



Second Quarter Report

January 1, 2016–March 31, 2016
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Activity Description	Health Policy Project (HP+) is a five-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-15-00051, beginning August 28, 2015. HP+ is implemented by Palladium, in collaboration with Avenir Health, Futures Group Global Outreach, Plan International USA, Population Reference Bureau (PRB), RTI International, the White Ribbon Alliance for Safe Motherhood (WRA), and ThinkWell.
Main Program Message	HP+ improves health outcomes by advancing sustainable health policy; financing; stewardship, transparency, and accountability; and advocacy for RH/FP, HIV, and MNCH efforts at the global, national and subnational levels.
Name of USAID AOR	Linda Cahaelen, ScD
Name of Agreement Officer	Alisa J. Dunn
Name of Technical Contact	Suneeta Sharma, Health Policy Plus Director, Palladium
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ABBREVIATIONS

AIDS	acquired immune deficiency syndrome
AM	activity manager
AOR	Agreement Officer's Representative
BBL	brown bag lunch
CAM	country activity manager
CIP	costed implementation plan
ED	education
ES	economic support
EPMCD	Ending Preventable Maternal and Child Deaths
FP	family planning
FP2020	Family Planning 2020
FP/RH	family planning and reproductive health
HEP+	Health & Education Policy Plus
HIV	human immunodeficiency virus
HP+	Health Policy Plus
HPP	Health Policy Project
KEA	Kenya and East Africa
MEL	monitoring, evaluation, and learning
MNCH	maternal, newborn, and child health
NUT	nutrition
PEPFAR	President's Emergency Plan for AIDS Relief
PMP	performance monitoring plan
POP	population
RMC	respectful maternity care
SDG	Sustainable Development Goals
UNAIDS	United Nations Joint Programme on HIV/AIDS
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
WHO	World Health Organization
WRA	White Ribbon Alliance

I. PROJECT DESCRIPTION: HEALTH POLICY PLUS

Overview

Health Policy Plus (HP+) aims to improve the enabling environment for equitable and sustainable health services, supplies, and delivery systems through policy development and implementation, with an emphasis on voluntary, rights-based family planning and reproductive health (FP/RH); maternal, newborn, and child health (MNCH); and HIV and AIDS.

The project also expands creative strategies to accelerate the pace of HP+ policy work and shape enabling environments through: 1) more nuanced understanding of political, social, and economic influences on health; 2) enduring public, civil society, and private sector partnerships to create a virtuous cycle of engagement; 3) broader ownership of the health sector that integrates it with the economy, justice, and other sectors to support resilient health systems; 4) more transparent, usable, and accessible information for policymakers, implementers, and citizens; and 5) a more rigorous program to capture, learn from, and share experiences through monitoring, evaluation, and learning.

This purpose will be realized through achievement of the four result areas (see Figure 1 for Results Framework) that flow from the HP+ mandate and reflect the project's technical approach.

Figure 1. HP+ Results Framework



II. PROGRESS REPORT

A. Project Management

Objectives: To continue efficient project startup with clear management roles and responsibilities; ensure that the project’s vision and mandate are addressed and implemented in core and field workplans; to establish and manage financial and operations structures and processes; and to represent the project to key stakeholders in government and multilateral agencies and organizations to share best practices and to promote the HP+ role in improving the enabling environment for equitable and sustainable health services.

