Transform contractors will provide relatively short-term, targeted technical assistance or implementation services, working closely with in-country implementing partners to identify, pilot, and evaluate new approaches to behavior change research and programming.

Illustrative task orders could include:

- Strengthening the quality of existing communication activities through the introduction of new practices in research and design. Such practices could include immersive formative research methods drawn from anthropology, marketing, or human-centered design; systematic and insightful approaches to audience segmentation and profiling; or, rapid and rigorous strategies for message and materials testing, among others.
- Piloting state-of-the-art approaches to the use of "new" and social media in the context of multi-channel communication interventions.
- Addressing intractable social and behavior change challenges through bold or creative communication campaigns or other types of behavior change interventions.

**Means of Access**  
Direct Task Order

## Transform Contract Teams

USAID awarded five contracts under Transform, two of which are women-owned small businesses.

**Award 1: The Manoff Group (TMG)** brings ground-breaking health communication and behavior change expertise. TMG's consortium of partners provide complimentary technical strengths: Howard Delafield International, LLP specializes in commercial marketing and business models; OneWorld UK offers innovative technology solutions to development problems; Social Impact Inc. brings performance monitoring, impact evaluation and capacity development expertise; and University Research Co. LLC (URC) is an established leader in health services quality and performance improvement.

**Award 2: Hope Consulting** is known for bringing innovation and high-quality customer insight to their behavior change work. Its partners provide complimentary expertise: PATH brings over 30 years experience in behavior change and global health; Grameen Foundation AppLab offers expertise in developing and piloting mobile technologies for global health; and Dallant Networks has experience in online discussion, knowledge management, and open-source solutions.

**Award 3: Population Services International (PSI)** is an established leader in social marketing. PSI's consortium brings international caliber skills: IDEO.org uses human-centered design to innovate; Lowe Lintas provides marketing and advertising expertise; Internews has a depth of experience in media capacity building; Innovations for Poverty Action is highly skilled in rigorous evaluation; Hope Consulting is a communication strategy small business; and Sage Innovation is a communication small business with capacity in advocacy, strategy, and evaluation.

**Award 4: University Research Co. LLC (URC)** brings over forty-five years of experience in quality improvement, behavior change communication, and health systems strengthening. URC brings a dynamic team of partners: Accenture Development Partnerships employs a not-for-profit business model to channel the capabilities of Accenture; Danya International provides innovative digital behavior change communication approaches; Dimagi is a mobile and web-based technology company; GMMB employs engagement communications, advertising, and grassroots organizing in their advertising and marketing work; Ideas42 provides expertise in behavioral economics and behavior science; Saatchi & Saatchi Wellness develops world-class communications that builds brands; and The Manoff Group is a known leader in innovative formative research, communications, and social- and behavior-centered programming.

**Award 5: FHI360** is a known leader in global health and behavior change communication. FHI360's partners provide an opportunity to spur innovation: Cell-life provides expertise in mHealth; Equal Access International offers expertise in innovative radio programming and emerging channels; Food for the Hungry brings nutrition communication and community activation experience; Howard Delafield International provides health marketing and communication business expertise; Unitrend Ltd. offers advertising and commercial and health marketing expertise; and XYZ Design is a human centered design and innovation firm.

# Biodegradable Contraceptive Implants

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00060

**Project Number:**  
936-3107.14

**Duration:**  
9/10 - 9/15

**Geographic Scope:**  
Worldwide

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## Purpose

To improve contraceptive choices in developing countries through the development of a new, safe, and effective contraceptive method.

## Services Provided

This five-year agreement will focus on furthering the development of biodegradable contraceptive implants with a one-year duration of action. If proven to be safe, effective and acceptable, the inclusion of biodegradable implants would expand family planning options by filling the duration of effectiveness gap between injectables (3 mos.) and standard implants (5 yrs.), and negating the need for removal (unless so wished by the user).

**Means of Access**  
Field Support

# Expanding Effective Contraceptive Options (EECO)

## Purpose

Over 100 million women cite method-related reasons for non-use of modern contraceptives, underscoring the need for new and improved contraceptive methods and greater method choice.

The EECO project is designed to support the research, development and introduction of technologies that meet the full range of sexual and reproductive health needs of women and girls. The EECO team's objective is to produce roadmaps for introducing and creating demand for new woman-initiated family planning methods, including vaginal gels, barrier methods, and intra-vaginal rings. EECO will produce actionable information on how best to register products, which distribution and communication channels have the most traction, what kind of training and advocacy is required, and how to segment the market for each method. These results can then be extrapolated to bring products to national scale, helping to fill critical gaps in the family planning method mix.

## Services Provided

EECO will take a comprehensive approach, including clinical research as necessary, product registration and regulatory work, consumer and provider research, stakeholder advocacy, marketing and distribution, and establish an M&E feedback loop with product developers. WomanCare Global (WCG) is the prime. WCG will bridge the private sector and non-profit worlds by linking upstream product developers/suppliers and downstream marketing and distribution partners. WCG will lead regulatory and quality assurance efforts, will register and make products available, and will pilot intensive medical detailing with providers. Additional partners include PSI, the social marketing partner who will work with existing health networks to market and distribute products; the International Center for Research on Women (ICRW), who will conduct research with potential users and providers; Evofem, the biotech partner; and, Every1Mobile, the m-health partner.

## Means of Access

Core, Field Support

**Agreement Type:**

Cooperative Agreement

**Agreement Number:**

OAA-A-13-00088

**Project Number:**

936-7301.01

**Duration:**

10/13 - 9/18

**Geographic Scope:**

Worldwide (Zambia, India, Malawi)

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# Fertility Awareness for Community Transformation (FACT)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-13-00083

**Project Number:**  
936.7041.03

**Duration:**  
10/13 - 9/18

**Geographic Scope:**  
Worldwide

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## Purpose

To answer significant research questions related to how fertility awareness (FA) and fertility awareness-based methods (FAM) can contribute to an increase in overall family planning access and use.

## Services Provided

In developing countries, a woman's lifetime risk of dying due to pregnancy and childbirth is one in 75, nearly 100 times higher than the risk in developed countries. Studies also show that an estimated 220 million women are not using any family planning method, despite wanting to avoid pregnancy. Providing these women with information and the full range of family planning methods—including fertility awareness-based methods (FAM)—not only saves lives, but also improves other social, educational, environmental and economic indicators.

Work under the FACT Project is fostering an environment where women and men can take actions to protect their reproductive health throughout the life-course by testing strategies to increase fertility awareness and expand access to FAM at the community level.

The FACT Project is proposing to test two hypotheses:

- 1) Increasing access to fertility awareness information leads to increases in family planning use
  - Fertility awareness covers a range of key information, including how specific family planning methods work, how they affect fertility, and how to use them; and it can create the basis for understanding communication about and correctly using family planning. FACT is developing and testing this hypothesis based on state-of-the-art social and behavior change communication (SBCC) theory and practice to assess their effect at the individual, couple, family, and community levels.
- 2) Increasing access to fertility awareness-based methods has an impact on overall contraceptive use
  - Following the successes of the AWARENESS and FAM Projects that successfully proved that increasing access to fertility-based methods like SDM, LAM and the Two-Day Method led to an increase in overall contraceptive use, the Institute for Reproductive Health intends to test this hypothesis by exploring more cost-effective interventions to increasing access to FAM, including group teaching approaches.

## Means of Access

Field Support

# Progesterone Vaginal Ring/Contraceptive Vaginal Ring (PVR/CVR) Project

## Purpose

This project will further the development and introduction of two new woman-initiated contraceptive methods by:

- 1) Completing the development and regulatory approval of the one-year Nesterone®/Ethinyl-Estradiol (NES/EE) contraceptive vaginal ring (CVR), and initiating its introduction into priority countries;
- 2) Expanding availability in developing country markets of the three-month Progesterone Vaginal Ring (PVR) for postpartum women who are breastfeeding

The NES/EE CVR and PVR will be piloted for introduction through both the public and private sectors, including through social marketing and not-for-profit providers, with the potential of reaching up to twenty-five million users. Introduction strategies will focus on provision through multiple channels, including commercial outlets and community outreach initiatives.

To complete this work, the Population Council will collaborate with donors and agencies involved in obtaining regulatory approvals and prequalification, as well as procurement organizations to facilitate the process of introduction.

## Services Provided

Pending approval from the U.S. FDA and specific national regulatory bodies, this project will focus on catalytic activities to facilitate the introduction of these woman-initiated products at a country level through existing regulatory and service delivery networks. This work will include advocacy and advocacy research, market analyses and consumer research, development of packaging/delivery approaches, engaging policymakers/decision-makers, and adaptation at scale. The field implementation phase will include seeking political/resource commitments, partnerships, integration with existing programs and M&E.

## Means of Access

Core, Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-13-00075  
**Project Number:**  
936-7301.02  
**Duration:**  
10/13 - 9/18  
**Geographic Scope:**  
Worldwide

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# The Evidence Project

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-13-00087

**Project Number:**  
936-7300.01

**Duration:**  
10/13 -9/18

**Geographic Scope:**  
Worldwide

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## Purpose

As the Office of Population and Reproductive Health's flagship implementation science project, The Evidence Project focuses on generating, translating, and using evidence to strengthen and support scale-up of evidence-informed family planning/reproductive health (FP/RH) policies and programs.

## Services Provided

Through The Evidence Project project, the Population Council and its partners:

- Generate new evidence to increase the effectiveness of FP/RH programming. The Evidence Project will generate new evidence through rigorous research to address existing key FP/RH program issues of global significance, including developing and testing strategies to address these issues in a variety of contexts. In addition, The Evidence Project will have the capacity to design and conduct studies that respond to critical emerging issues, evidence gaps and country needs.
- Synthesize and share evidence in order to accelerate scale-up of evidence-based improvements in FP/RH policies and programs. The Evidence Project will consolidate both new and existing evidence through syntheses, systematic reviews, case studies and other strategic analyses as well as package and disseminate lessons learned for use by key FP/ RH audiences at global, regional, and country levels.
- Provide technical assistance (TA) for application and use of evidence to improve FP/RH programming. The Evidence Project will provide TA that responds to program priorities at country and regional levels and builds capacity for generating and translating evidence into practice (e.g., TA to cost programs; to incorporate evidence into service delivery guidelines, tools and/or program plans; and to monitor and evaluate scale-up of high-impact FP/RH practices).

## The Evidence Project Partners:

Population Council in collaboration with INDEPTH Network, International Planned Parenthood Federation (IPPF); Management Sciences for Health (MSH); PATH; and, Population Reference Bureau (PRB).

## Means of Access

Field Support

# Combination Contraceptive and Anti-HIV Vaginal Ring

## Purpose

To develop and evaluate a safe, effective, and acceptable contraceptive and HIV/AIDS prevention technology.

## Services Provided

This five-year project, recently extended an additional three years, focuses on the development of a vaginal ring that combines the recently proven HIV prevention drug, tenofovir, with the hormonal contraceptive, levonorgestrel. If shown to be safe, effective and acceptable, this combination ring would confer protection against HIV while delivering a highly effective contraceptive method, thus filling two reproductive health needs in one product.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-10-00068  
**Project Number:**  
936-3107.15  
**Duration:**  
9/10 - 12/18  
**Geographic Scope:**  
Worldwide

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# IPM Combination Contraceptive and Anti-HIV Vaginal Ring

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-11-00029

**Project Number:**  
936-3107.18

**Duration:**  
9/11 - 9/16

**Geographic Scope:**  
Worldwide

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## **Purpose**

To develop and evaluate a safe, effective and acceptable contraceptive and HIV/AIDS prevention technology.

## **Services Provided**

This five-year project aims to formulate a sixty day vaginal ring that combines the potential HIV prevention drug, dapivirine, with a hormonal contraceptive. Dapivirine showed high potency against HIV in early studies, and is currently being studied in a large-scale efficacy trial in a ring formulation. This project will focus on integrating a hormonal contraceptive into the dapivirine ring, with the end goal of successfully formulating a potent and inexpensive combination ring that is effective for sixty days.

## **Means of Access**

Field Support

# SILCS Cervical Barrier + Tenofovir (TFV) Gel

## Purpose

To develop and evaluate a safe, effective and acceptable contraceptive and HIV/AIDS prevention technology.

## Services Provided

This five-year project aims to test the safety and effectiveness of the one-size-fits-most SILCS cervical barrier, combined with tenofovir (TFV) gel, the only topical product shown to prevent the acquisition of HIV and herpes simplex virus (HSV) in women. If this combination of products is shown to be safe, effective and acceptable, it will provide a user-initiated, non-hormonal contraceptive method that also delivers protection against HIV and HSV.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-11-00064  
**Project Number:**  
936-3107.19  
**Duration:**  
9/11 - 9/16  
**Geographic Scope:**  
Worldwide

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# Gender Roles, Equality, and Transformations (GREAT) Project

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00073

**Project Number:**  
936-3107.13

**Duration:**  
9/10 - 3/17

**Geographic Scope:**  
Worldwide

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## Purpose

The Gender Roles, Equality, and Transformation (GREAT) Project aims to develop and test a package of evidence-based, scalable, life-stage tailored interventions to transform gender norms, reduce gender-based violence, and promote gender-equitable attitudes and sexual and reproductive health among adolescents (ages 10-19) in post-conflict communities in northern Uganda.

## Services Provided

This phased seven-year project will be implemented by Georgetown University's Institute for Reproductive Health with partners Save the Children and Pathfinder International. The project will conduct formative research to identify opportunities to promote the formation of gender equitable norms, attitudes and behaviors among adolescents and the significant adults in their lives. The research design includes innovative qualitative methods, such as collecting life histories from young people at different stages of the life course and in-depth interviews with individuals nominated by youth as significant influencers in their lives. Using an implementation science framework, the project will then inform the development and testing of interventions during the second phase that:

(1) impact gender norms to positively influence reproductive health outcomes, reduce gender-based violence, and improve gender equity, and (2) have the potential to catalyze wide-spread, sustainable movements to challenge gender inequities worldwide.

In addition, the Responsible, Engaged and Loving (REAL) Father's Initiative focuses on the design and evaluation of an innovative mentoring program and community awareness campaign designed to reach young fathers (aged 16-25) to reduce the incidence of intimate partner violence and physical punishment of children. In order to address underlying causes of domestic violence, the intervention is designed to challenge the gender norms and sexual scripts that often trigger coercion and violence in relationships and to teach effective parenting, communication, and problem-solving skills.

## Means of Access

Field Support

# Impact on Marriage: Program Assessment of Conditional Cash Transfers (IMPACCT) in India Project

## Purpose

To understand the implementation and impact of a specific cash transfer program to impact the age of marriage in Haryana, India.

## Services Provided

This five-year cooperative agreement awarded to the International Center for Research on Women (ICRW) provides a unique opportunity to evaluate an ongoing, government-run cash transfer program in Haryana, India. This government program was started about 16 years ago where parents of newborn girls were give a bond to cash in when the girl turns 18 years of age and is still unmarried. Several other such programs have since begun in India. The Haryana program is the first to come to maturity in a couple of years, and presents an opportunity to do a large-scale research study to assess its implementation and impact. The findings of this project will greatly improve the evidence to date on conditional cash transfer programs and health impacts, which will then be applied to the Haryana program, other Indian government programs, and cash transfer programs around the world.

## Means of Access

Field Support

**Agreement Type:**

Cooperative Agreement

**Agreement Number:**

OAA-A-10-00071

**Project Number:**

936-3107.10

**Duration:**

9/10 - 9/15

**Geographic Scope:**

India

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# Increasing Age of Marriage

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00002

**Project Number:**  
936-3107.09

**Duration:**  
9/10 - 9/16

**Geographic Scope:**  
Worldwide

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## Purpose

The Population Council will systematically test a combination of interventions to delay marriage and track associated program costs with a view to scale-up.

## Services Provided

This five-year cooperative agreement, recently extended an additional year, seeks to provide evidence regarding the reduction of early marriage as a social determinant for reproductive health. The project will undertake a quasi-experimental study. Interventions will include community education, programs to build the educational and economic assets of girls, and direct incentives. Baseline and endline surveys will measure impact of the programs on the age at marriage and the ongoing documentation will monitor program participation and cost. An important element is the team building with local partners, engaging local governmental and nongovernmental partners as well as promoting south-to-south exchanges and capacity building. The development of a clear evidence base and costing data will be supporting research utilization and scaling up of proven approaches.

## Means of Access

Field Support

# Tékponon Jikuagou

## Purpose

To reduce unmet need for family planning in Benin through social network interventions.

## Services Provided

This six-year, phased project will be implemented by Georgetown University's Institute for Reproductive Health (IRH) in partnership with CARE International and Plan International. The methodology includes social network analysis to identify strategies to increase women's access to and use of family planning and reproductive health services.

Formative research has found that deeply embedded social norms related to gender roles underlie unmet need for family planning. The goal is to create a social environment that enables married couples to achieve their fertility desires by fostering reflective dialogue and catalyzing discussion about social norms related to family planning, and diffusing information through formal and informal social groups, influential opinion leaders, and well-connected individuals.

Based on this formative research, IRH and its partners will design and test interventions that activate key individuals within these networks in order to reduce negative determinants and strengthen positive influences on attitudes and behaviors.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-10-00066  
**Project Number:**  
936-3107.17  
**Duration:**  
9/10 - 9/16  
**Geographic Scope:**  
Worldwide

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# Bayer HealthCare

## USAID Contraceptive Security Initiative

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
GPO-A-00-09-00004

**Project Number:**  
936-3085.06

**Duration:**  
9/09 - 9/16

**Geographic Scope:**  
Worldwide

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### Purpose

The Bayer-USAID Contraceptive Security Initiative (CSI) is an innovative public-private partnership that seeks to address the ever-increasing need for affordable contraceptives in the developing world. Through the CSI, Bayer and USAID are collaborating to introduce a commercially-sustainable oral contraceptive, at an affordable price, to middle income women across Sub-Saharan Africa. The Global Development Alliance (GDA) partnership leverages Bayer resources and USG resources in a 2-to-1 match.

### Services Provided

The CSI project introduces a new, affordable contraceptive product – MicrogynonFe – which has a price point above the social marketing and public-sector level, and below commercial prices. This strategy attracts contraceptive users to the middle of the market and seeks to create a permanent market niche for “Tier 2” brands. Bayer has pledged to maintain this low-cost and accessible pricing strategy well beyond the expiration of its agreement with USAID. This will grow the overall number of OC users in a sustainable way, and allow governments and donors to better target subsidized products to lower-income market segments.

Bayer invests in product launch, distribution, and retail access for the new brand -- bringing to bear its existing manufacturing, packaging, export/import and distribution capabilities to assure that the product is fully commercially sustainable. The CSI uses local pharmacies as the primary distribution channel to consumers and promotes sustainable market access for mid-priced contraceptives.

USAID resources support an initial period of demand-creation advertising and other market-building communications in order to help build initial product awareness and grow the Tier 2 market segment. Bayer has subcontracted Meridian Group International to develop and manage these in-country promotional activities.

The currently operates in Ethiopia, Tanzania, Uganda, Rwanda, Ghana, Malawi, and Kenya, and plans to launch in four additional countries.

### Means of Access

Core Only

# CapacityPlus

## Purpose

This project strengthens the human resources (HR) needed to implement quality health programs, in both the public and private sectors. It addresses both the number of healthcare workers needed and the quality and performance of those workers. The definition of “healthcare worker” is expanded to include HR managers, laboratory staff, pharmacists, social workers, information systems/monitoring and evaluation specialists and others essential to the effective functioning of the health system.

While strengthening the human resource systems necessary to develop, maintain and support the workforce, it also builds capacity in service delivery thereby increasing access to high quality FP/RH, HIV/AIDS, malaria, TB, MCH and other health services. Additionally, it works to foster the relationship of the workforce, as one of the six building blocks of health systems, to the other building blocks and strengthen the health system as a whole.

## Services Provided

Project interventions focus on:

- Fostering global leadership and advocacy to address the Human Resource for Health (HRH) crisis;
- Enhancing HRH policy and planning, including strengthening HR management and information systems;
- Improving HRH workforce development, including pre-service, in-service, and continuing professional development systems;
- Strengthening HRH performance support systems to improve health worker retention and productivity;
- Generating and disseminating knowledge to promote use of evidence-based HRH approaches.

Two cross-cutting themes are promoting gender equity in HR policy and management and integrating faith-based organizations given their integral role in healthcare delivery in many countries.

Implementing partners are IntraHealth International, Inc. with Abt Associates, IMA World Health, Liverpool Associates in Tropical Health (LATH), and Training Resources Group (TRG).

## Means of Access

Field Support and Associate Awards

**Agreement Type:**

Leader with Associate  
Cooperative Agreement

**Agreement Number:**

GPO-A-00-09-00006

**Project Number:**

936-3103.05

**Duration:**

9/09 - 9/15

**Geographic Scope:**

Worldwide

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# Support for International Family Planning Organizations (SIFPO/MSI)

**Agreement Type:**  
Cooperative Agreements

**Agreement Number:**  
OAA-A-10-00059

**Project Number:**  
936-3101.07

**Duration:**  
9/10 - 9/15

**Geographic Scope:**  
Worldwide

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## Purpose

SIFPO/MSI aims to increase the use of FP services globally through strengthening selected international family planning organizations which have a global reach and an extensive, multi-country network of FP clinics, in order to achieve maximum program impact and synergies.

## Services Provided

SIFPO/MSI leverages the comparative advantage and innovations of international family planning organizations to strengthen access to and use of high quality family planning services and commodities that are affordable and sustainable.

SIFPO/MSI offers a wide array of technical services available to missions and their counterparts, through two separate cooperative agreements. Awardees are working to:

- Strengthen the delivery of quality family planning services to priority populations, specifically reaching those populations with high unmet need for FP with cost-effective interventions.
- Quantify and disseminate quality assurance standards to strengthen FP program performance;
- Increase organizational sustainability of country-level FP programs, through internal South-to-South support and technical assistance to improve capacity to capture revenue and become more self-sustaining over time, while still responding to the needs of underserved and marginalized groups;
- Provide gender-sensitive FP services targeting youth strengthened so that youth and women, including young women, are able to access quality FP services that meet their needs;
- Using vouchers, social franchising, social marketing and outreach strategies, SIFPO/MSI seeks to increase use of voluntary family planning including long-acting and permanent methods.

SIFPO/MSI is implemented by Marie Stopes International, with partners Population Council, International Center for Research on Women, EngenderHealth, and International HIV/AIDS Alliance.

## Means of Access

This mechanism can no longer accept field support. Please see SIFPO2 awards, which can be accessed with field support.

# Support for International Family Planning Organizations (SIFPO/PSI)

## Purpose

SIFPO/PSI aims to increase the use of FP services globally through strengthening selected international family planning organizations which have a global reach and an extensive, multi-country network of FP clinics, in order to achieve maximum program impact and synergies.

## Services Provided

SIFPO/PSI leverages the comparative advantage and innovations of international family planning organizations to strengthen access to and use of high-quality family planning services and commodities that are affordable and sustainable.

SIFPO/PSI offers a wide array of technical services available to missions and their counterparts, through two separate cooperative agreements. Awardees are working to:

- Strengthen the delivery of quality family planning services to priority populations, specifically reaching those populations with high unmet needs for FP with cost effective interventions;
- Quantify and disseminate quality assurance standards to strengthen FP program performance;
- Increase organizational sustainability of country-level FP programs through internal south-to-south support and technical assistance to improve capacity to capture revenue and become more self-sustaining over time, while still responding to the needs of underserved and marginalized groups;
- Provide gender-sensitive FP services targeting youth, strengthened so that youth and women, including young women, are able to access quality FP services that meet their needs; and,
- Using vouchers, social franchising, social marketing and outreach strategies, SIFPO/PSI seeks to increase use of voluntary family planning including long-acting and permanent methods.

SIFPO/PSI is implemented by Population Services International, with partners IntraHealth and the Stanford Program for International Reproductive Education and Services (SPIRES).

## Means of Access

This mechanism can no longer accept field support. Please see SIFPO2 awards, which can be accessed with field support.

**Agreement Type:**  
Cooperative Agreements  
**Agreement Number:**  
OAA-A-10-00030  
**Project Number:**  
936-3101.08  
**Duration:**  
9/10 - 9/15  
**Geographic Scope:**  
Worldwide

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# Support for International Family Planning & Health Organizations II: Sustainable Networks (SIFPO2/MSI)

**Agreement Type:**  
Cooperative Agreements

**Agreement Number:**  
OAA-A-14-00036

**Project Number:**  
936-7400.01

**Duration:**  
4/14 - 4/19

**Geographic Scope:**  
Worldwide

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## Purpose

SIFPO2/MSI aims to increase access to and use of high quality, affordable family planning (FP) and other health information, products and services globally by strengthening and leveraging this organization's global reach, with local affiliates, network of FP clinics and other health platforms.

## Services Provided

SIFPO2/MSI works to strengthen global and local organizational capacity to deliver high quality FP and other health services to priority groups and improve sustainability of country level FP and other health programs through financing mechanisms, capacity building, and local partnerships.

SIFPO2/MSI offers a wide array of technical services available to Missions and their counterparts. MSI is working to:

- Strengthen the delivery of quality FP services and other health services, as appropriate, to priority populations, through providing the services directly or providing training and support to public or private health care providers;
- Strengthen quality assurance standards to improve program performance; use data for decision making to improve program implementation and client centered care;
- Increase organizational sustainability of country level FP and other health programs to improve capacity and become sustainable, while still responding to the needs of underserved and marginalized groups;
- Provide or build capacity of providers on gender sensitive and youth friendly health services;
- Use vouchers, social franchising, social marketing, mobile outreach strategies, and dedicated provider models, to increase use of voluntary family planning, including long-acting reversible contraceptives and permanent methods, and other health services; and,
- Test financing mechanisms, (vouchers, insurance or contracting) to build financial sustainability and participate in a total market approach.

SIFPO2/MSI is implemented by Marie Stopes International, with partners FHI 360, EngenderHealth, and Grameen Foundation.

**Means of Access**  
Field Support

# Support for International Family Planning & Health Organizations II: Sustainable Networks (SIFPO2/PSI)

## Purpose

SIFPO2/PSI aims to increase access to and use of high quality, affordable family planning (FP) and other health information, products and services globally by strengthening and leveraging this organization's global reach, with local affiliates, network of FP clinics and other health platforms.

## Services Provided

SIFPO2/PSI works to strengthen global and local organizational capacity to deliver high quality FP and other health services to priority groups and improve sustainability of country level FP and other health programs through financing mechanisms, capacity building, and local partnerships.

