Dealing with the Data: Changes to Data Tools and Approaches with COP23 / COP24 Planning
COP development this round is different!

Johannesburg Meetings
- The timing and the objectives of the Jo’burg meetings have changed
- **Previously:**
  - Purpose of Jo’burg meetings was to get to near final state of COP plan, including budgets and targets
- **Starting in COP23/COP24**
  - Jo’burg meetings earlier in the process
  - More opportunity for providing input that teams can incorporate
  - HOWEVER, less data, less specificity, no concrete budgets or targets
  - Process of setting budgets and targets takes place AFTER Jo’burg and CSOs MUST be prepared to engage at that stage!

### Key Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Dates for Group 1</th>
<th>Dates for Group 2</th>
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<tbody>
<tr>
<td>Release of COP22 Tools: FAST (includes PASIT and SRE), Target setting tool, Supply Planning Tool</td>
<td>February 15</td>
<td>February 15</td>
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<tr>
<td>Release of COP22 Guidance and COP/ROP22 Planning Level Letters</td>
<td>February 15</td>
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<tr>
<td>In-Country High-Level Preparation</td>
<td>February 21–24</td>
<td>February 21–March 3</td>
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<td>COP23 Planning Meetings Global Convening in Johannesburg.</td>
<td>February 27–March 3</td>
<td>March 6–10</td>
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<tr>
<td>In-country Planning and Tool Development (2 weeks)</td>
<td>March 6–17</td>
<td>March 13–24</td>
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<td>Strategic Checkpoint</td>
<td>March 20–24</td>
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<td>In-Country Stakeholder Meeting to Discuss Plan Review and Finalization</td>
<td>March 27–31</td>
<td>April 3–7</td>
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<td>Tool Checkpoint</td>
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<td>Finalization</td>
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<td>COP23 Submission Due</td>
<td>At least 5 working days before Approval</td>
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<tr>
<td>COP23 Virtual Approval Meetings</td>
<td>April 24–28</td>
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</table>
What is Up for Discussion in the COP Reviews?

Primarily a Budgeting Exercise at the Country Level

- High level budget in the Planning Letters
- Strategy and Approaches for Programs

What’s NOT Up for Discussion (generally)

- Country Level Funding (Can only be challenged with PEPFAR Headquarters)
- Which specific implementing partners will get funding.

S/GAC will not assign targets to countries, but only provide notional budget levels sufficient to achieve the full SDG goal and sustain gains made. Teams will develop their own targets across PEPFAR program areas, with the treatment current target no less than the result that was to be achieved in COP 2020. After the PEPFAR country team submits their COP21 targets, the notional budget will then be adjusted to the presented level of ambition.

The PEPFAR Country Operational Plan (COP 2021) notional budget for Malawi is $175,785,000 inclusive of all new funding accounts and applied pipeline. All earmarks and program direction provided below must be met. Targets and the subsequent approved budget should reflect the level of ambition the PEPFAR team, in collaboration with the Government of Malawi and civil society of Malawi, believes is critical for the country’s progress towards controlling the pandemic and maintaining control.

We are hoping this approach to target-setting and budget will establish an open dialogue on target-setting and empower teams to work with all stakeholders to plan a strategic and impactful COP. The expectation is for country teams and agencies to propose to S/GAC the targets they believe are achievable and feasible and hold their partners accountable to that achievement.

PEPFAR, with partner governments, multilateral partners, and communities, continues to move rapidly toward control of the HIV pandemic and plan for sustainability of programs. Achieving epidemic control for HIV will be a remarkable accomplishment, saving millions of lives, significantly lowering the burden of HIV/AIDS in countries and communities, reducing the future costs incurred to sustain the HIV response.

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<th>TABLE 1: All COP 2021 Funding by Appropriation Year</th>
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SECTION 2: COP 2021 BUDGETARY REQUIREMENTS AND OTHER CONSIDERATIONS

Malawi should plan for the full Care and Treatment (C&T) level of $94,000,000 and the full Orphans and Vulnerable Children (OVC) level of $20,000,000 of the PFL across all funding sources. These earmark levels on new funding are subsets of those amounts that must be programmed with specific types of...
PEPFAR’s Use of Data

PEPFAR uses data to target its resources and interventions

- At the end of the COPs process country teams must set the main targets for each country and geographically distribute them within countries.
- Must also determine budgets for each implementing partner (CSOs NOT involved)

Tools PEPFAR Uses:

- **DataPack/Flatpack**: Sets targets for districts
- **Fast Tool/Flatpack**: Sets budgets for each program and implementing partner
- **PASIT (Formerly Table 6)**: Identifies investments in strategic information and above-site activities
PEPFAR Data Systems and Changes for COP23/COP24
MER System

- Primary Performance Management and M&E System PEPFAR Uses
- Tally based system - counts the number of services being provided, no information about the quality or individuals accessing services