Summary of Main Accomplishments

- Funding through the end of the second quarter was US\$27,874,157. These second quarter funds included US\$6,037,500 Core funding for HIV activities and a total of 14 field-support Missions.
- Hosted first HP+ Partners meeting with USAID attendance where policy monitoring and evaluation was the focus.
- Completed a two-day Country Activity Manager (CAM) (field) and Activity Manager (AM) (core) training for Palladium and Partner staff.
- HP+ cost share plan approved by USAID.
- Hosted brown bag lunches (BBLs) at USAID on stigma and discrimination (The HPP/HP+ Stigma-Reduction Package for Health Facilities: Assessment, Staff Training and Environment Strengthening) and on HIV (Achieving Test and Start: The Policy, Financing, Governance, and Advocacy Agenda).
- Contributed thought leadership to global dialogues on policy reform, financing, and HIV:
 - Health and Education Policy Plus (HEP+) in Guatemala hosted an event on February 18 to launch the new project. The event brought together more than 150 people from the Ministry of Health, USAID, HEP+, and partners, as well as representatives from government ministries and civil society organizations to review progress under the previous project and activities underway to address decentralization, transparency, gender equality, capacity development, and sustainability of the health and education sectors. The event featured remarks by Luis Felipe García Ruano, Guatemala’s vice minister of health, William Brands, mission director, USAID/Guatemala; Linda Cahaelen, USAID health development officer and agreement officer’s, and reproductive health activist Mirna Montenegro.
 - HP+ HIV technical experts contributed to a March 3, 2016, strategic discussion on best practices on measuring and monitoring HIV stigma, tracking its relationship to HIV outcomes and service implementation, and promising interventions to reduce HIV stigma. The meeting, “Translating Research into Action: Reducing HIV Stigma to Optimize HIV Outcomes,” was convened by the Office of National AIDS Policy. HP+ staff provided an update on HIV stigma measurement and moderated a panel highlighting community-led activities focused on reducing HIV stigma.
 - Project leadership presented at a USAID-convened meeting on policy reform providing examples from previous health policy projects and outlining the HP+ policy reform

approach. The discussion garnered proactive responses from across the agency for further discussion and follow up.

- Staff leadership participated on April 4 and 5 in an invitation-only global dialogue at the United Nations Population Fund (UNFPA) on universal health coverage.

B. Core Programs

Overview

HP+ has a mandate across global, country, and subnational levels to strengthen and advance health policy priorities in FP/RH, HIV, and MNCH. As part of this mandate, core programs will provide technical leadership, develop practical tools and methodologies, add value to field support activities, and aim for higher-level outcomes.

FP/RH

Objectives: HP+ is being implemented in a dynamic policy context for family planning (FP). Several global initiatives provide a platform for HP+ work to support the FP/RH agenda. The emergence of Family Planning 2020 (FP2020) in recent years has provided new opportunities to strengthen commitment, increase investment, and enhance accountability. The newly approved Sustainable Development Goals (SDGs) are guiding the global development agenda, and HP+ is demonstrating the importance of FP/RH in order to achieve the SDGs. And the trend toward universal healthcare provides an additional opportunity to advocate for the inclusion of FP/RH, thereby helping reach more women with critical health services. The Year 1 workplan responds to the changing FP policy context and USAID priorities, while also positioning HP+ within global initiatives to increase access to FP, mobilize domestic funds for FP, and foster greater accountability on the part of governments to follow through on their FP commitments.

Summary of Main Accomplishments

During the January-March 2016 reporting period, HP+ made significant progress on its FP/RH work:

- The FP/RH workplan was submitted to the Agreement Officer Representative (AOR) team and, with revisions, has been approved. Activity managers and staff have been identified.
- The final workplan includes support for Monitoring, Evaluation, and Learning (MEL); Communications and Knowledge Management; the update of Spectrum models and rapid response; support for the HP+ gender advisor; and outlines 10 technical activities that support the four HP+ result areas:
 - Policy: Costed Implementation Plans (CIPs), policy and financial considerations for expanding method mix, and improved FP policy implementation for young women.
 - Financing: Lessons learned from incorporating FP in universal health care in Latin America and the Caribbean, harmonizing costing approaches in normative interventions, and support for the Population and Reproductive Health/FP financing framework.
 - Stewardship, accountability, and transparency: Advocacy and women's leadership, fostering government accountability and transparency for FP2020 commitments
 - Advocacy and leadership: Promoting accountability for the SDGs, and enhancing policy models (expanding DemDiv and using existing models to focus on youth).

- Made progress on development of a CIP execution approach, including formulation of strategy map, dashboard, and balanced scorecard; and progress on creating training materials for introducing CIP execution approach. Ongoing coordination among HP+, USAID, FP2020, Ouagadougou Partnership, and UNFPA on countries needing CIPs.
- Had a strong presence at the International Family Planning Conference—including eight oral presentations, seven posters, four pre-formed panels, facilitation in the “Implementing Best Practices” sessions, and co-chairing the conference’s advocacy and accountability subcommittee.
- Participated in the Prince Mahidol Awards Conference (PMAC) in Bangkok, Thailand, in January, contributing to the discussions with perspectives and findings of team economists. PMAC 2016 focused on building advocacy and the evidence base to support universal health coverages and explored challenges and opportunities around domestic resource mobilization.
- Finalized, won approval of, and disseminated to HP+ staff the gender strategy.
- Submitted budget request for Y2.
- *Global Health: Science and Practice* accepted for publication a paper based on Health Policy Project (HPP) research on applying a partnership evaluation framework to the Uganda CIP development.