SIFPO2/PSI offers a wide array of technical services available to Missions and their counterparts. PSI is working to:

- Strengthen the delivery of quality FP services and other health services, as appropriate, to priority populations, through providing the services directly or providing training and support to public or private health care providers;
- Strengthen quality assurance standards to improve program performance; use data for decision making to improve program implementation and client centered care;
- Increase organizational sustainability of country level FP and other health programs to improve capacity and become sustainable, while still responding to the needs of underserved and marginalized groups;
- Provide or build capacity of providers on gender sensitive and youth friendly health services;
- Use vouchers, social franchising, social marketing, mobile outreach strategies, and dedicated provider models, to increase use of voluntary family planning, including long-acting reversible contraceptives and permanent methods, and other health services;
- Test financing mechanisms, (vouchers, insurance or contracting) to build financial sustainability and participate in a total market approach

SIFPO2/PSI is implemented by Population Services International, with partners International Center for Research on Women, Results for Development, PharmAccess Foundation, and World Health Partners.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreements

**Agreement Number:**  
OAA-A-14-00037

**Project Number:**  
936-7400.02

**Duration:**  
4/14 - 4/19

**Geographic Scope:**  
Worldwide

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## Support for International Family Planning & Health Organizations II: Sustainable Networks (SIFPO2/IPPF)

**Agreement Type:**  
Cooperative Agreements

**Agreement Number:**  
OAA-A-14-00038

**Project Number:**  
936-7400.03

**Duration:**  
5/14 - 5/19

**Geographic Scope:**  
Worldwide

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### Purpose

SIFPO2/IPPF aims to increase access to and use of high quality, affordable family planning (FP) and other health information, products and services globally by strengthening and leveraging this organization's global reach, with local affiliates, network of FP clinics and other health platforms.

### Services Provided

SIFPO2/IPPF works to strengthen global and local organizational capacity to deliver high quality FP and other health services to priority groups and improve sustainability of country level FP and other health programs through financing mechanisms, capacity building, and local partnerships.

SIFPO2/IPPF offers a wide array of technical services available to missions and their counterparts. IPPF is working to:

- Strengthen the delivery of quality FP services and other health services, as appropriate, to priority populations, through providing the services directly or providing training and support to public or private health care providers;
- Strengthen quality assurance standards to improve program performance; use data for decision making to improve program implementation and client centered care;
- Increase organizational sustainability of country level FP and other health programs to improve capacity and become sustainable, while still responding to the needs of underserved and marginalized groups;
- Provide or build capacity of providers on gender sensitive and youth friendly health services;
- Use vouchers, social franchising, social marketing, mobile outreach strategies, and dedicated provider models, to increase use of voluntary family planning, including long-acting reversible contraceptives and permanent methods, and other health services;
- Test financing mechanisms, (vouchers, insurance or contracting) to build financial sustainability and participate in a total market approach.

SIFPO2/IPPF is implemented by International Planned Parenthood Federation, with partners Population Council and eight Member Associations.

**Means of Access**  
Field Support

# Strengthening Health Outcomes through the Private Sector (SHOPS)

## Purpose

The SHOPS Project works on increasing the role of the private sector in the sustainable provision and use of quality family planning (FP)/reproductive health (RH), HIV/AIDS; maternal, zinc treatment and child health, and nutrition; and other health information, products, and services.

## Services Provided

SHOPS builds upon decades of support for leadership in private health sector programming and on the work of its predecessor projects, Private Sector Partnerships-One (PSP-One) and Banking on Health, as well as projects such as Social Marketing for Change (SOMARC), AIDSMark, and Point-of-Use Water Disinfection and Zinc Treatment (POUZN). SHOPS' emphasis on exploring and advancing private sector innovations distinguishes this project from its predecessors. The SHOPS project offers a wide array of technical services available to Missions and their counterparts:

- Conduct private sector health assessments;
- Establish and facilitate public-private partnerships;
- Implement social marketing programs (including pharmaceutical partnerships) for FP, zinc treatment, and other health products and services;
- Conduct client-centered market segment analyses;
- Promote behavior change through targeted health communications interventions;
- Create financing mechanisms contracting, health insurance, voucher programs to improve access to affordable healthcare and products;
- Improve policy and regulatory environments for the private sector in health; and,
- Foster innovations and state-of-the-art private sector delivery and distribution models.

SHOPS is implemented by Abt Associates and their four core partners: Banyan Global, Jhpeigo, Marie Stopes International, and O'Hanlon Health Consulting.

## Means of Access

Field Support and Associate Awards.

**Agreement Type:**  
Leader With Associate  
Cooperative Agreement

**Agreement Number:**  
GPO-A-00-09-00007

**Project Number:**  
936-3085.09

**Duration:**  
9/09 - 9/15

**Geographic Scope:**  
Worldwide

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## Leadership, Management, and Governance (LMG)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-11-00015

**Project Number:**  
936-3099.07

**Duration:**  
9/11 - 9/16

**Geographic Scope:**  
Worldwide

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### Purpose

The Leadership, Management, and Governance (LMG) project is a five-year cooperative agreement that addresses the gap for sustainable leadership, management and governance capacity at all levels of the health system. Using highly effective interventions, the LMG project supports health care providers, program managers, and policy-makers to achieve better health system performance and better health outcomes. The LMG project fosters strong country ownership, gender equity and evidence-driven approaches by promoting the implementation of sound health policies, effective management, transparency, accountability, and engagement with civil society and the private sector.

### Services Provided

The LMG Project interventions:

- Foster global leadership and advocacy for improved leadership, management and governance capacity;
- Strengthen the delivery of quality family planning and other health services through improved leadership, management and governance capacity;
- Support the establishment and expansion of health managers as a professional cadre;
- Develop and strengthen pre-service education in leadership, management and governance;
- Develop and strengthen in-service leadership, management and governance education and training with Ministries of Health and local non-governmental and faith-based organizations;
- Expand the awareness and use of tested tools, models and approaches to strengthen leadership, management and governance capacity throughout the public sector and civil society organizations;
- Generate knowledge and conduct research to expand the knowledge base of the effect of enhanced leadership, management and governance capacity on health services outcomes in family planning, maternal and child health, HIV/AIDS and other health areas; and,
- Develop and update indicators for tracking country-led leadership, management and governance processes and capacity building.

LMG is implemented by Management Sciences for Health (MSH) with partners African Medical and Research Foundation (AMREF), International Planned Parenthood Federation (IPPF), Yale University Global Health Leadership Institute (Yale GHLI), Johns Hopkins University Bloomberg School of Public Health (JHSPH), and Medic Mobile.

### Means of Access

Field Support

# Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls (E2A)

## Purpose

Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls (E2A) is a five-year, world-wide cooperative agreement. The purpose of E2A is to increase global support for the use of evidence-based best practices to improve family planning and reproductive health (FP/RH) services, access, and quality. The project will strengthen service delivery by supporting scale-up and institutionalization of proven interventions in the health system. E2A will work to integrate FP/RH with other health and non-health services, mitigating gender barriers, and enhancing informed decision-making for women and girls.

## Services Provided

E2A will work in partnership with USAID's regional and country missions, host country partners, and international organizations to:

- Introduce large-scale implementation of family planning evidence-based practices;
- Provide technical assistance to apply systematic approaches, monitor and evaluate scale-up;
- Conduct youth and gender assessments, integrate youth and gender across service delivery interventions, and evaluate effectiveness of youth and gender approaches and models;
- Introduce and test innovative service delivery approaches;
- Provide technical assistance to support the integration of family planning into other health areas including FP/HIV and FP/MNCH and integration of family planning into non-health areas including workplace and environmental models; and,
- Document and synthesize evidence of high-impact practices in family planning.

The project is led by Pathfinder International with a consortium of partners: Management Sciences for Health (MSH), IntraHealth, Program for Appropriate Technologies in Health (PATH), ExpandNet, and the African Population and Health Research Center (APHRC).

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-11-00024  
**Project Number:**  
936-3101.09  
**Duration:**  
9/11 - 9/16  
**Geographic Scope:**  
Worldwide

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# Advancing Partners and Communities Project

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-12-00047  
**Project Number:**  
936-3084.10  
**Duration:**  
10/12 - 9/17  
**Geographic Scope:**  
Worldwide

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## Purpose

The Advancing Partners and Communities Project will advance and support community programs that seek to improve the overall health of communities and achieve other health-related impacts, especially in relationship to family planning. It will provide global leadership for community-based programming, execute and manage small and medium-sized subawards, support procurement reform by preparing awards for execution by USAID, and build technical capacity of organizations to implement effective programs.

## Services Provided

The project will accept all types of funding and addresses all health sector areas including family planning, HIV/AIDS, maternal and child health, and control of infectious disease.

Advancing Partners & Communities is positioned to provide a wide range of technical services to Missions, some of which include:

- Conduct assessments, introduce and promote innovative and high-impact strategies, and provide virtual or on-the-ground technical assistance to bilateral programs in the design of demonstration projects and national scale-up efforts of private and public-sector community family planning programs.
- Provide technical and organizational capacity building services for local NGOs that will prepare them to implement and monitor effective programs and receive funding directly from USAID.
- Provide grant-making services: Conduct fully open and targeted competitive solicitations; determine eligibility of awardees; prepare cooperative agreement documents for execution by USAID; execute actionable sub-awards; and execute sub-awards competed by an APS.
- Provide Missions a wide range of grant management and oversight services for awards to local organizations: monitoring of progress and expenditures of programs, ensuring financial accountability of grantees, supporting program monitoring and evaluation, ensuring compliance with all USAID requirements, including branding and family planning requirements.

## Means of Access

Field Support

# Postabortion Care Family Planning (PAC-FP)

## Purpose

To expand postabortion care (PAC) clients' access to a range of contraceptive methods, including long-acting reversible contraceptives (LARCS) and permanent methods (PMs), along with providing immediate life-saving care.

Many women who obtain PAC have an urgent need for family planning (FP); in obtaining FP services, they have a right to FP options, respect, confidentiality, and high-quality care. The PAC-FP project increases informed and voluntary use of LARCS/PMs by PAC clients, through two main strategic objectives; (1) Building local capacity to deliver postabortion family planning services with the inclusion of LARC/PMs among the methods women can choose from and to support future scale-up; and (2) Generating and communicating knowledge to advance access to LARCS/PMs through PAC.

## Services Provided

- Build local capacity to deliver quality postabortion family planning (PAC-FP) services, including LARCS/PMs, among a wide range of methods from which women can choose by using a systems approach, holistic approach to capacity building, and gender-integrated approach.
- Conduct implementation research to demonstrate the PAC-FP model, provide technical assistance, tools and materials to catalyze scale-up of the model.
- Document scale-up of the PAC-FP model progress and process
- Generate and communicate knowledge at country and global levels to advance access, knowledge, and best practices about post-abortion family planning;
- Improve organization of PAC services to facilitate on-site family planning service provision, service quality, logistics, policymaking, community and support for post-abortion family planning, and gender-related and other provider/community attitudes and norms that limit service access;
- Generate community/client demand by helping partners integrate messages/activities targeting women, men, and/or leaders into existing community/BEmONC outreach and BCC;
- Increase national/district decision-maker support for PAC FP services; and,
- Promote sustainability of the PAC-FP model by enhancing programmatic, institutional, and financial capacity of interventions, healthcare workers, and facilities.

## Means of Access

Core and Field Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00050

**Project Number:**  
936-6200

**Duration:**  
8/14 - 8/19

**Geographic Scope:**  
Worldwide

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Supply Chain for Health Division (SCH)

*John Crowley, Chief*

Technical Leadership and Research Division (TLR)

*Robert Ferris, Chief*

# Accelerating Strategies for Practical Innovation & Research in Economic Strengthening (ASPIRES)

**Agreement Type:**  
Cooperative Agreement  
under LWA Award EEM-  
A-00-06-0001

**Agreement Number:**  
OAA-LA-13-00001

**Project Number:**  
936-8100.01

**Duration:**  
7/13 - 7/18

**Geographic Scope:**  
Worldwide

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## Purpose

The primary goal of the project is to support gender-sensitive programming, research, and learning to improve the economic security of highly vulnerable individuals, families and children infected or affected by HIV/AIDS, as well as key populations at high risk of acquiring HIV.

## Services Provided

ASPIRES focuses on efficient provision of technical assistance (TA) to scale up high-quality interventions in the areas of consumption support, money management, and income promotion. The project will also focus on design and implementation of rigorous research to evaluate programs and inform a new understanding of best practices in economic strengthening.

The ASPIRES approach include:

- Using current evidence and state-of-the-art approaches to promote scalable, high-quality programming;
- Employing robust research methods to expand the evidence base and promote innovation;
- Building the capacity of national stakeholders to implement evidence-based programming as well as to monitor and evaluate programs;
- Coordinating with other donors, local and national governments, and global partners; and,
- Integrating an explicit gender perspective in research, tools, policy and standards recommendations, and technical assistance.

## Means of Access

Core and Field Support

# Strengthening High Impact Interventions for an AIDS-free Generation (AIDSFree) Project

## Purpose

AIDSFree aims to improve the quality and effectiveness of high-impact, evidence-based HIV and AIDS interventions such as PMTCT, VMMC, condom promotion, HTC as a gateway to care and treatment, and other emerging approaches in order to meet country-specific goals and objectives globally.

AIDSFree is a five-year cooperative agreement led by JSI Research & Training Institute, Inc., with partners Abt Associates, Inc., Elizabeth Glaser Pediatric AIDS Foundation, EnCompass LLC, IMA World Health, the International HIV/AIDS Alliance, Jhpiego Corporation, and PATH.

## Services Provided

AIDSFree provides capacity development and technical support to USAID missions, host-country governments, and HIV implementers at the local, regional, and national level. The project can support the following activities:

- Address structural barriers, and identify opportunities to support scale-up or piloting of new approaches in geographic priority areas;
- Develop evidence-based tools, protocols, and standard operating procedures;
- Monitor and evaluate interventions, support data collection, analysis, and utilization;
- Facilitate organizational capacity assessments;
- Utilize gender analysis to target appropriate interventions;
- Facilitate south-to-south technical exchanges; and,
- Engage the private sector to foster and develop public-private partnerships;

## Means of Access

Core and Field Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00046

**Project Number:**  
936-8102.01

**Duration:**  
07/14 - 07/19

**Geographic Scope:**  
Worldwide

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# 4Children - Coordinating Comprehensive Care for Children\*

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-14-00061  
**Project Number:**  
936-8104.01  
**Duration:**  
9/14 - 9/19  
**Geographic Scope:**  
Worldwide

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## Purpose

The overarching purpose of the 4Children project is to improve health and well-being outcomes for orphans and vulnerable children (OVC) affected by HIV and AIDS and other adversities. 4Children seeks to support systems and structures at country and regional levels for promoting evidence-based interventions to protect against risk, interrupt cycles of vulnerability, and build pathways to resilience leading to an AIDS-free generation and contributing to overall improvements in quality of life and productivity in vulnerable children and their families.

## Services Provided

Led by Catholic Relief Services, the 4Children team includes core partners IntraHealth, Maestral, Pact, Plan and Westat, and collaborating partners African Child Policy Forum (ACPF), Parenting in Africa Network (PAN) and Regional Psychosocial Support Initiative (REPSSI). With a highly qualified project team, an extensive roster of technical experts, and an established presence in all potential target countries, 4Children is poised to provide customized, rapid and cost-effective capacity building support to governments and civil society in strategic technical and organizational areas.

Project activities will contribute to the following objectives:

1. To increase the generation and use of evidence through surveillance and research to inform strategic child welfare and protection programming for children affected by AIDS and other adversities;
2. To support countries to scale up evidence-based child welfare and protection programming for children affected by AIDS and other adversities from the household and community levels to the national level; and,
3. To create an enabling environment, focused on local capacity and ownership, that is conducive to sustainable and quality child welfare and protection programming for children affected by AIDS and other adversities.

## Means of Access

Core and Field Support

\*Formerly C3

# Linkages Across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES) Project

## Purpose

The Linkages Across the Continuum of HIV Services for Key Populations Affected by HIV (LINKAGES) Project is led by FHI 360 in partnership with IntraHealth International, Pact and the University of North Carolina (UNC), Chapel Hill. LINKAGES aims to accelerate the ability of partner governments, key population (KP) civil society organizations and private sector providers to more effectively plan, deliver and optimize comprehensive HIV/AIDS prevention, care and treatment services at scale that reduce HIV transmission among KPs sex workers, men who have sex with men, transgender persons, people who inject drugs, and their partners and extend life for those who are HIV-positive. This central mechanism is a five-year cooperative agreement providing for both core-funded and field-supported key populations (KP) programs.

## Services Provided

The project includes the following results:

**Result 1:** Increased availability of comprehensive prevention, care and treatment services, including reliable coverage across the continuum of care for key populations.

**Result 2:** Demand for comprehensive prevention, care and treatment services among key populations enhanced and sustained.

**Result 3:** Strengthened systems for planning, monitoring, evaluating and assuring the quality of programs for key populations.

LINKAGES provides overarching technical leadership in KP programming. It offers a range of approaches, tools, Standard Operating Procedures, technical assistance and related support that can be tailored for differing priorities and needs. At the country level, LINKAGES will engage governments, KP civil society organizations and networks, and private providers to jointly plan, implement and evaluate project interventions – using accessible, shared data to inform and adapt programming on an ongoing basis. Use of a cascade framework and related toolkit will enable local stakeholders to visualize, analyze and tailor solutions to address gaps in the HIV prevention, care and treatment continuum through state-of-the-art, evidenced-based interventions and quality assurance processes. The LINKAGES overarching capacity strengthening approach emphasizes south-to-south technical assistance and mentoring. Gender will be a cross-cutting theme used to inform the design, implementation, and monitoring and evaluation of sustainable activities at scale.

## Means of Access

Core and Field Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00045

**Project Number:**  
936-8103.01

**Duration:**  
6/14 - 6/19

**Geographic Scope:**  
Worldwide

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# YouthPower: Evidence and Evaluation IDIQ

**Agreement Type:**  
IDIQ  
**Agreement Number:**  
Multiple  
**Project Number:**  
936-8101  
**Duration:**  
4/15 - 4/20  
**Geographic Scope:**  
Worldwide

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**Website:**  
Coordinated by YouthPower:  
Evidence and Evaluation.  
Task Order #1

## Purpose

The maximum contract ceiling for this IDIQ is \$72 million dollars. There are six (6) IDIQ holders, including four (4) small business set-asides. Operating units can access this mechanism through direct task orders.

The YouthPower: Evidence and Evaluation IDIQ is designed to conduct research, evaluate innovative programs, disseminate information and strengthen/expand the evidence base for cross-sectoral and sector-specific approaches in positive youth development. This IDIQ will support the agency to invest in positive youth development research and evaluation within and across multiple sectors, including health, education, economic opportunity, peace and security, democracy, human rights and governance and strive to evaluate the impact of cross-sectoral youth programming. IDIQ holders form consortia of diverse organizations that bring a range of sector expertise to support single-sector and holistic cross-sectoral youth programs.

Activities include but are not limited to: designing, managing, and publishing rigorous impact evaluations in a variety of international settings including conflict, fragile, and crisis-affected environments; designing, conducting, and publishing performance evaluations, using mixed methods in a variety of international settings including conflict, fragile, and crisis-affected environments; design and implementation of cross-sectoral youth assessments; facilitation of strategy design and program design support to USAID and other donors; establishing data collection and monitoring procedures and systems; capacity development, training, and technical assistance in the area of design, monitoring and evaluation; management of knowledge management initiatives including information and communications technologies (ICT), new media, and communities of practice; and research in the area of international cross-sectoral youth development.

USAID expects the YouthPower: Implementation IDIQ holders and the YouthPower: Evidence and Evaluation IDIQ holders to collaborate throughout the life of both projects.

## Means of Access

Direct Task Order

# YouthPower: Evidence and Evaluation - Task Order #1

## Purpose

YouthPower: Evidence and Evaluation - Task Order #1 falls under the YouthPower: Evidence and Evaluation IDIQ, which is a multiple award IDIQ designed to conduct research, evaluate innovative programs, disseminate information and strengthen/expand the evidence base for cross-sectoral and sector-specific approaches in positive youth development. This task order will support the agency to invest in positive youth development research and evaluation within and across multiple sectors, including health, education, economic opportunity, peace and security, democracy, human rights and governance and strive to evaluate the impact of cross-sectoral youth programming. As the prime contractor, Making Cents International will provide leadership in promoting best and promising practices evidence and research within and across youth development sectors.

The activities planned under this Task Order will complement activities planned under YouthPower: Implementation IDIQ - Task Order #1.

Additionally, Making Cents International will be conducting the following sub-tasks:

1. Create and manage a YouthPower website to serve as a learning hub for cross-sectoral youth development.
2. Establish and maintain a cross-sectoral youth learning network to disseminate research, evaluation, and learning products.
3. Develop a standard indicator reporting system to be used by the YouthPower: Implementation IDIQ and YouthPower: Evidence and Evaluation IDIQ holders.
4. Analysis of positive youth development vs. problem/risk behavior youth programming.
5. Provision of evidence and evaluation support to USAID Missions and operating units, as needed, through evaluation & research technical assistance.

## Means of Access

Core and Field Support

**Agreement Type:**  
Task Order  
**Agreement Number:**  
OAA-TO-15-00011  
**Project Number:**  
936-8101.Ha  
**Duration:**  
4/15 - 4/20  
**Geographic Scope:**  
Worldwide

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# YouthPower: Implementation IDIQ

**Agreement Type:**  
IDIQ  
**Agreement Number:**  
Multiple  
**Project Number:**  
936-8101  
**Duration:**  
2/15 - 2/20  
**Geographic Scope:**  
Worldwide

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## Purpose

The maximum contract ceiling for this IDIQ is \$375 million dollars. There are six (6) IDIQ holders, including one (1) small business set-aside. Operating units can access this mechanism through direct task orders.

The YouthPower: Implementation IDIQ is designed to support USAID in the implementation of its Youth in Development Policy (2012). It will enable the agency and its partners to invest in positive youth development programming that works within and across multiple sectors, including health, education, economic opportunity, peace and security, and democracy, human rights and governance. IDIQ holders form consortia of diverse organizations that bring a range of sector expertise to support single-sector and holistic cross-sectoral youth programs.

The YouthPower: Implementation IDIQ will cover a range of functions related to the cross-sectoral youth program design, piloting, implementation, scale-up, and capacity development. Activities include but are not limited to: project implementation; capacity development of local partners and stakeholders; management of sub-awards to local stakeholders; design and implementation of cross-sectoral youth assessments, piloting of innovative approaches and documentation of results; implementation of action research and performance evaluations; data collection and monitoring; and training of local stakeholders in cross-sectoral youth project assessment, design, and implementation.

USAID expects the YouthPower: Implementation IDIQ holders and the YouthPower: Evidence and Evaluation IDIQ to collaborate throughout the life of both projects.

## Means of Access

Direct Task Order

# YouthPower: Implementation - Task Order #1

## Purpose

YouthPower: Implementation IDIQ - Task Order #1 falls under the YouthPower: Implementation IDIQ, which is a multiple award IDIQ designed to support USAID to invest in positive youth development programming that works within and across multiple sectors, including health, education, economic opportunity, peace and security, and democracy, human rights and governance. Operating units can access this mechanism through core and field support buy-in.

The purpose of Task Order #1 is to support and advance the implementation of USAID's Youth in Development Policy through technical assistance in cross-sectoral, positive youth development programming to USAID Missions and operating units. Task Order #1, led by FHI 360, will strengthen the capacity of USAID operating units, youth development institutions and systems (to include the government, civil society organizations (CSOs), and private sector/business community) to design, implement and sustain positive youth development programming across sectors. Task Order #1 will also facilitate the use of innovative approaches for both implementation and capacity building activities. Some such approaches may include, but not be limited to, the use of information and communications technologies (ICT) and new media tools to strengthen youth engagement and participation and the development of public-private partnerships. This task order will also increase youth engagement in development efforts. Programming will consider the needs of adolescent girls, young women, and at risk and vulnerable populations while considering gender and cultural norms.

The activities planned under this Task Order will complement activities planned under YouthPower: Evidence and Evaluation IDIQ - Task Order #1.

## Means of Access

Core and Field Support

**Agreement Type:**  
Task Order  
**Agreement Number:**  
OAA-TO-15-00003  
**Project Number:**  
936-8101.Da  
**Duration:**  
2/15 - 2/20  
**Geographic Scope:**  
Worldwide

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# Supply Chain Management System (SCMS)

**Agreement Type:**  
Task Order  
**Agreement Number:**  
GPO-I-03-05-00032  
**Project Number:**  
936-3090.140  
**Duration:**  
6/09 - 9/15  
**Geographic Scope:**  
Worldwide

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## Purpose

SCMS is a multi-billion dollar program funded by PEPFAR, managed by USAID and implemented by Partnership for Supply Chain Management (PfSCM). The purpose of the program is to ensure the uninterrupted supply of quality health commodities to people impacted by HIV/AIDS, and to promote sustainable supply chains in partner countries, in collaboration with U.S. agencies and other stakeholders.

SCMS is implemented by the Partnership for Supply Chain Management, a non-profit consortium of thirteen organizations led by John Snow, Inc., Research & Training Institute (JSI) and Management Sciences for Health (MSH).

Other partners include:

Booz Allen Hamilton, Crown Agents USA, Inc., i+solutions, The Manoff Group, MAP International, North-West University, Northrop Grumman, Imperial Health Science (IPS), UPS Supply Chain Solutions, Voxiva, 3i Infotech.

## Services Provided

The program's three main objectives are: Support and Operate a Global Supply Chain; Technical Assistance and System Strengthening; and global collaboration with other stake holders. The technical staff supports the prevention, care and treatment activities of PEPFAR in 22 countries. Working with partner countries, the USG's investment in health commodity procurement through SCMS to date is over \$2 billion, which includes 3,500 types of health products from 200 suppliers, delivered to 23 countries. This includes antiretroviral medicines, test kits, laboratory supplies and equipment, drugs for opportunistic infections, therapeutic food, and male circumcision kits.

As of September 2014, the USG's total investment in supply chain technical assistance through the SCMS program is valued at approximately \$400 million. This assistance has been provided at various levels and functions of developing country supply chains, including the follow areas: forecasting; supply planning; procurement; warehousing; inventory control systems; laboratory harmonization; drug regulatory environments; logistics, warehousing, and other health management information systems. These investments have had a spill over effect, benefiting public health supply chains across multiple health areas.

## Means of Access

Working Capital Fund and Field Support

# Supply Chain Program Quality Assurance Contract

## Purpose

This contract will serve as the primary vehicle through which USAID will assure the quality of health commodities procured in support of global health programs.

## Services Provided

To accomplish this overall contract goal, FHI 360 will

- Establish a comprehensive quality assurance program;
- Design and implement a quality control strategy;
- Provide technical leadership in forums within the quality assurance arena;
- Provide technical assistance to partner country medicines regulatory authority, other government bodies, and academic institutions; and,
- Collaborate with global partners (e.g., Global Fund, UNFPA) and other contractors within the Global Health Supply Chain Program.

## Means of Access

The QA contract is one of six mechanisms under the Global Health Supply Chain Program. Core funding will support the vendor prequalification, recall management, SOP generation, quality control testing, global collaboration, and other activities within this contract. Field support will fund the technical assistance and capacity building activities under this contract.

