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Users Guide to USAID/Washington Health Programs

April 2013

Users Guide to USAID/Washington Health Programs

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User Information

Locating the Electronic Copy of the Users Guide

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

http://transition.usaid.gov/our_work/global_health/home/Resources/users_guide.html

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) or Wyman Stone (wstone@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.

Table of Contents

Introduction to the Bureau for Global Health.....	1
Global Health Offices and Functions	2
Office of the Assistant Administrator.....	2
Center for Accelerating Innovation and Impact	2
Center of Excellence on Children in Adversity.....	2
Office of Health, Infectious Diseases and Nutrition	3
Infectious Diseases Division	3
Maternal and Child Health Division.....	3
Nutrition Division.....	3
Malaria Division.....	3
Office of HIV/AIDS.....	3
Technical Leadership and Research Division	3
Implementation Support Division	3
Strategic Planning, Evaluation and Reporting Division.....	3
Supply Chain Management Division.....	4
Office of Population and Reproductive Health	4
Commodities Security and Logistics Division.....	4
Policy, Evaluation and Communication Division	4
Research, Technology, and Utilization Division.....	4
Service Delivery Improvement Division.....	4
Office of Professional Development and Management Support.....	4
Professional Development Team.....	4
Personnel Team	5
Administrative Support Team	5
Office of Policy, Programs, and Planning.....	5
Strategy, Analysis, Evaluation, and Outreach Division	5
Program Implementation and Budget Management Division	5
Office of Country Support.....	6
Office of Health Systems.....	6
Project Listing	7
Bureau-wide Projects.....	9
Knowledge Management Services (KMS).....	10
Global Health Professional and Organizational Development (GHPOD)	11
Global Health Fellows Program II (GHFP-II).....	12
Global Health Support Initiative-II (GHSI-II)	13
Global Health Technical Assistance Bridge Project: GH Tech Bridge III.....	14
MEASURE Evaluation Phase III	15
MEASURE Phase III, Demographic and Health Surveys (DHS).....	16
World Health Organization Consolidated Grant	17
Office of Population and Reproductive Health	19

Central Contraceptive Procurement (CCP).....	20
USAID DELIVER Project (Deliver II) Task Order 4.....	21
BALANCED Project	22
Health Communication Capacity Collaborative (HC3).....	23
Health, Environment, Livelihood, Population and Security (HELPS) Project.....	24
Health Policy Project (HPP)	25
Inform Decision-Makers to Act (IDEA) – ASPEN	26
Inform Decision-Makers to Act (IDEA) - PRB Population Reference Bureau.....	27
Knowledge for Health (K4Health).....	28
MEASURE US Census Bureau	29
MEASURE Evaluation III PRH Associate Award.....	30
Biodegradable Contraceptive Implants.....	31
Combination Contraceptive and Anti-HIV Vaginal Ring	32
IPM Combination Contraceptive and Anti-HIV Vaginal Ring	33
SILCS Cervical Barrier + Tenofovir (TFV) Gel.....	34
Facilitating Regulatory Pathways for Approval of Multipurpose Prevention Technologies.....	35
The Fertility Awareness-Based Methods (FAM) Project	36
Gender Roles, Equality, and Transformations (GREAT) Project.....	37
Impact on Marriage: Program Assessment of Conditional Cash Transfers.....	38
in India (IMPACCT) Project	
Increasing Age of Marriage	39
The Population Council Product Development Agreement (PC-PDA).....	40
Program Research for Strengthening Services (PROGRESS).....	41
Terikunda Jekulu.....	42
Bayer HealthCare – USAID Contraceptive Security Initiative	43
Capacity <i>Plus</i>	44
Responding to the Need for Family Planning through Expanded Contraceptive.....	45
Choices and Program Services (RESPOND)	
Support for International Family Planning Organizations (SIFPO/MSI).....	46
Support for International Family Planning Organizations (SIFPO/PSI)	47
Strengthening Health Outcomes through the Private Sector (SHOPS)	48
Leadership, Management, and Governance (LMG)	49
Evidence to Action for Strengthened Family Planning and Reproductive Health	50
Services for Women and Girls (E2A)	
Advancing Partners and Community-based Family Planning.....	51
Office of HIV/AIDS.....	53
AIDS Support and Technical Assistance Resources (AIDSTAR) Sector I - Service Delivery.....	54
AIDS Support and Technical Assistance Resources (AIDSTAR) Sector I,.....	55
Task Order #1 John Snow, Inc.	
AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II,.....	56
Task Order #1 Management Sciences for Health	
AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II,.....	57
Task Order #2 Training Resources Group	
Supply Chain Management System (SCMS).....	58
Health Policy Initiative Costing Task Order.....	59
U.S. Census Bureau Participating Agency Program Agreement (PAPA)	60
CONRAD Proprietary Product Research and Development (PPRD).....	61

Table of Contents

International AIDS Vaccine Initiative (IAVI).....	62
Livelihood and Food Security Technical Assistance (LIFT)	63
Microbicides Partnership Program	64
Project SEARCH GBV Evaluation TO - Tathmini GBV (Futures Group).....	65
Preventive Technologies Agreement (PTA)	66
Project SEARCH: John Hopkins University Task Order 2 (R2P)	67
Project SEARCH: Population Council Task Order (HIVCore)	68
IS APS: The Partners Demonstration Project.....	69
IS APS: Project START	70
IS APS: Impact Evaluation of SILC on Child Household Well-being	71
IS APS: Situkulwane Lesiphephile - Safe Generations.....	72
IS APS: REaCH.....	73
IS APS: Thol’impilo: Bringing People into Care.....	74
IS APS: ENGAGE4HEALTH.....	75
IS APS: The Kabeho Study	76
Grant Management Solutions (GMS 2) Project	77
Joint U.N. Programme on HIV/AIDS (UNAIDS III).....	78
Office of Health, Infectious Diseases, and Nutrition	81
UNICEF MCH Umbrella Grant	82
Centers for Disease Control and Prevention IAA Agreement II.....	83
Africa Program for Onchocerciasis Control (APOC)	84
End Neglected Diseases (END) in Africa: Family Health International 360 (FHI 360).....	85
End Neglected Diseases (END) in Asia: Family Health International 360 (FHI 360)	86
ENVISION RTI.....	87
Onchocerciasis Elimination Program of the Americas (OEPA)	88
Deliver Project for Malaria.....	89
MalariaCare	90
Indoor Residual Spraying 2	91
Indoor Residual Spraying 2 Task Order #4	92
International Federation of Red Cross and Red Crescent Societies (IFRC) Umbrella	93
Malaria Vaccine Development Program (MVDP).....	94
Medicines for Malaria Venture	95
NetWorks: Building Capacity for Sustained Net Coverage and Use.....	96
Global Alliance for TB Drug Development.....	97
STOP TB Partnership.....	98
Tuberculosis Indefinite Quantity Contract (IQC).....	99
TB Task Order 2015	100
TB Care – 1	101
TB Care – 2	102
TREAT TB	103
Fistula Care.....	104
Health and Emergency Response Support(WHO: Polio, Immunizations, CS, ID).....	105
Health and Immunization Response Support (UNICEF Polio, EPI Grant).....	106
Health and Immunization Response Support (NGO’s: Polio Eradication, Immunization).....	107
Health and Immunization Response Support (NGO’s: Polio Eradication, Immunization).....	108
Maternal and Child Health Integrated Program (MCHIP)	109
WASH <i>Plus</i> : Supportive Environments for Healthy Communities	110

Saving Lives at Birth: A Grand Challenge for Development	111
Child Survival and Health Grants Program (CSHGP).....	112
Child Survival Health Grants Program Cooperative Agreements	113
The Global Alliance for Improved Nutrition (GAIN)	114
Health Research Challenge for Impact (HRCI).....	115
HealthTech V	116
Strengthening Partnerships, Results and Innovation in Nutrition Globally (SPRING).....	117
Accelovate.....	118
Translating Research into Action (TRAction) Project.....	119
Food and Nutrition Technical Assistance III (FANTA-III).....	120
World Health Organization Consolidated Grant/Maternal, Child, and Adolescent	121
Health and Development (WHO/MCA)	
DELIVER - Emerging Pandemic Threats Task Order 6	122
Food and Agriculture Organization of the United Nations (FAO) Umbrella Grant.....	123
PREDICT	124
IDENTIFY	125
PREVENT.....	126
RESPOND	127
Office of Health Systems	129
Health Care Improvement Project (HCI).....	130
Applying Science to Strengthen and Improve Systems (ASSIST).....	131
Health Finance and Governance Project (HFG)	132
Promoting the Quality of Medicines (PQM)	133
Systems for Improved Access to Pharmaceuticals and Services (SIAPS)	134
Other Bureaus	137
World Health Organization/Africa Regional Office (WHO/AFRO) Support for Disease	138
Control and Reproductive Health in Africa	
World Health Organization/Africa Regional Office (WHO/AFRO) Support for the.....	139
Eradication of Polio	
African Strategies for Health (ASH).....	140
Displaced Children and Orphans Fund.....	141
Leahy War Victims Fund.....	142
Victims of Torture Fund	143
PEER HEALTH.....	144
Acronym List	147
Indexes	157
Agreement Name Index	158
COR/AOR Index.....	162
Activity Director Index.....	163
Agreement Number Index.....	165
Project Number Index.....	171

Introduction to the Bureau for Global Health

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Global Health Offices and Functions

Bureau 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 and encouraging the wider global community to adopt new technologies and approaches and to pursue USAID priorities and goals.

Office of the Assistant Administrator (AA/GH)

Assistant Administrator: Ariel Pablos-Méndez

Deputy Assistant Administrator: Robert Clay

Deputy Assistant Administrator: Wade Warren

Deputy Assistant Administrator: Katherine Taylor

U.S. Global Malaria Coordinator/PMI: Timothy Ziemer

Special Advisor for Children in Adversity: Neil Boothby

Science Advisor: James Shelton

The Office of the Assistant Administrator provides oversight to the GH Bureau and leadership for the Global Health Initiative, 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 the Bureau'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 Introduction and Impact, is the focal point for accelerating the introduction and scale up of innovative global health 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

Center for Accelerating Innovation and Impact (CAII) is located within the Office of the Assistant Administrator (AA/GH), will promote and reinforce innovative, business-minded approaches to address key bottlenecks in the development, introduction and scale-up of global health technologies and interventions – applying business and marketplace principles to accelerate impact against some of the world's most important health challenges. The Center will engage luminaries across sectors to identify best practices and push the boundaries of current thinking; catalyze transformational innovation and partnerships; and apply cutting-edge market tools and practices to support the rapid introduction of, and access to, priority health innovations.

Center of Excellence on Children in Adversity

Director: Neil Boothby

The Center of Excellence on Children in Adversity coordinates USAID efforts under the USG Action Plan on Children in Adversity. This Center brings together USAID's technical experts - at the Missions and in Washington - who are leading the response to the world's most vulnerable children.

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 the Global Health Bureau's activities in child survival health, maternal health, and infectious diseases, which include Tuberculosis, Malaria, Pandemic Influenza and Other Emerging Threats, Neglected Tropical Diseases and Water and Sanitation, and provides technical leadership in each of these areas.

- **The Infectious Diseases Division (GH/HIDN/ID)** is responsible for technical leadership and direction in Tuberculosis and Neglected Tropical Disease (NTD) issues.
- **The Maternal and Child Health Division (GH/HIDN/MCH)** provides technical leadership and direction in newborn, child and maternal health, and safe motherhood initiatives. Division teams focus on newborn and child health and survival; maternal health; polio; immunization programs, including support to the Global Alliance for Vaccines and Immunization (GAVI); and vaccine introduction and new technologies. This Division also houses the Environmental Health Team, which focuses on technical leadership and support for safe water, hygiene and sanitation.
- **The Nutrition Division (GH/HIDN/NUT)** is responsible for technical leadership and direction in nutrition, micronutrients and food security. Division teams focus on infant and young child nutrition, micronutrient supplementation, food fortification, and developing innovative products to improve diet quality for sustainable nutrition and food security programming. The Nutrition Division also houses the child and maternal health research program and the Child Survival and Health Grants Program that facilitates a productive partnership between USAID and U.S. private and voluntary organizations.
- **The Malaria Division (GH/HIDN/MAL)** provides technical advice and support to Missions on prevention and treatment of Malaria in 19 countries in Africa and one regional program in Southeast Asia under the President's Malaria Initiative and to countries that received USAID malaria funding.

Office of HIV/AIDS (GH/OHA)

Director: David Stanton

Deputy Director: Paul Mahanna

The Office of HIV/AIDS 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.

- **The 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 Emergency Plan goals and objectives.
- **The Implementation Support Division (GH/OHA/IS)** focuses on the provision of assistance to accelerate and scale-up HIV/AIDS programs in the field, and manages the majority of centrally-funded HIV/AIDS programs.
- **The 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 incorporate innovations, best practices and lessons learned.

- **The 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: 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.

- **The 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.
- **The Policy, Evaluation, and Communication Division (GH/PRH/PEC)** works across the entire portfolio of Global Health activities to improve the collection, analysis and use of data in policymaking and program planning; and promotes policies, behavior change and community norms, which result in improved reproductive and health outcomes.
- **The 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.
- **The Service Delivery Improvement Division (GH/PRH/SDI)** develops and applies innovative strategies that improve the performance of individuals, organizations, and systems for the sustainable delivery of quality family planning and related services.

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 development, personnel, and administrative support.

- **The Professional Development Team (GH/PDMS)** manages professional 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 Public Health Fellows Program, which places and supports Fellows worldwide.

- **The 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, 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.
- **The Administrative Support Team (GH/PDMS)** manages the Bureau operating expense budget, in collaboration with GH/PPP/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 Global Health's strategic planning, budgeting, programming, and procurement functions. OPPP provides leadership, advice, 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 Global Health objectives and is integrally involved in performance monitoring and program evaluation. Additionally, OPPP houses the team that takes the lead in Global Health donor coordination activities.

- **The 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 Global Health and with other units within the Agency. This Division serves as the primary GH resource for USAID evaluation policies and practices; oversees implementation of the Bureau evaluation plan and analyzes and disseminates evaluation findings, conclusions, recommendations and best practices as appropriate. The Division leads the Bureau 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.
- **The Program Implementation and Budget Management Division (GH/OPPP/PIBM)** is responsible for providing programmatic support to Global Health technical office staff, from activity design through implementation. It also takes the lead in procurement planning, monitoring, and tracking of all procurement actions. Its staff prepares and monitors Global Health's budgets, which includes the management of the Global Health program and operating expenses, operating year budget, and the monitoring of Global Health's pipeline.