HIV

Objectives: HP+ will focus on a viable and continuous HIV response by developing solutions to support the achievement of the United Nations Joint Programme on HIV/AIDS’ (UNAIDS) 90-90-90 targets; sustained HIV epidemic control; and the implementation and monitoring of related, supportive policies. Realization of these achievements will require adequate and predictable health financing, as well as policies that protect human rights, eliminate stigma and discrimination, strengthen supply chains and service delivery, and engender accountable and transparent health systems.

Summary of Main Accomplishments

From January through March, the HIV team

- Received 2015 HIV core funds notification and developed and submitted draft activity plans to the HIV AOR team for gender and sexual diversity training, a stigma and discrimination reduction package, and a policy scan/civil society auxiliary module and action planning.
- Has made progress on its Sustainable Financing Initiative funding which is spread across four separate activities: Kenya, which has already been approved by USAID headquarters and the Kenya Mission, and Tanzania, Uganda and global for which activity plans under development.
- Contributed to field support work, including HP+ participatory assessments and workplan development in West Africa, Tanzania, Mali, and Malawi; and field support activity start up in Mozambique, Jamaica and Kenya.
- Continued to implement HPP work extended through March 2016.
- Submitted 13 abstracts, one adolescent satellite, and one skills-building workshop to the 21st International AIDS Conference.
- Developed and submitted a list of potential 2016 core fund activities to USAID’s pediatric and prevention of mother-to-child transmission teams.

Objectives: HP+ will play a lead role in promoting high impact MNCH policies to help achieve USAID’s goal of Ending Preventable Maternal and Child Deaths (EPMCD) in a generation. HP+ will build on the success of White Ribbon Alliance’s (WRA’s) global leadership in advancing respectful maternity care (RMC) and midwifery care through continued championing of RMC in USAID’s EPCMD priority countries. HP+ seeks to achieve this by building in-country capacity to advocate, develop, implement, and monitor MNCH policies.

Summary of Main Accomplishments

During the project’s second quarter

- HP+ hosted the RMC council meeting to develop a five-year vision and goals; plan will be finalized at April and September meetings.
- The advocacy subcommittee identified three activities to better position RMC, as part of the RMC council meeting:
 1. Include a monitored and evidence-generating indicator on the participatory accountability mechanism for RMC in the Global Strategy for Women’s, Children’s and Adolescents’ Health which will enable maternal health advocates advance their work on participatory accountability mechanisms for RMC. The framework was presented to the World Health Organization (WHO) in February and at the Partnership for Maternal, Newborn & Child Health Global Strategy Accountability Meeting in March.
 2. Submit implementation guidance on accountability for RMC to the High Commissioner on Human Rights on reducing maternal mortality and morbidity. The focus on accountability helps focus the need for governments to acknowledge the rights of women, and apply pressure for countries to follow through on commitments they have made.
 3. Share the RMC framework with the WHO Reproductive Health and Research Technical Working Group.
- WRA hosted and facilitated a strategy workshop with key partners and the WHO and the International Confederation of Midwives are finalizing a strategy that focuses on strengthening and empowering the midwifery profession to raise their voices individually and collectively and to ensure that midwives have a seat at the table when decisions are made that affect their roles and responsibilities.
- WRA made a grant to WRA/Afghanistan to create a working group that will coordinate an advocacy campaign to increase community awareness and garner support for the passage of the Afghanistan’s Midwifery and Nursing Council Act in Parliament.

C. Monitoring, Evaluation, and Learning

Objectives: The HP+ MEL approach will increase the evidence base for the effectiveness of health policy; financing; advocacy; and stewardship, transparency, and accountability activities related to strengthening health systems and health outcomes. HP+ will incorporate a focus on learning into the approach to contribute to global knowledge and ensure that data are collected to inform ongoing project activities. HP+ strives to contribute to this evidence-base by carrying out the following areas of focus:

1. Implementing the *HP+ Project Performance Monitoring Plan* (PMP) and providing technical assistance to support core and field program PMPs.