**Agreement Type:**

Contract

**Agreement Number:**

OAA-C-15-00001

**Project Number:**

936-3090.211

**Duration:**

1/15 - 12/19

**Geographic Scope:**

Worldwide

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## Supply Chain – Rapid Test Kits

**Agreement Type:**  
Task Order  
**Agreement Number:**  
OAA-I-15-00002  
**Project Number:**  
REQ-GH-13-000045  
**Duration:**  
2/15 - 2/26  
**Geographic Scope:**  
Worldwide

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### Purpose

The Global Health Supply Chain – Rapid Test Kits IDIQ (GHSC-RTKs) serves as the singular means of procuring HIV RTKs within the GHSC Program. The GHSC was designed to provide supply chain technical assistance as well as commodity procurement for the Bureau of Global Health, regardless of the commodity type.

As the primary diagnostic tool for determining HIV/AIDS status and the gateway for care and treatment of HIV positive people, RTKs play a vital role in combatting the global HIV/AIDS epidemic. Without an adequate and timely supply of quality RTKs, HIV/AIDS programs cannot function.

Thus Remote Medical International (RMI) will play a vital role in supporting the USG's goal of achieving an AIDS-free generation in our lifetime. The primary objective of this Contract is to ensure the availability of approved HIV Rapid Test Kits (RTKs) using a global procurement strategy. An RTK is defined as an assay for the diagnosis of infection with

HIV-1/2 or type specific diagnosis of HIV-1 and HIV-2, from which test results can be read directly, within 30 minutes of the time the specimen is applied to the device, without calibration or calculations.

The USAID | Global Health Supply Chain – Rapid Test Kits (GHSC-RTKs) project will have the responsibility for the procurement and shipment of HIV rapid test kits (RTKs) to designated destinations and stakeholders for use in host country HIV and AIDS programs. Other procurement and supply chain-related services will be provided by other contracts within the GHSC Program. This IDIQ is a small business set aside.

### Services Provided

Procurement of HIV Rapid Test Kits with delivery to an in-country consignee.

### Means of Access

Working Capital Fund and Field Support

# U.S. Census Bureau Participating Agency Program Agreement (PAPA)

## Purpose

Since 1988, the U.S. Census Bureau has worked with USAID's Bureau of Global Health to enhance the quantity, quality, and utility of HIV/AIDS-related data. These data are used for policy development, program formulation, and monitoring and evaluation, and form an integral part of USAID's work in combating HIV/AIDS. Applying its extensive experience in epidemiological data base projections and population projection modeling, the Census Bureau has contributed to the USAID program with support in monitoring the spread of HIV and in understanding the effect the AIDS pandemic has on development.

## Services Provided

The Census Bureau's HIV/AIDS program includes seven principal activities:

- **HIV/AIDS Surveillance Database:** a collection of all available seroprevalence studies conducted in Africa, Asia, Latin America and the Caribbean, Eastern Europe and the countries of the former Soviet Union, and Oceania;
- **Technical Support:** special "on-request" analysis of data in the Surveillance Data Base, training and consultation on modeling and other projects, and direct assistance to USAID Field Missions in the form of demographic workshops and other TA;
- **Modeling HIV Epidemic Trends:** development of mathematical models of HIV epidemic trends in order to refine existing estimates of mortality;
- **Special Reports:** on important public health or policy issues related to HIV/AIDS;
- **Sample Vital Registration with Verbal Autopsy (SAVVY):** an innovative opportunity to collect reliable data on total deaths and deaths due to HIV/AIDS;
- **Spatial Data Repository:** a planned repository that would house population and health data for PEPFAR countries, potentially including health facilities, spatial characteristics of the spread of HIV/AIDS, and demographic characteristics of target populations; and,
- **Synergy, Collaboration, and Dissemination:** with organizations such as the Centers for Disease Control and Prevention (CDC), MEASURE/Evaluation, the Office of the Global AIDS Coordinator (OGAC), UNAIDS, WHO, the Global Fund, and others.

## Means of Access

Core and Field Support

**Agreement Type:**  
Participating Agency  
Program Agreement (PAPA)

**Agreement Number:**  
GHA-T-00-08-00002

**Project Number:**  
936-3090.93

**Duration:**  
3/08 - 9/16

**Geographic Scope:**  
Worldwide

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# Expenditure Analysis Technical Assistance to Partners (EATAP)

**Agreement Type:**  
Contract  
**Agreement Number:**  
OAA-C-13-00041  
**Project Number:**  
936-3090.138  
**Duration:**  
7/13 - 7/16  
**Geographic Scope:**  
Worldwide

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## Purpose

This three-year project was developed to deliver technical assistance to President's Emergency Plan for AIDS Relief (PEPFAR) implementing partner (IP) organizations in selected countries to complete the PEPFAR Expenditure Analysis (EA) reporting requirement proposed by the Office of the US Global AIDS Coordinator (S/GAC) and document the lessons learned from the implementation of the Expenditure Analysis Initiative.

## Services Provided

The purpose of EATAP is to provide in-country and virtual technical assistance to PEPFAR implementing partners. EATAP is intended to aid in the fulfillment of the expenditure analysis reporting requirements by implementing partners and to that effect will among others:

- Deliver technical assistance and provide training sessions as necessary to implementing partners during the EA data collection period;
- Resolve EA content and data queries raised during the data collection timeframe and after close of the data collection period when the EA team has run all data quality checks;
- Ensure that implementing partners' EA data are accurate and complete prior to submission to the EA data collection module by close of the data collection period; and,
- EATAP is assisting PEPFAR in the development of a Budget Allocation Calculator.

## Means of Access

Core Funding

# International AIDS Vaccine Initiative (IAVI)

## Purpose

USAID provides support to the International AIDS Vaccine Initiative (IAVI), a non-governmental organization, to accelerate the development of an effective vaccine for HIV prevention. This proposal builds upon IAVI's established infrastructure and track record in AIDS vaccine R&D, country programs, and public policy with the primary goal of ensuring the development and distribution of safe, effective, accessible preventive HIV vaccines for use throughout the world, with a particular focus on developing countries. The purpose of the research is grounded in the stark reality of the economic and social devastation of the pandemic in Africa and Asia, a public health catastrophe.

## Services Provided

USAID funds are used to support:

- Vaccine Development Partnerships that are focused on advancing HIV vaccine candidates to clinical trials. Vaccine Development Partnerships link scientists in industrialized and developing countries with counterparts in the private vaccine industry. This team approach provides the technical, organizational, and financial resources needed for vaccine development. The desired result is that significantly improved vaccine products are developed and prioritized, and the most promising are tested in clinical trials;
- The Core Immunology Laboratory, which provides standardized reagents, training for developing country scientists, and quality assurance/quality control for laboratory testing associated with HIV vaccine clinical trials;
- Non-human primate studies to assist in the pre-clinical development and evaluation of HIV vaccine candidates;
- Site development and community preparations for HIV vaccine efficacy trials in developing countries. Vaccine clinical trial centers have been established in Kenya, Uganda, Rwanda, Zambia, South Africa, and India;
- Clinical trials of vaccine candidates and that these studies proceed efficiently and at the highest ethical standards to inform product development and prepare for efficacy trials in developing countries; and,
- Public policy research to accelerate and support HIV vaccine research and development and future access. To achieve these results, IAVI is proposing an ambitious but realistic scope of work supported by IAVI's growing network of clinical trial centers in developing countries in East and Southern Africa and India that we make ready and sustain, to flexibly utilize for efficacy trials of the most promising vaccine candidates.

## Means of Access

Core Only

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-11-00020  
**Project Number:**  
936-3090.66  
**Duration:**  
9/11 - 9/16  
**Geographic Scope:**  
Worldwide

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# Livelihood and Food Security Technical Assistance II (LIFT II)

**Agreement Type:**  
Cooperative Agreement  
under LWA Award  
EEM-A-00-06-0001

**Agreement Number:**  
OAA-LA-13-00006

**Project Number:**  
936-8400.01

**Duration:**  
8/13- 7/18

**Geographic Scope:**  
Worldwide Code 935

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## Purpose

LIFT II provides technical assistance to design and establish referral systems for economic strengthening, livelihood and food security (ES/L/FS) services in conjunction with and as a means to enhancing engagement, adherence and retention of PLHIV and other patients in clinical care and treatment. LIFT II is a five-year project aimed at strengthening ES/L/FS services delivery in conjunction with health programs, working with USG agencies, implementing organizations, governments, civil society and the private sector. The primary goal of LIFT II is to support evidence-based, gender-sensitive programming to improve household food security and resilience as a component of a continuum of nutrition and health care.

## Services Provided

LIFT II provides technical assistance in support of ES/L/FS activities, particularly in the context of Nutrition Assessment, Counseling and Support (NACS) programs including: conducting assessments of country ES/L/FS activities; developing ES/L/FS strategies and implementation plans; designing and supporting monitoring and evaluation of ES/L/FS activities to assess impact, cost effectiveness, potential for replicability and scale-up, and sustainability; supporting policy development for ES/L/FS programs; leveraging of other donor resources; and strengthening implementing partner capacity, including training and quality improvement. LIFT II focuses on establishing referral systems at the local level that assess the needs of individuals and families, refers them to local ES/L/FS services, strengthens those services, and tracks those served to promote retention and adherence in clinical care.

## Means of Access

LIFT II is an Associate Award in the Office of HIV/AIDS under the Bureau for Economic Growth, Education and Environment (E3) FIELD Support Leader with Associate (LWA) Cooperative Agreement, managed by FHI 360, for the purpose of supporting the effective design and delivery of integrated ES/L/FS strengthening programs. Core funding is limited, but initial support for country assessments and program design and planning can be requested from OHA. Country-level agencies can access further ES/L/FS technical support through funding of their own associate awards or by adding funds to the OHA LIFT II award.

# Project SEARCH GBV Evaluation TO - Tathmini GBV (Futures Group)

## Purpose

The purpose of this Task Order is to evaluate the effectiveness of gender-based violence (GBV) prevention and response interventions, in the Mbeya Region of Tanzania. The types of GBV that are the focus of the Tathmini GBV program evaluation are intimate partner violence and sexual violence against adults and children, regardless of the relationship with the perpetrator. This task order provides tools and methods for evaluating promising service delivery and community-based intervention models for GBV prevention and related HIV outcomes; and bolsters the evidence-base for improving and scaling up effective GBV programs worldwide.

Futures Group is the prime implementer in collaboration with MUHAS, Pangea Foundation, and Population Council.

## Description of the study

Study to compare the effectiveness of GBV comprehensive programming over time with standard practice in control facilities and communities. The study will examine whether the comprehensive GBV program leads to increased care for GBV survivors. Secondary aims include assessment of program effects related to knowledge, attitudes, and norms regarding GBV and gender equality; community-led actions to address GBV; knowledge of and barriers to utilization of GBV services; GBV service components and quality; GBV service and program capacity and coverage; and HIV-related outcomes. The program itself will be implemented by local partners who are supported by PEPFAR through the Walter Reed Program in Tanzania.

## Dissemination

National stakeholder meeting to build consensus on information needs; Regional, district, and community-level meetings in the Mbeya Region; Workshops with PEPFAR IPs on routine M&E, in collaboration with UCSF and DOD; Dissemination of technical briefs, evaluation study reports for dissemination nationally and in study communities.

## Means of Access

N/A

### Agreement Type:

IQC

### Agreement Number:

GHH-I-00-07-00029

OAA-TO-12-00009

### Project Number:

936-3090.Ra

### Duration:

2/12 - 8/15

### Geographic Scope:

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# Project SEARCH: Population Council Task Order (HIVCore)

**Agreement Type:**  
Task Order  
**Agreement Number:**  
OAA-TO-11-00060  
**Project Number:**  
936-3090.Ta  
**Duration:**  
9/11 - 9/16  
**Geographic Scope:**  
Worldwide

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## Purpose

The task order is being led by Population Council with the following partners: Futures Group, Elizabeth Glaser Pediatric AIDS Foundation, and University of Washington. The purpose of this task order is to improve access to and quality and effectiveness of HIV/AIDS treatment, care and support, and prevention of mother to child (PMTCT) service delivery programs in developing countries through operations research. Studies and evaluations conducted under the task order will identify and address gaps in programming knowledge in these areas and increase the evidence base for scaling up promising approaches.

The task order can accept field support from all USAID Missions for HIV treatment, care and support and PMTCT operations research and basic program evaluation activities. Project evaluations (e.g., mid-term and endline project performance evaluations) will not be undertaken under this task order.

## Services Provided

- To identify critical knowledge gaps and conduct operations research and evaluation activities to inform program strategies relating to quality, sustainability, cost effectiveness, and efficiencies;
- To identify service delivery approaches for successful program implementation, guideline adoption and adaptation to achieve the greatest sustainable programmatic outcomes through small-scale and basic program evaluations; and,
- To document and disseminate promising approaches and best practices within a framework of operations research to promote utilization of results.

## Means of Access

Field Support

# IS APS: The Partners Demonstration Project

## Purpose

An open-label, pilot demonstration and evaluation project of antiretroviral based HIV-1 prevention among high-risk HIV-1 serodiscordant African couples, the Partners Demonstration Project is one of eight studies awarded under the first round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

In Africa, HIV serodiscordant couples account for a substantial proportion of new HIV infections. Several studies have shown pre-exposure prophylaxis (PrEP) and initiation of antiretroviral therapy (ART) can significantly reduce HIV transmission. However, some HIV-infected individuals do not want to begin ART until they are symptomatic, and national guidelines for ART typically are based on WHO guidelines for HIV-infected persons with CD4<350. Providing PrEP to the HIV-negative partner as a bridge until the HIV-infected partner initiates ART and achieves viral suppression could be an effective method to prevent HIV transmission in HIV serodiscordant couples.

This study looks to examine the feasibility and effectiveness of bridging PrEP to ART in decreasing HIV transmission among HIV serodiscordant couples. The primary objectives are to identify high-risk HIV serodiscordant couples in Kenya and Uganda based on an empiric risk score and the factors that affect the successful implementation of PrEP as a bridge to ART. Other objectives include measuring the proportion of individuals who achieve sustained adherence to ART and PrEP, and determine the impact of the bridging strategy on HIV transmission and cost-effectiveness. This project will study how to translate the efficacy of antiretrovirals for prevention of HIV transmission into a public health delivery model focused on HIV serodiscordant couples.

## Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

## Means of Access

Core Funding

### Agreement Type:

Cooperative Agreement

### Agreement Number:

OAA-A-12-00023

### Project Number:

936-3090.123

### Duration:

7/12 - 7/15

### Geographic Scope:

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# IS APS: Project START

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00022

**Project Number:**  
936-3090.122

**Duration:**  
7/12 - 7/15

**Geographic Scope:**  
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## Purpose

The Start TB patients on ART and Retain on Treatment study (Project START) is one of eight studies awarded under the first round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

Tuberculosis (TB) morbidity and mortality among HIV-infected patients remains a major problem in Africa. In Lesotho, HIV prevalence is the world's third highest (23 percent), and the TB incidence rate is the world's sixth highest (633 cases per 100,000 population). Fortunately, effective treatments exist for individuals affected by both HIV and TB. Provision of ART for those being treated for TB reduces mortality risk by 64 percent to 95 percent and is associated with a reduction in recurrent TB. Despite substantial evidence of the benefits of early ART initiation for HIV-infected TB patients, implementation and uptake have been suboptimal.

This study looks to evaluate the cost-effectiveness and acceptability of a combination of interventions to improve early ART initiation and retention during TB treatment, as well as TB treatment success among HIV-infected TB patients in Lesotho. Researchers will address the evidence-to-program gap to overcome barriers that prevent early ART implementation in high-burden, resource-limited settings.

## Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

## Means of Access

Core Funding

# IS APS: Impact Evaluation of SILC on Child Household Well-being

## Purpose

Impact Evaluation of Savings and Internal Lending Communities on Child Household Well-being is one of eight studies awarded under the first round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

Zambia has one of the highest HIV prevalence rates in the world, and as in other countries with high HIV prevalence, Zambia suffers from high-poverty rates, high food insecurity, and high child malnutrition. To mitigate these impacts of high HIV prevalence and incidence, the Government of Zambia is committed to improving social support programs for households, specifically economic strengthening and food security programs.

Futures Group will examine the impact of a community savings model, known as savings and internal lending communities (SILC), on child and household well-being in Zambia. Futures Group will examine the impact of a community savings model, known as SILC, on child and household well-being in Zambia. The study will assess the impact of caregivers' participation in SILC on children's food security and examine how participation in SILC changes household decision-making dynamics, children's nutritional status, access to health and school services, and household expenditures. The study results will identify effective approaches to implementing savings and loan group models, promoting economic security for orphans and vulnerable children (OVC) households, and improving children's access to health care, education, and nutrition.

## Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

## Means of Access

Core Funding

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00021

**Project Number:**  
936-3090.121

**Duration:**  
7/12 - 7/15

**Geographic Scope:**  
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# IS APS: Situkulwane Lesiphephile - Safe Generations

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00020

**Project Number:**  
936-3090.120

**Duration:**  
7/12 - 3/16

**Geographic Scope:**  
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## Purpose

Improving Approaches to ARV Therapy for HIV+ Pregnant Women (Situkulwane Lesiphephile - Safe Generations) is one of eight studies awarded under the first round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

Mother-to-child transmission of HIV is attributable to 90 percent of new pediatric HIV infections worldwide, evidence indicates that initiating ARV therapy during pregnancy can effectively reduce MTCT. Many factors including but not limited to timely, diagnosis of maternal HIV and initiation of ARV therapy, have prevented effective PMTCT efforts.

This study will evaluate the feasibility and cost-effectiveness of providing all HIV-positive pregnant women lifelong triple ARV therapy, regardless of CD4 count (Option B+), in the Kingdom of Swaziland. All enrolled women and their infants will be comprehensively followed up to determine outcomes. The goal of the study is to show that a single, streamlined approach to ARV therapy for HIV-positive pregnant women will lead to more effective PMTCT.

## Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

## Means of Access

Core Funding

## IS APS: REaCH

### Purpose

Randomized Evaluation of HIV/FP Service Models Program (REaCH) is one of eight studies awarded under the first round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

In Zambia and other African countries, a fragmentation exists in the continuity of care between FP and HIV services. Previous modeling has shown that in generalized HIV epidemics, integration of FP and HIV services is critical and very cost-effective in controlling HIV transmission. Unfortunately, the service models between nongovernmental organizations and government-sponsored public care are disconnected and have limited the effectiveness of FP and HIV service linkage efforts. This has led to missed opportunities for averting unintended pregnancies and new HIV infections. Furthermore, poor tracking and follow-up has likely led to lower uptake of life saving ART and cost-effective prevention methods such as voluntary medical male circumcision.

REaCH, a randomized controlled trial, compares the incremental costs and health service utilization of two models of FP and HIV service linkage and integration: a comprehensive provider-initiated referral model with client follow-up; and an integrated services model. Results of the evaluation will contribute to the evidence base used to inform FP and HIV service integration programming in Zambia, PEPFAR priority countries and globally.

### Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

### Means of Access

Core Funding

**Agreement Type:**

Cooperative Agreement

**Agreement Number:**

OAA-A-12-00026

**Project Number:**

936-3090.125

**Duration:**

7/12 - 7/15

**Geographic Scope:**

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# IS APS: Thol'impilo: Bringing People into Care

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00028

**Project Number:**  
936-3090.127

**Duration:**  
7/12 - 7/15

**Geographic Scope:**  
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## Purpose

An Evaluation of Strategies to Accelerate Entry into Care following HIV Diagnosis, Thol'impilo: Bringing People into Care is one of eight studies awarded under the first round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

Late initiation of ART of newly diagnosed HIV-positive patients contributes to the high HIV, associated mortality, and HIV incidence in South Africa. Even after raising the CD4 count threshold to initiate therapy, late entry to ART remains a prevalent problem in South Africa. One proposed reason for late entry is the failure to connect people who test positive for HIV into immediate care. This has led to increased HIV associated mortality and contributed to HIV transmission. Thol'impilo: Bringing People into Care looks to examine how to increase effectively and efficiently the timely entry into care among people recently diagnosed as HIV-positive.

Thol'impilo: Bringing People into Care assigns HIV-positive HTC patients to 1 of 4 arms: POC CD4 testing, POC CD4 testing and care facilitation/case management, POC CD4 testing and transport assistance, or standard of care. Each strategy tested addresses key barriers to timely initiation of ART; health perceptions, personal barriers, and structural barriers.

Other factors that will be examined include the time to initiate ART among those eligible, retention in care 6 months from entry, cost-effectiveness, and impact on mortality and HIV transmission.

## Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

## Means of Access

Core Funding

# IS APS: ENGAGE4HEALTH

## Purpose

A Combination Strategy for Linkage and Retention, ENGAGE-4HEALTH is one of eight studies awarded under the first round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

ENGAGE4HEALTH addresses the challenges of ensuring effective linkage from HIV testing to HIV care and retention in HIV care among individuals who have successfully linked to care. Linkage and retention remain challenging in many PEPFAR priority countries. Available data suggest that less than one-third of individuals who test positive are successfully linked to and retained in HIV care at one year. Previous research has failed to address the multiple concurrent barriers newly diagnosed HIV patients face in the linkage from HIV testing to HIV care. In addition, most previous research has examined retention in HIV care instead of identifying weaknesses in linkage.

ENGAGE4HEALTH, a site-randomized study in Mozambique, will compare the effectiveness of a combination of interventions, versus the current standard of care, on linkage and retention of newly diagnosed HIV patients. Patients will be followed from initial testing to retention in care one year later. In addition, ENGAGE4HEALTH will look at the incremental effect of providing non-cash financial incentives in conjunction with the combination of interventions compared to the combination of interventions alone. ENGAGE4HEALTH hypothesizes that a combination of interventions of linkage and retention will be more effective in mitigating the multiple barriers HIV-positive patients face when moving from diagnosis to treatment.

## Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

## Means of Access

Core Funding

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00027

**Project Number:**  
936-3090.126

**Duration:**  
7/12 - 7/16

**Geographic Scope:**  
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## IS APS: The Kabeho Study

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00024

**Project Number:**  
936-3090.124

**Duration:**  
7/12 - 7/16

**Geographic Scope:**  
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### Purpose

Kigali Antiretroviral and Breastfeeding Assessment for the Elimination of HIV (The Kabeho Study) is one of eight studies awarded under the first round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

In 2010, the World Health Organization released a series of guidelines for the prevention of mother-to-child transmission of HIV (PMTCT). These guidelines highlighted effective infant feeding practices and emphasized the use of ARVs to make extended breast feeding a safe option for HIV-positive women and children. The Government of Rwanda took these guidelines a step further and initiated all HIV-positive women on lifetime ARV therapy in addition to infant feeding counseling and support programs to reduce pediatric HIV and allow for safe breast feeding practices. However, large evidence gaps on how to effectively carry out national PMTCT programs to eliminate pediatric HIV in resource-limited countries exist. Challenges of PMTCT program scale-up include adherence to long drug regimens and regular attendance at prenatal and postnatal clinics for safe breast feeding practices.

The Kabeho Study will examine the effectiveness and feasibility of universal ART for HIV-positive pregnant women coupled with infant feeding counseling and food support on 18-month HIV-free survival of HIV-exposed children in Kigali, Rwanda. Other objectives include determining factors associated with optimal infant growth and adherence to the ART regimen. This study addresses the lack of evidence that exists in how to effectively scale up ARV therapy and infant feeding counseling and support for PMTCT efforts in low-resource countries, and how effective these programs are in reducing mother-to-child transmission (MTCT).

### Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

### Means of Access

Core Funding

# IS APS: HIV Prevention 2.0

## Purpose

“HIV Prevention 2.0 (HP2): Achieving an AIDS-Free Generation in Senegal” is one of two studies awarded under the second round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>).

Individual level biological and behavioral risks among key populations are contextualized by higher order risk factors including size and density of social and sexual networks, as well as stigma operating at the community level and affecting public policies. Recipient’s studies have consistently demonstrated that the manifestations of stigma targeting key populations in the African context limit both the provision and uptake of effective HIV prevention, treatment, and care programs. The dual reality of the importance of HIV risks among key populations in generalized epidemics and the role of stigma in driving risks necessitates characterizing valid tools to measure stigma in these populations and effective interventions to reduce it.

The study will measure impacts of a scalable package of integrated stigma mitigating interventions for key populations, including men who have sex with men and female sex workers. Employing a non-randomized prospective cohort design in Dakar, Senegal, outcomes will include coverage of HIV and health services and, for participants living with HIV, adherence to antiviral therapy and viral load measures. A multifaceted approach will employ behavioral and web-based community interventions in order to support biomedical services deployed in Dakar through the Ministry of Health. The premise relies on the continuum of HIV care for key populations that asserts the most effective process for diagnosis, linkage and retention to care for populations at highest risk of HIV acquisition and transmission is the availability of testing services and access to treatment.

## Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

## Means of Access

Core Funding

### Agreement Type:

Cooperative Agreement

### Agreement Number:

OAA-A-13-00089

### Project Number:

936-3090.134

### Duration:

9/13 - 9/16

### Geographic Scope:

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# IS APS: Evaluation of the National South African Female Condom Program

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-13-00069

**Project Number:**  
936-3090.133

**Duration:**  
9/13 - 12/16

**Geographic Scope:**  
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## Purpose

“Evaluation of the National South African Female Condom Program: Investigating Factors Associated with Uptake and Sustained Use” is one of two studies awarded under the second round of the Annual Program Statement: Implementation Science Research to Support Programs under PEPFAR (IS APS, <http://go.usa.gov/Ye83>). The female condom was identified by the Reproductive Health Supplies Coalition in 2011 as one of several under-used reproductive health technologies having the potential to expand choice in reproductive health and family planning programs, add value to the method mix, and respond to the needs of diverse types of clients. The female condom is also key to increasing HIV protection options and is the only female-initiated HIV prevention barrier method. South Africa has one of the largest and best-established, public-sector male and female condom programs world-wide. This evaluation aims to strengthen the program through identification of strategies that are most likely to enhance its acceptability, effectiveness and efficiency, enabling evidence-based adaptation for program scale-up.

A Cascade Model will be applied to identify and understand program and behavioral challenges affecting uptake of female condoms. This model will analyze “fall off” at various stages, including: (1) the macro-structural level; (2) service delivery; (3) provider promotion via counseling and provision of FC; (4) gender; (5) users (initial adoption and continuation of use over 12 months); and (6) user access to a sustained supply of female condoms. The evaluation will comprise three complementary components, each interrogating different junctures of the Cascade Model using a mixed-methods approach: a national evaluation sample of female condom distribution sites; a cohort of 300 new female condom acceptors and 60 of their partners for longitudinal assessment of key outcomes related to condom use, HIV-related behaviors, and relationship characteristics; and key informant interviews with policymakers and program managers to identify critical issues such as overall program leadership and coordination, training, supply and commodity security, advocacy, monitoring and integration with other programs.

## Services Provided

The APS supports implementation science research and evaluation activities, but it does not provide funding to support or establish service delivery activities.

## Means of Access

Core Funding

# Grant Management Solutions (GMS 2) Project

## Purpose

This contract provides technical assistance to improve the functioning of Global Fund grants to fight AIDS, tuberculosis, and malaria. The aim of the GMS project is to improve the functioning of Global Fund grants, and thereby increase the effectiveness and efficiency of prevention, care and treatment interventions for HIV/AIDS, TB and malaria in countries seeking TA. The mission of GMS is to provide urgent, short-term TA to CCMs and PRs for the purpose of unblocking bottlenecks and resolving systemic problems that hinder the response to the three diseases, as well as to engage in capacity building and knowledge dissemination activities.