Office Of Country Support (OCS)

Director: Elise Ayers

The Office of Country Support (OCS) is the Bureau for Global Health’s hub to provide broad, strategic assistance and support to countries and missions. With changing initiatives and priorities, this support assists both country programs and HQ country teams in understanding and managing challenges involving business practices as they relate to field programs. As a critical interlocutor of change, the OCS interfaces with GH element offices, regional bureaus, other pillar bureaus and interagency colleagues to ensure coordinated strategic, technical and programmatic assistance to countries. OCS leads the Global Health Country Team System, drawing on GH staff expertise across offices, fostering country representation from a “whole of health” program perspective.

Office of Health Systems (OHS)

Director: Karen Cavanaugh

Health systems strengthening is critical to enabling countries to effectively address the complex health challenges they face in an evidence-based and sustainable way. To elevate the importance of health systems strengthening and its ability to help drive in-country ownership and sustainability, 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.

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 (KMS)

Agreement Type:
Contract
Agreement Number:
OAA-M-11-00005
Project Number:
936-3140.06
Duration:
3/11 - 3/14
Geographic Scope:
Worldwide

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Purpose

The purpose of the KMS task order is to provide:

- Analysis of health, program, and financial data to support senior management decisions and investments;
- Evidence-based information and services to guide the design and management of USAID health programs;
- Knowledge management and organizational learning for USAID health programs;
- Communication products and services to raise awareness and understanding of global health issues and activities among the informed public, both US and foreign, as well as among NGOs, PVOs, and decision-makers in global health.

Services Provided

KMS provides services to all offices of the Bureau for Global Health and is able to accept funds from all GH Elements and all GHCS earmarks from other USAID operating units. This activity can also accept nonhealth 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 varied information sources through a central platform;
- Evidence-based communications 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 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:
Cooperative Agreement
Agreement Number:
OAA-TO-1200030
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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Project/Agreement

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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 US, 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 - 12/13

Geographic Scope:

Worldwide

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Global Health Technical Assistance Bridge Project: GH Tech Bridge III

Agreement Type:
Contract
Agreement Number:
OAA-C-13-00032
Project Number:
936-3098.22
Duration:
2/13 - 8/13
Geographic Scope:
Worldwide

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Purpose

To provide the Bureau for Global Health (GH), Regional Bureaus, and USAID field missions with the necessary technical expertise to design, manage, and evaluate program activities.

Services Provided

Key areas of assistance for this IQC include:

- Program Evaluations;
- Health Sector Assessments;
- Program Designs;
- Technical Program Assistance;
- Convening of Consultative Groups;
- Research Tracking;
- Dissemination of Lessons Learned; and
- Technical Reviews.

The Project will also provide Global Health Bureau, Regional Bureaus, and USAID field missions with the ability to access independent specialists, including those from universities, not-for-profit, and for-profit organizations and to obtain technical services of key experts to support areas of strategic interest to USAID.

Partners: Development & Training Services, Inc. (dTS) and CAMRIS International and Engility- International Resources Group (IRG)

Means of Access

Field Support

MEASURE Evaluation Phase III

Purpose

MEASURE Evaluation Phase III continues the program's 10 year initiative to improve the collection, analysis and presentation of data to promote better use in planning, policymaking, managing, monitoring and evaluating of population, health and nutrition programs. The program aims to accomplish this through achieving the following six results:

- Increased user demand for data and tools;
- Increased individual and institutional capacity in monitoring and evaluation;
- Increased collaboration and coordination in obtaining and sharing health sector data;
- Improved tools, methodologies and technical guidance;
- Increased availability of data, methods and tools; and
- Increased facilitation of data use.

MEASURE Evaluation Phase III is the Global Health Bureau's primary vehicle for supporting improvements in monitoring and evaluation in population, health and nutrition worldwide.

Services Provided

The MEASURE Evaluation Phase III Leader with Associates Cooperative Agreement provides technical assistance, global leadership and training to strengthen monitoring and evaluation of host country programs across the PHN sector. It also works to strengthen routine health information systems, to build capacity in host country institutions, to develop new tools and methodologies, and to conduct evaluation research. In addition, it continues to facilitate coordination of monitoring and evaluation and routine health information system strengthening efforts. Phase III incorporates the principle of sustainability into the project's overall framework by integrating organizational development, management, and behavior change into all aspects of its technical assistance.

Currently, MEASURE Evaluation works in approximately 40 countries worldwide.

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.

Agreement Type:
Leader with Associates
Cooperative Agreement

Agreement Number:
GHA-A-00-08-00003

Project Number:
936-3083.10

Duration:
8/08 - 8/14

Geographic Scope:
Worldwide

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MEASURE Phase III, Demographic and Health Surveys (DHS)

Agreement Type:

Contract

Agreement Number:

GP0-C-00-08-00008

Project Number:

936-3083.11

Duration:

*9/08 - 9/13

Geographic Scope:

Worldwide

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Purpose

The purpose of MEASURE Phase III DHS is to improve the collection, analysis and presentation of data and promote better use in planning, policymaking, managing, monitoring and evaluating population, health and nutrition programs. 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.

Services Provided

The MEASURE DHS contract is the USAID/GH's main source of nationally representative and cross-nationally comparable demographic and health survey data, and as such, addresses host countries' emerging needs for data to guide policies and programs. The range of surveys available under this project includes the following:

- Standard national Demographic and Health Survey (DHS), which is conducted at intervals of four to five years;
- AIDS Indicators Survey (AIS), which provides indicators used 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 project is able to collect biomarker data relating to a wide range of conditions, including infectious and sexually transmitted diseases, chronic illnesses such as diabetes, micronutrient deficiencies, and exposure to environmental toxins. In addition, the project conducts qualitative studies to guide survey development as well as to clarify findings from surveys.

Other activities for MEASURE DHS include:

- Developing country strategies for data collection, capacity building and data dissemination and use;
- Providing technical assistance to local organizations to facilitate application of DHS data to program and policy development;
- Facilitating online access to archived DHS data and publications.

* Follow-on contract, DHS-7, will be awarded by the end of FY13.

Agreement Number: TBD-GH-01-2013. Project Number: 936.3083.15

Means of Access

World Health Organization Consolidated Grant*

Purpose

This grant provides support for collaborative activities with USAID and the World Health Organization (WHO) in infectious diseases, maternal and child health, family planning, safe motherhood, 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 a simplified 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
- Project evaluation and assessments
- Monitoring and evaluation
- Education/information strategies
- Maternal and neonatal health
- Family Planning and Reproductive Health
- Implementing Best Practices in Family Planning
- Medical Eligibility Criteria (MEC)

* Also includes World Health Organization Consolidated Grant/Child and Adolescent Health and Development (WHO/CAH), listed in Office of HIDN project listing.

Means of Access

Field Support

Agreement Type:
Grant
Agreement Number:
GHA-G-00-09-00003
Project Number:
936-3100.51
Duration:
9/09 - 9/14
Geographic Scope:
Worldwide

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Central Contraceptive Procurement (CCP)

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

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Sdn. Bhd.; Quindao Double
Buterfly 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, condoms, and other essential public health supplies.

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, and other essential public health supplies. 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/techar-eas/contraprocedure.html

*Contractors may change annually due to competitive contract procedures.

Means of Access

Field Support

USAID | 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 - 9/14
Geographic Scope:
Worldwide

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Building Actors and Leaders for Advancing Community Excellence in Development (BALANCED) Project

Agreement Type:
Cooperative Agreement

Agreement Number:
GPO-A-00-08-00002

Project Number:
936-3101.06

Duration:
9/08 - 9/13

Geographic Scope:
Worldwide

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Purpose

The BALANCED project's overall objective is to advance and support wider use of effective Population, Health, Environment (PHE) approaches worldwide.

Services Provided

Population, Health, Environment (PHE) projects acknowledge and address the complex connections between humans, their health, and their environment. The key objective of these projects is to simultaneously improve access to health services, especially family planning and reproductive health, while helping communities manage the natural resources on which they depend. The underlying philosophy is an integrated approach to meeting communities' family planning, basic health, and natural resource management needs that is more effective than delivering these services in stand-alone or parallel programs. PHE projects play an important role in areas where demographic trends such as growth and migration place pressure on the environment, where degraded natural resources impact the health and livelihoods of local communities, and where a lack of health services, especially family planning and reproductive health, threatens long-term prospects for sustainable development.

The BALANCED project will:

- Develop, organize and synthesize PHE knowledge and tools;
- Build capacity for integrated PHE project implementation; and
- Provide technical assistance and implement results-oriented PHE field activities in areas of high biodiversity.

The project will expand USAID's global leadership in integrated PHE project activities by disseminating knowledge and building capacity at a global level, based on lessons that emerge from country-specific PHE field activities. These activities will focus on building PHE capacity and scaling up proven integrated PHE approaches, building on successful PHE activities implemented under previous awards.

Means of Access

Field Support

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, 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 regional “MarketPlaces,” including both virtual and physical centers;
- 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 on-line 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;
- Emphasize the power of personal narrative through the voices of influential policy spokespeople 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

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;
- 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 (K4Health)

Agreement Type:
Leader With Associate
Cooperative Agreement

Agreement Number:
GPO-A-00-08-00006

Project Number:
936-3091.04

Duration:
*9/08 - 9/13

Geographic Scope:
Worldwide

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Purpose

Health service providers, program managers, and policymakers need to access and use quality, relevant health information to effectively perform their work. Unfortunately, multiple barriers to health information exist, particularly in the developing world. K4Health is designed to remove impediments to accessing and adapting health information and to facilitate knowledge exchange at global, regional and local levels.

Services Provided

K4Health provides global leadership in health knowledge management - the synthesis, exchange, adaptation and use of health information. The project's major components include:

A global web portal, www.k4health.org, offering:

- A Google custom search tool to help users quickly find vetted resources;
- eLearning courses for rapid or just-in-time learning;
- eToolkits with specialized materials on priority health topics; collections that users can design, develop, or modify to meet local needs;
- Virtual discussion forums that provide participants access to a community of experts around the world;
- Data on health information needs, preferences for obtaining and sharing information, and typical uses of information technologies; and
- Field-based information needs data collection tools and programming to respond to identified needs.

Regional and country knowledge management platforms, contributing:

- A compilation of key health information materials provided in local languages including the Family Planning Global Handbook and Wall Chart;
- Novel and easy ways to access health information at local levels;
- mHealth applications to improve information exchange amongst providers; and
- A process to gather information from health workers and facilitate the exchange of information amongst them.

Means of Access

Field Support and Associate Awards

MEASURE|US Census Bureau

Purpose

The MEASURE Program is a coordinated effort to improve the collection, analysis and presentation of data for use in planning, policy-making, managing, monitoring and evaluating population health and nutrition programs. The agreement with the US Census Bureau (USCB) seeks to strengthen 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.

Services Provided

This interagency agreement (IAA) 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 US-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;
- 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 (CSPro), 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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MEASURE Evaluation III PRH Associate Award

Agreement Type:
Associate Award
Agreement Number:
GPO-A-00-09-00003
Project Number:
936-3083.13
Duration:
1/09 - 1/14
Geographic Scope:
Worldwide

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Purpose

MEASURE Evaluation Phase III continues the MEASURE program's initiative to improve the collection, analysis, and presentation of data to promote better use in planning, policymaking, managing, monitoring and evaluating of population, health, and nutrition programs. In line with the MEASURE Evaluation Phase III Leader, the objective of the MEASURE Evaluation Phase III Office of Population and Reproductive Health (PRH) Associate Award is to ensure optimal demand for and analysis of FP/RH data, and the appropriate use of such information to measure performance and to inform FP/RH interventions and policies. The program aims to accomplish this by achieving the following three results:

- Increased collaboration and coordination in efforts to obtain and communicate FP/RH data in areas of mutual interest;
- Improved design and implementation of M&E frameworks and information gathering processes including tools, methodologies, and technical guidance to meet users' needs; and
- Timely and topical analyses done for improved understanding of FP/RH dynamics and evidence-based decision making.

Services Provided

The MEASURE Evaluation Phase III PRH Associate Award provides technical assistance, global leadership, and training to strengthen monitoring and evaluation of PRH programs. It also works to develop PRH monitoring and evaluation tools and methodologies, and to conduct PRH evaluation research. In addition, the PRH Associate Award will facilitate and strengthen coordination of data collection, analysis, and dissemination of FP/RH data among PRH CAs and stakeholders, with the aim of providing guidance on best practices, promising innovations, and setting monitoring and evaluation standards.

Means of Access

Field Support (POP funding only)

Biodegradable Contraceptive Implants

Purpose

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

Services Provided

This five-year project 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 FP 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

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-10-00060
Project Number:
936-3107.14
Duration:
9/10 - 9/15
Geographic Scope:
Worldwide

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Combination Contraceptive and Anti-HIV Vaginal Ring

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-10-00068
Project Number:
936-3107.15
Duration:
9/10 - 9/15
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 will focus on the development of a vaginal ring that combines the recently proven HIV prevention drug, tenofovir, with the hormonal contraceptive, LNG. 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 RH needs in one product.

Means of Access

Field Support

IPM 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 aims to formulate a 60-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 60 days.

Means of Access

Field Support

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-00029
Project Number:
936-3107.18
Duration:
9/11 - 9/16
Geographic Scope:
Worldwide

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SILCS Cervical Barrier + Tenofovir (TFV) Gel

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-11-00064
Project Number:
936-3107.19
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 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

Facilitating Regulatory Pathways for Approval of Multipurpose Prevention Technologies

Purpose

To improve reproductive health in developing countries by facilitating the regulatory pathways for approval of Multipurpose Prevention Technologies.

Services Provided

This project will support collaboration with the US FDA and other stringent regulatory authorities to develop appropriate strategies and testing algorithms for the expedited approval of multipurpose prevention technologies, foster the hybridized approval of products that fall across two regulatory domains (e.g., devices and drugs), and identify preclinical and bridging studies deemed necessary for eventual approval of a multipurpose prevention technology.

