

# Influencing PEPFAR COPS

## An Advocate's Guide

### Country Operational Plans (COPs) at a glance

- The US government's Presidential Emergency Plan for AIDS Relief (PEPFAR) is a US\$48 billion initiative that is active in more than 35 countries.
- In the majority of these countries, the PEPFAR program completes an annual COP that describes national PEPFAR targets, goals, implementing partners, and budgets.
- The COP is developed by all of the US government partners working in country. These include: the CDC, Department of Defense, Peace Corps, USAID and US Embassy.
- There is usually flexibility in determining the budget for a PEPFAR COP—but it requires evidence based advocacy. New initiatives and priorities, such as scale up of voluntary medical male circumcision (VMMC) could provide the catalyst for increased funding.
- The COP describes what each of the US government partners will do directly. It also specifies the in-country partners that will receive sub-grants for different activities.
- US government partners consult with the national government, implementing partners and other stakeholders as they develop the COP but there is no standard or mandated procedure for this consultation. The 2013 process is the first one that specifies civil society should be engaged in the planning process.
- The in-country US team sends a draft COP to the Washington, DC-based Office of the Global AIDS Coordinator (OGAC), which reviews the contents and gives feedback. This process is usually completed by the end of March.
- OGAC and the country team work together to finalize a COP and budget. This process is usually completed by the end of July.

### Civil society advocacy on COPs

There are many ways that Africa-based civil society can influence COPs—even if the process and key stakeholders are unfamiliar at the outset. These include:

- Writing to and/or requesting a meeting with the PEPFAR Coordinator, and heads of relevant agencies in country. USAID and CDC are particularly important as they are almost always the biggest agency recipients of PEPFAR funding. Contact AVAC or the local US embassy to find out who holds these positions in your country.
- Once you have made contact with a member of the PEPFAR team, ask to review the targets in the draft COP. Provide feedback on what you would expect to see.
- If you do not already have one, go to <http://www.pepfar.gov/countries/cop/index.htm> and download a copy of last year's COP.
- Ask US and national stakeholders to complete impact modeling that projects cost savings and HIV infections averted with different levels of antiretroviral treatment, VMMC, testing, Option B+ and other interventions. PEPFAR has completed this analysis for many countries. You can request that your country have a similar analysis—and use it to advocate with government, Global Fund to Fight AIDS Tuberculosis and Malaria and PEPFAR.
- Lobby national decision-makers to enact policy through national strategic plans or make commitments that can be used to leverage more ambitious COPs. For example, a commitment from the Kenyan government to increase health spending in the future was used to secure an immediate commitment of increased PEPFAR funding for the 2012 COP.
- Share questions and advice with other advocates working on similar campaigns. This may be a new area and the PEPFAR process is not always clear. There are many resources available—and we can show collective strength in coordinating efforts in different countries.

#### For more information

##### AVAC

AVAC is a non-profit organization that uses education, policy analysis, advocacy and a network of global collaborations to accelerate the ethical development and global delivery of AIDS vaccines, male circumcision, microbicides, PrEP and other emerging HIV prevention options as part of a comprehensive response to the pandemic.

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##### Health GAP

Health GAP (Global Access Project) is an advocacy and policy organization dedicated to eliminating barriers to affordable life-saving medicines for people living with HIV as key to a comprehensive strategy to confront and ultimately stop the AIDS pandemic. Health GAP works in the US and in heavily impacted countries, including Kenya and Uganda, to advocate for increased funding, accountability, and scale up of services and rights necessary to turn the tide.