## Services Provided

GMS has three objectives:

1. Provide urgent, short-term, management-related technical support to Global Fund grantees in order to allow and improve the functioning of Global Fund grants, thereby increasing the quality and effectiveness of prevention, care and treatment interventions for HIV/AIDS, tuberculosis and malaria. This urgent, short-term support will constitute the majority of the support provided. Medium- to long-term technical assistance may also be provided on a more limited basis as directed by the COR. This support is generally provided in four technical areas:

- Organizational development (including governance and leadership) for Global Fund Country Coordinating Mechanisms (CCMs);
- Program and financial management for Global Fund Principal Recipients (PRs);
- Procurement and supply management (PSM); and
- Monitoring and evaluation (M&E)

2. Scale up the number of local people and institutional entities that have knowledge of the Global Fund and can provide high-quality management support to Global Fund grantees, by engaging in mentoring and training relationships with 12 regional entities.

3. Develop knowledge-sharing platforms. This involves developing, collating, and widely disseminating tools/guidance/curricula/ lessons learned with the broader Global Fund community, including other technical support providers.

## Means of Access

Core funding (applications accepted from CCMs and PRs and reviewed by U.S. Government Global Fund Technical Support Advisory Panel [TSAP]) and Field Support.

### Agreement Type:

Contract

### Agreement Number:

OAA-C-12-00040

### Project Number:

936-3090.129

### Duration:

10/12 - 9/17

### Geographic Scope:

Worldwide

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# Joint U.N. Programme on HIV/AIDS (UNAIDS III)

**Agreement Type:**

Grant

**Agreement Number:**

AID-GH-IO-12-00001

**Project Number:**

936-3090.128

**Duration:**

10/12 - 9/17

**Geographic Scope:**

Worldwide

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## Purpose

The UNAIDS III grant seeks to expand UNAIDS' response to the global HIV epidemic by supporting its 2011-2015 Strategy, which aims to advance global progress in achieving targets for universal access to HIV prevention, treatment, care, and support; to halt and reverse the spread of HIV; and to contribute to the achievement of the Millennium Development Goals by 2015. The scope of the grant provides core support to the following strategic areas:

- Leadership and advocacy
- Coordination, coherence and partnerships
- Building country ownership, mutual accountability & sustainable capacity
- Knowledge translation
- Measurement of progress and improved accountability

## Services Provided

In addition to the focus areas listed above, UNAIDS III supports the following components:

- Combination Prevention – predicated on the idea that no single intervention is effective alone in the control of HIV transmission;
- Smart Investments – with the expectation that the UNAIDS Secretariat can play a leadership role in helping all stakeholders to maximize the impact of every dollar;
- Country Ownership – with the ultimate goal of having recipient countries plan, oversee, manage, deliver, and eventually finance health programs that are fully responsive to the needs of their people;
- Women, Girls and Gender Equality – acknowledging the need to address the disproportionate impact of HIV / AIDS on women and girls, UNAIDS should play a key role in redressing gender imbalances, empowering women and girls and improving health outcomes for individuals, families, and communities;
- OVC and other Key Populations – UNAIDS should continue to strengthen its engagement with civil society and networks of people living with HIV in order to facilitate their full, active and meaningful participation;
- Strategic Information – acknowledging that UNAIDS has played a leading role in coordinating efforts to harmonize and synthesize HIV data for decision-making, UNAIDS should continue to guide the coordination, development and use of strategic information;
- Technical Support Facilities (TSF) – which provide technical support on possible solutions for Global Fund grants experiencing implementation bottlenecks. This is demand driven and includes capacity building of local experts and groups to provide longer-term support.

## Means of Access

Core Funding and Field Support

# Advocacy in Action: A Comprehensive Advocacy Strategy for Microbicide Introduction

## Purpose

The objective of the project is to develop multi-stakeholder advocacy coalitions to plan and execute advocacy strategies facilitating microbicide research and accelerated access.

## Services Provided

This project includes the following aims:

- Create and strengthen innovative and flexible multi-stakeholder coalitions that plan and execute advocacy strategies identifying and addressing key issues related to microbicide research and access; and,
- Develop and strengthen civil society advocacy capacity to influence decision points as well as national and international issues associated with planning for product introduction.

## Means of Access

Core Funding

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-13-00032  
**Project Number:**  
936-3090.132  
**Duration:**  
5/13 - 5/16  
**Geographic Scope:**  
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# Media Messages and Mobilization: Engaging Media Professionals in Microbicides Research and Introduction

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-13-00030

**Project Number:**  
936-3090.130

**Duration:**  
5/13 - 5/16

**Geographic Scope:**  
Worldwide

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## Purpose

This project is designed to create an informed, favorable and accurate media environment for microbicide research and accelerated introduction through ongoing support to media professionals and the broad array of stakeholders who play a role in research, preparedness and implementation efforts.

## Services Provided

This project includes the following aims:

- Cultivate and nurture a cadre of informed, engaged journalists working globally and in key countries where microbicide research is planned, ongoing and/or where early introduction of approved products is likely to occur; and,
- Ensure proactive and real-time dissemination of key information and consistent and accurate messaging to journalists, trial-site staff, research networks, civil society and other key stakeholders engaged with microbicide research and preparations for product introduction.

**Means of Access**

Core Funding

# Microbicides Access and Introduction Stakeholder Group

## Purpose

The objective of the project is to support USAID's external and interdisciplinary Microbicide Access and Introduction Stakeholder Group in order to generate thoughtful, informed input that enables microbicide research and speeds the process of preparing for product introduction.

## Services Provided

This project includes the following aims:

- Build an informed, active, influential and multidisciplinary group of individuals representing the full range of constituencies in key countries and regionally in Africa; and,
- Consolidate and leverage the group's inputs and influence to ensure maximum positive impact on microbicide access preparedness at national and international levels.

## Means of Access

Core Funding

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-13-00031  
**Project Number:**  
936-3090.131  
**Duration:**  
5/13 - 5/16  
**Geographic Scope:**  
Worldwide

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# Development of Novel On-Demand and Longer-Acting Microbicide Product Leads

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00010

**Project Number:**  
936-3090.143

**Duration:**  
11/13 - 11/18

**Geographic Scope:**  
Worldwide

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## Purpose

To develop new on-demand and longer-acting microbicide products that can reach or be ready for clinical testing with the timeframe of the agreement and meet the criteria of being more potent, acceptable, discreet, longer and broader acting in order to improve adherence and effectiveness.

## Services Provided

This project includes the following activities:

- Advancing the clinical development of novel TFV-based products that are already or will be in clinical testing prior to the start of this project;
- Developing improved, more effective microbicide products using on-demand and longer-acting drug delivery systems; and,
- Expanding the preclinical pipeline by designing and testing new formulations incorporating novel microbicide candidates with different mechanisms of action.

## Means of Access

Core Funding

# Validation of Objective Measures of Product Adherence for Microbicide Trials

## Purpose

To develop a composite, sensitive, and robust panel of biomarkers which objectively measure (1) vaginal/rectal insertion of product, (2) semen exposure, and (3) drug/placebo delivery at the mucosa to permit a rational interpretation of microbicide results.

## Services Provided

This project includes the following activities:

- Optimizing and automating biomarkers of vaginal insertion, semen exposure and product/gel delivery from returned, used vaginal applicators;
- Validating a triple adherence marker in clinical studies utilizing timed intercourse, intravaginal insemination and directly observed insertion of TFV and placebo gel applicators in the U.S. and Africa; and,
- Applying the triple adherence markers to a subset of returned gel applicators from the FACTS 001 and CAPRISA 008 studies.
- Discovering biomarkers to differentiate rectal from vaginal insertion of returned microbicide gel applicators.

## Means of Access

Core Funding

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-14-00005  
**Project Number:**  
936-3090.141  
**Duration:**  
11/13 - 11/16  
**Geographic Scope:**  
Worldwide

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# Completion of Phase III Microbicide Clinical Trial for Tenofovir 1% Gel

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00011

**Project Number:**  
936-3090.142

**Duration:**  
11/13 - 11/18

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## Purpose

The objectives of this program are to complete clinical and regulatory activities required for licensure of tenofovir (TFV) 1% gel for the prevention of vaginal HIV acquisition in women and to provide information about its implementation in African populations.

## Services Provided

This project includes the following activities:

- Completing clinical activities required for TFV 1% gel licensure;
- Completing regulatory activities required for TFV 1% gel licensure;
- Conducting open-label TFV 1% gel Implementation Studies in South Africa and other African countries; and,
- Conducting a bridging study for the approval of one TFV 1% gel that is safe and acceptable for vaginal and rectal use.

## Means of Access

Core Funding and Field Support

# Dapivirine Ring Microbicide Licensure Program

## Purpose

To successfully obtain regulatory approval for the monthly dapivirine vaginal ring from the Medicines Control Council (MCC) in South Africa and as broadly as possible from other National Regulatory Authorities in Africa and other regions of the world with significant HIV epidemics.

## Services Provided

This project includes the following aims:

- Completion of IPM 027 with ongoing and expanded adherence measurements;
- Implementation of a Phase IIIb trial in IPM 027 research centers.
- Preparation and filing of regulatory dossiers; and,
- Execution of studies to reduce the cost of manufacturing dapivirine ring.

## Means of Access

Core Funding

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-13-00095  
**Project Number:**  
936-3090.136  
**Duration:**  
12/13 - 12/18  
**Geographic Scope:**  
Worldwide

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# Advancing the Microbicide Pipeline

**Agreement Type:**  
Cooperative Agreement

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OAA-A-13-00096

**Project Number:**  
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**Duration:**  
9/13 - 9/18

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## Purpose

To advance promising ARV-based microbicides through preclinical and early-/mid-stage clinical testing.

## Services Provided

This project includes the following aims:

- Advance DS003-based tablet and ring through Phase I/II clinical evaluation;
- Advance maraviroc and maraviroc-combination rings through formulation and preclinical development; and,
- Identify and evaluate new and early development ARV compounds with alternative mechanisms of action for pipeline progression.

## Means of Access

Core Funding

# Thin-Film Polymer Device for Microbicide Delivery

## Purpose

To develop a novel microbicide sustained-release delivery system in the form of a subcutaneously injected and biodegradable thin-film polymer device that improves on the effectiveness, acceptability, usage, and accessibility of existing microbicide delivery systems. To test the safety, pharmacokinetics (PK), pharmacodynamics (PD), and acceptability of ARVs systemically delivered through the novel TFPD by conducting IND-enabling pre-clinical and Phase I clinical studies.

## Services Provided

This project includes the following activities:

- Identification of lead and back up ARV candidate and technology development;
- Pre-IND/preclinical research;
- IND regulatory activities;
- Pilot product manufacturing and clinical translation; and,
- Phase I clinical work

## Means of Access

Core Funding

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-14-00012  
**Project Number:**  
936-3090.144  
**Duration:**  
11/13 - 11/18  
**Geographic Scope:**  
Worldwide

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# Microbicide Adherence Measurement and Optimization

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00003

**Project Number:**  
936-3090.145

**Duration:**  
11/13 - 11/16

**Geographic Scope:**  
Worldwide

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## Purpose

To create a coherent, validated, and feasible adherence measurement and support package for use in ARV-based vaginal ring trials. The package will integrate evidence and best practices related to adherence measurement and support together with promising biomedical inventions.

## Services Provided

This project includes the following aims:

- Develop, test, and refine adherence support messages and other communications that can be used in future clinical trials to maximize ring adherence;
- Develop a vaginal ring psychometric adherence scale that is inexpensive and easy to administer, with better predictive ability than current self-report adherence measures;
- Produce designs, models, and/or prototypes for innovative tools to measure ring adherence, using “smart” and biometric technologies to detect ring insertion and/or removal; and,
- Establish a Consortium for Ring Adherence to provide a much needed mechanism for interdisciplinary collaboration in advance of clinical trials to address known challenges pre-emptively.

## Means of Access

Core Funding

# Non-ARV-Based Microbicide

## Purpose

To develop a safe, effective, and acceptable non-ARV-based microbicide that protects users against HIV and also STIs and that can be delivered via different vehicles suitable for provision through public-sector programs.

## Services Provided

The project includes the following aims:

- Develop a griffithsin microbicide to be formulated as a sustained-delivery vaginal ring and an on-demand nanofiber delivery system;
- Demonstrate the safety and efficacy of the griffithsin formulations against HIV and other STIs in vitro, ex vivo, and in vivo;
- Identify and follow the regulatory path needed to secure INDs to advance the griffithsin microbicides for clinical testing; and,
- Plan and conduct a first-in-human Phase 1 clinical study on a griffithsin gel.

## Means of Access

Core Funding

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-14-00009  
**Project Number:**  
936-3090.146  
**Duration:**  
12/13 - 12/18  
**Geographic Scope:**  
Worldwide

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# Project SOAR (Supporting Operational AIDS Research)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00060

**Project Number:**  
936-8401.01

**Duration:**  
9/14 - 9/19

**Geographic Scope:**  
Worldwide

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## Purpose

The goal of Project SOAR (Supporting Operational AIDS Research) is to improve the quality and impact of HIV and AIDS program outcomes by strengthening operations research and evaluation activities. Project SOAR supports the PEPFAR Blueprint Roadmap for Driving Results with Science and contributes to PEPFAR's Impact Agenda.

Project SOAR is awarded to the Population Council in collaboration with its partners, the Elizabeth Glaser Pediatric AIDS Foundation, Futures Group, Futures Institute, Johns Hopkins University, and the University of North Carolina at Chapel Hill. Project SOAR is a five-year cooperative agreement with a ceiling of \$70 million. The period of performance is September 15, 2014 through September 14, 2019. This mechanism accepts both core funds and field support.

## Services Provided

The project will advance an operations research and evaluation agenda, in collaboration with the Office of HIV and AIDS and USAID country teams in three areas:

1. Conducting high quality operational research and evaluation studies to improve and advance HIV and AIDS program implementation;
2. Capacity building to strengthen local institutions' capacity to design and conduct high quality operational research and evaluation, and; and,
3. Data dissemination and data utilization of operational research and evaluation data and findings.

## Means of Access

Field Support





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Office Director

*Elizabeth Fox*

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*Cheri Vincent, Division Chief*

Maternal and Child Health Division (MCH)

*John Borrazzo, Division Chief*

Nutrition Division (NUT)

*Anne Peniston, Division Chief*

Global Health Security and Development (GHSD)

*Dennis Carroll, Director*

*Andrew Clements, Deputy Director*

Malaria Division (MAL)

*Julie Wallace, Division Chief*

# UNICEF MCH Umbrella Grant

**Agreement Type:**  
Grant  
**Agreement Number:**  
GHA-G-00-07-00007  
**Project Number:**  
936-3080.06  
**Duration:**  
9/07 - 9/20  
**Geographic Scope:**  
Worldwide

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## Purpose

To implement activities designed to improve MCH through a wide range of interventions including Integrated Management of Childhood Illness (IMCI), micronutrient fortification and supplementation programs (specifically iodine and vitamin A), early newborn care, and WASH.

Note: polio/immunization activities and procurements are supported under separate agreements with UNICEF.

## Services Provided

This grant funds activities implemented through UNICEF's country, regional and headquarter offices in support of a wide range of MCH interventions. Country-specific proposals are needed to define the activities to be conducted in support of national programs and USAID mission strategic plans. In general, activities can focus on improving service delivery, planning and training, monitoring and evaluation, advocacy and communications, limited equipment procurement (e.g., cold chain) and policy development.

## Means of Access

Field Support

# Centers for Disease Control and Prevention IAA Agreement II

## Purpose

To strengthen the delivery of infectious disease and other health programs in developing countries by accessing technical expertise from the Centers for Disease Control and Prevention (CDC) and collaborating with the CDC to address infectious disease and other health problems in the developing world.

## Services Provided

The umbrella Interagency Agreement (IAA) with CDC allows USAID to access technical expertise from CDC, a world-renowned source of specialized technical experience and expertise in the international health field. The IAA supports activities in the control and prevention of infectious diseases including tuberculosis, malaria, disease surveillance, antimicrobial resistance, neglected tropical diseases, and environmental health.

Specific work plans are developed with appropriate centers or divisions within CDC and activities take the form of short-term consultancies or long term technical assistance. Activities include:

- Technical and program support for the development and implementation of appropriate global/regional/country-level health programs and strategies;
- Monitoring and evaluation of global/regional/country-level health activities, projects and programs; and,
- Studies, assessments, evaluation and other research activities to assist in policy dialogue, planning and formulating health programs.

Missions can access the IAA through field support for either short-or-long term technical assistance.

## Means of Access

Field Support

**Agreement Type:**  
IAA

**Agreement Number:**  
GHN-T-00-06-00001

**Project Number:**  
936-3100.24

**Duration:**  
8/06 - 9/15

**Geographic Scope:**  
Worldwide

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# Africa Program for Onchocerciasis Control (APOC)

**Agreement Type:**

Grant

**Agreement Number:**

GHA-G-00-09-00007

**Project Number:**

936-3100.110

**Duration:**

9/09 - 9/15

**Geographic Scope:**

Africa

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## Purpose

The African Program for Onchocerciasis Control (APOC) was established in 1995 to extend the delivery of the drug ivermectin for the control of onchocerciasis (river blindness) in Africa. Onchocerciasis, one of the neglected tropical diseases (NTDs), is a major cause of blindness and debilitating skin disease in many African countries. With the registration of ivermectin for the treatment of onchocerciasis in 1989, mass treatment of at-risk populations with the drug was adopted as a new strategy. APOC's goal is to eliminate onchocerciasis as a disease of public health importance in Africa.

APOC operates through an approach known as community-directed treatment with ivermectin (CDTT). This unique approach utilizes community drug distributors to distribute ivermectin for the prevention of onchocerciasis. APOC is a partnership program that includes 19 participating countries with active involvement of the Ministries of Health and their affected communities, several international and local NGOs, the private sector (drug donation programs), donor countries, UN agencies, and the scientific community. The World Bank and the World Health Organization (WHO) are the fiscal agent and the executing agency of APOC respectively.

## Services Provided

- Provide USAID funds to support through the World Bank Trust Fund to work in the Africa region.
- Provide USAID funds to support APOC activities in Tanzania, with additional countries to be considered as funding permits.
- The USAID NTD Team Leader is a member of the transitional task force serving as advisor providing technical and operational guidance to WHO for the future role and structure of APOC for the APOC transition in 2015.

## Means of Access

Core Only

# End Neglected Diseases (END) in Africa: Family Health International 360 (FHI 360)

## Purpose

Neglected Tropical Diseases (NTDs) affect the health of over one billion people worldwide, with over two billion people at risk, especially among those living in poverty in remote rural areas or urban slums. Children are disproportionately affected and can live with the consequences their whole lives, including severe physical pain, irreversible disability, gross disfigurement, mental impairment, and, in some cases, death.

The purpose of this agreement is to support the control of seven NTDs in Africa. These diseases include lymphatic filariasis (elephantiasis), onchocerciasis (river blindness), schistosomiasis (snail fever), three soil transmitted helminthes (hookworm, roundworm, and whipworm), and trachoma, all of which can be controlled or eliminated in an integrated fashion using costeffective strategies for preventive chemotherapy (PCT) with highly effective drugs, many of which are donated by major pharmaceutical companies.

## Services Provided

This cooperative agreement implemented by Family Health International 360 (FHI360) focuses on the expansion of NTD control or elimination programs in African countries. FHI360 provides managerial assistance, supports robust monitoring & evaluation systems, and coordinates reporting of technical progress. FHI360 also provides careful managerial oversight of funds to grantees that have experience implementing integrated NTD control or elimination programs and advanced financial accounting and fiscal management systems. FHI360 provides managerial capacity, organizational skills, a proven track record in managerial technical assistance, and development of streamlined work plans and budgets. FHI360 also has a history of close working collaboration with Ministries of Health and/or Ministries of Education in developing countries. NTD-specific technical direction and decision making under this award will be coordinated directly by USAID.

## Means of Access

Core Only

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00050

**Project Number:**  
936-3100.55

**Duration:**  
9/10 - 9/18

**Geographic Scope:**  
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Home.aspx](http://end.fhi360.org/SitePages/Home.aspx)

# End Neglected Tropical Diseases (END) in Asia: Family Health International 360 (FHI 360)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00051

**Project Number:**  
936-3100.56

**Duration:**  
9/10 - 9/15

**Geographic Scope:**  
Asia

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## Purpose

Neglected Tropical Diseases (NTDs) affect the health of over one billion people worldwide, with over two billion people at risk, especially among those living in poverty in remote rural areas or urban slums. Children are disproportionately affected and can live with the consequences their whole lives, including severe physical pain, irreversible disability, gross disfigurement, mental impairment, and, in some cases, death.

The purpose of this agreement is to support the control of six NTDs found in Asia. These diseases include lymphatic filariasis (elephantiasis), schistosomiasis (snail fever), three soil transmitted helminthes (hookworm, roundworm, and whipworm), and trachoma, all of which can be prevented and/or cured in an integrated fashion using cost-effective strategies for preventive chemotherapy (PCT) with highly effective drugs, many of which are donated by major pharmaceutical companies.

## Services Provided

This award, implemented by FHI360, focuses on the expansion of NTD control in Asia with programs in Bangladesh, Cambodia, Laos, Papua New Guinea, Philippines and Vietnam. The END in Asia program supports ministries of health and other government entities across Asia as they scale up and strengthen their local NTD control activities, with a major focus on preventative chemotherapy through mass drug administration following international guidelines and protocols from WHO. In addition to managing the grant mechanism in selected countries, FHI360 is also responsible for overall program and financial management; monitoring; recording and report of coverage and treatment data; coordination; and quality control. FHI360 provides high-caliber managerial capacity, organizational skills, a proven track record in managerial technical assistance, including effective fiscal management, implementation of M&E systems, development of streamlined work plans and budgets, a history of working in close collaboration with Ministries of Health and/or Ministries of Education in developing countries, and access to monitoring and evaluation (M&E) expertise.

## Means of Access

Core Only

# Coalition on Operational Research for Neglected Tropical Diseases GDA (COR-NTD)

## Purpose

The global momentum to control or eliminate Neglected Tropical Diseases (NTDs) accelerated dramatically following new and expanded commitments by private and public partners endorsing the London Declaration calls for new efforts to advance research and development. Such research is especially critical for those NTD programs targeting disease elimination.

Many aspects of the research in NTDs are common to all of the current disease-specific NTD initiatives. These disease-specific initiatives of share similar technical approaches and programmatic objectives.

The purpose of this project is to capitalize on the similarity in the different NTD disease-specific approached to promote both efficiency and effectiveness in related operational research (OR) supporting these programs. Critical research priorities have been identified through a series of consultative processes on NTD OR hosted by BMGF and the NTD Support Center (NTD-SC) at the Task Force for Global Health (TFGH). The COR-NTD will define the most important research gaps and unmet needs that can be addressed through coordinated OR.

## Services Provided

- Help focus the NTD research community on its common challenges by creating a network of investigators to identify and prioritize the NTD research needs;
- Define and undertake a coordinated research initiative targeting these prioritized needs;
- Improve the timeliness of the OR response to new challenges identified by NTD country programs;
- Work with the donor community to ensure that support for research is adequate to meet program needs;
- Collaborate with other NTD research efforts (e.g., DFID-funded research); and,
- Harness the comparative advantages of BMGF and USAID in spearheading this initiative.

## Means of Access

Core Only

**Agreement Type:**

Grant

**Agreement Number:**

OAA-G-14-00008

**Project Number:**

936-6502

**Duration:**

6/14 - 6/19

**Geographic Scope:**

Africa

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## ENVISION

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-11-00048

**Project Number:**  
936-3100.58

**Duration:**  
9/11 - 9/16

**Geographic Scope:**  
Worldwide

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### Purpose

To provide USAID and the Bureau for Global Health with assistance to decrease the burden of Neglected Tropical Diseases (NTDs) that inflict economic, psychosocial and physical damage on the poorest populations of the developing world.

The special focus of this cooperative agreement is the control, and in some cases, elimination, of seven NTDs – lymphatic filariasis (elephantiasis), onchocerciasis (river blindness), schistosomiasis (snail fever), blinding trachoma, and soil-transmitted helminths (hookworm, roundworm, and whipworm) in 14 countries via targeted preventive chemotherapy delivered through mass drug administration. Most of the drugs required are donated through highly successful public-private partnerships with several major pharmaceutical companies.

Led by RTI International and its partners, this project follows and builds on the Neglected Tropical Disease Control Program, USAID's first NTD project launched in 2006. ENVISION will continue to focus on an integrated approach to deliver NTD treatments to target countries, documenting control and elimination through comprehensive monitoring and evaluation.

### Services Provided

Support host countries to prepare and execute comprehensive country plans for NTDs using preventive chemotherapy and integrated strategies to reduce costs and improve health outcomes by controlling and in some cases eliminating the targeted diseases.

- Issue and manage grants in target countries focused on supporting host country governments to introduce and/or scale up integrated NTD programs;
- Develop global technical tools and guidelines with the World Health Organization to support integrated implementation of NTD programs and dissemination of best practices;
- Provide technical assistance through an on-demand 'Technical Assistance Facility'; and,
- Coordinate resource mobilization, expertise, NTD-specific technical direction and award decision-making at central level (GH)

**Means of Access**  
Field Support and Core

# Onchocerciasis Elimination Program of the Americas (OEPA)

## Purpose

Onchocerciasis, commonly called river blindness, is a blinding disease, with severe economic and social consequences. In Latin America, onchocerciasis was present in 13 foci within six countries: Brazil, Venezuela, Mexico, Ecuador, Guatemala, and Colombia. Despite significant progress in eliminating disease transmission in 11 of the 13 foci (in all but Venezuela and Brazil), and Colombia and Ecuador receiving verification of elimination in 2013 and 2014 respectively, challenges remain to fully eliminate onchocerciasis in hard-to-reach, indigenous populations in the Amazon region.

The Carter Center's Onchocerciasis Elimination Program for the Americas (OEPA) works closely with each endemic country's Ministry of Health to eliminate river blindness from the region. Aimed at eliminating the first parasitic disease from a region, this grant contributes to the public health of the entire Latin American region and meet a key goal within the GHI strategy - the elimination of onchocerciasis in Latin America. It is expected that river blindness in the Americas will no longer plague the population in the next four to five years.

## Services Provided

The Carter Center prepares and executes onchocerciasis elimination activities in each of the six endemic countries;

- In Brazil and Venezuela, OEPA supports the distribution of Merck-donated Mectizan® four times per year to hasten elimination in the remote, cross-border Yanomami area;
- Health education, advocacy and awareness of onchocerciasis in all six countries;
- Maintaining and enhancing national and regional technical coordination and activities, including robust monitoring and evaluation, in all six countries; and,
- Preparation for verification of elimination in Guatemala and Mexico.