Means of Access

Field Support

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-10-00072
Project Number:
936-3107.16
Duration:
9/10 - 9/13
Geographic Scope:
Worldwide

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The Fertility Awareness-Based Methods (FAM) Project

Agreement Type:
Cooperative Agreement

Agreement Number:
GPO-A-00-07-00003

Project Number:
936-3107.04

Duration:
9/07 - 9/13

Geographic Scope:
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Purpose

To improve contraceptive choices by expanding access to fertility awareness-based methods (FAMs), the Standard Days Method (SDM), the TwoDay Method (TDM) and the Lactational Amenorrhea Method (LAM), in developing countries. This activity addresses the needs of women and men who want to use a FAM to avoid pregnancy but lack the information and skills to use them effectively.

Services Provided

For some people, FAMs are their first introduction to FP and/or first choice for contraception. The FAM project expands FAM options and services and improves awareness of the fertile period. The project contains the following elements:

- Operations Research to understand service delivery issues and scale-up of FAMs;
- Mainstreaming FAMs into FP programs at a large scale in 8-10 focus countries;
- Increasing RHA among youth, adults and at the community level;
- Evaluating the costs and cost-effectiveness of FAM services.

Improving capacity of public and private sector institutions to provide FAMs. The project will provide technical assistance to Ministries of Health, NGOs, other donors, other cooperating agencies, bilateral and other developing country programs for the provision and expansion of the SDM, TDM and LAM. The project also focuses on empowering women and men to participate in their own reproductive health care and decision-making. Countries interested in expanding choices to include effective fertility awareness based methods should contact either the implementing partner or the USAID AOR.

Means of Access
Field Support

Gender Roles, Equality, and Transformations (GREAT) Project

Purpose

To understand the processes through which social norms and attitudes about gender, reproductive health, and violence are transmitted in Northern Uganda.

Services Provided

This phased five year 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 GBV, and improve gender equity, and 2) have the potential to catalyze wide-spread, sustainable movements to challenge gender inequities worldwide.

Means of Access

Field Support

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-10-00073
Project Number:
936-3107.13
Duration:
9/10 - 9/15
Geographic Scope:
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Impact on Marriage: Program Assessment of Conditional Cash Transfers in India (IMPACCT) Project

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-10-00071
Project Number:
936-3107.10
Duration:
9/10 - 9/15
Geographic Scope:
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<http://www.icrw.org/where-we-work/evaluating-power-conditional-cash-transfers-ccts-delay-marriage-india>

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 new born 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 can then be applied to the Haryana program, other Indian government programs, and cash transfer programs around the world.

Means of Access

Field Support

Increasing Age of Marriage

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 will 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

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-10-00002
Project Number:
936-3107.09
Duration:
9/10 - 9/15
Geographic Scope:
Worldwide

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The Population Council Product Development Agreement (PC-PDA)

Agreement Type:
Cooperative Agreement

Agreement Number:
GPO-A-00-04-00019

Project Number:
936-3107.01

Duration:
7/04 - 6/14

Geographic Scope:
Worldwide

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Purpose

The purpose of this activity is to develop, evaluate, bring to market, and make available to public sector programs, new and better products for family planning and for prevention of sexually transmitted HIV/AIDS and other infections.

Services Provided

Agency core-supported research by the Population Council will support the development of a proprietary hormone-releasing contraceptive vaginal ring as well as the development of proprietary vaginal microbicides to prevent or reduce sexual transmission of HIV. Overall, these activities aim to expand the array of contraceptive choices for both women and men and to improve reproductive health. Additional information is also available at www.popcouncil.org.

Means of Access

Field Support

Program Research for Strengthening Services (PROGRESS)

Purpose

To increase access to and quality of family planning services through:

- Program research to test innovative service delivery approaches;
- Research-to-practice activities;
- Institutional capacity development to use and conduct research; and
- Expanding access to improved or new contraceptive methods.

Services Provided

PROGRESS focuses on research and technical assistance to improve family planning programs worldwide. PROGRESS has a mandate to:

- Expand the number and types of service delivery points geographically and economically accessible to underserved groups particularly the poor, postpartum women and youth;
- Expand availability of contraceptive methods and effective referral systems;
- Reduce medical, policy and supply barriers to service delivery points;
- Improve the quality of contraceptive methods and services;
- Increase demand for services;
- Increase the efficiency and sustainability of services;
- Strengthen local research groups in focus countries so they can address programmatic questions using appropriate and efficient research methodologies; and
- Increase the ability of key stakeholders to value evidence-based decision-making, understand the results of program research, and use research to improve programs and services.

PROGRESS will also bridge the gap between the developers of contraceptive methods and the providers and clients who use those methods. PROGRESS will assist USAID to improve the process of developing new contraceptive methods and refine existing methods by assuring the process is informed by what potential users need and want, and by the capacity of service providers and delivery systems to make methods available.

Means of Access

Field Support

Agreement Type:

Cooperative Agreement

Agreement Number:

GPO-A-00-08-00001

Project Number:

936-3107.05

Duration:

6/08 - 6/13

Geographic Scope:

Worldwide

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Terikunda Jekulu

Agreement Type:
Cooperative Award
Agreement Number:
OAA-A-10-00066
Project Number:
936-3107.17
Duration:
9/10 - 9/15
Geographic Scope:
Worldwide

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Purpose

To understand the disconnect between unmet need and demand for family planning in West Africa.

Services Provided

This five-year, phased project will be implemented by Georgetown University's Institute for Reproductive Health (IRH) in partnership with CARE International and the Center for Development and Population Activities (CEDPA). The methodology includes social network analysis to identify strategies to increase women's access to and use of family planning and reproductive health services. Based on Phase I's formative research results, 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. Then, successful social network interventions will be expanded to additional communities throughout West Africa, and if applicable, to other West African countries.

Means of Access

Field Support

Bayer HealthCare USAID Contraceptive Security Initiative

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. In the first ever project of this nature, Bayer and USAID are collaborating to introduce a commercially-sustainable oral contraceptive, at an affordable price, to middle income women in multiple developing countries.

Launched in September of 2009, this GDA partnership program is governed by a five-year collaboration agreement between USAID and Bayer HealthCare Pharma, in which Bayer provides a more than 2-to-1 match for USG funds.

Services Provided

Through the CSI project, Bayer and USAID are seeking to create a permanent market niche for affordable “Tier 2” OC products. The product, MicrogynonFe, will have a price point above the social marketing and public sector level, and below commercial prices, which will attract contraceptive users to the middle of the market. Through the CSI, the overall number of OC users will grow in a sustainable way, allowing governments and donors to better serve lower income markets. Every cycle pack sold reduces the quantity of subsidized product that public sector sources need to provide.

Via a ‘manufacturer’s model’ program, Bayer has pledged to invest in product launch, distribution, and retail access for the new brand over a period of 10 years, regardless of net margin. Bayer brings to bear its existing manufacturing, packaging, export/import and distribution capabilities (as well as extensive staff expertise and capacity) to assure that the product is fully commercially sustainable, and using local pharmacies as the primary distribution channel to consumers. This approach leverages the private sector to ensure market viability and create sustainable markets 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, Inc., an experienced USAID subcontractor on social marketing initiatives, to develop and manage the in-country promotional activities.

The project is fully operational in Ethiopia, Tanzania, Rwanda and Uganda, and plans to launch in seven additional countries.

Means of Access

Core Only

Agreement Type:
Cooperative Agreement
Agreement Number:
GPO-A-00-09-00004
Project Number:
936-3085.06
Duration:
9/09 - 9/14
Geographic Scope:
Worldwide

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CapacityPlus

Agreement Type:
Leader with Associate
Cooperative Agreement

Agreement Number:
GPO-A-00-09-00006

Project Number:
936-3103.05

Duration:
9/09 - 9/14

Geographic Scope:
Worldwide

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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 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

Responding to the Need for Family Planning through Expanded Contraceptive Choices and Program Services (RESPOND)

Purpose

To increase the use of family planning and reproductive health (FP/RH) services, with a focus on the informed and voluntary use of long-acting and permanent methods (LAPMs) of contraception.

Services Provided

- Increase access to and provision of the full range of contraceptives including LAPMs;
- Apply state-of-the-art approaches to strengthen programming for supply, demand, and the enabling environment for FP/RH and LAPM services
 - Increase access to and provision of a range of contraceptives, including LAPMs;
 - Generate interest and demand for LAPMs;
 - Strengthen commitment, support and programming for LAPMs;
- Conduct programmatic research on key operational issues to introduce and expand access to a broad range of contraceptive methods and FP/RH services;
- Design and implement programs which integrate family planning with MNCH, HIV/AIDS, gender/male involvement, PAC, and other related RH/FP services.

RESPOND's Implementing Partners:

- EngenderHealth (prime recipient), Johns Hopkins University Center for Communications Programs (JHU/CCP), Meridian Group International, Inc., FHI360, Futures Institute, and Population Council

Means of Access

Field Support and Associate Awards

Agreement Type:
Leader With Associate
Cooperative Agreement

Agreement Number:
GPO-A-00-08-00007

Project Number:
936-3103.04

Duration:
9/08 - 9/14

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 syner-

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

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 syner-

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.
- 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

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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Strengthening Health Outcomes through the Private Sector (SHOPS)

Agreement Type:
Leader With Associate
Cooperative Agreement

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

Project Number:
936-3085.09

Duration:
9/09 - 9/14

Geographic Scope:
Worldwide

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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;
- Foster innovations and state-of-the-art private sector delivery and distribution models.

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

Means of Access

Field Support and Associate Awards.

Leadership, Management, and Governance (LMG)

Purpose

The Leadership, Management, and Governance Project (LMG) is a 5 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.
- 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

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

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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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:

- Apply systematic approaches to achieve sustainable scale-up, and monitor and evaluate the science of sustainable scale-up
- Support the learning agenda for GHI strategies and BEST action plans
- Document and synthesize local evidence to identify high impact interventions
- Translate knowledge into practice by facilitating selection, introduction and large-scale implementation of evidence-based practices
- Address system and policy issues that lead to sustainable scale-up strengthened services and improved health outcomes
- Introduce and test innovative service delivery approaches, especially for reaching youth; adapt and scale-up proven approaches within and between countries
- Support gender assessments and youth, integrate and mainstream gender-equitable approaches into service delivery interventions, and evaluate the effectiveness of approaches and models
- Document program and system approaches in the delivery of integrated packages of services to identify essential elements of success that are replicable and lead to sustainable scale up
- Translate knowledge into practice by facilitating selection, introduction and large-scale implementation of evidence-based practices

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

Advancing Partners and Community-based Family Planning

Purpose

Advancing Partners and Community-based Family Planning 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 sub-awards, 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 child health, and control of infectious disease.

Advancing 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

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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AIDS Support and Technical Assistance Resources (AIDSTAR) Sector I - Service Delivery

Agreement Type:
IQC

Agreement Number:
Multiple

Project Number:
936-3090

Duration:
6/07 - 6/13

Geographic Scope:
Worldwide

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Purpose

The AIDS Support and Technical Resources (AIDSTAR) Sector I: Service Delivery Indefinite Quantity Contract (IQC) is a flexible mechanism available to USG country teams, USAID/W operating units, missions and other USG agencies, to access technical expertise and implementation support across a broad range of HIV/AIDS-related technical areas. AIDSTAR is available to work in both Emergency Plan focus and other bilateral countries. AIDSTAR contractors have demonstrated technical capacity in a range of technical areas related to prevention, care and support, treatment/anti-retroviral therapy and related services, stigma and discrimination, gender, and program-related data collection and analysis. AIDSTAR Sector I may be used for: long or short-term technical assistance and program implementation support in a full range of PEPFAR program areas including prevention, care and treatment; long or short-term in-country support for coordination and scale-up for HIV/AIDS activities in support of USG country strategies; documenting and disseminating successful innovative approaches and sustainable models, evidence-based best practices and lessons learned, and new approaches, tools and methodologies in HIV/AIDS programming.

Services Provided

The AIDSTAR website (<http://ghiqc.usaid.gov/aidstar/>) provides resources and guidelines for missions and contractors to carry out the necessary steps for procurement of task orders under this IQC.

Means of Access

Direct Task Order

AIDS Support and Technical Assistance Resources (AIDSTAR) Sector I, Task Order #1 John Snow, Inc.

Purpose

The AIDSTAR-One project provides technical assistance to USAID's Office of HIV/AIDS and USG country teams across a broad range of technical areas. The project is available to implement programs in other bilateral countries across prevention, care and treatment, and for technical assistance to support USG teams in strategic planning, program or needs assessments and documentation of successful program models. AIDSTAR-One can also undertake the management of grants to local NGOs. AIDSTAR-One assistance can be accessed through field support transfers from USAID field missions. Some restrictions apply to the use of this mechanism by focus countries. Consult the COR (Elizabeth Berard) for further information.

AIDSTAR-One has four major components:

- HIV/AIDS Technical Resource Development and Dissemination: To create, synthesize, manage and disseminate tested approaches and good and promising practices in HIV program implementation in support of PEPFAR goals;
- HIV/AIDS Prevention, Care and Treatment: To advance and support state-of-the-art program strategies to prevent HIV transmission, and provide care and treatment services to those infected and affected by HIV;
- Policy, Systems Strengthening and Sustainability: To provide technical assistance to strengthen systems, support policies and develop guidelines to promote sustainable HIV prevention, care and treatment programs at the country level, including modes of service delivery that are cost effective and sustainable;
- Field Support-funded Program Implementation (primarily for non-focus countries): To support USG country teams by implementing programs that help meet country-level targets and contribute to broader goals of the President's Emergency Plan for AIDS Relief (PEPFAR).

Means of Access

Field Support

Agreement Type:
Central Task Order under
AIDSTAR-Sector I IQC
Agreement Number:
GHH-I-01-07-00059
Project Number:
936-3090.Da
Duration:
1/08 - 1/14
Geographic Scope:
Worldwide

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AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II, Task Order #1 Management Sciences for Health

Agreement Type:
Task Order
Agreement Number:
GHH-I-01-07-0068
Project Number:
936-3090.La
Duration:
9/08 - 9/13
Geographic Scope:
Worldwide

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Purpose

The AIDSTAR-Two Project is currently in its final program year ending in September 2013. It contributes to stronger and more sustainable country-led HIV/AIDS programs, organizations and networks by offering systematic organizational capacity building assistance. All organizations, institutions and networks delivering health services along the HIV/AIDS prevention-care treatment continuum require good management, leadership and governance practices, as well as good public health and clinical practices.