2. Developing and implementing the *HP+ Evaluation and Learning Agenda*, which will contribute to the understanding the relationships among health policy interventions and health outcomes.

The MEL team will provide technical coordination to and oversight of MEL across the project through the implementation of the PMP to track the project's results and advance global learning related to key policy; financing; advocacy and stewardship, transparency, and accountability issues.

Summary of Main Accomplishments

- Developed indicator reference sheets, detailing definitions and examples of each PMP indicator in collaboration with results leads and cross-cutting leads.
- Submitted HP+ PMP, including indicator reference sheets, to USAID for review on February 29, 2016.
- Conducted HP+ Partners Meeting to discuss partner experience and plans for policy evaluation on February 23, 2016.
- Initiated development of theories of change for HP+'s contribution to PEPFAR and FP2020 goals.
- Contributed to the development of field and core work plans; compiled and reviewed PMPs for field work plans and core activity plans; and assisted field teams in responding to MEL questions from USAID Missions in Jamaica, Pakistan, and West Africa.
- Developed draft MEL training materials for HP+ staff in field offices and headquarters.
- Submitted workplan for a core activity to support MEL activities for project Year 2.

D. Communications and Knowledge Management

Objectives: The Communications and Knowledge Management team aims to cultivate systematic and continual sharing across and outside the project and develop, create, and disseminate information that supports the project goal to develop and implement policies that of strengthen and advance equitable, sustainable, and rights-based health services, supplies, and delivery systems—especially for FP/RH, HIV, and MNCH. Using an audience-centered approach, communications efforts will be conducted in collaboration with technical team members, project leadership, and USAID counterparts to effectively generate, capture, and share knowledge, best practices, and tools.

Summary of Main Accomplishments

- Provided communications review, editing, and design support for the FP/RH, MNCH, HIV, and Sustainable Financing core workplans and for several country workplans.
- Coordinated HP+ abstract submissions to the International AIDS Conference. This includes review and submission of 16 abstracts to AIDS2016 and the Global Health Systems Research conference, coordination and support for HP+ collaboration on a satellite session focused on HIV and adolescents.
- Developed a final HP+ brand, website structure and website text for the HP+ website, which will be launched in May 2016 along with new project templates.
- Initiated outreach to HP+ partner communications staff to establish a working group, with its first meeting set for May 2016.

- Drafted, edited, and disseminated two externally published commentary pieces advocating for accountability and community participation in the United Nations High Level Meeting on Ending AIDS. Blogs appeared in *Global Health Now*, an online initiative of the Johns Hopkins Bloomberg School of Public Health and in *ScienceSpeaks*, the blog of the Center for Global Health Policy at the Infectious Disease Society of America.
- Coordinated four internal breakfast briefings for staff to encourage information sharing across HP+ teams and coordinated updates to a directory of project staff with a focus on technical expertise and interests to improve coordination and collaboration.
- Hired and on-boarded a communications coordinator and a publications and graphic design associate.
- Developed and launched a new products database to track the development, manage production, and share HP+ products.
- Revised the HP+ *Style Guide* to be adapted as an interactive *Frequently Asked Questions* for the HP+ intranet.
- Participated in the CAM/AM training to introduce best practices for communications protocols and product development and dissemination.

E. Cross-cutting Issues

Equity

Objectives: In an effort to enhance health equity, HP+ will look for innovative ways to expand democratic processes by engaging civil society actors and communities to advance human rights, establish accountability mechanisms, generate data, and assess the impact of equity-driven policies. HP+ seeks to identify those who are left out from receiving adequate health care or do not achieve adequate levels of health, how the poor and the excluded can make demands for mandated services, and how they can engage in policy making to ensure policies meet their needs. With a recognition that how we identify those who fall behind in having adequate health is not an easy process, we hope that our in-depth analyses and provisioning of adequate space for all voices to be heard will lead to health policy being accountable to the poor and the excluded.

Summary of Main Accomplishments

During the project's second quarter, the Equity team

- Began discussions for involvement on equity issues in Pakistan.
- Initiated the development of an equity framework.
- Started an equity concept note, which will clarify our framework to emphasize that those who do not receive adequate health care and those who do not achieve adequate health must play a greater role in policy making and monitoring policy implementation.