Key Pieces of Data only Available in MER

- Primary means for tracking quarterly improvement and implementation of the COPs
- Granular district/facility level and implementing partner level results

https://datim.zendesk.com/hc/article_attachments/10003735798420
Prevention Services:

- **AGYW_PREV**: % of AGYW that have DREAMS primary prevention package
- **FPINT_SITE**: # of service delivery sites offering integrated family planning services (NOT PUBLIC)
- **GENE_GBV**: # of people receiving post-GBV clinical care
- **KP_MAT**: # of people who inject drugs (PWID) receiving Medication Assisted Therapy (MAT)
- **KP_PREV**: # of key population individuals reached with prevention programming
- **OVC_SERV**: # of orphans/vulnerable children served
- **PP_PREV**: # of priority prevent individuals reached with prevention programming
- **PrEP_CURR**: # of people currently on PrEP
- **PrEP_NEW**: # of people newly enrolled on PrEP
- **TB_PREV**: # of people completing course of TPT
- **VMMC_CIRC**: # of males accessing voluntary medical male circumcision
PEPFAR Data Systems - Monitoring and Evaluation

Testing Services:

- CXCA_SCRN: # of women screened for cervical cancer
- HTS_INDEX: # of individuals identified and receiving HIV testing through index testing services (Partially PUBLIC)
- HTS_RECENT: # of newly diagnosed individuals tested with an HIV recency assay
- HTS_SELF: # of HIV self-test kits distributed
- HTS_TST: # of individuals tested for HIV and receiving their results
- HTS_TST_POS: # of individuals newly testing positive for HIV
- OVC_HIVSTAT: % of OVC with documented HIV status
- PMTCT_EID: # of infants tested for HIV in early infant diagnosis programs
- PMTCT_FO: % of infants with documented final HIV status that were part of a birth cohort (NOT PUBLIC)
- PMTCT_HEI_POS: # of infants (<12 months) diagnosed HIV positive
- PMTCT_STAT: # of pregnant women tested for HIV
- TB_STAT: % of TB patients tested for HIV
Treatment Services:

- CXCA_TX: % of women screening positive for cervical cancer that received treatment
- PMTCT_ART: % of HIV positive pregnant women accessing HIV treatment
- TB_ART: % of HIV positive TB-patients accessing HIV treatment
- TX_CURR: # of individual currently on ARV treatment
- TX_ML: # of ART patients who have been lost-to-follow-up (NOT PUBLIC)
- TX_NEW: # of individuals newly enrolled on ARV treatment
- TX_TB: % of ART patients screened for TB
- TX_RTT: # of ART patients returned to treatment after being lost-to-follow-up

Viral Suppression Services

- TX_PVLS: % of ART patients with a suppressed viral load
PEPFAR Data Systems - Monitoring and Evaluation

**Health Systems:**

- **EMR_SITE:** # of PEPFAR supported facilities with an Electronic Medical Record System (NOT PUBLIC)
- **HRH_CURR:** # of health care workers working on HIV supported by PEPFAR
- **HRH_PRE:** # of new health care workers graduated with support from PEPFAR
- **HRH_STAFF:** # of health care workers working at a facility
- **LAB_PTCQI:** # of PEPFAR supported laboratory and point-of-care sites engaged in quality improvement and proficiency testing
- **SC_ARVDISP:** # of bottles of ARV dispensed by patients (NOT PUBLIC)
- **SC_CURR:** # of ARV bottles in stock (NOT PUBLIC)
PEPFAR Data Systems - Monitoring and Evaluation

MER System

- PEPFAR is in the process of modifying MER for COP23 / COP24
- Outcomes of that have not been communicated at this stage
- There has been some push to reduce the amount of data reported to headquarters - this is dangerous!
SIMS System

- Quality Assurance and Monitoring System PEPFAR uses
- Meant to monitor whether facilities are implementing programs correctly and consistently
- Not limited to assessing PEPFAR programming at a facility

Key Pieces of Data only Available in SIMS

- More detail about what may be going wrong at a facility that is under-performing (i.e. is defaulter tracing being done? Do patients get viral load results? etc)

Draft COP Guidance has made SIMS (potentially) optional if country team wants to use a different system for site monitoring
Changes to MER Target Setting in COP Process
Setting Targets for COP23 / COP24

No longer part of the Jo’burg meeting. Will take place in the following months. CSOs must be prepared to be engaged throughout that process!