AIDSTAR-Two (referred here as AS-Two) offers capacity building technical assistance to local HIV/AIDS implementing partners including civil society organizations (CSOs), nongovernmental organizations (NGOs), national AIDS commissions, Ministries of Health and Social Welfare, Global Fund Country Coordinating Mechanisms and Principal Recipients, as well as regional and local HIV/AIDS service and advocacy networks. In addition, AS-Two collaborates closely with five different PEPFAR Technical Working Groups (at present Orphans and Vulnerable Children, Health Information Systems, Care and Support, Most-at-risk Populations, and Health Systems Strengthening) on various capacity building related initiatives. These initiatives include country-based and regional assessments (e.g., documenting gaps in services for MARPs), workshops and conferences, and the dissemination of capacity building approaches and tools through the AS-Two website, OVCsupport.net and other mechanisms. Funded through the Office of HIV/AIDS, AS-Two is a three-year Task Order with two additional option years. Awarded at the end of September 2008, AS-Two is led by Management Sciences for Health (MSH). Consortium partners include MSH, the International HIV/AIDS Alliance, Cardno Emerging Markets, Health and Development Africa, Initiatives, Inc., Save the Children, and Religions for Peace. At present, the Alliance and Cardno are actively engaged in AS-Two activities along with MSH.

AS-Two core areas of expertise include:

- Strengthening organizational governance (e.g., CSO boards of directors and other governing bodies);
- Improving financial management;
- Setting organizational direction and strategies and improving internal management systems (financial, human resources, monitoring and evaluation, etc.);
- Strengthening leadership, management and governance and technical capacities;
- Project management;
- Performance-based financing;
- Health systems strengthening;
- Enhancing human resources for the health and social welfare workforces;
- Organizational assessments; and
- Strengthening HIV/AIDS prevention and care practices.

Means of Access

Direct Task Order and Field Support

AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II, Task Order #2 Training Resources Group

Purpose

The Strengthening Teams to Achieve Results (TeamSTAR) Project uses organizational development methodologies to accelerate the performance and impact of US Agencies and USAID country teams at the mission level implementing PEPFAR programs.

TeamSTAR provides a broad range of organizational development (OD) services to enable PEPFAR teams to resolve issues, strengthen team performance, and engage stakeholder organizations in ways that promote country ownership of sustainable HIV programs through:

- **Situational Assessments, Analysis and Planning** to ensure that OD field interventions are customized and responsive to country teams' needs;
- **Team Support and Skill Enhancement** to improve teamwork and team members' ability to work collaboratively;
- **Coaching for USG and PEPFAR Staff** to enhance their abilities for cross-agency collaborative planning and decision-making;
- **Collect Tools and Resources** that address team challenges and OD needs;
- **Information Dissemination** to promote knowledge sharing and adoption of state-of-the-art OD tools, best practices and methods to enhance team performance; and
- **Coordination with USAID/Washington and OGAC** to ensure that TeamSTAR interventions are consistent with guidance, directives and priorities; and to inform participating agencies of issues and implementation challenges.

Means of Access

Field Support

Agreement Type:
Task Order
Agreement Number:
GHH-I-02-07-00070
Project Number:
936-3090.Na
Duration:
9/09 - 9/14
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 PEPFAR Program managed by USAID and implemented by Partnership for Supply Chain Management (PfSCM). The purpose of SCMS is to ensure the supply of quality essential medicines and other products to people impacted by HIV/AIDS, and to promote sustainable supply chains in partner countries, in collaboration with US agencies and other stakeholders. SCMS supports the rapid scale up of HIV/AIDS prevention, care and treatment by providing an uninterrupted supply of key commodities.

SCMS is implemented by the Partnership for Supply Chain Management, a non-profit consortium of 13 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, RTT, UPS Supply Chain Solutions, Voxiva, 3i Infotech.

Services Provided

The program provides an uninterrupted supply of quality essential medicines; knowledge, skills and technology transfer; and global collaboration with other stakeholders. The technical staff support the prevention, care and treatment activities of PEPFAR in 22 countries. Working with partner countries, the USG's investment to date is \$1 billion which is reflected in buying 3,500 different types of commodities from 280 suppliers, delivering (10,000 shipments) in 50 countries. This includes antiretroviral drugs, test kits, laboratory supplies and equipment, drugs for opportunistic infections, therapeutic food, and male circumcision kits.

Through September 2012, 690 technical assistance assignments have been completed in 25 countries. The knowledge, skill and technology transferred through these long and short term assistance assignments to local institutions are helping to build robust and potentially sustainable systems that support all health related programs. Support has been provided in forecasting and quantification, warehousing and distribution, laboratory logistics, quality assurance, and Management Information Systems.

Means of Access

Working Capital Fund and Field Support

Health Policy Initiative Costing Task Order

Purpose

This three-year project was developed in response to the Global Health Initiative and PEPFAR Country Teams' requests for a mechanism to generate data on cost-effective interventions for health services and programs to support evidence-based decision-making. The task order can support USAID/Washington and USAID/Missions in the area of HIV/AIDS, family planning/reproductive health (FP) and maternal health (MH).

Services Provided

The project is designed to strengthen host country strategic information capacity and USG information systems, and to this end will:

- Provide national, regional and local leaders and stakeholders reliable costing data to be used to develop policy and provide for programmatic decision-making for health service delivery and system priorities.
- Provide direct technical assistance to USAID Missions, other US Government supported programs, and multilateral organizations to evaluate and assess resource allocation for public health programming and cost-effective policy priorities.
- Conduct training to bolster in-country expertise among policy national, regional and local leaders and stakeholders to utilize, analyze, interpret and present timely and accurate costing data for evidence-based decision-making and advocacy within their respective regions
- Publish, disseminate and present relevant information to 1) inform and equip USAID and other USG field staff and host-government policy makers with cost data for decision-making information and analysis for program planning and 2) document processes for replicating this work.

Means of Access

Core Funding and Field Support

Agreement Type:
Task Order
Agreement Number:
GPO-I-06-05-00040
Project Number:
936-3109.Db
Duration:
7/10 - 7/13
Geographic Scope:
Worldwide

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

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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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 Data Base: 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;
- 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

CONRAD Proprietary Product Research and Development (PPRD)

Purpose

To improve reproductive health in developing countries by reducing HIV/AIDS transmission through the development of new, safe, and effective microbicides.

Services Provided

This cooperative agreement supports research toward a successful microbicide, with a focus on continued clinical testing of several microbicide candidates, including the proprietary product tenofovir gel. It also supports pre-clinical research conducted at the Department of Obstetrics and Gynecology, Eastern Virginia Medical School. New microbicides that offer protection from HIV, as well as, other sexually transmitted infections, and unplanned pregnancy are also a high priority.

CONRAD-PPRD also sponsors international workshops and technical meetings which bring together collaborating scientists and other leading experts to provide technical leadership on specific research issues.

Means of Access

Field Support

Agreement Type:
Cooperative Agreement
Agreement Number:
GPO-A-00-08-00005
Project Number:
936-3107.06
Duration:
9/08 - 9/14
Geographic Scope:
Worldwide

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International AIDS Vaccine Initiative (IAVI)

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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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;
- 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

Livelihood and Food Security Technical Assistance (LIFT)

Purpose

The LIFT Project provides technical assistance to design and integrate economic strengthening, livelihood and food security (ES/L/FS) support within HIV/AIDS and other health programming. LIFT is a 5-year project aimed at strengthening the impact of ES/L/FS interventions in support of the U.S. Government President's Emergency Plan for AIDS Relief (PEPFAR), the Global Health Initiative (GHI) and Feed the Future (FtF).

Services Provided

LIFT provides technical assistance in support of ES/L/FS activities, particularly in the context of NACS (nutrition assessment, counseling and support) programs, including: conducting assessments and portfolio reviews of country ES/L/FS activities; developing ES/L/FS country strategies and implementation plans; designing and supporting monitoring and evaluation (M&E) of ES/L/FS activities to assess impact, cost effectiveness, potential for replicability and scale-up, and sustainability; supporting policy development and establishing environments for ES/L/FS programs, including leveraging other donor resources; strengthening implementing partner capacity, including training and quality improvement activities; and support for program proposal and scope of work (SOW) development for ES/L/FS assistance.

LIFT's implementation design work prioritizes catered targeting of beneficiaries and households; using sustainable approaches through engagement of local services, institutions and stakeholders; and building strategic partnerships and linkages that provide complementary services rather than duplicating or creating parallel systems. LIFT can assist PEPFAR, GHI and FtF country teams in establishing priorities for strategic investment in ES/L/FS programming and can provide technical support to collaborating agencies and implementing partners.

Means of Access

LIFT is an Associate Award managed in the Office of HIV/AIDS (OHA) under the Economic Growth, Education and Environment (EEE) Bureau's FIELD-Support Leader with Associate (LWA) Cooperative Agreement, a consortium managed by FHI360 and including CARE and Save the Children, 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 Associate Award and providing a SOW to the AOR, which can then be integrated into the LIFT Program Description.

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

Agreement Number:
GHH-A-00-09-0007

Project Number:
936-3090.116

Duration:
9/09 - 9/13

Geographic Scope:
Worldwide Code 935

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Microbicides Partnership Program

Agreement Type:
Cooperative Agreement

Agreement Number:
GPO-A-00-05-00041

Project Number:
936-3090.63

Duration:
9/05 - 9/13

Geographic Scope:
Worldwide

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Purpose

Through this cooperative agreement USAID collaborates with the International Partnership for Microbicides (IPM) to accelerate the development of safe, effective, acceptable and affordable microbicides to prevent sexual HIV transmission in resource-poor countries.

Services Provided

Through this agreement, IPM will continue developing its advanced product leads, especially the Dapivirine Ring. This will include relevant drug and product development activities with selected preclinical studies, such as testing toxicity and antiviral activity in nonhuman primate and other animal models, and clinical studies, such as for safety, acceptability, pharmacokinetics, and effectiveness, as appropriate.

Means of Access

Core Only

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 & 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

A pair-matched cluster randomized trial design to compare the effectiveness of GBV comprehensive programming over time with standard practice in control facilities and communities. The study has two primary aims reflected in the research questions: (1) “Did the comprehensive GBV program lead to increased care for GBV survivors?” and (2) “Did the GBV program lead to a decline in GBV?” 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 - 2/15

Geographic Scope:

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Preventive Technologies Agreement (PTA)

Agreement Type:
Cooperative Agreement

Agreement Number:
GHO-A-00-09-00016

Project Number:
936-3107.07

Duration:
8/09 - 8/14

Geographic Scope:
Worldwide

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Purpose

To develop, evaluate, and introduce a range of safe, effective, and acceptable HIV/AIDS prevention technologies (e.g., microbicides and barrier methods) and other reproductive health technologies and to enhance the capacity of field programs to provide services to populations at high risk.

Services Provided

The project includes the following activities:

- Developing and testing new or improved, microbicides and other reproductive health technologies, and providing technical assistance for the provision of these technologies;
- Assessing the acceptability and impact on users and programs of various microbicide products and reproductive health technologies;
- Developing and testing tools and strategies to improve integration of family planning and HIV/AIDS programs;
- Providing technical assistance to bilateral and other developing country programs to utilize state of the art research for service delivery improvement; and
- Surveillance and testing of condoms and other commodities to ensure product quality.

Means of Access

Core and Field Support

Project SEARCH: John Hopkins University

Task Order 2 (R2P)

Purpose

The prevention research task order has been awarded to the Johns Hopkins University Bloomberg School of Public Health. The purpose of this task order is to identify and address gaps in HIV prevention programming knowledge, provide tools for developing and evaluating promising HIV prevention interventions, and bolster the evidence base for improving and scaling up HIV prevention programs. This task order aims to advance understanding of HIV prevention at a global level and address country-specific prevention program research and evaluation needs.

The task order can accept field support from all USAID Missions for HIV prevention program research and public health evaluation activities.

Services Provided

Core funding will focus primarily on research and evaluation issues relevant to multiple countries or regions. Task order objectives are to:

- Conduct applied program research and public health evaluations to improve quality, coverage, and effectiveness of HIV prevention programming;
- Promote use of research findings and data in HIV prevention program design, strategic planning, implementation, and revision of ongoing HIV prevention efforts; and to
- Build capacity of national governments, in-country organizations, and local researchers to conduct applied HIV prevention research and utilize program research results.

The prevention program research task order will focus on the following priority areas within prevention research:

- Addressing sexual behavior and related norms in generalized epidemics;
- Bolstering the evidence base for high-risk populations and concentrated epidemics;
- Exploring the use of biomedical prevention modalities;
- Addressing prevention in a variety of service-delivery settings; and
- Conducting operations research on adult male circumcision programs.

Means of Access

Field Support

Agreement Type:

Task Order

Agreement Number:

GHH-I-02-07-00032 TO-02

Project Number:

936-3090.Sb

Duration:

9/08 - 9/13

Geographic Scope:

Worldwide

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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 - 9/14
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.
- 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-12-000023

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 - 7/15

Geographic Scope:

Kingdom of Swaziland

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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, yet evidence shows that initiating ARV therapy during pregnancy can effectively reduce MTCT. When it comes to PMTCT, there are barriers to scaling up effective ARV therapy into effective PMTCT programs. Many factors, from diagnosis of maternal HIV to initiation of ARV, 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 family planning (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:
Zambia

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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 - 7/15

Geographic Scope:
Mozambique

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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 - 7/15

Geographic Scope:

Rwanda

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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

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 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 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:

AID-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:

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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 Support

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Bureau for Global Health

Office Director

Elizabeth Fox

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BethAnne Moskov

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Infectious Diseases Division (ID)

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Maternal and Child Health Division (MCH)

John Borrazzo, Division Chief

Nutrition Division (Nut)

Anne Peniston, Division Chief

Pandemic Influenza and Other Emerging Threats Unit (PIOET)

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 - 9/15

Geographic Scope:

Worldwide

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Purpose

To implement activities designed to improve MCH through a wide range of interventions that may include Integrated Management of Childhood Illness (IMCI); micronutrient fortification and supplementation programs (specifically iodine and vitamin A).