## Means of Access

Core

**Agreement Type:**

Grant

**Agreement Number:**

OAA-G-12-00020

**Project Number:**

936-3100.61

**Duration:**

9/12 - 9/17

**Geographic Scope:**

Worldwide

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## Delivering a Macrofilaricide to Address Urgent Treatment Needs of Patients Suffering from Onchocerciasis and Lymphatic Filariasis GDA (DNDi)

**Agreement Type:**  
GDA Grant  
**Agreement Number:**  
OAA-G-14-00010  
**Project Number:**  
936-6501  
**Duration:**  
9/14 - 9/19  
**Geographic Scope:**  
Africa

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### Purpose

Filarial diseases cover three debilitating infectious diseases caused by parasitic worms: onchocerciasis (river blindness), lymphatic filariasis (LF, or elephantiasis), and loiasis (African eye worm, or Loa loa). More than 1 billion of the world's poorest people are at risk and an estimated 128 million people suffer from LF; 47 million with onchocerciasis; and unknown numbers with loiasis.

Programs for the treatment and control of filarial diseases through mass drug administration (MDA) have been in place for over 20 years but have only met partial success. Current drug treatments use microfilaricides, killing only the larvae that mature by passage through an insect vector. While this is effective in reducing transmission treatment, it must be repeated at regular intervals for the life of the adult worm (up to 17 years), making implementation extremely difficult in endemic countries. There is an urgent need for a macrofilaricide, targeting adult worms that can be used for onchocerciasis and LF, particularly in Loa loa co-endemic areas. The purpose of this GDA is to develop a macrofilaricide for use in individual case management and, after appropriate testing, as an alternative preventive treatment in MDA programs.

### Services Provided

The goal of the DNDi Filaria Program is to improve individual patient care and contribute to efforts to treat, control, and eliminate filarial infections by developing a safe, efficacious, affordable, and field-adapted macrofilaricidal drug to treat onchocerciasis and/or LF patients in need. DNDi and partners aim to advance four drug candidates to Phase I clinical testing of safety and tolerability as well as defining maximum tolerated dose for use in efficacy testing.

### Means of Access

Core Only

# Morbidity Management and Disability Prevention for Blinding Trachoma and Lymphatic Filariasis (MMDP)

## Purpose

USAID's NTD Program has focused on supporting country-led efforts to introduce and scale-up the delivery of preventive drug treatments aimed at controlling, and in some cases eliminating, these diseases. While mass drug administration (MDA) can prevent new infections, and in some cases prevent existing infections from worsening, it does not provide the necessary support for people already suffering from the consequences of lifelong infection. Despite significant increases in support for NTD MDA programs in recent years by a range of donors and partners, there has not been a similar increase in support for morbidity activities. In order to address this gap, a more comprehensive approach to address morbidity management and disability prevention (MMDP) for NTDs is required.

The purpose of this project is to assist countries already supported by USAID's NTD Program to incorporate comprehensive MMDP strategies within their national NTD programs. The project will focus on MMDP for lymphatic filariasis (LF) and blinding trachoma, two of the NTDs targeted by USAID's NTD Program that cause significant morbidity and disability in adolescents and adults.

## Services Provided

This project will provide assistance to a subset of countries already supported by USAID's NTD Program to develop comprehensive strategies to increase access to MMDP services for LF and blinding trachoma, including surgeries, and assist them in scaling up and monitoring these interventions. This strategic and complementary investment aims to alleviate the suffering of individuals facing the debilitating consequences of blinding trachoma and lymphatic filariasis (LF).

## Means of Access

Core Only

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-14-00054  
**Project Number:**  
936-6500  
**Duration:**  
7/14 - 7/19  
**Geographic Scope:**  
Africa

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## TB Care - I

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-10-00020  
Order No. 1

**Project Number:**  
936-3100.52

**Duration:**  
9/10 - 9/15

**Geographic Scope:**  
Worldwide

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### Purpose

The purpose of TB CARE I is to establish a mechanism to support USAID operating units in the implementation of their TB control and prevention programs through the introduction and expansion of the components of the WHO-recommended STOP TB Strategy and contribution to the overall USAID goal and objectives in select countries by 2015. This award is a follow-on mechanism to TB CAP.

### Services Provided

TB CARE I, implemented by KNCV Tuberculosis Foundation, in partnership with the American Thoracic Society (ATS), Family Health International (FHI), Japan Anti-Tuberculosis Association (JATA), Management Sciences for Health (MSH), International Union Against Lung and Tuberculosis Disease (The Union) and the World Health Organization (WHO), will work in two key areas:

- **Technical Assistance.** Provide short- and long-term technical assistance to USAID Missions and Regional Platforms in implementing and scaling-up priority interventions in accordance with the STOP TB Strategy and future longer-term plans. TB CARE I will respond to the global TB epidemic by providing well-coordinated state-of-the-art, context appropriate, technically sound and cost-effective consultation and technical assistance to high-prevalence countries and missions. TB CARE I will engage experts in all aspects of TB control, including strengthening DOTS, programmatic management of drug resistant TB (and extensively drug resistant TB – XDR TB), improving laboratory capacity, infection control, and TB/HIV-AIDS collaboration.
- **Global Technical Leadership.** Support Bureau for Global Health core programs and further USAID global technical leadership in TB control by focusing on catalytic activities and approaches to scaling-up the STOP TB Strategy. Activities will complement and expand existing global TB control efforts by working in collaboration with other global TB partners and maximize on-going efforts to accelerate the pace of DOTS expansion to meet global targets, including programmatic management on drug-resistant TB.

### Means of Access

Field Support

## TB Care - II

### Purpose

The purpose of TB CARE II is to establish a mechanism to support USAID operating units in the implementation of their TB control and prevention programs through the introduction and expansion of the components of the WHO-recommended STOP TB Strategy and contribution to the overall USAID goal and objectives in select countries by 2015. This award is a follow-on mechanism to TB CAP.

### Services Provided

TB CARE II, implemented by University Research Corporation (URC), in partnership with Project Hope, Partners in Health (PIH), and Jhpiego, will work in two key areas:

- **Technical Assistance.** Provide short- and long-term technical assistance to USAID Missions and Regional Platforms in implementing and scaling-up priority interventions in accordance with the STOP TB Strategy and future longer-term plans. TB CARE I will respond to the global TB epidemic by providing well-coordinated state-of-the-art, context appropriate, technically sound and cost-effective consultation and technical assistance to high-prevalence countries and Missions. TB CARE I will engage experts in all aspects of TB control, including strengthening DOTS, programmatic management of drug resistant TB (and extensively drug resistant TB – XDR TB), improving laboratory capacity, infection control, and TB/HIV-AIDS collaboration.; and,
- **Global Technical Leadership.** Support Bureau for Global Health core programs and further USAID global technical leadership in TB control by focusing on catalytic activities and approaches to scaling-up the STOP TB Strategy. Activities will complement and expand existing global TB control efforts by working in collaboration with other global TB partners and maximize on-going efforts to accelerate the pace of DOTS expansion to meet global targets, including programmatic management on drug-resistant TB.

### Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-10-00021  
**Project Number:**  
936-3100.53  
**Duration:**  
9/10 - 9/15  
**Geographic Scope:**  
Worldwide

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# TREAT TB

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
GHN-A-00-08-00004

**Project Number:**  
936-3100.47

**Duration:**  
9/08 - 3/16

**Geographic Scope:**  
Worldwide

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## Purpose

Technology, Research, Education and Technical Assistance for Tuberculosis (TREAT TB) is a cooperative agreement with the International Union Against Tuberculosis and Lung Disease (IUATLD), also known as The Union. TREAT TB focuses on field evaluations of diagnostic techniques for TB, clinical trials and operations research to improve patient management, treatment efficacy, disease prevention, and infection control measures for TB and MDR TB. TREAT TB also provides for field support to address key TB and TB/HIV issues through operational research to improve the national TB program's performance.

## Services Provided

This agreement will promote programmatically relevant research in the focus countries of the TB element and can accept field support funds from any mission with TB funds for technical assistance related to operational research. The primary interventions will include:

- Field evaluations of new/adapted diagnostic tools and translational research to continually update the globally-recommended diagnostic algorithm;
- Operational research to overcome constraints to implementing or introducing current and new tools/approaches;
- Clinical trials to improve MDR-TB patient management, treatment efficacy, and disease prevention;
- Technical assistance to USAID missions for the design and implementation of field trials of new tools and operational research to address programmatic constraints; and,
- Evaluation research to monitor the impact of new tools and approaches.

## Means of Access

Field Support

# TB Communications Award

## Purpose

The TB Communications Award provides communications services to assist the USAID TB Team in describing its work to a variety of audiences.

## Services Provided

LRG provides communications and publishing services to effectively describe the work of the TB Team to a variety of audiences. By designing and producing reports, creating media materials and executing events, the TB team's efforts can reach a wider audience thereby making a bigger impact. The needs of the team include publications such as an annual report to Congress, implementation of a communications plan for World TB Day, materials for other TB events throughout the year, and the production of media materials. The contractor works with the TB team to strategically plan for new ways to better communicate USAID's efforts.

## Means of Access

Core Funding Only

**Agreement Type:**

Contract

**Agreement Number:**

OAA-N-13-00002

**Project Number:**

936-3100.62

**Duration:**

9/13 - 9/16

**Geographic Scope:**

Worldwide

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# STOP TB Partnership

**Agreement Type:**  
Grant  
**Agreement Number:**  
GHA-G-00-08-00005  
**Project Number:**  
936-3100.46  
**Duration:**  
9/08 - 9/16  
**Geographic Scope:**  
Worldwide

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## Purpose

The purpose of the Stop TB Partnership is to realize the goal of elimination of tuberculosis (TB) as a public health problem, and ultimately to obtain a world free of TB. Its mission is to: (i) ensure that every TB patient has access to effective diagnosis, treatment, and cure; (ii) stop transmission of TB; (iii) reduce the inequitable social and economic toll of TB; and, (iv) develop and implement new preventive, diagnostic, and therapeutic tools and strategies to stop TB. An important partner in USAID's TB program, this grant focuses on three main areas: 1) Support for the Global TB Drug Facility (GDF); 2) Support for key activities of the Stop TB Partnership Secretariat related to priority areas of USAID's strategy; and 3) Support for the TB Technical Assistance Mechanism (TBTEAM).

## Services Provided

Global TB Drug Facility (GDF): An initiative to increase access to anti-TB drugs for the implementation of DOTS. The GDF is a mechanism of the STB Partnership and is under the direction of the STB Partnership secretariat. The objective of the GDF is to provide anti-TB drugs to treat patients and to help countries to reach the global TB treatment targets. This grant supports the work of the GDF, including: grant applications and review; monitoring of GDF recipients to assess program performance; rational use of anti-TB drugs; financial flows and drug management; procurement of anti-TB drugs via a competitive bidding process; technical assistance to improve the management of anti-TB drugs; the promotion of fixed-dose-combination products; the development and testing of new products such as diagnostic kits; general GDF management and information management and support; the development of a comprehensive advocacy strategy for the GDF to help ensure that it has adequate finances/resources to implement work plan activities. Support for the STB Partnership Secretariat and other technical areas: The Secretariat supports relations with all the Stop TB partners, and encompasses liaison with current Partners, potential partners and global initiatives (e.g., the Global Fund). In addition, specific initiatives will be supported with a focus on governance, partner engagement, and strategic planning by strengthening support to partnership bodies, including the Coordinating Board, Working Groups, and the Global Coalition of TB Activists (GCTA).

## Means of Access

Field Support

# Global Alliance for TB Drug Development

## Purpose

The Global Alliance for TB Drug Development (TB Alliance) is a non-profit, public-private partnership with the mission to develop new TB drugs that shorten and simplify treatment, treat MDR-TB and better treat latent infection. The TB alliance was created to address the lack of market incentives that brought research and development efforts for new TB drugs to a virtual standstill after the 1960s.

## Services Provided

As a not-for-profit public-private partnership, the TB alliance links the best practices and drives of the private sector with the health equity priorities and resources of the public sector. This process helps design new ways to leverage worldwide science and market forces for public good. With a sole focus on new TB drug development, the TB alliance has established a strong pipeline of drug candidates. Anticipated developments include:

- Introduction of at least one moxifloxacin-based new treatment-shortening regimen to the field and registration globally;
- Movement of a multidrug-resistant TB (MDR-TB) treatment through Phase III trials;
- Development of treatments for drug-resistant TB and drug-sensitive TB.

## Means of Access

Core Only

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
GHS-A-00-08-00012

**Project Number:**  
936-3100.39

**Duration:**  
9/08 - 9/18

**Geographic Scope:**  
Worldwide

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# Challenge TB

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00029

**Project Number:**  
936-6400

**Duration:**  
9/14 - 9/19

**Geographic Scope:**  
Worldwide

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## Purpose

Challenge TB serves as one of USAID's main country level TB implementation mechanisms. Challenge TB aligns with the WHO post-2015 Global TB Strategy and the new USG TB Strategy to enhance focus on improving patient-centered quality TB services, building local capacity and the utilization of innovations and new technologies to move forward in the global fight against TB.

## Services Provided

Challenge TB is implemented by lead partner KNCV Tuberculosis Foundation, and other consortium partners include American Thoracic Society, FHI 360, IRD, International Union Against Tuberculosis and Lung Disease, Japan Anti-Tuberculosis Association, MSH, PATH and WHO. The project provides an array of services to reach, cure and prevent TB under three overarching objectives:

- 1) Improved access to patient-centered quality TB, drug-resistant TB, and TB/HIV services;
- 2) Strengthened TB platforms; and,
- 3) Prevention of transmission and disease progression

## Means of Access

Field Support

# DELIVER Malaria Task Order 7

## Purpose

To provide USAID Missions and Bureaus with a worldwide mechanism to support the goals and objectives of the President's Malaria Initiative and USAID's goal of reducing the burden of malaria in Africa. It will support USAID's implementation of malaria prevention and treatment programs through the procurement, management, and delivery of high quality, safe, and effective malaria commodities; the provision of on-the-ground logistics capacity, technical assistance, and pharmaceutical management expertise; and technical leadership to strengthen the global supply, demand, and financing of high quality malaria commodities.

## Services Provided

Procurement of high quality, safe, and effective malaria commodities with on-the-ground logistics capacity, technical assistance and pharmaceutical management expertise. The goals of this task order are as follows:

- To improve and expand USAID's provision of malaria commodities to programs through direct procurement and delivery to country;
- To strengthen in-country supply systems and capacity for effective management of malaria commodities; and,
- To improve global supply and long-term availability of malaria commodities.

## Means of Access

Field Support

**Agreement Type:**  
Task Order  
**Agreement Number:**  
OAA-TO-11-00012  
**Project Number:**  
936-3100.54  
**Duration:**  
3/11 - 9/15  
**Geographic Scope:**  
Worldwide

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# MalariaCare

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00057

**Project Number:**  
936-3100.118

**Duration:**  
9/12 - 9/17

**Geographic Scope:**  
Worldwide

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## Purpose

Program for Appropriate Technology in Health (PATH) and its partners were awarded a 5-year Cooperative Agreement in September 2012 to support PMI focus or non-focus countries to scale up high-quality malaria diagnosis and case management services for malaria and other childhood illnesses; and to strengthen laboratory diagnostic capacity for malaria and other infectious diseases.

## Services Provided

Under MalariaCare, PATH and its partners will work to improve accuracy of diagnostic testing in the public sector; increase the percentage of suspected malaria patients who received a diagnostic test for malaria; increase the percentage of patients who receive appropriate treatment for malaria or other related illness, consistent with the diagnostic test; and strengthen lab systems at country level for diagnosis of malaria and other infectious disease. PATH's partners on the MalariaCare project include Medical Care Development International (MCDI), Population Services International (PSI), and Save the Children. MalariaCare offers comprehensive technical support to USAID Missions and national governments to expand high-quality diagnosis and treatment for malaria and other childhood illnesses and infectious diseases. Our services include technical assistance, implementation support, training and capacity-building, policy development, and monitoring and evaluation. The project also contributes to global leadership to advance worldwide malaria control efforts by identifying and sharing innovations and best practices in malaria diagnosis and treatment. The MalariaCare team's expertise includes laboratory strengthening, malaria diagnosis and treatment, and community-based management of sick children in both the public and private sectors.

## Means of Access

Core and Field Support

## Indoor Residual Spraying 2 Task Order #4

### Purpose

To support planning and implementation of indoor residual spraying (IRS) programs to prevent malaria. This task order will enhance US-AID's ability to implement IRS programs on the ground through cost-effective commodities procurement for IRS, IRS logistics systems, access to technical expertise, and implementation of IRS in countries affected by malaria. The IRS 2 IQC places added emphasis on building the capacity of Ministries of Health and local institutions to plan, conduct, supervise and monitor IRS programs.

### Services Provided

- Establish cost-effective supply chain mechanisms including procurement, distribution and storage of IRS-related commodities and execute all aspects of logistical plans for IRS-related activities;
- Implement safe and high-quality IRS programs and provide operational management support and expert short- and long-term technical and administrative assistance;
- Provide on-going monitoring and evaluation for activities and ensure quality control measures for commodities, operations, and monitoring are established and/or refined and implemented;
- Contribute to global IRS policy-setting and country-level policy development of evidence-based IRS and disseminate experiences and best practices; and,
- Strengthen the capacity of NMCPs, health personnel, and other relevant institutions in the managerial, technical, supervisory, and evaluative functions of IRS by engaging, training, and supervising personnel at the central, provincial, and district levels. In addition, ensure that planning, and implementation of IRS includes sufficient attention to gender considerations and that IRS continues to protect women and children of targeted communities from malaria.

### Means of Access

Field Support

**Agreement Type:**  
Task Order  
**Agreement Number:**  
OAA-TO-11-00039  
**Project Number:**  
936-3100.Gb  
**Duration:**  
8/11 - 8/15  
**Geographic Scope:**  
Worldwide

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# Indoor Residual Spraying 2 Task Order 6 (The PMI AIRS Project)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-TO-14-00035

**Project Number:**  
936-3100.Gc

**Duration:**  
9/14 - 9/17

**Geographic Scope:**  
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## Purpose

To support planning and implementation of indoor residual spraying IRS programs to prevent malaria. This task order will enhance USAID's ability to implement IRS programs on the ground through cost-effective commodities procurement for IRS, IRS logistics systems, access to technical expertise, and implementation of IRS in countries affected by malaria. The IRS 2 IQC places added emphasis on building the capacity of Ministries of Health and local institutions to plan, conduct, supervise and monitor IRS programs.

## Services Provided

1. Establish cost-effective supply chain mechanisms including procurement, distribution and storage of IRS-related commodities and execute all aspects of logistical plans for IRS-related activities.
2. Implement safe and high-quality IRS programs and provide operational management support (i.e., field supervision, operations planning, and day-to-day implementation management) and expert short- and long-term technical and administrative assistance, primarily in the PMI focus countries but also in other countries where USAID supports malaria programs (specified annually by USAID).
3. Provide on-going monitoring and evaluation for activities and ensure quality control measures for commodities, operations, and monitoring are established and/or refined and implemented.
4. Contribute to global IRS policy – setting and country – level policy development of evidence – based IRS and disseminate experiences and best practices.
5. Contribute to the collection and analysis of routine entomological and epidemiological data, in order to effectively monitor and promote evidence-based vector control interventions, including PMI or USAID-directed research and the piloting of relevant, novel tools/technologies.
6. Strengthen the capacity of NMCPs, health personnel and other relevant institutions in the managerial, technical, supervisory, and evaluative functions of IRS (Components 1-3) by engaging, training, and supervising personnel at the central, provincial, district, and community levels. In addition, ensure that planning and implementation of IRS includes attention to gender considerations and that IRS continues to protect women and children of targeted communities from malaria.

## Means of Access

Field Support

# International Federation of Red Cross and Red Crescent Societies (IFRC) Umbrella

## Purpose

The purpose of this grant is to support the IFRC's efforts to prevent and control malaria and tuberculosis.

## Services Provided

This grant will provide a flexible and simple means for USAID operating units to access the federation's headquarters and field office expertise to support tuberculosis and malaria activities. Through individual proposals, USAID missions or headquarters will be able to work with IFRC to customize scopes of work, work-plans, budgets, and indicators to meet the needs of the country, USAID mission and IFRC, in coordination with other funding partners. In general, activities will focus on utilizing Red Cross and Red Crescent volunteers to increase insecticide-treated net (ITN) ownership, increase the correct and consistent use of ITNs, improve understanding and awareness of the signs and symptoms of malaria, and provide community-based activities to help scale-up proven malaria prevention and treatment interventions. In the area of TB, activities will focus on increasing the detection and treatment of tuberculosis using proven interventions and engage in international partnership to support the goals of the Stop TB program.

## Means of Access

Field Support

**Agreement Type:**

Grant

**Agreement Number:**

GHA-G-00-08-00006

**Project Number:**

936-3100.48

**Duration:**

9/08 - 9/18

**Geographic Scope:**

Worldwide

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# Malaria Vaccine Development Program (MVDP)

**Agreement Type:**  
Various  
**Agreement Number:**  
Various  
**Project Number:**  
936-6300  
**Duration:**  
9/13 - 9/18  
**Geographic Scope:**  
Worldwide

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## Purpose

To develop malaria vaccines for use in control programs in the developing world. Through a cadre of partners dedicated to the malaria vaccine development enterprise, MVDP maintains a pipeline of candidate vaccines in pre-clinical, clinical and field evaluation.

## Services Provided

The USAID MVDP has been successful in building strategic partnerships with some of the most capable malaria vaccine groups in the world. Through these partnerships, the program currently works toward vaccines that attack the parasite both in the liver and in the blood stream using both standard and innovative technologies to acquire key insights into how to best overcome the parasite's evasion tactics.

Current agreements include:

- Walter Reed Army Institute of Research (WRAIR) Umbrella  
GHA-T-00-08-00007
- Naval Medical Research Center (NMRC)  
GHA-T-00-09-00004

**Means of Access**

Core Only

# Medicines for Malaria Venture

## Purpose

The Medicines for Malaria Venture MMV was established in 1999 to build and manage a research and development portfolio capable of leading to the registration of at least one new antimalarial drug every five years. Although partnered with industry, MMV's focus is on discovery and development of drugs that will be affordable to populations living in malaria endemic areas. MMV manages and directs research and development activities carried out at a broad variety of institutions, comprising 42 academic and pharmaceutical organizations located in 10 different countries. At present, there are 38 candidate anti-malarial agents in MMV's portfolio, including several completely new therapeutic targets. This portfolio is highly dynamic and managed to accelerate the identification and development of promising candidates and also the recognition and rapid replacement of less promising drug projects.

## Services Provided

Emphasis in the MMV portfolio is being placed on developing drugs and drug combinations that:

- Are effective against drug-resistant strains of *P. falciparum*;
- Improve patient compliance with therapeutic regimens of 3 days or less;
- Have a low propensity to select for drug resistance;
- Are safe in young children and pregnant women;
- Have potential for use as intermittent preventive treatment in pregnancy; and,
- Cost of product is no more than \$1.00 U.S. per treatment.

## Means of Access

Core Only

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
GHS-A-00-04-00014  
**Project Number:**  
936-3100.13  
**Duration:**  
9/07 - 9/17  
**Geographic Scope:**  
Worldwide

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# IVCC: Bringing Insecticide-based Tools to Market

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-13-00086

**Project Number:**  
936-6301

**Duration:**  
10/13 - 9/18

**Geographic Scope:**  
Worldwide

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## Purpose

The Innovative Vector Control Consortium (IVCC) is an international public-private partnership whose aim is to foster research and development of new vector control products and tools for public health, including new insecticides and insecticide formulations. IVCC was awarded a 5-year Cooperative Agreement in September 2013 to support its work to advance 3 novel insecticide candidates to the final stages of development by 2019.

## Services Provided

IVCC is working with private sector industry partners to develop cost-effective alternatives to pyrethroid insecticides for public health use in malaria control. Activities related to insecticide development include testing on lead compounds and selection of alternative chemical classes for consideration. Testing encompasses human and environmental toxicology, biological efficacy, cross-resistance, and stability. In addition, IVCC aims to accelerate market entry for new vector control products.

## Means of Access

Core Only

## VectorWorks

### Purpose

VectorWorks project is a comprehensive and innovative program to support countries to achieve and maintain high levels of coverage and use of long-lasting ITNs as well as to facilitate the adoption of proven alternative vector management interventions, including those targeting specific sites or populations.

### Services Provided

The project will build upon previous successful investments in long-lasting ITNs and offer state-of-the-art approaches to scale-up additional tools. This agreement goal reflects USAID/PMI's intent to continue investments in ongoing and new areas of emphasis related to achieving and maintaining high ownership and use of long-lasting ITNs and potentially other alternative vector management interventions that may be identified in the future.

The project is implemented by Johns Hopkins Bloomberg School of Public Health Center for Communication Programs, with its partners: Population Services International, Tropical Health, Tulane University, the Mennonite Economic Development Associates, and the Swiss Tropical and Public Health Institute.

The agreement has three objectives:

- Objective 1: Develop and promote policies at both the international and national levels to encourage sustained, high levels of coverage and use of long-lasting ITNs and/or alternative vector management interventions;
- Objective 2: Design, conduct and analyze results from monitoring, evaluation, and operational research activities in order to improve current best practices of long-lasting ITNs and/or alternative vector management interventions; and,
- Objective 3: Promote and support country-level implementation of malaria prevention activities to ensure sustained high level coverage and use of long-lasting ITNs and, as needed, targeted coverage and appropriate use of alternative vector management interventions

### Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-14-00057  
**Project Number:**  
936-6301  
**Duration:**  
10/14 - 9/19  
**Geographic Scope:**  
Worldwide

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# Fistula Care Plus

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00013

**Project Number:**  
936-6201.01

**Duration:**  
12/13 - 12/18

**Geographic Scope:**  
Africa and South Asia

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## Purpose

Fistula Care Plus aims to strengthen health system capacity for fistula prevention, detection, treatment and reintegration in Sub-Saharan Africa and South Asia. Building on the learning and accomplishments of the global Fistula Care Project (2007-2013), the new project will increase emphasis on country ownership and public-private partnerships to enhance the sustainability of country programs and in selected settings will also address pelvic organ prolapse.

## Services Provided

- Strengthen policy and the enabling environment to institutionalize fistula prevention, treatment and reintegration;
- Strengthen maternal health and family planning services in the public and private sectors to support fistula prevention and treatment;
- Enhance community understanding and practices to prevent fistula, improve access to fistula treatment, reduce stigma, and support reintegration of women and girls with fistula;
- Reduce transportation, communications and financial barriers to accessing preventive care, detection, treatment and reintegration support; and,
- Strengthen the evidence base for approaches to improve fistula care, and scale-up application of standard monitoring and evaluation indicators for prevention and treatment.

## Fistula Care Plus Implementing Partners

Fistula Care Plus is implemented by EngenderHealth (prime) with core partner Population Council and other partners Dimagi, TERREWODE, Direct Relief, the Fistula Foundation and the Maternal Health Task Force.