Changes in how PEPFAR is proposing setting targets:

- Reducing age/sex specific targets
- Reducing HTS modality targets
- Changing geographic level targets
- Key Populations targets
- 2 year targeting
Setting Targets for COP23 / COP24

- Reducing age/sex specific targets
- Reducing HTS modality targets
- Changing geographic level targets
- Key Populations targets
- 2 year targeting

Previously:
- Targets set in the same 5-year age bands that results are reported in

Problem:
- Highly intensive to set targets at that fine a disaggregation
- The quality of the targets set is very poor as we don’t have data to justify that level of precision

Now:
- 7 age groups: <1 (EID), 1-9, 10-14, 15-24, 25-34, 35-49, 50+
- Sex disaggregates: Male/Female
Setting Targets for COP23 / COP24

- Reducing age/sex specific targets
- Reducing HTS modality targets
- Changing geographic level targets
- Key Populations targets
- 2 year targeting

Previously:
- Targets set for granular testing modalities with little strategic significance

Problem:
- Highly intensive to set targets for each modality
- The quality of the targets set is very poor as we don’t have data to justify that level of precision

Now:
- Reducing the overall number of modalities
Setting Targets for COP23 / COP24

- Reducing age/sex specific targets
- Reducing HTS modality targets
- Changing geographic level targets
- Key Populations targets
- 2 year targeting

Previously:
- Targets set (generally) at district/county level

Problem:
- Highly intensive to set targets for each modality
- The quality of the targets set is very poor as we don’t have data to justify that level of precision
- If targets are set poorly, our metrics for whether partners are performing well/poorly are useless

Now:
- Country programs MAY be allowed to change their target setting to a higher level geography (provincial/regional)

https://programme.aids2022.org/Abstract/Abstract/?abstractid=7277
Setting Targets for COP23 / COP24

- Reducing age/sex specific targets
- Reducing HTS modality targets
- Changing geographic level targets
- Key Populations targets
- 2 year targeting

No specific and real changes to the way that KP *MER Targets* are being set

Problem:
- Targeting for KPs continues to rely heavily on inaccurate, outdated, and problematic size estimates

PEPFAR’s Proposed Solutions:
- Engage with UNAIDS and others on supporting new estimates
- Improve the data pack tool
- Engage earlier on KP targets
Setting Targets for COP23 / COP24

- Reducing age/sex specific targets
- Reducing HTS modality targets
- Changing geographic level targets

No specific and real changes to the way that KP *MER Targets* are being set

PEPFAR’s Proposed Solutions:
- Engage with UNAIDS and others on supporting new estimates
- Improve the data pack tool
- Engage earlier on KP targets
Setting Targets for COP23 / COP24

- Reducing age/sex specific targets
- Reducing HTS modality targets
- Changing geographic level targets
- Key Populations targets
- 2 year targeting

Previously:
- COP targets set annually

Problem:
- With 2-year COPs budgets, need 2-year (notional) COP targets
- Setting of COP targets annually has led to big swings in targets based off assumed changes in performance

PEPFAR’s Proposed Solutions:
- 2nd year targets only set at national level by age/sex and KP
- 2nd year targets will be re-visited during the midpoint review to set detailed targets at lower geographies/IP levels, etc.
Financial Classification System and Changes for COP23/COP24
Brand new in COP23 / COP24, budget data that we get will include new “Initiative Funding”

Initiatives:
- Funding for specific programming of special interest to headquarters and reporting to Congress, but which has all the same line items as the core program
- **Core Program**: All funding that isn’t part of the other initiatives. The VAST majority of funding will be in the core program.
- **Cervical Cancer**: Funding for programming supporting cervical cancer screening, prevention, and treatment for PLHIV
- **Community-Led Monitoring**: CLM funding will be able to be seen directly in the initiative funding.
- **DREAMS**: The AGYW specific DREAMS program implementation funding
- **VMMC**: Funding for voluntary medical male circumcision
### Budget Structure - Financial Classification - Beneficiaries and Sub-Beneficiaries

#### Beneficiaries
- Females
- Key Populations
  - Priority Populations
- Males
- Non-Targeted
- OVC
- Pregnant / Breastfeeding Women

#### Sub-Beneficiaries
- Adult Men (25+ years)
- Adult Women (25+ years)
- Adults (25+ years)
- Boys (<15 years)
- Care givers of OVC
- Children (<15 years)
- Clients of Sex Workers
- Displaced Persons
- Girls (<15 years)
- Men who have Sex with Men
- Military & Uniformed Services
- Mobile Populations
- OVC
- People in Prisons
- People who Inject Drugs
- Sex Workers
- Transgender Individuals
- Young/Adolescent Males (15-24)
- Young/Adolescent Females (15-24)
- Young/Adolescent (15-24)
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PEPFAR is fundamentally changing the way budgets are allocated to different beneficiaries

Previously:
- Both the Beneficiary and Sub-beneficiary were individually selected for each line item

Problem:
- Lots of categorization problems
- Inaccurate

New:
- Teams will only allocate “Targeted Beneficiaries”
- “Allocated Beneficiaries” will be calculated from the MER Targets data
Budget Structure - Financial Classification - Targeted and Allocated Beneficiaries