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, HIV/AIDS, 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;
- 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 - 9/13

Geographic Scope:
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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 - 9/14

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. With a focus on the mass treatment approach, 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 (CDTI). 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

- Support the APOC through the World Bank Trust Fund to work in the Africa region to expand its existing models for the control of onchocerciasis to the 6 other NTDs targeted by USAID's NTD Control program, which can all be addressed through mass drug administration.
- Support APOC activities initially in Tanzania, with additional countries to be added as funding permits.
- Significant reduction in the burden of NTDs in the targeted countries, where NTDs are a major public health problem.
- Building sustainable community-based systems capable of annual delivery of NTD drug delivery.
- Establishment and strengthening of effective collaborations between non-governmental organizations and national Ministries of Health in the planning and implementation of integrated NTD drug delivery programs.

Means of Access

Core Only

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

Purpose

More than 1 billion people worldwide suffer from painful, debilitating tropical diseases which disproportionately impact poor, rural populations. Commonly referred to as neglected tropical diseases (NTDs), these diseases not only cause severe sickness and disability but also compromise mental and physical development, contribute to childhood malnutrition, reduce school enrollment and hinder economic productivity. Seven of these NTDs can be treated through targeted mass drug administration, eventually leading to control and/or elimination of the disease. These diseases – lymphatic filariasis (LF), schistosomiasis, onchocerciasis, blinding trachoma, and soil-transmitted helminthiasis (STH) – all have safe and effective drug therapies that can be delivered to all eligible individuals in an affected community once or twice a year.

The purpose of this agreement is to support the control and elimination of these seven neglected tropical diseases in five West African countries. All of these diseases can be controlled or eliminated in an integrated manner using cost-effective 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 (FHI) focuses on the expansion of NTD control or elimination programs in African countries. FHI will provide managerial assistance, support robust Monitoring & Evaluation systems, and coordinate reporting of technical progress. FHI will also provide 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. FHI provides managerial capacity, organizational skills, a proven track record in managerial technical assistance, and development of streamlined work plans and budgets. FHI 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 - 9/15

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

End Neglected 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:
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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 neglected tropical diseases (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, FHI 360 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. NTD-specific technical direction and decision-making under this award will be coordinated directly by USAID.

Means of Access

Core Only

ENVISION RTI

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 in the developing world.

The special focus of this cooperative agreement is the control, and in some cases elimination, of five NTDs - lymphatic filariasis (elephantiasis), onchocerciasis (river blindness), schistosomiasis (snail fever), soil transmitted helminths (intestinal worms), and blinding trachoma that can targeted with preventive chemotherapy delivered through mass drug administration. Most of the safe and effective 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, and will continue to focus on an integrated program approach to deliver NTD treatments to target countries and to document control and elimination through comprehensive monitoring and evaluation.

Services Provided

Support host countries to prepare and execute comprehensive country plans for neglected tropical diseases 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;
- Development of global technical tools and guidelines with the World Health Organization to support integrated implementation of NTD programs and dissemination of best practices;
- Resource mobilization, expertise, NTD-specific technical direction and decision-making under this award is coordinated directly by the Global Health Bureau;
- Technical assistance is provided through an on-demand 'Technical Assistance Facility'.

Means of Access

Field Support and Core

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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Onchocerciasis Elimination Program of the Americas (OEPA)

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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Purpose

Onchocerciasis, commonly called river blindness, is a blinding disease, with severe economic and social consequences. In Latin America, onchocerciasis is 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), challenges remain to fully eliminate the disease and make a formal request to the WHO for certification of elimination.

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.
- Preparation for certification of elimination in Colombia, Ecuador, and Mexico.

Means of Access
Core

Deliver Project for Malaria

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 - 3/14

Geographic Scope:

Worldwide

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MalariaCare

Agreement Type:
Task Order
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

Purpose

To support planning and implementation of indoor residual spraying (IRS) programs to prevent malaria. This IQC 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.

Services Provided

- Establish a worldwide procurement mechanism to support IRS and prepare and execute all aspects of logistical plans for IRS-related activities including timely procurement, distribution, and storage of all commodities.
- Together with NMCPs, implement IRS programs and provide operational management support (i.e., field supervision, operations planning, day-to-day implementation management) and expert short- and long-term technical and administrative assistance.
- Ensure the safe and judicious use of insecticides, including preparation of environmental assessments, adherence to best practices, and monitoring of activities.
- Build and strengthen the capacity of NMCPs in the technical and managerial functions of IRS by engaging, training, and supervising personnel at the central, provincial, and district levels.
- Provide on-going monitoring and evaluation for activities and ensure that quality control measures are established and implemented.

In addition to the IQC, GH awarded a Task Order in FY 2010 that missions can access through field support for any of the above services.

Means of Access

Task Orders

Agreement Type:
Multi-award IQC
Agreement Number:
See Below
Project Number:
936-3100.Aa
Duration:
9/09 - 9/14
Geographic Scope:
Worldwide

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Indoor Residual Spraying 2 Task Order #4

Agreement Type:

Task Order

Agreement Number:

OAA-TO-11-00039

Project Number:

936-3100.Gb

Duration:

8/11 - 8/14

Geographic Scope:

Worldwide

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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

- 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.
- 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

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 to 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 - 9/13

Geographic Scope:

Worldwide

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Malaria Vaccine Development Program (MVDP)

Agreement Type:

N/A

Agreement Number:

Various

Project Number:

936-3118

Duration:

9/03 - 9/13

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's lead vaccine, developed with the Walter Reed Army Institute of Research (WRAIR) and GlaxoSmithKline Biologics (GSK) is undergoing field evaluation in collaboration with the National Institute of Allergy and Infectious Diseases (NIAID) in Mali. Vaccines in earlier stages of development are in the pipeline through efforts with WRAIR, the Naval Medical Research Institute (NMRC), and NIAID.

Current agreements under the MVDP include:

- Walter Reed Army Institute of Research (WRAIR) Umbrella
GHA-T-00-08-00007
- Naval Medical Research Center (NMRC)
GHA-T-00-09-00004
- Malaria Vaccine Initiative
GHS-A-00-04-00016
- National Institute of Allergy and Infectious Diseases (NIAID)/NIH
GHA-T-00-07-00004

Means of Access

Core Only

Medicines for Malaria Venture

Purpose

The Medicines for Malaria Venture 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 antimalarial 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;
- Cost of product is no more than US \$1.00 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:
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NetWorks: Building Capacity for Sustained Net Coverage and Use

Agreement Type:
Cooperative Agreement

Agreement Number:
GHS-A-00-09-00014

Project Number:
936-3100.50

Duration:
9/09 - 9/14

Geographic Scope:
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Purpose

NetWorks is a comprehensive and innovative program to build sustainable long-lasting insecticidal nets (LLIN) systems that bridge the key technical areas of advocacy, policy, distribution, monitoring, and communications for increased net access and use in malaria endemic countries. Endemic countries, particularly in Africa, differ widely in resources (financial and human) and experiences with LLIN distribution that contribute to a unique “net context” in each country. Partnerships and policies vary widely, while procurement and distribution challenges hamper implementation. This combination of issues underscores the need for flexibility inherent in the NetWorks approach. NetWorks emphasizes fitting program activities to the national “net context.”

Services Provided

The NetWorks dynamic approach will empower national governments, USAID missions and their partners (civil society and the private sector) to create sustainable systems to increase access, enable ownership and promote appropriate use of LLINs and other malaria prevention technologies. NetWorks partners in this project include Malaria Consortium, Swiss Tropical and Public Health Institute, and Catholic Relief Services. Through a unique, strategic process, Networks will:

- Provide an adaptive approach to rapid analysis of each country’s context and needs;
- Facilitate stakeholder coordination and policy refinement;
- Strengthen distribution networks with locally - appropriate combinations of methods - campaigns, routine distribution via health facilities and/or private sector subsidies - with capacity-building in logistics, procurement and net coverage monitoring;
- Strengthen demand creation and promotion through effective behavior change communication programs based on community input and refined via ongoing monitoring and evaluation;
- Provide ongoing evaluation of key issues/barriers and implementation strategies.

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 drive 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 - 9/13
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 - 9/13

Geographic Scope:

Worldwide

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Purpose

The purpose of this grant is to support the objectives of the Stop TB (STB) Partnership and the achievement of the global targets to detect 70 percent of infectious pulmonary TB cases, and to successfully treat 85 percent of those cases. As an important partner in USAID's TB program, this grant focuses on two areas: 1) Support for the Global TB Drug Facility (GDF); and 2) Support for key activities managed by the STB secretariat related to priority areas of USAID's strategy, particularly country level advocacy, communications and social mobilization, and TB and poverty.

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 TB drugs to treat patients and to help countries to reach the global TB control 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, including approaches for reaching out to the poor, integration of Advocacy, Communications and Social Mobilization into DOTS programs, information dissemination, and activities to promote the Second Global Plan to Stop TB covering 2006-2015.

Means of Access

Field Support

Tuberculosis Indefinite Quantity Contract (IQC)

Purpose

Tuberculosis IQC provides a mechanism for USAID Missions and Bureaus to easily access quality technical assistance and support for their tuberculosis activities. The TB IQC supports USAID operating units in the implementation of their tuberculosis control and prevention programs through the introduction and expansion of the components of the WHO-recommended STOP TB Strategy, which include:

- Pursue high-quality DOTS expansion and enhancement;
- Address TB/HIV, MDR-TB and other challenges;
- Contribute to health system strengthening;
- Engage all care providers;
- Empower people with TB, and communities; and
- Enable and promote research.

TB IQC works worldwide.

Services Provided

TB IQC provides access to qualified prime and sub-contractors with a diverse mix of expertise, skills and experience in TB control, the STOP TB Strategy and in health systems strengthening. The IQC also includes one small business as a prime contractor and many more small businesses among the sub-contractors.

Means of Access

Direct Task Order

Agreement Type:
IQC
Agreement Number:
Multiple
Project Number:
Multiple
Duration:
7/09- 7/14
Geographic Scope:
Worldwide

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TB Task Order 2015

Agreement Type:
Contract
Agreement Number:
GHN-I-01-09-0006
Order No. 1
Project Number:
936-3100.Ea
Duration:
9/09 - 9/14
Geographic Scope:
Worldwide

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Purpose

The objective of this Task Order is to support the implementation and scale-up of the Stop TB Strategy and the Global MDR-TB and XDR-TB Response Plan 2007 - 2008 to increase detection and successful treatment of TB and to achieve reductions in TB prevalence and deaths in USAID priority countries.

Services Provided

This Task Order implemented by PATH provides 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. Particular attention is given to assisting countries to plan, implement and scale-up diagnosis and treatment of drug resistant TB in compliance with WHO's guidelines for programmatic management of drug-resistant TB.

Priority areas of technical assistance are:

- Program gaps in implementation of the Stop TB Strategy including:
 - Strengthening quality DOTS implementation;
 - Strengthening laboratory networks and introducing new diagnostic tools;
 - Addressing the challenges of TB/HIV, including infection control;
 - Engaging the private sector;
 - Enhancing advocacy, communication and social mobilization; and
 - Monitoring and evaluation, and operations research.
- Program gaps in implementation of MDR/XDR-TB scale-up activities;
- Preparation of Global Fund proposals; and
- Implementation of Global Fund grants.

PATH has identified the following sub-contractors to assist them with implementation of this Task Order: American Society for Microbiology, Brigham and Women's Hospital, Inc./Partners in Health, Foundation for Innovative New Diagnostics, Initiatives, Inc., Management Sciences for Health and University of California, San Francisco.

Means of Access

Field Support

TB Care - 1

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 be engage experts in all aspects of TB control, including strengthening DOT, 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

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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TB Care - 2

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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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 be engage experts in all aspects of TB control, including strengthening DOT, 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

TREAT TB

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;
- Evaluation research to monitor the impact of new tools and approaches.

Means of Access

Field Support

Agreement Type:
Cooperative Agreement
Agreement Number:
GHN-A-00-08-00004
Project Number:
936-3100.47
Duration:
9/08 - 9/13
Geographic Scope:
Worldwide

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Fistula Care

Agreement Type:
Cooperative Agreement

Agreement Number:
GHS-A-00-07-00021

Project Number:
936-3092.09

Duration:
*9/07 - 9/13

Geographic Scope:
Worldwide

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Purpose

Fistula Care is a six-year, worldwide cooperative agreement to support fistula prevention, repair, and reintegration; and monitoring, evaluation and research. Fistula Care will assist USAID/Washington to monitor fistula activities and report on this area of congressional interest.

This GH/HIDN/MCH agreement is an Associate Award through the ACQUIRE Project, and accepts both MCH and POP funds..

Services Provided

Fistula Care aims to:

- Strengthen the capacity of surgeons and hospitals to provide fistula repair;
- Increase access to emergency obstetrical care;
- Increase understanding about obstetric fistula and steps to prevent it;
- Conduct research to strengthen the quality of fistula services.

Priority activities for achieving these results include:

- Upgrading facilities and providing medical equipment and supplies;
- Training providers in clinical and counseling skills;
- Enabling health facilities to continuously monitor and improve the quality of their services;
- Supporting transportation and hospitalization costs for fistula clients;
- Working with communities to increase awareness about the causes of fistula, to increase access to preventive services, and to identify and refer women for treatment;
- Strengthening facility-based birthing and emergency obstetric care for prevention of fistula;
- Partnering with other institutions to support women's rehabilitation and reintegration into family and community life; and
- Conducting clinical and programmatic research to improve the safety and efficiency of care.

Fistula Care is implemented by EngenderHealth in partnership with IntraHealth, CARE, Meridian Group International, Adventist Development and Relief Agency (ADRA) and Society for Women and AIDS in Africa (SWAA). The project works with public sector, private sector and non-governmental and faith-based institutions, both national and international, to provide a full range of fistula care services.

*Please note that a follow-on agreement (Fistula Prevention and Repair) is to be awarded during FY13

Means of Access

Field Support

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

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

Field Support

Agreement Type:

Grant

Agreement Number:

AAG-G-00-97-00019

Project Number:

936-3080.03

Duration:

9/97 - 9/22

Geographic Scope:

Worldwide

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

Agreement Type:

Grant

Agreement Number:

AAG-G-00-97-00021

Project Number:

936-3080.01

Duration:

9/97 - 9/22

Geographic Scope:

Worldwide

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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

Field Support

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

Purpose

To increase PVO participation in polio eradication and immunization, increase linkages between polio eradication and other health services, and to 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, and Ethiopia, but has the flexibility to expand to 2 – 3 additional countries if field support resources are available.