## Means of Access

Field Support

# Prevention and Treatment of Pre-Eclampsia and Eclampsia

## Purpose

The purpose of the Prevention and Treatment of Pre-Eclampsia and Eclampsia project is to increase and expand effective and under-utilized approaches to overcome persistent implementation challenges in the prevention and treatment of pre-eclampsia and eclampsia. Bolstering coverage of high impact interventions for PE/E will involve contributions to the development of knowledge, evidence, advocacy, tools, materials, services, and technical assistance.

Led by Population Council, the strategic objective of the project is to prevent and treat pre-eclampsia and eclampsia by improving the early detection and management of PE/E including increasing the use of magnesium sulfate, an underutilized RMNCH priority commodity.

## Services Provided

To achieve the strategic objective, the project will

- significantly expand services in selected MCH priority countries for detecting and managing pregnant women at risk of PE/E through increased MgSO<sub>4</sub> awareness, access, and use alongside other effective interventions;
- promote introductory and scale-up strategies in selected MCH priority countries for these effective interventions designed with policy and health system analyses;
- conduct implementation research to assess and validate the PE/E intervention package;
- strengthen local capacity through engagement with national MoHs, Ob/Gyn and midwifery leaders, university teaching hospitals, legislative boards, professional associations, and community organizations; and,
- share lessons learned in national, regional, and global knowledge-management (KM) platforms to inform strategies for introducing, \monitoring, and scaling up PE/E interventions and advancing the global agenda.

## Means of Access

Core and Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-14-00048  
**Project Number:**  
936-6200  
**Duration:**  
8/14 - 8/19  
**Geographic Scope:**  
Worldwide

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# Health and Emergency Response Support (WHO: Polio, Immunizations, CS, ID)

**Agreement Type:**

Grant

**Agreement Number:**

AAG-G-00-97-00019

**Project Number:**

936-3080.03

**Duration:**

9/96 - 9/22

**Geographic Scope:**

Worldwide

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## Purpose

- To implement activities to eradicate polio;
- Improve immunization services; and
- Improve disease surveillance.

## Services Provided

This grant supports activities implemented through WHO country, regional and headquarter offices in support of polio eradication in the context of strengthening immunization and disease control programs.

The grant supports USAID's five-part polio eradication strategy:

- Partnerships between all interested public and private sector parties;
- Routine immunization and immunization systems: cold chain refurbishment/management;
- Logistics, vaccine forecasting, planning and budgeting at the district and national levels;
- Supplemental immunization, operational support to National Immunization Days, social mobilization, house-to-house mop up immunization;
- Surveillance and case detection for AFP and other reportable diseases; and,
- Information feedback and use.

## Means of Access

Core and Field Support

# Health and Immunization Response Support (UNICEF Polio, EPI Grant)

## Purpose

To implement activities designed to improve polio eradication efforts and routine immunization. Other MCH activities, e.g., Integrated Management of Childhood Illness (IMCI); micronutrient fortification and supplementation programs (specifically iodine and vitamin A) are supported under a separate agreement.

## Services Provided

This grant funds activities implemented through UNICEF's country, regional and headquarter offices in support of a wide range of MCH interventions. Country-specific proposals are needed to define the activities to be conducted in support of national programs and USAID mission strategic plans. In general, activities can focus on improving service delivery, planning and training, monitoring and evaluation, advocacy and communications, limited equipment procurement (e.g., cold chain) and policy development.

## Means of Access

Core and Field Support

**Agreement Type:**  
Grant

**Agreement Number:**  
AAG-G-00-97-00021

**Project Number:**  
936-3080.01

**Duration:**  
9/96 - 9/22

**Geographic Scope:**  
Worldwide

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# Health and Immunization Response Support (NGO's: Polio Eradication, Immunization)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00031

**Project Number:**  
936-3080.07

**Duration:**  
9/12 - 9/17

**Geographic Scope:**  
Asia/Africa

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## Purpose

To increase PVO participation in polio eradication and immunization, increase linkages between polio eradication and other health services, and improve case detection of acute flaccid paralysis (AFP) and other reportable diseases in underserved or hard to reach populations, including cross-border and transit populations. The project will continue its work in India, Angola, Ethiopia, Nigeria and regionally in the Horn of Africa. One additional country and/or expansion of services in the current countries could be considered if there are sufficient field support resources

## Services Provided

The CORE Group Polio Project, originated as a subset of the 50+ member organizations of the CORE Group, Inc – a network of partners to generate collaborative action and learning to improve and expand community-focused public health practices for underserved populations around the world. World Vision is the primary recipient and coordinates the work of 10 US-based NGOs and 18 local NGOs who extend the projects to especially hard-to-reach and marginalized locations in each country and across borders. This agreement allows the project to expand its linkages with other health services using non-polio funds to extend the knowledge, skills and community engagement developed for polio eradication.

This agreement strengthens the network and builds upon ongoing field programs of CORE members. This cooperative agreement supports:

- Community-based case detection/reporting strategies for polio and other vaccine preventable diseases;
- Community Mobilization and Interpersonal Communications for polio, immunization and other health services;
- Monitoring and Evaluation of polio immunization campaigns;
- Microplanning, Training, community mapping, baby tracking, cold chain monitoring cross-border coordination and emergency outbreak response;
- Information dissemination about polio eradication and lessons from community-level engagement; and,
- Participation of PVOs in interagency committees and subnational planning events and supplemental immunization activities (NIDs, SNIDs, mop-up).

## Means of Access

Core and Field Support

# WASHplus: Supportive Environments for Healthy Communities

## Purpose

WASHplus is a cooperative agreement managed by FHI 360 with CARE and Winrock International as core partners, and teamed with a highly talented group of university, private and public sector resource partners in areas such as creative financing, innovation, and public-private partnerships in addition to WASH service delivery. The project is designed to support healthy households and communities by creating and delivering interventions that lead to improvements in access, practices and health outcomes related to water supply, sanitation and hygiene (WASH) and household air pollution (HAP).

## Services Provided

WASHplus will focus on the following key environmental health interventions:

- Increased access to improved water sources to meet domestic needs;
- Improvement in drinking water quality;
- Increased access to and use of sanitary facilities for human excreta disposal;
- Increased and improved handwashing with soap; and,
- Increased use of alternatives to cooking with biomass fuels using traditional stoves and/or increased use of housing improvements to reduce household air pollution

WASHplus is able to provide long or short-term technical assistance to missions, regional bureaus, national and local organizations to:

- design, implement and evaluate programs that will increase the availability and use of water supply and sanitation infrastructure, promote hygiene practices, and HAP interventions;
- design and implement hygiene improvement programs at scale that promote handwashing, sanitation and safe drinking water at the point-of-use;
- develop and implement strategies for integration of WASH and HAP interventions in health and non-health programs, e.g., HIV/AIDS, food security, education and nutrition, etc.;
- support participation in strategic partnerships with other donors, cooperating agencies, public and private partners;
- develop and test new and innovative approaches and tools for WASH and HAP implementation; and
- support knowledge and information exchange at the global- and country-level, capacity building and networking.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-10-00040  
**Project Number:**  
936-3122.07  
**Duration:**  
9/10 - 9/15  
**Geographic Scope:**  
Worldwide

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## Prevention and Management of Preterm Birth and Low Birth Weight Complications: Every Premie – SCALE (EP-SCALE)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00049

**Project Number:**  
936-6200

**Duration:**  
9/14 - 8/19

**Geographic Scope:**  
Worldwide

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### Purpose

The purpose of EP-SCALE is to reduce newborn mortality by focusing on the evidence, advocacy, and catalytic efforts needed to increase use and coverage of critical and under-utilized interventions to prevent and manage pre-term birth and low birth weight complications (PTB/LBW).

In line with USAID's newborn program focus on tackling the major causes of mortality through community-based approaches, quality improvement, implementation research, and policy advocacy, EP-SCALE will catalyze global uptake of PTB/LBW interventions, overcome bottlenecks, and significantly increase coverage to ultimately improve RMNCH outcomes while decreasing newborn mortality.

Led by Project Concern International, the EP-SCALE partnership also includes the American Academy of Pediatrics, and the Global Alliance for Prevention of Prematurity and Stillbirth.

### Services Provided

To achieve the strategic objective, the project will

- improve translation of evidence into action through consolidation of evidence and focused implementation research;
- convene a global technical working group on PTB/LBW implementation challenges and solutions;
- increase capacity of local, national, and global entities (health care providers, community groups) to scale-up and sustain the utilization of high impact interventions;
- increase national and global awareness and rapid uptake of PTB/LBW interventions through the provision of core packages of support which include tools, modules, analyses, surveys, targeted technical assistance, and other forms of support; and
- increase prioritization of PTB/LBW with in-country decision and policy makers and other relevant stakeholders at global and national levels.

### Means of Access

Core and Field Support

# Maternal and Child Survival Program (MCSP)

## Purpose

The Maternal and Child Survival Program (MCSP) program is a \$500 million cooperative agreement designed to support the introduction, scale up and sustainability of high-impact reproductive, maternal, newborn, and child health (RMNCH) interventions. The MCSP program will advance USAID's goal of Ending Preventable Child and Maternal Deaths through provision of tailored technical assistance within countries to meet the specific priorities and contextual needs of local RMNCH programs and engagement in high-level technical and policy dialogue at the global level.

## Services Provided

- Support countries to increase coverage and utilization of evidence-based, high-quality RMNCH interventions at the household, community and health facility levels-integrating with nutrition, malaria, HIV/AIDS, and water, sanitation and hygiene (WASH) interventions as appropriate
- Strengthen civil society, local institutions and communities and engage at the global, regional, national and local levels to improve accountability and enhance responsiveness of health systems to local and community health needs
- Foster effective policy, action-oriented learning, and accountability for improved RMNCH outcomes across the continuum of care
- Close innovation gaps to improve RMNCH outcomes through engagement with a broad range of partners
- Apply gender- and equity-focused approaches at scale to improve MCSP service availability, access, quality, demand, cost-effectiveness and utilization

The MCSP partnership includes Jhpiego as the prime partner; lead partners: Save the Children Federation, Inc (SC), Snow, Inc. (JSI), ICF International, Results for Development Institute (R4D), Program for Appropriate Technologies in Health (PATH), and Population Services International (PSI); and associate partners: Broad Branch Associates, CORE Group, Johns Hopkins Bloomberg School of Public Health (JHSPH), Communications Initiative (CI), Venture Strategies Innovations (VSI) and Futures Institute.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-14-00028

**Project Number:**  
936-6200.01

**Duration:**  
3/14 - 3/19

**Geographic Scope:**  
Worldwide

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## Child Survival and Health Grants Program (CSHGP)

**Agreement Type:**

See Cooperative Agreements\*

**Agreement Number:**

See Cooperative Agreements\*

**Project Number:**

936-3114 and 936-4000.10

**Duration:**

See Cooperative Agreements\*

**Geographic Scope:**

Worldwide

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\*See MCSP entry  
in Users Guide

### Purpose

The CSHGP facilitates a dynamic partnership between USAID and private and voluntary organizations (PVOs)/NGOs (an active portfolio of 15 PVO/NGO projects in 11 countries). Through the CSHGP, USAID leverages the development entrepreneurship and “know how” of PVOs/NGOs and their local partners for innovative and effective community-oriented programming that sustainably improves maternal, newborn and child health (MNCH) outcomes, strengthens local and community health systems, and contributes to reductions in morbidity and mortality. PVOs/NGOs, with their local partners (national and local MOH, local NGOs/CBOs, communities), implement in a range of settings, from remote communities in a single district to multiple districts or a province. Projects address critical health needs of vulnerable populations and work strategically with a systems approach at the household, community, health facility, and policy levels and strengthens linkages as relevant. The CSHGP portfolio contributes to advancing evidence and learning to strengthen the engagement of community and civil society to support USAID’s goals and strategies in health, including ending preventable child and maternal deaths, both in priority countries and globally through the Maternal and Child Survival Program\*, including the CORE Group network of more than 70 NGOs and affiliates.

### Services Provided

- Fostering technical, cross-sectoral and systems integration through community-oriented approaches facilitated by PVOs/NGOs;
- Advancing action-oriented learning for innovative community-oriented solutions through technically rigorous projects with robust monitoring and evaluation systems; project evaluations; new partnerships between PVOs/NGOs, research institutions, and local/national governments for conducting operations research and for utilization of evidence and lessons; and
- Building local capacity of the MOH and local NGOs and documenting promising practices and processes in local capacity building and sustainability.

### Means of Access

Field Support

# Child Survival Health Grants Program Cooperative Agreements

<b>Country</b>	<b>PVO</b>	<b>Agreement No</b>
Benin	Catholic Relief Services	AID-OAA-A-12-00089
Benin	MCDI	AID-OAA-A-12-00092
Ghana	Catholic Relief Services	AID-OAA-A-11-00042
Guatemala	Curamericas	AID-OAA-A-11-00041
India	Save the Children	AID-OAA-A-12-00091
Kenya	HealthRight International	AID-OAA-A-12-00076
Kenya	Concern Worldwide	AID-OAA-A-12-00078
Liberia	International Rescue Committee	AID-OAA-A-12-00094
Liberia	Africare	AID-OAA-A-10-00034
Malawi	Save the Children	AID-OAA-A-11-00058
Pakistan	Mercy Corps	AID-OAA-A-12-00093
Rwanda	World Relief	AID-OAA-A-11-00056
Rwanda	CARE	AID-OAA-A-10-00035
Sierra Leone	Concern Worldwide	AID-OAA-A-11-00054
Timor Leste	Health Alliance International	AID-OAA-A-11-00057

# The Global Alliance for Improved Nutrition (GAIN)

**Agreement Type:**

Grant

**Agreement Number:**

GHA-G-00-06-00002

**Project Number:**

936-3094.08

**Duration:**

9/06 - 9/15

**Geographic Scope:**

Worldwide

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## Purpose

The Global Alliance for Improved Nutrition (GAIN) is an alliance of national and international public and private organizations that promote nutrition-based solutions to address undernutrition among those most in need. GAIN was created at a special UN session for children in 2002, and is now formally a Foundation under Swiss Law. Currently, GAIN receives funding from the U.S. Agency for International Development, the Bill and Melinda Gates Foundation, the Canadian International Development Agency, the Children's Investment Fund Foundation, and a number of governments and charitable groups.

With this support, GAIN is funding fortification programs in 25 countries around the world, reaching approximately 610 million people, half of whom are women and children. GAIN's goal is to reach more than one billion people with fortified foods that have sustainable nutritional impact. Successful programs in recent years have included vitamin A-fortified edible cooking oil in Mali and Uganda, the development of high quality complementary foods in Kenya, and increasing access to nutrient enriched staple foods in Bangladesh.

## Services Provided

The Global Alliance for Improved Nutrition activity provides the following services:

- Provide support to selected countries working on the Feed the Future Initiative to strengthen private-public partnerships to improve nutrition in agriculture, health and nutrition sectors;
- Competitive grant-making to developing countries through a proposal review process;
- Technical assistance on the design, implementation and evaluation of food fortification programs to ensure effectiveness;
- Create national and regional Business Alliances of leading companies, which bring high quality, affordable fortified foods to those most in need;
- Develop innovative programs and approaches to reach vulnerable groups such as infants, young children, mothers and women;
- Foster country involvement in and ownership of the integrated nutrition-related plans and programs; and,
- Performance measurement and monitoring to ensure that projects are efficient and cost-effective and progressing towards set targets; and
- Communications, including global advocacy, corporate communications and social marketing technical assistance.

## Means of Access

Field Support

# Strengthening Partnerships, Results and Innovation in Nutrition Globally (SPRING)

## Purpose

SPRING is a USAID cooperative agreement designed to provide global technical leadership to support scale-up of country-specific nutrition programs and to advance the global evidence-based, advocacy platforms, and policies for nutrition. SPRING provides technical assistance to USAID and its partners, including host country governments, international organizations and NGO implementing partners. SPRING develops and adapts approaches to accelerate action on nutrition policies; builds the capacity of countries to design, implements and evaluates nutrition programs, builds the evidence base for multi-sectoral nutrition actions; promotes effective delivery of a core package of nutrition interventions; and emphasizes country-specific approaches to scale up nutrition programs. Focus areas for technical assistance include maternal and child health and nutrition, integrated agriculture and nutrition programming, social and behavior change communication, HIV/AIDS, and community-based nutrition programs.

## Services Provided

SPRING builds on past USAID investments in nutrition and aims to deliver high impact nutrition interventions that improve maternal, infant and young child nutrition (MIYCN) to reduce stunting and micronutrient deficiencies, focusing predominantly on the 1,000 days window of opportunity (pregnancy through the age two). SPRING provides technical assistance at the country and global level to:

- Strengthen and scale-up country-specific Social and Behavior Change Communication (SBCC) programs;
- Advance country-specific approaches to improve dietary diversity and quality;
- Support country-specific scale up of evidence-based nutrition interventions;
- Strengthen policy and advocacy efforts to support food and nutrition policies and programming; and,
- Expand evidence-based learning, monitoring and evaluation for effective approaches to scale up nutrition services.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-11-00031

**Project Number:**  
936-4004.02

**Duration:**  
9/11 - 9/16

**Geographic Scope:**  
Worldwide

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# Food and Nutrition Technical Assistance III (FANTA-III)

**Agreement Type:**

Cooperative Agreement

**Agreement Number:**

OAA-A-12-00005

**Project Number:**

936-4004.03

**Duration:**

1/12 - 1/17

**Geographic Scope:**

Worldwide

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## Purpose

FANTA-III is a USAID cooperative agreement designed to strengthen food security and health policies, programs and systems for improved nutrition. FANTA-III provides technical support to USAID and its partners, including host country governments, international organizations and implementing partners. Focus areas for technical assistance include maternal and child health and nutrition, nutrition assistance for HIV and other infectious diseases, community-based nutrition programs, nutrition in emergencies, food security and livelihood strengthening, resiliency and vulnerability. FANTA-III develops and adapts approaches to support the design and quality implementation of field programs, while building on field experience to build and expand the evidence base, strengthen capacities to implement quality programming and strengthen and promote global standards for nutrition and health programming to improve nutrition.

## Services Provided

FANTA-III's field support activities provide targeted, specialized technical assistance and training activities to support nutrition and food security programming strategies, early warning and response systems to nutrition emergencies, and monitoring and evaluation (M&E) for Title II and other USG programs; integrate nutrition services into national health systems (e.g., Community-Based Management of Acute Malnutrition (CMAM), Nutrition Assessment, Care and Support (NACS) for People Living with HIV); strengthen and improve community-based nutrition programming; support development of nutrition-related national policies and guidelines; support quality assurance/quality improvement of nutrition programming; and support improved nutrition and food security programs in other priority areas as needed.

FANTA-III's global leadership activities support advances in methods and tools that promote program quality; increase capacity to deliver effective services at scale; strengthen international, USG, country government and implementing partner capacity to design, deliver, monitor, improve and demonstrate effectiveness and impact of USAID-assisted food security and health programs for improved nutrition; develop and refine indicators measuring household and individual food security and diet quality; build the evidence-base on the impact of lipid-based nutrient supplements (LNS); adapt data sampling methodologies for cost-effective M&E; and develop methods and tools for quality assurance/quality improvement, beneficiary screening and targeting, and cost analysis for program planning and implementation.

## Means of Access

Field Support

# Child Blindness Program

## Purpose

Child Blindness Program (CBP) is implemented by Partners for Global Research and Development (PGRD), a Small Business Administration (SBA)-approved mentor/protégé Joint Venture. This five-year program, implemented through a congressionally-mandated child blindness directive, features prominently in USAID's multi-faceted approach to eradicate preventable blindness and improve delivery of quality eye care.

PGRD will work with USAID GH to fund, select, and support U.S.-based and non-U.S.-based organizations. Through a competitive process, organizations will receive grants that expand the delivery of quality eye care services to children and other vulnerable populations with limited access to sight-saving services. A key facet of the program is to build on previous program successes from the USAID Child Blindness Eye Health and Grants Fund, a previous iteration of CBP.

Goals include:

1. Deliver and expand coverage of quality eye care services for children in underserved communities; and,
2. Increase global knowledge based on best practices and innovative approaches for pediatric eye care programs.

## Services Provided

CBP will meet its objectives by awarding grants in the following two categories:

1. Delivery and Expansion Grants: intended to support capacity building and improve increased accessibility and availability to quality vision services for children and other vulnerable groups.
2. Innovation and Knowledge Grants: intended to generate innovations in the field of pediatric eye care research, sharing of lessons learned, documentation of best practices, and evidence for concepts detailed in the CBP Learning Agenda.

## Means of Access

Core Funded (GH-C)- Directive from Congress

**Agreement Type:**  
Contract with sub-awards

**Agreement Number:**  
OAA-C-13-00088

**Project Number:**  
936-4004.04

**Duration:**  
6/13 - 6/18

**Geographic Scope:**  
Worldwide

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# HaRP: Health Research Challenge for Impact (HRCI)

**Agreement Type:**  
Leader with Associate  
Cooperative Agreement

**Agreement Number:**  
GHS-A-00-09-00004

**Project Number:**  
936-3116.06

**Duration:**  
9/09 - 9/15

**Geographic Scope:**  
Worldwide

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## Purpose

The Health Research Challenge for Impact (HRCI) conducts multi-disciplinary, multi-country research, evaluations, implementation research and introductory activities with a wide range of existing and new partners/institutions to develop and test new/refined tools, technologies, approaches, policies and/or interventions to improve the health of infants, children, mothers and families in developing countries. With WHO and other partners, HRCI helps establish global prevention and treatment guidelines, standards and norms and provides the evidence-base for effective newborn, child, maternal and integrated MNCH health and nutrition programs.

## Services Provided

The Health Research Challenge for Impact activity provides the following services:

- Conducts multi-disciplinary, multi-country research, evaluations, health services/operations research and introductory activities with a wide range of existing and new partners/institutions;
- Develops, tests and refines new and improved tools, technologies, approaches, interventions and policies;
- Provides the evidence-base for effective newborn, child, maternal and integrated MNCH health and nutrition programs;
- Engages local partners and contributes to national evidence-based decision making and program improvement;
- Works with WHO and other partners to help establish global prevention and treatment guidelines, standards and norms; and,
- Responds to global public health research priorities and challenges.

Partners and subcontractors include the International Centre for Diarrheal Disease Research, Bangladesh (ICDDR,B); Save the Children/USA; Makerere University; and Muhimbili University of Health and Allied Sciences, Tanzania (MUHAS).

## Means of Access

Core, Field Support and Associate Awards

## HaRP: HealthTech V

### Purpose

HealthTech develops, adapts, evaluates and/or facilitates the introduction of affordable and appropriate technology solutions for the safe, effective, and more equitable distribution of health care services in low-resource countries. This project will address implementation barriers (e.g., issues with technical design, supply chain management, and policy) that typically prevent innovative technologies from reaching the most vulnerable populations. A significant focus of this project will be the advancement of health technologies through commercialization efforts.

### Services Provided

The HealthTech V Project provides the following services:

- Identify and prioritize new and promising existing technologies to address health and development challenges through activities;
- Develop viable health technologies that are appropriate, affordable, and acceptable for distribution and use in low-resource settings and show promise for sustainable market;
- Introduce innovative health technologies in developing country settings, bridging the “research-to-use” gap in conjunction with capacity building;
- Support scale-up to global access and use of health technologies; and,
- Engage local partners and contributes to national evidence-based decision making and program improvements.

Partners and subawardees (KEMRI) PHI, FIGO, WHO, UNICEF, and African Network for Drugs, Diagnostics Innovation (ANDI), CONRAD, MatCH-Wits, LSTM, and University of Bristol.

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-11-00051  
**Project Number:**  
936-3116.08  
**Duration:**  
9/11 - 9/16  
**Geographic Scope:**  
Worldwide

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**Means of Access**  
Core and Field Support

## HaRP: Accelovate

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-11-00050

**Project Number:**  
936-3116.09

**Duration:**  
9/11 - 9/16

**Geographic Scope:**  
Worldwide

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### Purpose

The purpose of this program is to develop, introduce, and support the scale-up of new health tools and technologies. These tools and technologies are appropriate, affordable and acceptable for distribution and use in low-resource settings to accelerate reductions in mortality and morbidity in low resource settings. Accelovate will help to overcome technical, supply, or policy hurdles to adapt and advance effective technologies through innovations in the value chain and promotion of mainstream use. Significant emphasis will be placed on field introduction and scale up.

### Services Provided

The Accelovate Project provides the following services:

- Identify and prioritize promising existing and emerging technologies to address health development challenges through activities;
- Engage in selective development of health technologies that are appropriate, affordable, and acceptable for distribution and use in low-resource settings and show promise for sustainable market;
- Advance the introduction of innovative health technologies in developing country settings, bridging the “research-to-use” gap in conjunction with capacity building;
- Lead efforts to scale up global access and use of health technologies;
- Develop a significant sub-grants program to support the achievement of project objectives;
- Create opportunities for public-private partnerships to bring technology to scale;
- Build on local assets and expertise, thereby progressively increasing capacity in developing nations to participate actively in the technology value chain; and,
- Proactively manage technology transfer and intellectual property to ensure innovations are sufficiently protected while also reaching target populations.

Partners and subcontractors include the Jhpiego, Johns Hopkins Center for Bioengineering Innovation and Design, Johns Hopkins Center for Global Health, Population Services International, and the Laerdal Foundation.

### Means of Access

Field Support

# HaRP: Translating Research into Action (TRAction) Project\*

## Purpose

The Translating Research into Action (TRAction) project supports implementation research and delivery science to provide critically-needed evidence to program implementers and policy makers on how to implement new and proven health interventions at scale and across different contexts to reduce mortality and severe morbidity in women, newborns and young children. There is a preponderance of evidence on the potential impact of specific maternal, neonatal and child health interventions yet the successful implementation and scale-up of these in countries remains a challenge. TRAction will address this knowledge gap by managing research, introduction and evaluation activities on how to effectively deliver, increase utilization, achieve coverage, and scale up evidence based newborn, child, maternal and integrated MNCH health and nutrition tools, approaches, interventions and policies that are relevant to field programs.

## Services Provided

The Translating Research into Action (TRAction) Project:

- Solicits applications, awards and manages sub-awards on research, evaluation and introduction activities. This includes, but is not limited to:
  - Working with USAID/GH and/or USAID Missions to determine the scopes of all solicitations and the selection criteria to be used in all procurements;
  - Leading and/or participating in the technical review process;
  - Conducting cost analyses and determine whether potential grantees meet financial and other criteria to receive USAID funds;
- Monitors and provides ongoing technical, programmatic and financial oversight of sub-awards;
- Conducts landscape analysis of research and program activities, undertakes evidence reviews and synthesizes research knowledge;
- Disseminates research results; and,
- Supports efforts to translate research results and undertakes selective introduction activities.

Harvard School of Public Health is a partner on this agreement.