Gender

Objectives: To support gender equality, HP+ will use our *Gender Analysis Framework* throughout the project to explore how gender influences health behaviors and services, and how policies reduce or perpetuate inequalities. Additionally, HP+ will engage women, vulnerable populations, health and gender

ministries, and others in advocacy; design gender-transformative policies; support gender-responsive budgeting; and expand the evidence base through gender-sensitive data systems, new models, and evaluation.

Summary of Main Accomplishments

- HP+ staff from Washington, DC worked with the HEP+ team to identify and operationalize gender approaches and activities for the Guatemala program, as part of a larger country planning process. This included a two-day orientation to key gender and sexual diversity concepts for technical staff and external meetings with partners to gather perspectives about priorities and current initiatives for gender equality and social inclusion in the education and health sectors. HEP+ team also met with the USAID Guatemala ARO and gender advisor, representatives from the Secretaría Presidencial de la Mujer, civil society partners from the indigenous women's networks, the men's network for new masculinities, and the national observatories for education (ONCE) and FP/RH (OSAR). The outputs from the orientation and meetings were integrated into the annual workplan and program strategy.
- HP+ submitted final revisions to the PEPFAR Malawi Gender Assessment report, based on feedback from PEPFAR and USAID Malawi. Findings and recommendations from the assessment, and their implications for meeting 90-90-90 targets and country operational plan (COP) 16 programming, were presented during the Washington, DC COP management meeting in March 2016, and were submitted in April with PEPFAR Malawi's COP16.
- HP+ contributed to a two-day consultation and small group follow-up in the development of a USAID framework on Women's Economic Empowerment and Equality and will continue to be involved with review of the resulting draft framework.
- In support of work promoting accountability for the SDGs—especially Goal 3 on health, Goal 5 on gender, and the associated FP/RH targets—HP+ conducted a rapid policy assessment for Pakistan to identify barriers to the implementation of strong health programs, and in turn, the impact of those health programs on the achievement of the SDGs. The policy assessment incorporated gender-integration checklists completed during the HP+ Pakistan field support participatory assessment in January; the checklists assessed the level of gender-responsiveness of health policies and guidelines, specifically in the policy formulation process, descriptions, and outlined priorities. To supplement the policy assessment, HP+ developed an interview guide and is conducting a series of key informant interviews with key stakeholders in Pakistan to better assess the policy environment and related sociocultural barriers, opportunities, and challenges to achieving the SDGs. The interview guide includes a set of questions and question prompts focused on the gender-related barriers and challenges to achieving the SDGs in Pakistan.

Capacity Development and Sustainability

Objective (Capacity Development): To strengthen the capacity of stakeholders (including individuals, organizations, government entities) to create and implement contextualized solutions. Within HP+, capacity development is not an end in itself; rather, it is a process that enables the creation and implementation of the most effective and efficient development solutions. It is also necessary to sustain development results—to ensure gains don't dissipate after our involvement ends, and to also go beyond maintaining progress gained via embedded capacities to adapt and self-renew.

To this end, HP+ assists partners with assess needs and design action plans; builds systems-driven capacities at individual, institutional, and systems levels through approaches tailored to the needs of different partners.

Objective (Sustainability): To sustain and improve country leadership; political, social, and cultural soundness; integration of best practices; financial sustainability and creative uses of all financing sources; viability of civil society organizations and networks; and accountability to promote enduring political commitment and better use of resources.

Summary of Main Accomplishments

- Adapted USAID’s Local Systems Framework and USAID-recommended Collective Impact approach for use in HP+.
- Tested systems-based and collective impact approach to inform HP+ capacity development strategy via three workshops in Guatemala and Uganda, with focus on civil society networks. Excellent results as measured by in-country partner satisfaction and HP+ assessment of substantive results in the form of customized capacity development and sustainability strategies.
- Provided technical support to core and field workplans and activities in development, including Pakistan, Ghana, Malawi, and Guatemala.
- As part of HP+ capacity development team, helped design and implement three day CAM/AM training.
- By invitation from USAID’s capacity development thought leaders, presented on HP+ Innovations in systems-based capacity development.
- Met with peers from other organizations to share experience and ideas and help frame “Capacity Development 2.0.”
- Created first draft of HP+ capacity development strategy and gathered feedback for second draft.
- Participated in a range of meetings and technical events, representing perspectives of capacity development and sustainability.