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 reach 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

Field Support

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

Agreement Type:
Cooperative Agreement

Agreement Number:
GHN-A-00-07-00014

Project Number:
936-3080.05

Duration:
9/07 - 3/13

Geographic Scope:
Asia/Africa

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Purpose

To increase PVO participation in polio eradication, immunization, vitamin A activities and to improve case detection of acute flaccid paralysis (AFP) and other reportable diseases in underserved or hard to reach populations in India, Angola, and Ethiopia.

Services Provided

The CORE group is a network of 35 U.S.-based private voluntary organizations that have received funding from the USAID Bureau of Humanitarian Response's child survival grants in the past for improving maternal and child health in underserved populations. This agreement strengthens the network and builds upon ongoing field programs of CORE members. This grant supports:

- Case detection/reporting strategies for vaccine preventable diseases;
- Training and information dissemination about polio eradication and AFP/integrated disease case detection and reporting; and
- Participation of PVOs in interagency committees and subnational planning events and supplemental immunization activities (NIDs, SNIDs, mop-up).

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

Field Support

Maternal and Child Health Integrated Program (MCHIP)

Purpose

The Maternal and Child Health Integrated Program (MCHIP) is a \$600 million Leader with Associates Cooperative Agreement (LWA) designed to support the introduction, scale-up and further development of high impact Maternal, Neonatal, and Child Health (MNCH) interventions, including the program approaches to effectively deliver those interventions, to achieve measurable reductions in under-five and maternal mortality and morbidity.

Services Provided

- Increase availability and use of appropriate high-impact maternal, neonatal and child health interventions, including supportive family planning, HIV/AIDS, and malaria interventions based on country-level needs and opportunities at the facility and community levels;
- Advance global leadership in maternal, neonatal and child health, including further development and promotion of improved approaches and scale-up plans. In partnership with UN, international and US partners and NGOs, revise and develop clinical guidelines, toolkits and indicators related to MNCH-malaria. Support global efforts to introduce new vaccines at the country level;
- Provide specialized technical assistance to PVO/NGOs and their local partners supported by the Child Survival and Health Grant Program (CSHGP) and PMI- Malaria Community Programs (MCP) that includes design, monitoring, and evaluation of innovative, effective, and scalable community-oriented strategies and strengthens NGO capacity and partnerships for conduct of operations research and program learning.

The MCHIP partnership includes Jhpiego as the prime partner, John Snow, Inc. (JSI), Johns Hopkins University/Institute for International Programs (JHU/IIP), ICF Macro, Inc., Program for Appropriate Technology in Health (PATH), Save the Children (SC), Broad Branch Associates, and Population Services International (PSI). MCHIP merges the functions of several current USAID/GH projects (ACCESS, BASICS III, Immunization BASICS, POPPHI, and CSTS+) to improve efficiency and effectiveness, and to support Mission needs for integrated MCH programs.

Means of Access

Field Support and Associate Awards

Agreement Type:
Leader with Associates
Cooperative Agreement
Agreement Number:
GHS-A-00-08-00002
Project Number:
936-4000.01
Duration:
9/08 - 9/14
Geographic Scope:
Worldwide

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WASHPlus: Supportive Environments for Healthy Communities

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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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 indoor air pollution (IAP).

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 indoor 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 IAP 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 IAP 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 IAP implementation; and
- support knowledge and information exchange at the global; and
- country level, capacity building and networking.

Means of Access

Field Support

Saving Lives at Birth: A Grand Challenge for Development

Purpose

Saving Lives at Birth, a partnership of USAID, the Government of Norway, the Bill & Melinda Gates Foundation, Grand Challenges Canada, and the World Bank, was launched in 2011. In the first round of the challenge, the partners sought groundbreaking prevention and treatment approaches for pregnant women and newborns in poor, hard-to-reach communities around the time of childbirth. In 2012, a second round of the challenge was issued as a partnership between USAID, the Government of Norway, the Bill & Melinda Gates Foundation, Grand Challenges Canada, from the UK Department for International Development (UKaid).

Services Provided

Awards under Saving Lives at Birth include: 1) Seed Grants to demonstrate proof of concept, and 2) Transition Awards to support transition of successful innovations toward scale up. Under the first round of Saving Lives at Birth, USAID manages the following sixteen fixed obligation grants and cooperative agreements:

OAA-G-11-00062 Baylor College of Medicine
OAA-A-12-00007 Columbia University
OAA-G-11-00069 Diagnostics for All
OAA-G-11-00064 Duke University
OAA-A-12-00012 Grameen Foundation USA
OAA-G-11-00071 Jhpiego
OAA-A-11-00073 John Snow, Inc. (JSI)
OAA-G-11-00060 Johns Hopkins University
OAA-G-11-00058 Monash University
OAA-G-11-00061 Operative Experience, Inc.
OAA-G-11-00072 Partners for Development
OAA-G-11-00063 PATH
OAA-G-11-00068 Population Council
OAA-G-11-00065 Rice University
OAA-G-11-00066 Save the Children
OAA-IO-11-00004 WHO

An additional 8 grants are managed by Grand Challenges Canada, one of the Saving Lives at Birth partners. In 2012, 15 grants were awarded, 12 of which are managed by USAID and 3 by Grand Challenges Canada.

Means of Access

Core Only

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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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 MCHIP entry
in Users Guide

Purpose

The CSHGP facilitates a dynamic partnership between USAID and private and voluntary organizations (PVOs)/NGOs. 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. Program components of the CSHGP combine global implementation (direct cooperative agreements) with specialized technical assistance and collaboration to advance NGO action with learning and dissemination through communities of practice and include:

- An active portfolio of 35 PVO/NGO projects in 26 countries. Approximately 10 cooperative agreements are awarded annually through a competitive RFA; and
- Specialized technical assistance for PVO/NGO community-oriented programming through the Maternal and Child Health Integrated Program (MCHIP), ensuring technical rigor and strengthening program design, monitoring and evaluation, including a focus on operations research for testing and scaling up innovations to improve the delivery of high impact MNCH interventions.

Through MCHIP, a partnership with CORE Group contributes to USAID’s leadership role in innovative integrated community MCH programming, and to maximize the inclusion of NGO contributions in scale-up of proven and integrated MCH interventions at the country level.

Services Provided

- Fostering technical, cross-sectoral and systems integration through community-oriented approaches facilitated by PVOs/NGOs;
- Advancing program learning for 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 collaboration for action and learning through an NGO coalition;
- Building local capacity of the MOH and local NGOs and documenting promising practices and processes in local capacity building and sustainability;
- Bringing new partners to USAID (national NGOs and US PVOs/NGOs); and
- Leadership for community health through combining global implementation with specialized technical assistance and resources, and collaboration for action, learning, and dissemination.

Means of Access

Child Survival Health Grants Program

Cooperative Agreements

Country	PVO	Agreement No
Afghanistan	World Vision	GHN-A-00-08-00008
Bangladesh	CRWRC	GHS-A-00-09-00009
Benin	Catholic Relief Services	AID-OAA-A-12-00089
Benin	MCDI	AID-OAA-A-12-00092
Benin	Center for Human Services	AID-OAA-A-10-00047
Burundi	Concern Worldwide	GHS-A-00-08-00005
Cambodia	International Relief & Development	AID-OAA-A-10-00052
Ecuador	Center for Human Services	GHS-A-00-09-00008
Ghana	Catholic Relief Services	AID-OAA-A-11-00042
Guatemala	Curamericas	AID-OAA-A-11-00041
Honduras	Child Fund International	GHS-A-00-09-00011
India	Save the Children	AID-OAA-A-12-00091
India	CARE	GHN-A-00-08-00006
India	CRWRC	GHS-A-00-07-00025
Indonesia	Mercy Corps	AID-OAA-A-10-00063
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
Liberia	Curamericas	GHN-A-00-08-00011
Malawi	Save the Children	AID-OAA-A-11-00058
Mozambique	World Relief	GHN-A-00-09-00017
Nepal	Health Right	GHN-A-00-09-00019
Niger	Concern Worldwide	GHA-A-00-09-00006
Pakistan	Mercy Corps	AID-OAA-A-12-00093
Pakistan	Aga Khan Foundation	GHN-A-00-08-00010
Peru	Future Generations	AID-OAA-A-10-00048
Russia	Partners in Health	AID-OAA-A-10-00036
Rwanda	World Relief	AID-OAA-A-11-00056
Rwanda	CARE	AID-OAA-A-10-00035
Sierra Leone	Concern Worldwide	AID-OAA-A-11-00054
South Sudan	World Vision	AID-OAA-A-10-00037
Timor Leste	Health Alliance International	AID-OAA-A-11-00057
Uganda	Medical Teams International	GHS-A-00-09-00012
Zambia	Save the Children	GHS-A-00-09-00013

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 US 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;
- 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

Health Research Challenge for Impact (HRCI)

Purpose

The Health Research Challenge for Impact (HRCI) conducts multi-disciplinary, multi-country research, evaluations, operations 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; and Makerere University.

Means of Access

Field Support and Associate Awards

Agreement Type:
Leader with Associate
Cooperative Agreement
Agreement Number:
GHS-A-00-09-00004
Project Number:
936-3116.06
Duration:
9/09 - 9/14
Geographic Scope:
Worldwide

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HealthTech V

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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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 improvement.

Partners and subcontractors (KEMRI) PHI, FIGO, WHO, UNICEF, and African Network for Drugs and Diagnostics Innovation (ANDI).

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, build the capacity of countries to design, implement and evaluate nutrition programs, build the evidence base for multi-sectoral nutrition actions, promote effective delivery of a core package of nutrition interventions, and emphasize 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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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

Translating Research into Action (TRAction) Project*

Purpose

The purpose of the Translating Research into Action (TRAction) Project is to accelerate the introduction and scale up of approaches and interventions that when implemented in programs will 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. <http://www.hrcd-project.org>

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:
 - Work with USAID/GH and/or USAID Missions to determine the scopes of all solicitations and the selection criteria to be used in all procurements;
 - Lead and/or participate in the technical review process;
 - Conduct 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

Field Support and Associate Awards

*Previously known as Health Research Challenge for Delivery (HRCd)

Agreement Type:
Leader with Associate
Cooperative Agreement
Agreement Number:
GHS-A-00-09-00015
Project Number:
936-3116.05
Duration:
9/09 - 9/14
Geographic Scope:
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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 new 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 NGO implementing partners. Focus areas for technical assistance include maternal and child health and nutrition, 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, 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; strengthen nutrition in emergencies 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

World Health Organization Consolidated Grant/Maternal, Child, and Adolescent Health and Development (WHO/ MCA)

Purpose

To identify, sustain, and increase the effectiveness of strategies/technologies that advance child survival in developing countries. A partner in the Health Research Program (HaRP), WHO/CAH refines existing technologies and develops new and cost-effective interventions to reduce mortality and morbidity associated with major childhood illnesses. Results of these efforts establish guidelines, standards and policies used by practitioners in hospitals, clinics and community settings.

Services Provided

WHO/CAH, works with global partners including applied researchers, bilateral agencies, foundations, and host countries to:

- Monitor and coordinate research that will result in new interventions, methodologies, and/ or the establishment of global guidelines for case management and prevention of the major causes of neonatal and childhood mortality and morbidity;
- Facilitate health services and operations research; and
- Monitor and evaluate progress of advances in child health.

Recent achievements and ongoing efforts include:

- Identification, validation, and planning for the use of zinc in the treatment of acute diarrhea;
- Implementation/evaluation of the Integrated Management of Childhood Illness approach;
- Identification and potential treatments for the major causes of infectious illness in neonates;
- Demonstration of new vaccine efficacy prior to incorporation into vaccine programs;
- Development of strategies to prevent disease and increase care seeking; and
- Reduction of infectious disease mortality with exclusive breastfeeding.

** Included in the World Health Organization Consolidated Grant, listed in Bureau-wide project listing.*

Means of Access

Field Support

Agreement Type:
Grant
Agreement Number:
GHA-G-00-09-00003
Project Number:
936-3100.51
Duration:
9/09 - 9/14
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 - 2/14
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
- 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 - 4/14

Geographic Scope:

Worldwide

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PREDICT

Agreement Type:
Cooperative Agreement

Agreement Number:
GHN-A-00-09-00010

Project Number:
936-4002.21

Duration:
9/09 - 9/14

Geographic Scope:
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Purpose

The goal of PREDICT is to establish a global early warning system for zoonotic (i.e., of animal origin) disease emergence that is capable of detecting, tracking and predicting the emergence of new infectious diseases in high-risk wildlife (e.g., bats, rodents, and non-human primates) that could have pandemic potential. Particular focus will be placed on establishing an enhanced wildlife monitoring capacity in those geographic “hotspots” that pose a particular risk for the emergence of new infectious disease threats. Surveillance will focus on specific priority pathogens including, but not limited to, retroviruses, influenza, corona viruses and filoviruses.

Services Provided

Assess Capacity and Develop Plans for Implementation of Wildlife Surveillance Support in “hotspot” countries and regions:

- Develop an assessment tool to capture information on key capabilities and systems; and
- Analyses of gaps in systems and barriers to implementation.

Develop Risk Models for Zoonotic Disease Emergence and Spread:

- Identify key factors contributing to the emergence and spread of zoonotic disease in geographic focus areas and/or target species; and
- Produce models that illustrate the occurrence and spread of diseases from wildlife.

Implement “SMART” (Strategic, Measurable, Adaptive, Responsive, and Targeted) Wildlife Surveillance Strategies to Identify and Target High-Risk Wildlife in the Regions Most Vulnerable to Zoonotic Disease Emergence:

- Develop and improve protocols that result in more efficient and effective sampling;
- Provide countries with training and technical assistance to develop, expand, and maintain surveillance systems;
- Use modeling results to forecast events and plan surveillance strategies;
- Where appropriate, work with local authorities on disease investigations, data collection, analysis and interpretation;
- Continue engaging stakeholders in developing policy that supports the surveillance system; and
- Develop/expand communication mechanisms that inform stakeholders of results.

Improve the Flow and Handling of Information, Specimens, and Samples Resulting from Surveillance Activities:

- Assist countries in formulating policy and protocols for disease notification;
- Provide technical assistance to key participants in translating surveillance information to inform animal and human health activities and policy decisions; and
- Provide training and technical assistance and institute quality control systems for processing, tracking, storing, maintaining and retrieving samples and data.