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+256 776 574 729 (Uganda)

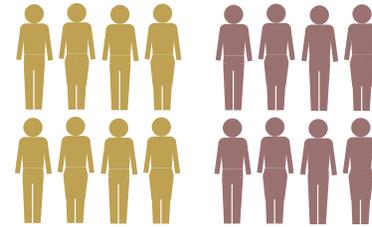
+1 267 475 2645 (USA)

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### Country-Level Advocacy Points

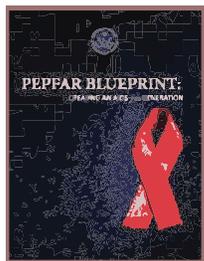
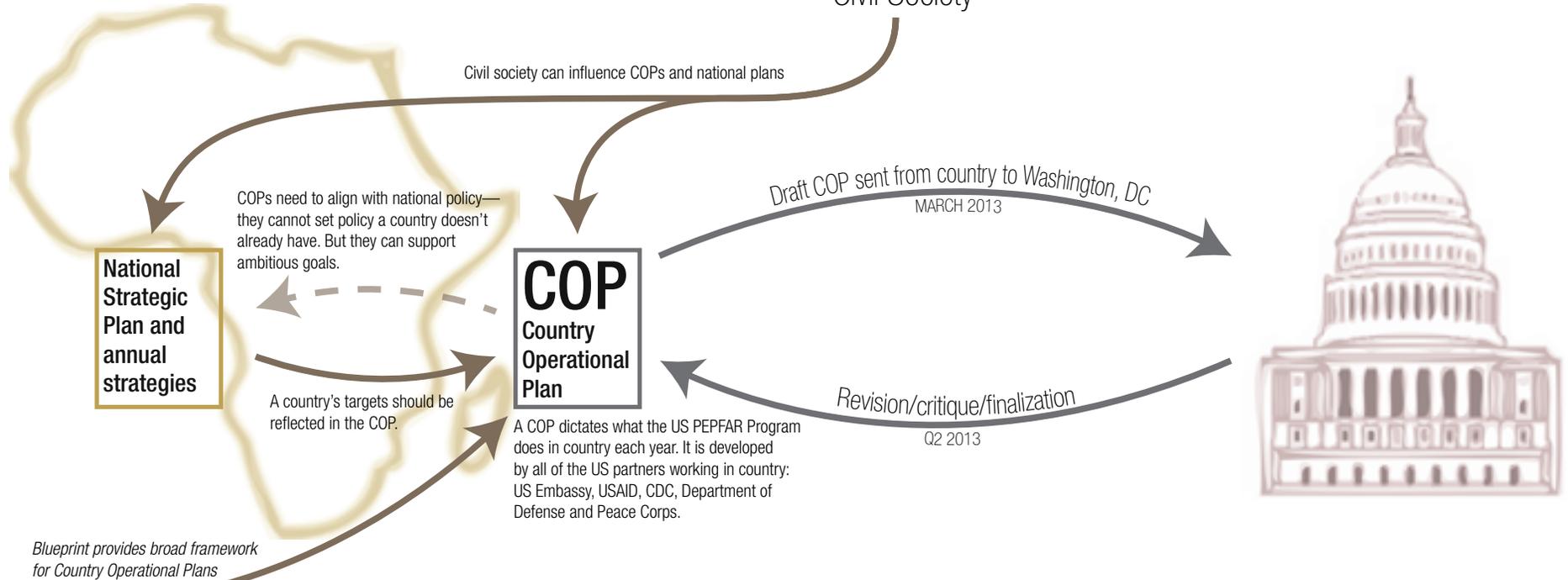
- Ensure the COP is ambitious and consistent with the [PEPFAR Blueprint](#)
- Use PEPFAR commitments to influence national plans and policies—e.g. Blueprint statement that PEPFAR will support national programs implementing the WHO guidelines for treatment of serodiscordant couples.
- It is PEPFAR's obligation and your right that you be meaningfully involved



Civil Society

### US-Level Advocacy Points

- Lobby to increase overall PEPFAR funding
- Ensure COP targets match Blueprint goals
- Amplify specific country concerns



### The PEPFAR Blueprint

Priority is combination prevention: VMMC, ART, PMTCT, testing, condoms, and programs targeting key populations (p15).

Support for plans incorporating Option B+, treatment at a CD4 count of 350 and above, and treatment for the positive partner in serodiscordant couples (p 19). Financial assistance may be available to countries that need them to implement these programs.

full report at: <http://1.usa.gov/U4BNII>

PEPFAR is reorienting its approach in order to increase country financial commitments and ownership (p 44).

Engaging civil society in the COP process is a priority. Small grants are available for ongoing advocacy work. (p 46).