F. Field Programs

Objectives: In addition to the project’s core activities, HP+ will help countries achieve their health goals by working in-country with diverse stakeholders to develop and implement evidence-based, inclusive policies; more sustainable financing; strong advocacy and communications; and improved governance will contribute to optimizing health resources and foster more equitable, sustainable, rights-based health services, supplies, and delivery systems.

Summary of Main Accomplishments

As of mid-April 2016 HP+ received

- Requests for 14 field programs (country, regional), including two new countries (Pakistan and Indonesia). Other field programs are building on their work under HPP.
- Over US\$20 million in field funding either obligated, in the USAID Field Support Database, or committed in writing by field missions; larger country programs.
- Funding and commitments from HIV, FP/RH, economic support (ES), MNCH, education (ED), nutrition (NUT), and other.

- Increased attention to health financing (beyond costing), building on prior experience in Kenya, Tanzania, Afghanistan, and East Africa and with new interest in West Africa, Mali, Madagascar, and Guatemala.
- Continuing interest in the application of our models and approaches in FP (Mali, West Africa, Malawi, Madagascar, Nigeria) and HIV (Jamaica, Ghana, West Africa, Mozambique, Tanzania).
- Increased attention to health governance and health sector/systems reform in Guatemala, Pakistan, West Africa, KEA, and possibly Madagascar.

HP+ has responded to these exciting opportunities by

- Mobilizing 14 CAMs and finance/operations staff.
- Identifying and hiring international staff to provide essential technical leadership, support, and quality assurance for field programs both virtually and through limited short-term technical assistance.
- Recruiting and/or retaining over 50 local staff so far [30-Guatemala, 17-Kenya, 3-Malawi, 3-West Africa, 2-Jamaica], with more under recruitment.
- Initiating participatory development of 14 field workplans with Mission and national colleagues; submitting 12 workplans, of which six are approved to date. Of those submitted, six cover large and complete field programs (Guatemala, Jamaica, Pakistan, Madagascar, Kenya, and West Africa). Six others (Ghana, Tanzania, Mozambique, Ethiopia, Nigeria, and Indonesia) are for discrete and defined work.
- Planning to submit two large and complex field workplans in April (Malawi and Mali).
- Completing one initial field activity—the Malawi gender assessment—and initiating another—the Pakistan RAPID—and mobilizing several others to start in the second quarter: two Indonesia assessments (private sector, civil society); one Ghana study (facility-based stigma); costing of antiretroviral treatment protocols in Mozambique; initial FP CIP data collection in Madagascar, and others.

Figure 2. HP+ Field Programs



Country Workplan Status

- Workplan Approved
- Participatory Assessment/
Work planning in Progress
- Workplan Submitted

APPENDIX A: HP+ COMPLETED PRODUCTS

Table A1. HP+ Completed Products

Core-funded Products
<i>Project-wide</i>
Health Policy Plus: Health Advocacy
Health Policy Plus: Health Financing
Health Policy Plus: Health Governance
Health Policy Plus: Health Policy
Health Policy Plus: Project Overview
<i>HIV</i>
Towards an AIDS-free Generation: Health Policy Plus Supports PEPFAR's Drive to Reach HIV Treatment, Care, Support Targets
Towards a Stigma-free Generation Health Policy Plus Investing in Stigma Reduction (English)
Towards a Stigma-free Generation Health Policy Plus Investing in Stigma Reduction (Russian)
The HIV Treatment Gap: Estimates of the Financial Resources Needed versus Available for Scale-up of Antiretroviral Therapy in 97 Countries from 2015 to 2020 (<i>Journal Article, PLoS Medicine, November 2015</i>)
Field-funded Products
<i>Pakistan</i>
Population and Development in Pakistan
17 Reasons to Invest in Family Planning in Pakistan: Accelerating Achievement of the Sustainable Development Goals

Health Policy Plus
Palladium
1331 Pennsylvania Ave., NW, Suite 600
Washington, DC 20004 USA
Tel: (202) 775-9680
Fax: (202) 775-9694
<http://www.healthpolicyplus.com>