## Means of Access

Core, Field Support and Associate Awards

*\*Previously known as Health Research Challenge for Delivery (HRCDD)*

**Agreement Type:**  
Leader with Associate  
Cooperative Agreement

**Agreement Number:**  
GHS-A-00-09-00015

**Project Number:**  
936-3116.05

**Duration:**  
9/09 - 9/16

**Geographic Scope:**  
Worldwide

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## DELIVER - Emerging Pandemic Threats Task Order 6

**Agreement Type:**  
Task Order  
**Agreement Number:**  
OAA-TO-11-00015  
**Project Number:**  
936-3100.57  
**Duration:**  
2/11 - 9/15  
**Geographic Scope:**  
Worldwide

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### Purpose

The objectives of DELIVER Task Order 6 are twofold: ensure the timely, consistent, and efficient provision of critical public health commodities to respond to infectious disease outbreaks; and provide technical assistance to countries to develop efficient, effective systems to maintain their health system laboratory supply needs through the operation and management of a secure, reliable, agile, and efficient supply chain and the provision of technical assistance.

### Services Provided

DELIVER Task Order 6 works with the Emerging Pandemic Threats (EPT) Program partners to assist developing countries to:

- Develop supply chain management capacity through advocacy for investment in supply chains to improve laboratory capacity and quality of services;
- Build the capacity of their laboratories through supply chain management technical assistance in support of EPT Program partners with:
  - logistics system assessment,
  - logistics system design and implementation,
  - logistics management information systems (LMIS), manual and web-based,
  - product selection and use,
  - quantification (forecasting and supply planning),
  - commodity financing and procurement,
  - inventory management, storage and distribution,
  - national commodity security policy and strategy,
  - capacity building in logistics management,
  - logistics monitoring and supportive supervision,
  - other supply chain innovations and initiatives (e.g. supply chain integration, outsourcing/third party logistics services, workforce excellence in supply chain management);
- Facilitate laboratory strategic planning workshops to ensure that supply chain issues are addressed;
- Procure public health commodities and other supplies required to effectively and rapidly respond to outbreaks of infectious diseases globally; and,
- Coordinate the in-country receipt, distribution, and transportation of commodities including developing processes and standards for ordering, receiving, transferring, transporting, storing, releasing, and distributing commodities within recipient countries.

### Means of Access

Core Only

# Food and Agriculture Organization of the United Nations (FAO) Umbrella Grant

## Purpose

To provide support to FAO to carry out collaborative activities with USAID to prevent and control highly pathogenic avian influenza (HPAI) and other emerging zoonotic diseases of significant public health concern as well as other diseases, such as H1N1 influenza, that can infect both humans and animals. The overall objective is to reduce the risk of human exposure by reducing infections in animals.

## Services Provided

This umbrella grant mechanism allows USAID missions and bureaus to provide support to FAO either to headquarters or to regional and country offices for specific technical input and assistance related to avian influenza and other zoonotic diseases of significant public health concern, including H1N1 influenza. USAID supports FAO as the lead international organization for animal health activities, with capacities to support outbreak surveillance and investigation, response, planning and preparedness, improved biosecurity, disinfection, public-private partnerships and communications.

## Means of Access

Field Support

**Agreement Type:**

Grant

**Agreement Number:**

GHA-G-00-06-00001

**Project Number:**

936-3100.32

**Duration:**

9/06 - 4/19

**Geographic Scope:**

Worldwide

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# PREVENT

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
GHN-A-00-09-00002

**Project Number:**  
936-4002.18

**Duration:**  
9/09 - 9/15

**Geographic Scope:**  
Worldwide

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## Purpose

To reduce the threats of emerging pandemic viruses among affected or at-risk populations through strategic behavior change activities in targeted high-risk regions.

## Services Provided

- Promote effective risk reduction practices for emerging pandemic threats among affected populations through strategic behavior change activities in targeted high-risk regions;
- Characterize risk by working with the wildlife, veterinary, medical and scientific community to better understand what populations may be at risk for exposure to emerging pandemic threats, including H5N1, and what practices and/or factors increase the risk of exposure and infection in order to strategically target behavior change communication activities;
- Reduce exposure to risk by creating awareness among targeted, high-risk audiences of high-risk behaviors for contracting zoonotic diseases such as avian influenza and Ebola hemorrhagic fever (EHF), practical preventative measures and how to recognize and respond appropriately to cases of diseases of animal origin in animals or humans;
- Enhance national capacity by providing assistance to national governments to develop and implement a public communication strategy for emerging pandemic threats; and,
- Promote long-term behavior change by developing and implementing transformative behavior change approaches which seek to create awareness among targeted audiences of high-risk animal and marketing practices that put humans at risk for disease transmission from animal to humans and between humans.

## Means of Access

Core Only

# One Health Workforce (OHW)

## Purpose

This project will build on existing One Health University Networks in Africa and South East Asia to provide solutions to the workforce needs of national ministries and the private sector, as well as focus on strengthening the operational capacities of the university networks. A partnership between the University of Minnesota and Tufts University will support institutions under OHW in strengthening faculty Capacities for OH teaching, research, and community outreach, to ensure that graduates are prepared with core competencies and skills for preventing, controlling, detecting and responding to zoonotic diseases. Ultimately this will position the One Health Networks as long-term sustainable leaders in One Health.

## Services Provided

1. Work through the regional and country networks to support universities to strengthen their graduate and undergraduate preparation of future health workers to meet country OH workforce needs (e.g., the future OH workforce) by:
  - a. Targeting training programs to identified needs at the country level;  
Promoting cross-disciplinary, cross-institutional and cross-sectoral (public-private-academic) collaboration in training
  - b. Transforming the classroom through innovative and problem based teaching and training;
  - c. Incorporating practical experience and skill building (One health practice) into training programs-both existing and new.
2. Work through the regional and country networks to support universities to strengthen their graduate and undergraduate preparation of current health workers to meet country OH workforce needs by:
  - a. Creating in-service continuing education programs designed to strengthen capacity in government and the private sector in an ongoing basis to meet identified country OH workforce needs;
  - b. Designing applied training programs aimed at advancing in service careers through remote/service-based certificate, masters and doctorate level training programs.
3. Help strengthen Regional and national university networks in ways that promote their sustainability by:
  - a. Reviewing and strengthening their organizational systems including financial, management, and communication;
  - b. Identifying sustainable strategies to engage and support universities and faculty.

## Means of Access

Core Only

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
OAA-A-15-00014  
**Project Number:**  
936-6600  
**Duration:**  
11/14 - 11/19  
**Geographic Scope:**  
West/Central/East Africa and  
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## Voice of America (VOA)

**Agreement Type:**  
IAA

**Agreement Number:**  
AAG-P-00-01-00001

**Project Number:**  
936-3096.10

**Duration:**  
06/01 - 9/15

**Geographic Scope:**  
Worldwide

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### Purpose

The Voice of America (VOA), a dynamic multimedia broadcaster funded by the U.S. Government, broadcasts accurate, balanced, and comprehensive news and information to an international audience. VOA provides a wide range of programming for broadcast on radio, TV and the internet outside of the U.S., in 43 languages.

Since 1997, the Office Health, Infectious Diseases, and Nutrition (HIDN) has partnered with VOA/IBB in order to promote health communications and behavior change for child survival, train journalists, conduct townhalls, etc.

The success of the VOA/IBB IAA is measured in terms of audiences reached by airing health programs by both TV and Radio, in-country training for health journalists, and costs. With a worldwide audience of over 100 million listeners, VOA has produced over 40,000 health reports on polio, malaria, HIV/AIDS, TB, reproductive health and drug resistance over the past decade. Broadcasters have aired reports in over 30 languages.

VOA inter-agency Agreement with USAID since 2001 leverages core strengths in broadcasting, program development, town halls and training; while also developing local capacity, showcasing local voices and keeping transaction costs low.

Evidence also demonstrates the great potential of new information and communication technologies in increasing community knowledge and influencing community norms and encouraging community participation in health awareness activities. Community participation and knowledge remain the main drivers to increase demand and use of health services.

VOA can play an important role in creating the demand for health services such as immunization, insecticide treated nets and for malaria control services, and that has to be done by raising awareness and community knowledge about the means of preventing and treating major causes of childhood illnesses.

### Services Provided

The IAA is designed to carry out collaborative activities with international and national broadcasters and journalists in support of project development, implementation, monitoring and evaluation of health communications and education for USAID's programs, especially for efforts concerning maternal health, child survival, HIV/AIDS, tuberculosis, malaria, the worldwide effort to eradicate polio and other important health issues.

### Means of Access

Field Support

# PSA- Procurement Support Award (Jefferson Consulting Group)

## Purpose

USAID's Bureau for Global Health awarded Jefferson Solutions (Jefferson) the Procurement Support Award (PSA), a five-year support contract, in July 2013. The PSA allows Global Health and the USAID Missions to quickly access dedicated resources to support acquisition and assistance (A&A) efforts for Global Health-funded and health-related projects. The PSA is also able to provide additional project support on an as-requested basis.

## Services Provided

The PSA is a time and materials contract designed to save time and agency resources in the A&A process. The PSA can provide support to both health offices and the Office of Acquisition and Assistance (OAA).

The PSA supports the full acquisition and assistance lifecycle for Global Health-funded and health-related projects. The Washington Office as well as USAID Missions can request PSA staff for short-term or long-term services. We provide support for the following activities: Assist in the negotiation and administration of contracts, grants, cooperative agreements and interagency agreements

- Planning Phase: Assist with Concept Papers, Project Appraisal Documents (PAD), Statements of Work, Proposal Instructions, Evaluation Criteria, Choice of Instrument Memo, and IGCE;
- Solicitation Phase: Support OAA with RFPs and RFAs;
- Evaluations Phase: Support TECs with Evaluation Plans, Compliance Reviews, Cost/Price Analysis, Reference Reviews, Etc.;
- Award Phase: Prepare award documentation in GLAAS and support in post-Award debriefs;
- Post Award: Track deliverables, maintain documentation; and,
- PSC Recruitment: Develop position descriptions, build candidate databases, recruit and screen candidates, develop PSC solicitations, manage applications, check references, conduct interviews, and develop award documents.

## Means of Access

Field Support

**Agreement Type:**  
Contract  
**Agreement Number:**  
OAA-M-13-00002  
**Project Number:**  
936-6200.02  
**Duration:**  
8/13 - 8/18  
**Geographic Scope:**  
Worldwide

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# Applying Science to Strengthen and Improve Systems (ASSIST)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00101

**Project Number:**  
936-3104.15

**Duration:**  
9/12 - 9/17

**Geographic Scope:**  
Worldwide

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## Purpose

ASSIST is the follow-on to the Health Care Improvement (HCI) project, which has reached its ceiling. ASSIST builds on the modern quality improvement approaches used in the US health system and over 20 years of GH efforts to adapt these approaches to the needs of USAID-assisted health systems.

ASSIST supports teams of host country providers to study the way they implement health services, and to test changes in implementation that might improve outcomes. A published 12 country study demonstrates the effectiveness of modern QI for outcomes such as compliance with evidence-based clinical guidelines, family planning acceptance rates, reduction in post-partum hemorrhage, tuberculosis treatment completion rates, and prevention of mother-to-child transmission of HIV. Both clinical and community level services were included in the study.

ASSIST also supports health system leaders to scale up improvements and to institutionalize ongoing improvement efforts as a permanent, integral part of delivering health services.

ASSIST will also advance the state-of-the-art for QI in lower- and middle- income countries by integrating research, evaluation, and knowledge management activities into technical assistance.

## Services Provided:

Modern QI approaches can produce rapid, quantitative improvements in a wide range of health processes. In addition to health services themselves, these approaches have also been effective for management processes such as records management and workforce management. Specific approaches include:

- Improvement collaboratives which organize up to 50 facilities to address a specific topic;
- Development of accreditation and other regulatory strategies;
- Pay-for-performance programs addressing quality;
- Quality of care and quality improvement evaluations;
- Performance improvement technologies, including more effective training and human resources management;
- mHealth (mobile health) to strengthen health systems and improve health care quality; and,
- Health systems strengthening for non-communicable diseases/ injuries.

## Means of Access

Field Support

# Health Finance and Governance Project (HFG)

## Purpose

The purpose of the Health Finance and Governance Project is to increase the use of priority health care services, including primary health care services, by partner countries' populations through improved governance and financing systems in the health sector. Partner countries' health systems are constrained from delivering intended results by inefficient use of resources, weak health governance structures, and ineffective operations. Under this project, partner countries will increase domestic resources for health care, manage those resources more effectively, and increase the efficiency of purchasing decisions. Improved governance of the health sector will occur through improved partner country capacity in stewardship, increased quality engagement of civil society and private sector, and stronger systems of strategic planning and management.

## Services Provided

HFG is USAID's flagship project in health finance and governance. It focuses on four key areas and integrates activities across them:

- Finance: increasing financing of health from domestic sources; reducing financial barriers that inhibit access to priority health services; increasing efficiency of health sector resource allocation.
- Governance: increasing partner countries' capacity to manage and oversee health systems at the national, provincial and district level; strengthening capacity of civil society and private sector for meaningful engagement with host country government; improving transparency and accountability of financial processes and financial management systems.
- Operations: country institutions develop administrative processes and structures that are efficient, equitable, and equipped to deliver quality services; improving public financial management systems to become more transparent and meet international standards of fiduciary soundness; increasing use of high-functioning systems to efficiently manage, deploy and incentivize the health workforce; increasing capacity to employ effective health sector strategy and planning systems including budgeting, payroll and logistics.
- Research and information: advancing the global health systems research and development agenda; increasing institutional and human capacity in health systems research; developing and using health systems performance measurement tools and indicators; developing and implementing standards for health system strengthening activity design.

## Means of Access

Field Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-12-00080

**Project Number:**  
936-3104.14

**Duration:**  
9/12 - 9/17

**Geographic Scope:**  
Worldwide

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# Promoting the Quality of Medicines (PQM)

**Agreement Type:**  
Cooperative Agreement  
**Agreement Number:**  
GHS-A-00-09-00003  
**Project Number:**  
936-3104.8  
**Duration:**  
9/09 - 9/19  
**Geographic Scope:**  
Worldwide

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## Purpose

PQM's mandate is to help assure the quality and safety of priority medicines by strengthening medicines quality assurance systems in developing countries to protect public health. PQM is USAID's response to the growing challenge posed by substandard and counterfeit medicines. These medicines can cause treatment-failure and adverse effects, increase morbidity and mortality, and contribute to more rapid emergence and spread of antimicrobial resistance. In addition to representing a significant public health threat, these medicines also risk undermining past and current health investments.

## Services Provided

The PQM program (1) provides technical assistance in strengthening national medicines regulatory capacity; (2) works with international prequalification mechanisms and selected manufacturers to increase the supply of quality-assured medicines of relevance to priority USAID health programs; (3) promotes and supports evidence-based interventions to combat substandard and fake medicines in the supply chain; and (4) provides technical leadership and global advocacy regarding the importance of medicines quality assurance.

Illustrative activities include:

- Strengthen national medicines quality control laboratories, establish post-marketing surveillance systems, and address quality-assurance related aspects of procurement, medicines registration, and licensing;
- Improve compliance of selected manufacturers with good manufacturing Practices (GMPs) and support them in dossier preparation for WHO prequalification or other recognized prequalification systems;
- Build or support regional and international partnerships to exchange medicines-related information and take corrective actions to address substandard and counterfeit medicines problems;
- Collaborate with USG agencies, WHO, the World Bank, the Global Fund, the Global Drug Facility, the IOM, and others, to expand the availability of quality-assured medicines and support system strengthening efforts directed toward improving the quality of medicines at the country level;
- Test medicine samples, as needed, for USAID and USAID's collaborating partners; and,
- Develop pharmacopeial monographs and reference standards, as well as new medicines quality assurance tools, approaches, and methodologies as needed.

## Means of Access

Global & Field Support

# Systems for Improved Access to Pharmaceuticals and Services (SIAPS)

## Purpose

SIAPS works to strengthen essential areas of the pharmaceutical sector, including regulatory capacity, supply chain management, pharmaceutical financing and services, and pharmaceutical management information systems. Within this context, SIAPS addresses USG priority health elements including malaria, HIV/AIDS, family planning and reproductive health, tuberculosis, maternal and child health, and neglected tropical diseases. SIAPS focuses on enhancing pharmaceutical services through patient-centered solutions while continuing to support essential supply chain functions and medical products supply security. The SIAPS goal is to support the achievement of improved and sustained health outcomes by applying a systems strengthening approach consistent with the Global Health Initiative principles. The SIAPS result areas address the five health systems components (governance, human resources, information, financing, and service delivery) as they pertain to pharmaceutical management, informing the design of potential interventions to ensure that they respond to health element and cross-cutting concerns in support of health system strengthening.

## Services Provided

- Strengthen governance in the pharmaceutical sector by ensuring that transparency and accountability are embodied across all health system components impacting on pharmaceutical systems, including medicines policies, legislation, regulations, and norms and standards, and that national pharmaceutical sector development plans are strategic and evidence based;
- Increase and enhance the capacity of individuals, institutions, and networks in pharmaceutical management, including the capacity of organizations to provide pharmaceutical services and TA in pharmaceutical management systems strengthening;
- Address the information for decision-making challenges in the pharmaceutical sector by ensuring that systems support both products and patients, that tools are broadly available and used, and that strategic information is available and used for planning purposes;
- Strengthen the capacity of existing financing strategies and mechanisms to improve access to medicines by ensuring the most efficient use of existing financial resources, supporting the generation of additional financial resources, designing alternative financing strategies, and developing effective medicines strategies under Universal Health Coverage; and
- Apply proven tools and approaches to strengthen supply chains and, pharmaceutical services to assure product availability, patient safety and therapeutic effectiveness, improved medication use, and the mitigation of the emergence and spread of antimicrobial resistance.

## Means of Access

Global & Field Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-11-00021

**Project Number:**  
936-3104.13

**Duration:**  
9/11 - 9/16

**Geographic Scope:**  
Worldwide

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# **Center for Accelerating Innovation and Impact**

*Bureau for Global Health*

Center Director  
*Wendy Taylor*

# Saving Lives at Birth: A Grand Challenge for Development

**Agreement Type:**  
Multiple Fixed Obligation  
Grants and Cooperative  
Agreements

**Agreement Number:**  
Various

**Project Number:**  
936-4000.09

**Duration:**  
Various

**Geographic Scope:**  
Worldwide

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**Project/Agreement Websites:**  
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## Purpose

Saving Lives at Birth: A Grand Challenge for Development—a partnership of USAID, the Government of Norway, the Bill and Melinda Gates Foundation, Grand Challenges Canada, and the UK Department for International Development (DFID)—calls on the brightest minds across the globe to develop groundbreaking prevention and treatment approaches for pregnant mothers and newborns during the vulnerable hours surrounding birth. Since the launch of Saving Lives at Birth in 2011, four annual rounds of awards have been made to support a portfolio of 81 novel technology, service delivery, and demand-stimulation solutions for use in low resource settings.

Awards under Saving Lives at Birth include: 1) seed grants to demonstrate proof of concept, and 2) transition awards to support successful innovations' scale-up. Under the first and second round, USAID managed 28 fixed obligation grants and cooperative agreements. The majority of the two-year seed grants from Round 1 and 2 are now closed. Under the third and fourth rounds (2013 and 2014, respectively), USAID manages 37 awards. An additional 18 projects from Rounds 2-4 are managed by Grand Challenges Canada. Ongoing grants are listed below.

**Means of Access**

Core Only

# Saving Lives at Birth: Cooperative Agreements

<b>Round 1</b>	<b>Awards Transition</b>	<b>Agreement No</b>
	Columbia Univ. Dual HIV/Syphilis Diagnostic Devic	OAA-A-12-00007
	Grameen Foundation Scale up of MOTECH in Ghana	OAA-A-12-00012
	JSI Scale up of Chlorhexidine in Nepal	OAA-A-11-00073
<b>Round 2</b>	<b>Seed</b>	
	Boston University PharmaCheck	OAA-F-13-00004
	Burnett Institute Visitect POC CD4 count device	OAA-F-13-00011
	NOvate Medical Technologies, LLC Infaclip	OAA-F-13-00001
	PATH Gestational diabetes RDT	OAA-F-13-00024
	RAND Corporation Integrated RH program	OAA-F-13-00026
	SUNY Buffalo Chlorhexidine Waterless Hand Cleansing	OAA-F-13-00010
	<b>Transition</b>	
	Rice University Scale up of bCPAP in Malawi	OAA-A-13-00014
	Jhpiego Day of Birth	OAA-A-13-00012
<b>Round 3</b>	<b>Seed</b>	
	Bilimetrix RDT for hyperbilirubinemia (kernicterus)	OAA-F-13-00072
	Bioceptive, Inc Low-cost, reusable, intuitive IUD inserter	OAA-F-14-00003
	Convergent Engineering Handheld Pre-eclampsia Diagnostic	OAA-F-13-00077
	Dimagi, Inc. CommTrack	OAA-F-14-00004
	Duke University Pratt Pouch Health System Integration	OAA-F-13-00073
	Emory University Co-administration of Influenza and Tetanus Toxoid Vaccines	OAA-F-13-00083
	Harvard Handheld Vital Sign Monitor	OAA-F-14-00005
	Nanobiosym GeneRadar HIV POC Diagnostic	OAA-F-14-00006
	Oregon Health and Science University Xstat Minisponge	OAA-F-14-00007
	PATH Rectal Formulation of Magnesium Sulfate	OAA-F-14-00002
	PATH Sublingual Oxytocin Tablets	OAA-F-13-00078
	Population Services International Postpartum IUD Inserter	OAA-F-13-00084
	<b>Transition</b>	
	Massachusetts General Hospital Scale Up of Uterine Bal- loon Tamponade	OAA-A-14-00016
	The Research Institute at Nationwide Children's Hospital Congo Red Dot Pre-eclampsia Diagnostic	OAA-A-14-00017

# Saving Lives at Birth: Cooperative Agreements

<b>Round 4</b>	<b>Awards</b>	<b>Agreement No</b>
	<b>Seed</b>	
	Becton, Dickinson and Company Pre-eclampsia Diagnostic	OAA-F-15-00007
	Burnet Institute Point-of-care Diagnosis of Active Syphilis	OAA-F-14-00039
	Diagnostics for All Early Infant Diagnosis of HIV	OAA-F-14-00036
	FHI 360 Synchronizing Immunization, Family Planning and Growth Monitoring	OAA-F-14-00005
	Laerdal Global Health Improved Fetal Heart Rate Monitoring	OAA-F-15-00017
	Little Sparrows Technologies Bili-Hut Phototherapy Device	OAA-F-14-00041
	Massachusetts General Hospital Bacterial Neonatal Pneumonia Diagnostic	OAA-F-14-00045
	Massachusetts General Hospital Non-contact Mobile Oximeter	OAA-F-15-00009
	Massachusetts General Hospital Ketamine	OAA-F-15-00002
	Monash University Inhaled Oxytocin - Landscape & Stakeholder Analysis	OAA-F-14-00046
	PATH bCPAP Kit and Oxygen Blender	OAA-F-14-00042
	PATH Preeclampsia/eclampsia Screening and Diagnostic	OAA-F-15-00006
	PATH Sublingual Oxytocin in a Fast-Dissolving Tablet	OAA-F-15-00001
	Project HOPE INSPIRE Device	OAA-F-15-00008
	SimPrints Technology Ltd. SimPrints Biometric System for Health Workers	OAA-F-15-00010
	Sisu Global Health Hemafuse Autologous Transfusion Device	OAA-F-15-00004
	The Brigham and Women's Hospital Community-Based Management of Premature and Jaundiced Newborns	OAA-F-15-00023
	The University of Sydney Lactoferrin to Correct Iron Deficiency	OAA-F-15-00014
	William Marsh Rice University BreathAlert	OAA-F-15-00003
	<b>Transition</b>	
	Trustees of Boston University PharmaChk	OAA-A-15-00029
	PharmAccess Foundation Community-Based Health Insurance	OAA-A-15-00021
	D-Tree International, Inc mHealth for Safer Deliveries	OAA-A-15-00037

# PEER HEALTH

## Purpose

The Partnerships for Enhanced Engagement in Research (PEER) program is a competitive small grants program designed to directly support developing country researchers working in partnership with researchers supported by the National Institute of Health. PEER has three strategic objectives, called the ‘3C’s’:

- **Critical Evidence-** PEER advances health and development objectives by funding research that fills evidence gaps needed to address critical health challenges facing developing countries
- **Collaboration-** PEER creates and builds relationships between developing country researchers, global health practitioners, host country governments, NIH supported investigators, and USAID Missions and Embassy staff.
- **Capacity-** PEER builds research capacity in developing countries thereby promoting sustainability and enabling local solutions to context specific health challenges.

## Services Provided

- Research grants management;
- Country specific research objectives - Research objectives can be tailored to meet country health needs, for example: epidemiological surveillance, maternal and child health research, tuberculosis, environmental effects on health, nutrition, implementation studies around various health interventions, etc; and,
- Research Agenda Setting - This mechanism can be used to support country-specific research reports/agenda setting, through the convening authority and expertise provided by the National Academies of Sciences.

## Means of Access

Field and Core Support

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
OAA-A-11-00012

**Project Number:**  
N/A

**Duration:**  
7/11 - 7/16

**Geographic Scope:**  
Worldwide

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## Project Last Mile GDA

**Agreement Type:**  
Global Development  
Alliance

**Agreement Number:**  
OAA-A-14-00047

**Project Number:**  
936-9001.01

**Duration:**  
06/14 - 06/19

**Geographic Scope:**  
Worldwide

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### Purpose

USAID, the Coca-Cola Company, the Global Fund to Fight AIDS Tuberculosis and Malaria, and the Bill and Melinda Gates Foundation recently established an alliance to improve the delivery of medicines in developing country markets and, in particular, to those citizens residing in and around the last mile of the medical supply chain. The Alliance seeks to utilize the supply chain expertise and technical capabilities of Coca-Cola — a company whose supply chain is characterized as one of the widest reaching in the world. By leveraging the business intelligence of Coca-Cola in operating efficient and effective supply chain systems, the Alliance seeks to build the strategic capacities of central medical stores and/or those entities or programs responsible for medical commodity distribution. The objective of building this capacity is to increase availability and accessibility of essential medicines in Africa as the initial focus and then in developing countries worldwide.

### Services Provided

- Build the strategic capacities of central medical stores and other public health supply chain entities and programs to operate efficient and effective supply chain systems;
- Design interventions and solutions focused on reducing stock-outs and improving operational efficiencies in the delivery of priority healthcare products;
- Transfer relevant Coca-Cola institutional knowledge to entities and persons involved in developing countries' public health supply chain and capabilities including but not limited to the areas of quantification and forecasting, planning and procurement, data collection, distribution, communication and other relevant supply chain and marketing capabilities; and,
- Set up and maintain longer term mentor and advisory relationships between relevant in-country Coca-Cola bottler/distributor personnel and personnel in the country's public health supply chain to sustain the impact of the Alliance's efforts.

### Means of Access

Field and Core Support





# Other Bureaus/Offices

*Bureau Listing:*

Africa Bureau

Center of Excellence on Democracy, Human Rights and Governance Bureau

The bureaus listed above are not part of the Bureau of Global Health, but instead collaborate with it.