Means of Access

IDENTIFY

Purpose

IDENTIFY is one of the several USAID projects making up the Emerging Pandemic Threats Program (EPT). This project is a partnership between USAID and three international organizations - FAO, WHO, and OIE, which together are working to develop animal/veterinary and human/public health laboratory networks and strengthen laboratories' diagnostic capacities in identified EPT geographic "hot zones", where the potential for emergent diseases and pandemics is greatest.

Services Provided

USAID's two umbrella grant agreements with WHO, and with the FAO (the latter through which USAID provide funds to the OIE as well), serve as mechanisms through which USAID bureaus and Missions can support technical assistance and program support to build nations' and regions' animal and public health laboratories and disease surveillance and reporting systems to help distinguish known disease organisms from new and emerging disease threats. Project activities include supporting outbreak investigation and response; planning and preparedness efforts for potential pandemic; improving biosecurity and biosafety practices at laboratories; building public-private partnerships to advance this project's objectives; and building linkages between the animal and public health worlds to share relevant disease and outbreak information, strategize on combined animal-human prevention and response efforts.

Means of Access

Core and Field Support

Agreement Type:
Grant
Agreement Number:
GHA-G-00-09-00003
GHA-G-00-06-00001
Project Number:
936-3100.32
Duration:
9/06 - 9/14
Geographic Scope:
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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:
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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

RESPOND

Purpose

To strengthen the human capacity of countries to identify and respond to outbreaks of newly emergent diseases in a timely and sustainable manner.

Services Provided

RESPOND is a project that twins schools of public health and veterinary medicines in the “hotspot” regions with U.S. counterpart institutions to strengthen the capacities of countries to train cadres of professionals to identify and respond to outbreaks of newly emergent diseases in a timely and sustainable manner. This project develops outbreak investigation and response trainings that merge animal- and human-health approaches toward a comprehensive capacity for disease detection and control. RESPOND partners include DAI, the University of Minnesota, Tufts University, Training and Resources Group, and Ecology and Environment, Inc.

Means of Access

Core Only

Agreement Type:
Cooperative Agreement

Agreement Number:
GHN-A-00-09-00015

Project Number:
936-4002.20

Duration:
9/09 - 9/14

Geographic Scope:
Worldwide

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Office of Health Systems

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Health Care Improvement Project (HCI)

Agreement Type:

IQC

Task Order

Agreement Number:

GHN-I-03-07-00003

Project Number:

936-3104.Ab

Duration:

9/09 - 9/13

During which 3-year task orders can be issued

Geographic Scope:

Worldwide

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Purpose

HCI adapts modern quality improvement approaches to the needs of USAID-assisted countries, and seeks to institutionalize improvement as an integral element of delivering health services. This contract builds on a series of GH projects which have drawn on the state-of-the-art methodologies used in the US health system. Modern quality improvement focuses on studying and improving health care processes, rather than on the provision of inputs, such as drugs, training courses, and expert advice. A wide range of studies have documented deficiencies in health care processes in developing countries, including low levels of provider compliance with evidence-based guidelines. Management processes, such as record keeping and coordination among service units, also offer opportunities for improvement. Traditional strategies like supervision have shown only limited impact on what health care workers actually do.

Services Provided:

HCI builds on the world's largest body of experience in applying modern improvement methodologies to health in developing countries. The most widely used methodology is the improvement collaborative, which organizes a group of facility-level teams to work on a single area of service delivery. A recent analysis of 27 collaboratives in 12 countries examined 135 indicators of provider compliance in MCH, AIDS, TB, FP, and other services. At baseline, most indicators fell below 50 percent compliance. After the collaboratives, 119 of the indicators reached or exceeded 80% compliance, and most sustained this level for over a year. HCI supports similar collaboratives in all USAID priority services, working directly with health system leaders or in collaboration with USAID partners. The collaborative methodology has also been applied to non-clinical issues, such as community-based services, human resources management, programs for orphans and vulnerable children, implementing chronic care, and district level management.

The collaborative model has also been successfully applied to scaling up improved practices, through a process of planned spread through the health system.

HCI also provides technical assistance in the full range of modern quality improvement approaches, including private sector regulation (accreditation, certification, licensing); incorporating quality into pay for performance; incorporating quality improvement into supervision systems; quality assessments; quality improvement evaluations; and systems for records audit and feedback. HCI also addresses the impact of training on provider performance, including training evaluation and development of computer-based training programs.

Means of Access

Field Support and Task Orders

Applying Science to Strengthen and Improve Systems (ASSIST)

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; and
- Performance improvement technologies, including more effective training and human resources management.

Means of Access

Field Support and Task Orders

Agreement Type:
Cooperative Agreement Task
Order

Agreement Number:
OAA-A-12-00101

Project Number:
936-3104.15

Duration:
9/12 - 9/17

Geographic Scope:
Worldwide

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Health Finance and Governance Project (HFG)

Agreement Type:
Cooperative Agreement
Agreement Number:
OAA-A-12-00080
Project Number:
936-3104.14
Duration:
9/12 - 9/17
Geographic Scope:
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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 and Associate Awards

Promoting the Quality of Medicines (PQM)

Purpose

PQM's mandate is to help assure the quality and safety of priority medicines by strengthening medicines quality assurance mechanisms in developing countries. PQM is USAID's response to the growing challenge posed by substandard and counterfeit medicines. These medicines can cause treatment failure and costly adverse events, increase morbidity and mortality, and potentially 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 quality assurance systems; (2) works with international pre-qualification 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 (GMP) 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 (e.g. collaboration with WHO's International Medical Products Anti-Counterfeiting Taskforce - IMPACT);
- Collaborate with the World Bank, the Global Fund, the Global Drug Facility, the Green Light Committee, and the DfID-funded Medicines Transparency Alliance (MeTA), among others, to expand the availability of high quality 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 relevant pharmacopeial monographs and reference standards, as well as new medicines quality assurance tools, approaches and methodologies as needed.

Means of Access

Field Support

Agreement Type:
Cooperative Agreement

Agreement Number:
GHS-A-00-09-00003

Project Number:
936-3104.8

Duration:
9/09 - 9/14

Geographic Scope:
Worldwide

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Systems for Improved Access to Pharmaceuticals and Services (SIAPS)

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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Purpose

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 (GHI) principles. The SIAPS result areas address the intersections of five health systems components as they pertain to pharmaceutical services (governance, human resources, information, financing, and service delivery) in 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 improving medicines. 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, 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 services, 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, and designing alternative financing strategies when appropriate.
- 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 antimicrobial resistance.

Means of Access

Field Support

Other Bureaus/Offices

Bureau Listing:

Africa Bureau

Center of Excellence on Democracy, Human Rights and Governance Bureau

Center for Accelerating Innovation and Impact

The bureaus listed above are not part of the Bureau for 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 - 10/15
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, 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 (IDS)
- Child and Adolescent Health (CAH)
- 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, 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 - 9/12
Geographic Scope:
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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

Displaced Children and Orphans Fund

Purpose

The Displaced Children and Orphans fund (DCOF) provides financial and technical assistance for community-based programs that assist Vulnerable Children who are separated or orphaned and without parental or adult supervision.

Services Provided

This fund is coordinated and supported by the Office of Democracy, Human Rights and Governance. 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.

DCOF currently supports programs in 31 countries.

As part of its oversight and managerial responsibilities for the Fund, DCHA/DRG maintains a technical assistance contract with New Editions Inc. This contract provides technical assistance and support for fields missions that are interested in developing programs under the Fund.

Means of Access

Not Applicable

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 land-mines, 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 Office of Democracy, Human Rights and Governance, although most activities are implemented through grants and agreements that are managed by USAID Missions.

The LWVF currently supports program activities in 30 countries.

As part of its oversight and managerial responsibilities of the Fund, DCHA/DRG maintains a technical assistance contract with New Editions. This contract provides technical assistance and support for field missions that are interested in developing programs under the Fund.

Means of Access

Not Applicable

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.

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 in 20 countries 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 Office of Democracy 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. This contract provides technical assistance and support for field missions that are interested in developing programs under the Fund.

Means of Access

Not Applicable

Agreement Type:
N/A
Agreement Number:
N/A
Project Number:
N/A
Duration:
N/A
Geographic Scope:
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PEER HEALTH

Agreement Type:
Cooperative Agreement

Agreement Number:
OAA-A-11-00012

Project Number:

Duration:
7/11 - 7/16

Geographic Scope:
Worldwide

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Purpose

The Partnerships for Enhanced Engagement in Research (PEER) Health program is designed to support context-specific research needed for evidence-based programming through global and country-level research solicitations. The program is a jointly funded and managed program within the Bureau for Global Health's Center for Accelerating Innovation and Impact (CAII) and the Office of Science & Technology. PEER Health will provide grants to local researchers working in collaboration with a National Institute of Health (NIH) supported scientist. 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.

Services Provided

PEER Health aims to:

- Enable the creation of local solutions and advance knowledge of context specific health challenges;
- Leverage capacity built and supported by NIH for increased health impact;
- Strengthen collaborative networks of health researchers globally, particularly those involving developing country scientists and NIH researchers; and
- Build health research capacity in countries to create a more diverse and equal global research community.

The first round of core funded solicitations was focused on accelerating the reduction in child mortality through implementation research in support of the June 2012 Child Survival Call-to-Action held in Washington, DC.

Means of Access

Field and Core Support

Acronym List

Acronym List

Acronym	Definition
A&A	Acquisitions and Assistance
AAAS	American Association for the Advancement of Sciences
AACD	Activity Approval Completion Date
AAD	Activity Approval Document
AA	Assistant Administrator
AA/GH	Office of the Assistant Administration for the Bureau of Global Health
AAPD	Acquisition and Assistance Policy Directive
ACET	Advisory Council for Elimination of Tuberculosis
ADB	Asian Development Bank
ADS	Automated Directives System or Activity Data Sheet
AED	Academy for Educational Development
AEEB	Assistance for Eastern Europe and the Baltic's Program Funds
AFDB	African Development Bank
AFR	Africa Region or Bureau for Africa
AIDS	Acquired Immunodeficiency Syndrome
AIHA	American International Health Alliance
AIMI	African Integrated Malaria Initiative
AIS	Activity Information Sheets
AMR	Antimicrobial Resistance
ANE	Asia and Near East Region or Bureau for Asia and Near East
APAC	AIDS Prevention and Control
APHA	American Public Health Association
APP	Agency Performance Plan
APR	Agency Performance Report
APUA	Alliance for the Prudent Use of Antibiotics
AR	Annual Report
ARCH	Applied Research for Child Health
ARI	Acute Respiratory Infection
ART	Anti-Retroviral Therapy
ARV	Anti-Retroviral
ARS	Accruals Report System
ASEAN	Association of Southeast Asian Nations
BASICS	Basic Support for Institutionalizing Child Survival
BCC	Behavior Change Communication
BCI	Behavior Change Interventions
BHR	Bureau for Humanitarian Response (see DCHA)
BPBS	Bureau Program and Budget Submission
BTEC	Business Transformation Executive Committee
CA	Cooperating Agency or Cooperative Agreement
CARE	Cooperative for Assistance and Relief Everywhere, Inc.
CASU	Cooperative Administrative Support Units
CBJ	Congressional Budget Justification
CBO	Community Based Organization
CCH	Community and Child Health
CCP	Central Contraceptive Procurement
CDC	Centers for Disease Control and Prevention

CDD	Control of Diarrheal Diseases
CDIE	Center for Development Information and Evaluation
CDO	Cooperative Development Organization
CEDPA	Center for Development and Population Activities
CEE	Central and Easter Europe
CFA	African Financial Community
CFO	Core Funding Only
CH/N	Child Health and Nutrition
CHS	Child Health and Survival or Center for Health Services
CI	Conservation International
CIB	Contract Information Bulletin
CIDA	Canadian international Development Agency
CIF	Capital Investment Fun
CIMS	Contract Information Management System
CMS	Commercial Market Strategies
CN	Congressional Notification
CO	Contracting Officer
COHC	Centers for Health Communication
COR	Contracting Officer Representative
CP	Congressional Presentation
CPP	Comprehensive Postpartum Centers
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

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
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
IO M	Institute of Medicine
IPA	Interagency Personnel Agreement
IPPF	International Planned Parenthood Federation

Acronym List

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

Acronym List

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
OPS	Operations Division (SPBO)
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
PIO	Public International Organization
PL	Public Law
PLP	Population Leadership Program
PLWHA	People Living with HIV/AIDS

Acronym List

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
RP	Results Package (see AAD)
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)
SADC	Southern Africa Development Community
SAI	Special Assistance Initiative
SCF	Save the Children Foundation
SCT	Sewage Collection and Treatment Systems
SDI	Service Delivery Improvement Division (PRH)
SEED	Support for East European Democracy (see AEEB)
SM	Safe Motherhood
SNID	Sub-National Immunization Days
SO	Strategic Objective
SOTA	State of the Art
SOW	Statement of Work
SPA	Service Provision Assessment
SPB	Strategic Planning and Budgeting Division (SPBO)

Acronym List

SPBO	Office of Strategic Planning, Budgeting and Operations
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/W	USAID/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

Indexes

Agreement Name Index

page 158

COR/AOR Index

page 162

Activity Director Index

page 163

Agreement Number Index

page 165

Project Number Index

page 171

Agreement Name Index

Agreement Name	Page Number
Accelovate	118
Advancing Partners and Community-based Family Planning	51
Africa Program for Onchocerciasis Control (APOC)	84
African Strategies for Health (ASH)	140
AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II, Task Order #1 Management Sciences for Health	56
AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II, Task Order #2 Training Resources Group	57
AIDS Support and Technical Assistance Resources (AIDSTAR) Sector I - Service Delivery	54
AIDS Support and Technical Assistance Resources Sector I, Task Order #1 (AIDSTAR-One) John Snow, Inc.	55
Applying Science to Strengthen and Improve Systems (ASSIST)	131
BALANCED Project	22
Bayer HealthCare Pharma – USAID Contraceptive Security Initiative	43
Biodegradable Contraceptive Implants	31
CapacityPlus	44
Centers for Disease Control and Prevention IAA Agreement II	83
Central Contraceptive Procurement (CCP)	20
Child Survival and Health Grants Program (CSHGP)	112
Child Survival Health Grants Program Cooperative Agreements	113
Combination Contraceptive and Anti-HIV Vaginal Ring	32
CONRAD Proprietary Product Research and Development (PPRD)	61
DELIVER - Emerging Pandemic Threats Task Order 6	122
Deliver Project for Malaria	89
Displaced Children and Orphans Fund	141
End Neglected Diseases (END) in Africa: Family Health International 360 (FHI 360)	85
End Neglected Diseases (END) in Asia: Family Health International 360 (FHI 360)	86
ENVISION RTI	87
Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls (E2A)	50
Facilitating Regulatory Pathways for Approval of Multipurpose Prevention Technologies	35
Fistula Care	104
Food and Agriculture Organization of the United Nations (FAO) Umbrella Grant	123
Food and Nutrition Technical Assistance III (FANTA-III)	120