Targeted Beneficiary

- AGYW
- Key Populations
- Non-Targeted Populations
- OVC
- Pregnant and Breastfeeding Women
- Children
- Military

Allocated Beneficiaries

- MSM
- PWID
- Sex Workers
- Transgender
- People in Prisons
- Adult Women
- Girls
- AGYW
- Adult Men
- Boys
- ABYM
- Pregnant & Breastfeeding Women
- OVC Comprehensive
- OVC Preventive
- DREAMS
- Military
PEPFAR will provide CSO representatives with raw budget data: Please send this to data@pepfarwatch.org

From it, we can prepare a spreadsheet for advocates like this that shows where funding is INCREASING or DECREASING

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</table>
PEPFAR will provide CSO representatives with raw budget data: Please send this to data@pepfarwatch.org

From it, we can prepare a spreadsheet for advocates like this that shows where funding is INCREASING or DECREASING
Budget Structure - PASIT Data (Formerly Table 6)

What it is
- Details investments in above-site and strategic information
- IBBS Surveys
- IT Systems (electronic medical records)
- Supply Chain Management Systems
- New Guidelines Development

Access to it:
- Should be a tab on the flatpacks that are shared

Contents
- **Sub-Program Area**: Sub-program the activity relates to
- **Activity Category**: More detailed categorization of the activity
- **COP23 Beneficiary**: Targeted Beneficiary from the Financial Classification data
- **Status of Activity**: Whether this is a new activity or continuation from prior years
- **When Activity Implementation Began**:
- **Activity Title**: Free text title of the project
- **Short Activity Description**: Free text description of the project
- **Gap Activity will Address**: Rationale for funding the project
- **Activity Budget**: Funding level
- **Measurable Interim Output by end of FY24**: Free text of what will be completed by the end of FY24
- **Measurable Interim Output by end of FY25**: Free text of what will be completed by the end of FY25
- **Measurable Expected Output From Activity**: Free text of what the outcome will be when project is completed
- **Nature of Health System Investment**: Categorical area of investment: Capacity building, Support, Strengthening
- **How Long has PEPFAR Invested in gap**: Duration of PEPFAR systems investments in this area
- **What is the location of this investment**: National/Sub-national/Province/District
We will likely NOT start to see even draft versions of the tools until around the Strategic Checkpoint meeting in March.

We have insisted that once the tools development is underway, all CSO groups should get AT LEAST weekly revisions of the tools.

Must evaluate these to see if the priorities agreed to in Johannesburg are adequately represented in the tools, both the MER targets and the Budget.


<table>
<thead>
<tr>
<th>Key Milestones</th>
<th>Dates for Group 1</th>
<th>Dates for Group 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Release of COP22 Tools: FAST (includes PASIT and SRE), Target setting tool, Supply Planning Tool</td>
<td>February 15</td>
<td>February 15</td>
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<tr>
<td>Release of COP22 Guidance and COP/ROP22 Planning Level Letters</td>
<td>February 15</td>
<td>February 15</td>
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<tr>
<td>In-Country High-Level Preparation</td>
<td>February 21–24</td>
<td>February 21–March 3</td>
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<td>COP23 Planning Meetings Global Convening in Johannesburg.</td>
<td>February 27–March 3</td>
<td>March 6–10</td>
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<tr>
<td>In-country Planning and Tool Development (2 weeks)</td>
<td>March 6–17</td>
<td>March 13–24</td>
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<tr>
<td>Strategic Checkpoint</td>
<td>March 20–24</td>
<td>March 27–31</td>
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<tr>
<td>In-Country Stakeholder Meeting to Discuss Plan Review and Finalization</td>
<td>March 27–31</td>
<td>April 3–7</td>
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<tr>
<td>Tool Checkpoint</td>
<td>April 3–7</td>
<td>April 10–14</td>
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<tr>
<td>Finalization</td>
<td>April 10–21</td>
<td>April 17–21</td>
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<tr>
<td>COP23 Submission Due</td>
<td>At least 5 working days before Approval</td>
<td>At least 5 working days before Approval</td>
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<tr>
<td>COP23 Virtual Approval Meetings</td>
<td>April 24–28</td>
<td>April 24–28</td>
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</tbody>
</table>
Additional Webinar AFTER Johannesburg meetings to talk through ways to analyze the tools data.

- We don’t have all the details at this stage
- Important to re-fresh then

Things to do:

- Make sure commitments made in Jo’burg to CSO demands are well documented in the meeting slides and other materials.
- We’ll use these to hold the teams accountable to funding and targeting appropriately based on those commitments.
- **IF AGREEMENTS ARE NOT DOCUMENTED AT THE END OF JO’BURG, IT WILL BE VERY HARD TO GET THEM IN LATER!!!**
Thank you!

brian.honermann@amfar.org