# World Health Organization/Africa Regional Office (WHO/AFRO) Support for Disease Control and Reproductive Health in Africa

**Agreement Type:**

Grant

**Agreement Number:**

AFR-G-00-10-00002

**Project Number:**

N/A

**Duration:**

10/10 - 9/15

**Geographic Scope:**

Sub-Saharan Africa

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## Purpose

This Grant supports the World Health Organization/Africa Regional Office's (WHO/AFRO) program for the prevention and control of communicable diseases and the promotion of reproductive health and health systems in Africa. The mandate of the Organization is defined by its Member States in the Constitution adopted in 1946 that determines the objectives and functions of the Organization, its membership and its organs.

## Services Provided

The regional office in Brazzaville, Republic of Congo, largely through three Inter-country Support Teams (ISTs) that have been established in Harare, Zimbabwe; Libreville, Gabon; and Ouagadougou, Burkina Faso will:

- Provide technical and managerial support and contribute to sustainable capacity building;
- Engage with key partners at the sub-regional level;
- Provide rapid responses to countries in epidemic and emergency situations;
- Generate health knowledge and information and report back to the Country and WHO/AFRO Regional Office; and
- Plan, monitor and evaluate inter-country activities.

The program components supported by USAID address the following health problems:

- Malaria (MAL)
- Tuberculosis (TB)
- Integrated Disease Surveillance and Response (DSR)
- Child and Adolescent Health and Nutrition (CAN)
- Maternal and Newborn Health (MNH)
- Immunization, Vaccine Preventable Diseases (VPD)
- Family Planning and Reproductive Health (FP/RH)
- Health System Strengthening (HSS)

## Means of Access

Direct through Africa Bureau

# World Health Organization/Africa Regional Office (WHO/AFRO) Support for the Eradication of Polio

## Purpose

This Grant supports the World Health Organization/Africa Regional Office's (WHO/AFRO) program to eradicate polio in Africa. WHO/AFRO supports Member States in the following six (6) areas:

- (1) Developing partnerships to support polio eradication and vaccination;
- (2) Strengthening immunization delivery systems;
- (3) Improving planning, implementation, and monitoring of supplemental immunizations;
- (4) Improving acute flaccid paralysis (AFP) surveillance and response;
- (5) Supporting certification, containment, and post-certification policy development; and
- (6) Improving information dissemination to improve polio eradication activity quality.

## Services Provided

The regional office in Brazzaville, Republic of Congo, largely through three Inter-country Support Teams (ISTs) that have been established in Harare, Zimbabwe; Libreville, Gabon; and Ouagadougou, Burkina Faso to support country programs as appropriate to do the following:

- Provide technical and managerial support to supplemental immunization activities;
- Support the geographical expansion and quality improvement of surveillance systems;
- Improve the performance of laboratories; and
- Social mobilization and communication.

## Means of Access

Direct through Africa Bureau

### Agreement Type:

Grant

### Agreement Number:

AFR-G-00-07-00003

### Project Number:

N/A

### Duration:

10/07 - 9/15

### Geographic Scope:

Sub-Saharan Africa

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# African Strategies for Health (ASH)

**Agreement Type:**  
Grant  
**Agreement Number:**  
OAA-C-11-00161  
**Project Number:**  
N/A  
**Duration:**  
10/11 - 9/16  
**Geographic Scope:**  
Africa

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## Purpose

To work with African institutions, other development partners and partners within the USG to identify issues of regional significance in Africa, to develop strategies or approaches to resolve those issues and to provide support to the African institutions in applying the strategies and approaches throughout the region.

## Services Provided

ASH supports AFR/SD in identifying social sector issues, providing critical analysis of those issues, disseminating the analysis, advocating for solutions, promoting African partnerships, and strengthening African capacity in program planning, monitoring and evaluation. Specifically, ASH will:

- Provide strategic, analytical, information dissemination and advocacy support to the Africa Bureau, AID/W, USAID Missions, USAID Regional programs, as well as African institutions and networks;
- Identify implementation constraints and emerging priorities that threaten or limit program performance and/or exacerbate problems to improving African health status;
- Assist USAID and its development partners to identify innovative approaches to address and overcome these problems;
- Assist AFR/SD in the evaluation of regional and country programs aimed at assessing results achieved or not achieved, learning from these experiences and sharing promising practices to advance organizational learning and tell the Agency's story; and
- Support issues identification, analysis, sharing of promising practices, monitoring and evaluation across the areas of: Maternal and Child Health; Infectious Diseases; Reproductive Health; Multi-sectoral support to improving health outcomes, and Health System financing.

## Means of Access

Field Support

# Human Resources Alliance for Africa

## Purpose

This award identifies five key result areas within human resources for health (HRH): (1) HRH Planning; (2) Human Resources (for Health) Information Systems HRIS; (3) Pre- and In-service training; (4) Recruitment and Retention; and (5) Regulatory Environment and Professional Associations. The scope focuses activities on policy and facilitation within HRH, which are considered to be core strengths of ECSA.

## Services Provided

Policy, in the context of HRH, refers to strategic planning, budgeting, costing, resource mobilization, advocacy, leadership and governance. Examples would include long-term health workforce plans, fiscal projections, linking career promotion with in-service training and mentoring of senior management in HRH affairs. Facilitation refers to the design of operational guidelines, scopes of work, manuals and curricula. Examples include how Ministries of Health will collect HRH data, how they will streamline their processes to recruit new health workers, matching clinical training with the disease burden, assisting with the transition of donor-funded positions to the public sector and determining the scope and length of training for community health workers. One of the critical components to this award is ECSA's ability to work with government stakeholders outside health to achieve results for strengthen health systems.

## Means of Access

N/A

### Agreement Type:

Grant

### Agreement Number:

690-0020

### Project Number:

N/A

### Duration:

4/11 - 4/16

### Geographic Scope:

Southern Africa

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# Mentor Mothers Reducing Infections through Support and Education (RISE)

**Agreement Type:**  
Cooperative Agreement

**Agreement Number:**  
674-A-13-00015

**Project Number:**  
N/A

**Duration:**  
12/12 - 12/17

**Geographic Scope:**  
Africa

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## Purpose

This award contributes to the goal of strengthening the overall sustainableThe RISE project is a five-year regional cooperative agreement managed by the Regional HIV/AIDS Program, USAID/Southern African (RHAP). The project aims to reduce mother-to-child transmission of HIV in Southern and Eastern Africa through a peer support program that provides education and psychosocial support to HIV-positive pregnant women and new mothers, helps women access existing health care services to prevent mother-to-child transmission of HIV, and follows up with mothers and babies to ensure they receive appropriate medical care after delivery. RISE trains HIV-positive mentors in the clinic and community who act as peer educators and provide one-on-one and group counseling on the key aspects of the prevention of mother-to-child transmission (PMTCT) system. The project is currently implemented by mothers2mothers (m2m), a South African-based NGO.

## Services Provided

Under the RISE project, m2m provides the following services to prevent mother-to-child transmission of HIV in Africa:

- Direct service delivery - m2m delivers Mentor Mother services in communities. Service delivery activities include: group health talks with women in antenatal clinic settings; one-on-one interactions between the Mentor Mother and the client; support group sessions; couples interactions and support groups with female clients and their male partners; tracking and following up with mothers lost to care and referrals to relevant MNCH services.
- Capacity Building for Governments and Local Implementing Partners - m2m provides technical support to governments to develop national Mentor Mother Programs in their respective countries. m2m's role involves the development of standards and guidelines, curriculum, training program, and monitoring & evaluation framework for the national programs. m2m trains local partners, providing them with the knowledge and systems necessary to deliver Mentor Mother services in line with national governments' quality standards.
- Technical Advisory Services - Building on m2m's expertise in PMTCT care and support, m2m contributes to national PMTCT response coordination as well as conducts a number of activities to determine the success of similar peer education programs. These activities range from technical assistance in the development of relevant guidelines to analysis and assessment services for partners currently implementing peer education activities.

# Center for Children in Adversity/Displaced Children and Orphans Fund

## Purpose

The Center for Children in Adversity (CECA) supports U.S. Government, host-country and civil society partners to develop and implement programs and policies that address the objectives under the Action Plan for Children in Adversity (APCA), the first-ever, whole-of-government strategic guidance for international assistance to children.

USAID's Displaced Children and Orphans Fund (DCOF) provides financial and technical assistance for projects that help vulnerable children in jeopardy of losing, or those who are already living without, the care and protection of a family. This includes children in institutions, children living on the street, children displaced from their families and communities as a result of armed conflict, and other highly vulnerable children. Some of those children are orphans who have lost both parents; most are not.

Both CECA and DCOF are housed within USAID's Center of Excellence on Democracy, Human Rights and Governance (DRG), Bureau for Democracy, Conflict and Humanitarian Assistance (DCHA).

## Services Provided

Under these programs, most activities are implemented through USAID mission-managed grants and agreements. The major portion of these Funds is used to support program activities and provide technical assistance for programs and methodological approaches that strengthen families and communities to provide the necessary care, protection, and support for highly vulnerable children. Program activities address the needs of especially vulnerable children, including children affected by armed conflict, street children, and children otherwise separated from appropriate care-giving situations.

As part of its oversight and managerial responsibilities for the Fund, DCHA/DRG maintains a technical assistance contract with New Editions Consulting, Inc. This contract provides technical assistance and support for field missions that are interested in developing programs under the Fund

## Means of Access

N/A

**Agreement Type:**

N/A

**Agreement Number:**

N/A

**Project Number:**

N/A

**Duration:**

N/A

**Geographic Scope:**

Worldwide

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# Leahy War Victims Fund

**Agreement Type:**

N/A

**Agreement Number:**

N/A

**Project Number:**

N/A

**Duration:**

N/A

**Geographic Scope:**

Worldwide

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## Purpose

The Patrick J. Leahy War Victims Fund (LWVF) provides financial and technical assistance to programs that address the needs of people living with disabilities, primarily those who suffer from mobility-related injuries, caused by unexploded ordinance (UXO), including anti-personnel landmines, and other direct and indirect causes of physical disability (polio and other preventable diseases that might result from interrupted immunization campaigns).

## Services Provided

The LWVF is concerned with the provision of orthopedic services and devices to ensure unassisted mobility for civilian war victims and other persons with disabilities. Assistance may include training and institutional capacity strengthening, facilities upgrading, materials provision, and support for national disabilities policy reform and public advocacy. In addition, programs include support for increasing the social and economic opportunities of these survivors.

This fund is coordinated and supported by the Center of Excellence on Democracy, Human Rights and Governance, although most activities are implemented through grants and agreements that are managed by USAID Missions.

As part of its oversight and managerial responsibilities of the Fund, DCHA/DRG maintains a technical assistance contract with New Editions Consulting, Inc. This contract provides technical assistance and support for field missions that are interested in developing programs under the Fund.

## Means of Access

N/A

## Victims of Torture Fund

### Purpose

The Victims of Torture fund (VOT) provides financial and technical assistance to programs worldwide that assist in the rehabilitation of individuals who suffer from the physical and psychological effect of torture and trauma. Funds also support capacity building of organizations that serve people who have been tortured and evidenced based research on treatment and healing.

### Services Provided

The VOT primarily supports programs that help heal the psychological and physical trauma caused by torture. Additionally, the fund recognizes that communities, along with survivors, need to heal and recover. To this end, the fund supports programs that affirm the dignity of the survivor by restoring his or her position as a functioning and contributing member of the family and the community.

The fund works through nongovernmental organizations (NGOs) overseas that (1) provide direct services to survivors, their families, and communities; (2) strengthen the capacity of country-based institutions in their delivery of services to survivors; and (3) increase the level of knowledge and understanding about the needs of torture victims. The fund supports activities that attend to the medical, psychological, and social needs of torture survivors and their families. These programs include advocacy, training, technical assistance, and research. The fund is coordinated and supported by the the Center of Excellence on Democracy, Human Rights and Governance, although most activities are implemented through grants and agreements that are managed by USAID missions.

As part of its oversight and managerial responsibilities of the fund, DCHA/DRG maintains a technical assistance contract with New Editions Consulting, Inc. This contract provides technical assistance and support for field missions that are interested in developing programs under the fund.

### Means of Access

N/A

**Agreement Type:**

N/A

**Agreement Number:**

N/A

**Project Number:**

N/A

**Duration:**

N/A

**Geographic Scope:**

Worldwide

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# Wheelchair Program

**Agreement Type:**  
N/A  
**Agreement Number:**  
N/A  
**Project Number:**  
N/A  
**Duration:**  
N/A  
**Geographic Scope:**  
Worldwide

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## Purpose

Established in 2007, USAID's Wheelchair Program works to improve the availability of, access to, and sustainability of programs that provide appropriate wheelchairs in the developing world. The program promotes a comprehensive approach to the provision of suitable wheelchairs and the associated training and education that must accompany that work.

## Services Provided

In administering this program, USAID follows four (4) guiding principles:

1) appropriateness to the environment and individual user, 2) sustainability of local services, 3) necessity of training for service providers, and 4) quality of life for wheelchair users.

This fund is coordinated and supported by the Center of Excellence on Democracy, Human Rights and Governance, although most activities are implemented through grants and agreements that are managed by USAID Missions.

As part of its oversight of and managerial responsibilities for the program, DCHA/DRG maintains a technical assistance contract with New Editions Consulting, Inc. This contract provides technical assistance and support for field missions that are interested in developing programs under the Fund.

## Means of Access

N/A

## Disability Program

### Purpose

USAID's Disability Program is aimed at increasing the participation of people with disabilities in USAID programs and strengthening the capacity and services of disabled people's organizations (DPO). Funding provides an opportunity to invest in DPOs and strengthen their ability to advocate on their own behalf and to access and manage foreign assistance funding.

### Services Provided

Disability Program areas span sectors to include democracy, human rights and governance, economic growth and trade, education, the environment, gender equality and women's empowerment, and others.

This fund is coordinated and supported by the Center of Excellence on Democracy, Human Rights and Governance, although most activities are implemented through grants and agreements that are managed by USAID Missions.

As part of its oversight of and managerial responsibilities for the program, DCHA/DRG maintains a technical assistance contract with New Editions Consulting, Inc. This contract provides technical assistance and support for field missions that are interested in developing programs under the Fund.

### Means of Access

N/A

**Agreement Type:**

N/A

**Agreement Number:**

N/A

**Project Number:**

N/A

**Duration:**

N/A

**Geographic Scope:**

Worldwide

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# **Acronym List**

## Acronym List

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<b>Acronym</b>	<b>Definition</b>
A&A	Acquisitions and Assistance
AA	Assistant Administrator
AA/GH	Office of the Assistant Administration for the Bureau of Global Health
ADS	Automated Directives System or Activity Data Sheet
AFR	Africa Region or Bureau for Africa
AIDS	Acquired Immunodeficiency Syndrome
AIS	Activity Information Sheets
ART	Anti-Retroviral Therapy
ARV	Anti-Retroviral
ARS	Accruals Report System
BCC	Behavior Change Communication
CA	Cooperating Agency or Cooperative Agreement
CARE	Cooperative for Assistance and Relief Everywhere, Inc.
CBO	Community Based Organization
CCP	Central Contraceptive Procurement
CDC	Centers for Disease Control and Prevention
CI	Communications Initiative
CO	Contracting Officer
COR	Contracting Officer Representative
CPR	Contraceptive Prevalence Rate
CPR	Contractor Performance Report
CRS	Catholic Relief Services
CS	Child Survival
CS	Contraceptive Security
CSD	Child Survival and Disease Programs Fund (see CSH)
CSH	Child Survival and Health Programs Fund
CSL	Commodities Security and Logistics Division (PHR)
CSM	Contraceptive Social Marketing
CSO	Civil Society Organization
CSW	Commercial Sex Workers
CTO	Cognizant Technical Officer
CTR	Contraceptive Technology Research
CY	Calendar Year
CYP	Couple Year's Protection
DA	Development Assistance Program Funds
DAA	Deputy Assistant Administrator
DAI	Development Alternatives International
DALY	Disability Adjusted Life Year
DART	Disaster Assistance Response Team
DCA	Development Credit Authority
DCHA	Bureau for Democracy, Conflict and Humanitarian Assistance
DCOF	Displaced Children and Orphans Fund
DD	Diarrheal Disease
DEVTA	Deworming and Enhanced Vitamin A
DFA	Development Fund for Africa
DFID	Department for International Development (UK)

## Acronym List

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DG	Democracy and Governance
DH	U.S. Government Direct Hire
DHE	Direct-Hire Equivalent
DHS	Demographic and Health Survey
DOTS	Directly Observed Treatment, Short Course
DP	Development Planning Office
DPT	Diphtheria, Pertussis and Tetanus
EC	Emergency Contraception
E&E	Europe and Eurasia Region or Bureau for Europe and Eurasia
EGAT	Bureau for Economic Growth, Agriculture and Trade
EH	Environmental Health
EHP	Environmental Health Project
ENI	Europe and Newly Independent States (see E&E)
EOC	Emergency Obstetric Care
EPI	Expanded Program on Immunization
ERID	Emerging and Re-emerging Infectious Diseases
ESF	Economic Support Fund
EU	European Union
EWC	East-West Center
FAA	Foreign Assistance Act
FANTA	Food and Nutrition Technical Assistance
FAO	Food and Agriculture Organization
FAR	Federal Acquisition Regulations
FBO	Faith Based Organization
FDA	Food and Drug Administration
FFP	Food for Peace
FGC	Female Genital Cutting
FHI	Family Health International
FM	Office of Financial Management (see M/FM)
FOIA	Freedom of Information Act
FP	Family Planning
FP/RH	Family Planning/Reproductive Health
FS	Field Support
FSA	Freedom Support Act
FSI	Foreign Service Institute
FSN	Foreign Service National
FTE	Full-time Equivalent
FY	Fiscal Year
GAO	General Accounting Office
GAI	Global Aids Initiative
GAIN	Global Alliance for Improved Nutrition
GAVI	Global Alliance for Vaccines and Immunization
GC	General Counsel
GDA	Global Development Alliance
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
GH	Bureau for Global Health
GHAI	Greater Horn of Africa Initiative
GHI	Global Health Initiative

GHFP	Global Health Fellows Program
GHSD	Global Health Security and Development
GHSI II	Global Health Support Initiative II
GHSS	Global Health Support Services
GIS	Geographic Information System
GMI	Global Microenterprise Initiative
GPRA	Government Performance and Results Act
GSA	General Services Administration
GSM	Grants Solicitation and Management
GTZ	German Development Corporation
HCD	Human Capacity Development
HCP	Health Communication Partnership Project
HG	Host Government
HHS	Department of Health and Human Services
HIB	Hemophilus Influenza Type B
HIDN	Office of Health, Infectious Diseases and Nutrition
HIV	Human Immunodeficiency Virus
HKI	Helen Keller International
HMIS	Health Management Information System
HMO	Health Maintenance Organization
HPSP	Health Policy Support Program
HS	Health Systems Division (HIDN)
IAA	Interagency Agreement
IAVI	International AIDS Vaccine Initiative
IBRD	International Bank of Reconstruction and Development
ICASS	International Cooperative Administrative Support Services
ICDDR/B	International Center for Diarrheal Disease Research/Bangladesh
ICPD	International Conference on Population and Development
ICRC	International Committee of the Red Cross
ICRW	International Center for Research on Women
ICS	Immunochromatographic Strip (for testing for TB)
ID	Infectious Diseases or Infectious Diseases Division (HIDN)
IDB	Inter-American Development Bank
IDI	International Development Intern
IDP	Internally Displaced Person/People
IEC	Information, Education and Communication
IFPS	Innovations in Family Planning Services
IG	Office of the Inspector General
IMCI	Integrated Management of Childhood Illnesses
IIMPACT	Implementing AIDS Prevention and Control Activities
IMR	Infant Mortality Rate
INCLEN	International Clinical Epidemiology Network
IND	Investigational New Drug
INFO	Information and Knowledge for Optimal Health Project
INRUD	International Network for the Rational Use of Drugs
IO	Implementing Organization
IOM	Institute of Medicine
IPA	Interagency Personnel Agreement
IPPF	International Planned Parenthood Federation

## Acronym List

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IQC or IQ	Indefinite Quantity Contract
IR	Intermediate Result
IRC	International Rescue Committee
IS	Implementation Support Division (OHA)
ISPO	International Society for Prosthetics and Orthotics
ISTI	International Sciences and Technology Institute
IT	Information Technology
ITN	Insecticide Treated Nets
IUATLD	International Union Against Tuberculosis and Lung Disease
IUD	Intrauterine Device
JHUCCP	Johns Hopkins University Center for Communications Programs
JHUCS	Johns Hopkins University Child Survival Fellows Program
JICA	Japanese International Cooperation Agency
JSI	John Snow Inc.
LAC	Latin America and the Caribbean Region or Bureau for Latin America and the Caribbean
LDC	Less (or Least) Developed Country
LIFE	Leadership and Investments in Fighting the Epidemic Initiative
LOP	Life of Project
LPA	Bureau for Legislative and Public Affairs
LWA	Leader with Associate Award
M	Bureau for Management
MAQ	Maximizing Access and Quality
MCA	Millennium Challenge Account
MCC	Millennium Challenge Corporation
MCH	Maternal and Child Health or Maternal and Child Health Division (HIDN)
MDB	Multilateral Development Bank
M&E	Monitoring & Evaluation
MEDS	Monitoring, Evaluation and Design Support Activity
MENA	Middle East and North Africa
M/FM	Office of Financial Management
MH	Maternal Health
MIS	Management Information System
M&L	Management and Leadership
MMR	Maternal Mortality Ratio
MNH	Maternal and Neonatal Health
MOH	Ministry of Health
MOPH	Ministry of Public Health
MOST	Micronutrient Operational Strategies and Technologies
MOU	Memorandum of Understanding
MSH	Management Sciences for Health
MTCT	Mother-to-Child Transmission (of HIV/AIDS)
MVDP	Malaria Vaccine Development Program
MVI	Malaria Vaccine Initiative
NACP	National AIDS Control Program
NAD	New Activity Description
NAPCP	National AIDS Prevention and Control Program
NDH	Non-Direct Hire
NEP	New Entry Professional

NGO	Non-Governmental Organization
NHA	National Health Accounts
NID	National Immunization Days
NIH	National Institutes of Health
NIS	Newly Independent States Program Funds
NMRC	Navy Medical Research Center
NPR	National Performance Review
NUT	Nutrition Division (HIDN)
OAS	Organization of American States
OB	Obstetric
OC	Oral Contraceptive
OCP	Onchocerciasis Control Program
OE	Operating Expense
OFDA	Office of Foreign Disaster Assistance
OHA	Office of HIV/AIDS
OHS	Office of Health Systems
OMB	Office of Management and Budget
OMNI	Opportunities for Micronutrient Interventions Project
OPPP	Office of Policy, Programs, and Planning
OPV	Oral Polio Vaccine
OR	Operations Research
ORS	Oral Rehydration Salts
ORT	Oral Rehydration Therapy
OTI	Office of Transition Initiatives (DCHA)
OVC	Orphans and Vulnerable Children
OYB	Operational Year Budget
PAA	Population Association of America
PACD	Project Assistance Completion Date
PACT	Private Agencies Cooperating Together
PAHO	Pan American Health Organization
PAPA	Participating Agency Program Agreement
PAR	Performance and Accountability Report
PASA	Participating Agency Service Agreement
PATH	Programs for Appropriate Technologies in Health
PCV	Peace Corps Volunteer
PDC	Policy Development Coordination
PDMS	Office of Professional Development and Management Support (GH)
PEC	Policy, Evaluation and Communication Division (PRH)
PEI	Polio Eradication Initiative
PEPFAR	Presidents Emergency Plan for AIDS Relief
PHC	Primary Health Care
PHN	Population, Health, and Nutrition
PHR	Partnership for Health Reform
PIBM	Program Implementation and Budget Management Division
PIO	Public International Organization
PL	Public Law
PLP	Population Leadership Program
PLWHA	People Living with HIV/AIDS

## Acronym List

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PMF	Presidential Management Fellow
PML	Presentation Materials Library
PMNCH	Partnership for Maternal Newborn and Child Health
PMP	Performance Management Plan
PMTCT	Prevention of Mother to Child Transmission (of HIV/AIDS)
PNFPP	Philippines National Family Planning Program
POPIN	United Nations Population Information Network
PPC	Bureau for Policy and Program Coordination
PPDS	Program and Performance Data
PRB	Population Reference Bureau
PRH	Office of Population and Reproductive Health
PRIME	Primary Providers' Training and Education in Reproductive Health
PROWID	Promoting Women In Development
PSC	Personal Service Contract
PSIP	Procurement System Improvement Project
PSP	Private Sector Programs
PVC	Office of Private Voluntary Cooperation
PVO	Private Voluntary Organization
QA	Quality Assurance
QDDR	Quadrennial Diplomacy and Development Review
RBM	Roll Back Malaria
RCS	Office of Regional and Country Support
REDSO	Regional Economic Development Support Office
RFA	Request for Application
RH	Reproductive Health
RH/PHC	Reproductive and Primary Health Care
RHSC	Reproductive Health Supplies Coalition
RIF	Reduction in Force
RMNH	Reproductive Maternal and Newborn Health
RPM	Rational Pharmaceutical Management
RRB	Ronald Reagan Building
R&RS	Research and Reference Service
RSSA	Resource Support Services Agreement
RTU	Research, Technology and Utilization Division (PRH)
SAEO	Strategy, Analysis, Evaluation and Outreach Division
SADC	Southern Africa Development Community
SAI	Special Assistance Initiative
SBCC	Social and Behavior Change Communication
SCF	Save the Children Foundation
SCMS	Supply Change Management System
SCT	Sewage Collection and Treatment Systems
SDI	Service Delivery Improvement Division (PRH)
SM	Safe Motherhood
SNID	Sub-National Immunization Days
SO	Strategic Objective
SOTA	State of the Art
SOW	Statement of Work
SPA	Service Provision Assessment

SPER	Strategic Planning, Evaluation and Reporting Division (OHA)
SpO	Special Objective
SPU	Strategic Planning Unit
SSO	Strategic Support Objective
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infections
StopTB	Stop Tuberculosis
TA	Technical Assistance
TAACS	Technical Advisor in AIDS and Child Survival
TASC	Technical Assistance and Support Activity
TB	Tuberculosis
TBA	Traditional Birth Attendant
TBD	To Be Determined
TEC	Total Estimated Cost
TFGI	The Futures Group International
TFR	Total Fertility Rate
TI	Transition Initiative
TLR	Technical Leadership and Research Division (OHA)
TN	Technical Notification
TO	Task Order
TOA	Transfer Obligation Authority
U.S.	United States
U5MR	Under 5 Mortality Rate
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development USAID/
USAID/W	Washington
USDH	United States Direct Hire
USG	United States Government
USP	U.S. Pharmacopeial Convention
VAD	Vitamin A Deficiency
VB	Vector Born Disease
VCT	Voluntary HIV Counseling and Testing
VITA	Vitamin A Initiative
VOA	Voice of America
VVM	Vaccine Vial Monitor
WARP	West Africa Regional Program
WFP	World Food Program
WHO	World Health Organization
WID	Office of Women in Development (EGAT Bureau)
WRAIR	Walter Reed Army Institute of Research
YARH	Young Adult Reproductive Health





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