Agreement Name	Page Number
Gender Roles, Equality, and Transformations (GREAT) Project	37
Global Alliance for TB Drug Development	97
Global Health Fellows Program II (GHFP-II)	12
Global Health Professional and Organizational Development (GHPOD)	11
Global Health Support Initiative-II (GHSI-II)	13
Global Health Technical Assistance Bridge Project: GH Tech Bridge III	14
Grant Management Solutions (GMS 2) Project	77
Health and Emergency Response Support (WHO: Polio, Immunizations, CS, ID)	105
Health and Immunization Response Support (NGO's: Polio Eradication, Immunization)	107
Health and Immunization Response Support (NGO's: Polio Eradication, Immunization)	108
Health and Immunization Response Support (UNICEF Polio, EPI Grant)	106
Health Care Improvement Project (HCI)	130
Health Communication Capacity Collaborative (HC3)	23
Health Finance and Governance Project (HFG)	132
Health Policy Initiative Costing Task Order	59
Health Policy Project (HPP)	25
Health Research Challenge for Impact (HRCI)	115
Health, Environment, Livelihood, Population and Security (HELPS) Project	24
HealthTech V	116
IDENTIFY	125
Impact on Marriage: Program Assessment of Conditional Cash Transfers in India (IMPACCT) Project	38
Increasing Age of Marriage	39
Indoor Residual Spraying 2	91
Indoor Residual Spraying 2 Task Order #4	92
Inform Decision-Makers to Act (IDEA) - ASPEN	26
Inform Decision-Makers to Act (IDEA) - PRB Population Reference Bureau	27
International AIDS Vaccine Initiative (IAVI)	62
International Federation of Red Cross and Red Crescent Societies (IFRC) Umbrella	93
IPM Combination Contraceptive and Anti-HIV Vaginal Ring	33
IS APS: ENGAGE4HEALTH	75
IS APS: Impact Evaluation of SILC on Child Household Well-being	71
IS APS: Project START	70
IS APS: REACH	73
IS APS: Situkulwane Lesiphephile - Safe Generations	72
IS APS: The Kabeho Study	76

Agreement Name Index

Agreement Name	Page Number
IS APS: The Partners Demonstration Project	69
IS APS: Thol'impilo: Bringing People into Care	74
Joint U.N. Programme on HIV/AIDS (UNAIDS III)	78
Knowledge for Health (K4Health)	28
Knowledge Management Services (KMS)	10
Leadership, Management, and Governance (LMG)	49
Leahy War Victims Fund	142
Livelihood and Food Security Technical Assistance (LIFT)	63
Malaria Vaccine Development Program (MVDP)	94
MalariaCare	90
Maternal and Child Health Integrated Program (MCHIP)	109
MEASURE Evaluation III PRH Associate Award	30
MEASURE Evaluation Phase III	15
MEASURE Phase III, Demographic and Health Surveys (DHS)	16
MEASURE US Census Bureau	29
Medicines for Malaria Venture	95
Microbicides Partnership Program	64
NetWorks: Building Capacity for Sustained Net Coverage and Use	96
Onchocerciasis Elimination Program of the Americas (OEPA)	88
PEER HEALTH	144
PREDICT	124
PREVENT	126
Preventive Technologies Agreement (PTA)	66
Program Research for Strengthening Services (PROGRESS)	41
Project SEARCH GBV Evaluation TO - Tathmini GBV (Futures Group)	65
Project SEARCH: John Hopkins University Task Order 2 (R2P)	67
Project SEARCH: Population Council Task Order (HIVCore)	68
Promoting the Quality of Medicines (PQM)	133
RESPOND	127
Responding to the Need for Family Planning through Expanded Contraceptive Choices and Program Services (RESPOND)	45
Saving Lives at Birth: A Grand Challenge for Development	111
SILCS Cervical Barrier + Tenofovir (TFV) Gel	34
STOP TB Partnership	98
Strengthening Health Outcomes through the Private Sector (SHOPS)	48
Strengthening Partnerships, Results and Innovation in Nutrition Globally (SPRING)	117
Supply Chain Management System (SCMS)	58
Support for International Family Planning Organizations (SIFPO/MSI)	46

Agreement Name	Page Number
Support for International Family Planning Organizations (SIFPO/PSI)	47
Systems for Improved Access to Pharmaceuticals and Services (SIAPS)	134
TB Care - 1	101
TB Care - 2	102
TB Task Order 2015	100
Terikunda Jekulu	42
The Fertility Awareness-Based Methods (FAM) Project	36
The Global Alliance for Improved Nutrition (GAIN)	114
The Population Council Product Development Agreement (PC-PDA)	40
Translating Research into Action (TRAction) Project	119
TREAT TB	103
Tuberculosis Indefinite Quantity Contract (IQC)	99
U.S. Census Bureau Participating Agency Program Agreement (PAPA)	60
UNICEF MCH Umbrella Grant	82
USAID DELIVER Project (Deliver II) Task Order 4	21
Victims of Torture Fund	143
WASHPlus: Supportive Environments for Healthy Communities	110
World Health Organization Consolidated Grant	17
World Health Organization Consolidated Grant/Maternal, Child, and Adolescent Health and Development (WHO/MCA)	121
World Health Organization/Africa Regional Office (WHO/AFRO) Support for Disease Control and Reproductive Health in Africa	138
World Health Organization/Africa Regional Office (WHO/AFRO) Support for the Eradication of Polio	139

COR/AOR Index

Name	Page Number	Name	Page Number
Adamczyk, Christine	57	Karra, Mihira	36, 37, 38, 39,
Adetunji, Jacob	16,30		41, 42
Andes, Laura	14	Korde, Sonali	89, 90, 95
Baldwin, Lisa	138,139	Kottiri, Benny	62, 65, 69, 74
Ballard, Elisa	60	Kureshy, Nazo	112
Berard, Elizabeth	55	MacDonald, Patricia	50
Boni, Anthony	133, 134	Manning, Judy	31, 32, 33, 34,
Bornbusch, Alan	21		35,40
Brown, Lawrence	13	Matta, Nahed	109
Brown-Smith, Shari	12	Mowafy, Sherif	58
Cahaelen, Linda	25	Brandes, Neal	114, 115, 116,
Carlson, Craig	122, 123,		118, 119
	125	Ogden, Ellyn	105, 106, 107,
Cheng, Alison Surdo	67, 70, 71,		108
	75	Peniston, Anne	114, 117, 120
Claypool, Lee	61, 64	Pleuss, Elizabeth	97, 99, 100,
Clements, Andrew	124		103
Curtis, Carolyn	45	Quick, Timothy	63, 76
de Silva, Shyami	54	Rushton, Laurel	56, 77, 78
Doe, Brenda	49	Saldana, Kelly	83
Evans, Jeff	10	Sandison, Sarah	68, 74
Fabic, Madeleine Short	28	Schaefer, Lois	44
Farrell, Marguerite	43, 46,	Srinivasan, Padmini	20
	47,48	Stanton, Mary Ellen	104
Fotheringham, Megan	93, 96	Stewart, Krista	15
Garrison, Kama	126	Stewart, Scott	132
Gibb, Dale	17, 82, 121	Tull, Carmen	26, 27
Gordon, Rachel	111	Vincent, Cheri	84, 87, 98,
Graham, Victoria	51		101, 102
Hall, Tom	140	Wayman, Annica	144
Hamilton, Noni	22, 24, 29	Weinger, Mary	110
Harris, Emily	66, 72, 73	Wilburn, Michael	11
Heiby, James	130, 131	Youll, Susan	94
Hempstone, Hope	23		
Henry, Rob	127		
Hijazi, Mai	59		
Hillman, Emily	85, 86, 88		
Horvath, Rob	141,142,143		
Jensen, Elissa	91, 92		

Activity Director Index

Name	Page Number	Name	Page Number
ABT Associates	99	Frank Conlon	107, 108
Alison Mitchell	54	Glenn Ferri	29
Andrea A. Howard, MD, MS	70	Godfrey Sikipa	140
Andrew Fullem	54	Gustavo Doncel	61
Ann Lion	132	Gustavo F. Doncel	32, 34
Ann Warner	38	Hans Vemer	118
Annabel Erulkar	39	Harriet Stanley	45
Batya Elul, PhD	75	Injeflex Industria e Comercio Ltda	20
Bayer HealthCare Pharmaceuticals	20	Innolates Sdn. Bhd	20
Bolivar Pou	85	Jacqueline Bass	63
Bradford Lucas	91, 92	James Johnson	86
Brid Devlin	33	James Sherry	119
Bruce Aylward	105	Janine Barden-O'Fallon	30
Camille Hart	14	Jason Peat	93
Catherine Savino	141, 142, 143	Jay Gribble	27
Catherine Severo	77	Jen Bergeson-Lockwood	111
Chemonics International Inc.	99	Jennifer Pope	47
Christian Winger	117	Jim Thomas	15
Christopher Maddock	17, 121, 125	Joan Robertson	51
Cycle Technologies, Inc.	20	John Townsend	40
D'Arcy Richardson	100	Jonna Mazet	124
Deanna Kerrigan	67	Karen Beattie	104
Derek Reynolds	54	Karen LeBan	112
Donald Bundy	84	Karex Industries Sdn. Bhd	20
Dr. Connie Celum	69	Kate Tulenko	44
Dr. Frank Richards	88	Kelly Robbins	144
Dr. I.D. Rusen, MD, MSc.	103	Kirsten Bose	23
Dr. James Rice	49	Klaus Brill	43
Dr. Jenifer Chapman	71	Koki Agarwal	109
Dr. L. G. Sambo	138,139	Kuyosh Kadirov	73
Ed Scholl	55	Laneta Dorflinger	31, 66
Elaine J. Abrams, MD	72	Laura Guay	76
Eric Ottesen	87	Laurent Thomas	123, 125
Female Health Company	20	Leo Ryan	112
Francis (Kofi) Nyame	134	Linda Bruce	22
		Linda Casey	50
		Linda Tawfik	10
		Lisa Hare	89

Activity Director Index

Name	Page Number	Name	Page Number
Logenix	20	Salome Charalambous	74
Lucica Ditiu	98	Sam Kalibala	68
Maarten van Cleeff	101	Sandeep Bathala	24
Maggwa Ndugga	41	Sandra Remancus	120
Marc Van Ameringen	114	Sandy Callier	110
Margaret Anne Baker	51	Sang Silano	82
Margaret Clark	26	Sang Silano	106
Martha Brady	35	Sarah Clark	25
Matt Lynch	96	Sarah Handy	62
Medical Service Corpora tion International, Inc.	99	Sarah Johnson	56
Mel Spiegelman	97	Sharon Rudy	12
Melanie Moser	83	Steven Forsythe	59
Michael Free	116	Sunita Kishor	16
Michel Sidibé	78	Suretex Limited, Merck MSD	20
Naomi Rutenberg	40	Susan Mitchell	48
Neha Vorha	54	Susan Settergren	65
Nicole Gray	46	Susana de la Torre	122
Nippon Rubber Industry Co., LTD	20	Suzanne Rexing	54
Owen Wrigley, Ph.D., MRCP	126	Tara Sullivan	28
Pamela Foster	57	Ted Maly	82
PATH	99	Timothy B. Fowler	60
Patrick Lukulay	133	Unidus Corporation	20
Paul Hamilton	90	University Research Corporation, LLC.	99
Peter Potter-Lesage	95	UPS	20
Pfizer	20	Victoria Jennings	36
Pregna International Ltd.	20	Walter Proper	21
Quindao Double Butterfly Group, Co.	20	Willibrord Shasha	54
Rashad Massoud, M.D	130,131	Zeda Rosenberg	64
Rebecka Lundgren	37, 42		
Refiloe Matji	102		
Richard Owens	58		
Robert Black	115		
Robert Rice	11		
Robert Ryan-Silva	127		
Ruth Merkatz	40		

Agreement Number	Agreement Name	Page Number
AAG-G-00-97-00019	Health and Emergency Response Support (WHO: Polio, Immunizations, CS, ID)	105
AAG-G-00-97-00021	Health and Immunization Response Support (UNICEF Polio, EPI Grant)	106
AFR-G-00-07-00003	World Health Organization/Africa Regional Office (WHO/AFRO) Support for the Eradication of Polio	139
AFR-G-00-10-00002	World Health Organization/Africa Regional Office (WHO/AFRO) Support for Disease Control and Reproductive Health in Africa	138
AID-GH-IO-12-00001	Joint U.N. Programme on HIV/AIDS (UNAIDS III)	78
AID-OAA-A-10-00034	Child Survival Health Grants Program Cooperative Agreements. Liberia, Africare	113
AID-OAA-A-10-00035	Child Survival Health Grants Program Cooperative Agreements. Rwanda, CARE	113
AID-OAA-A-10-00036	Child Survival Health Grants Program Cooperative Agreements. Russia, Partners in Health	113
AID-OAA-A-10-00037	Child Survival Health Grants Program Cooperative Agreements. South Sudan, World Vision	113
AID-OAA-A-10-00047	Child Survival Health Grants Program Cooperative Agreements. Benin, Center for Human Services	113
AID-OAA-A-10-00048	Child Survival Health Grants Program Cooperative Agreements. Peru, Future Generations	113
AID-OAA-A-10-00052	Child Survival Health Grants Program Cooperative Agreements. Cambodia, International Relief & Development	113
AID-OAA-A-10-00063	Child Survival Health Grants Program Cooperative Agreements. Indonesia, Mercy Corps	113
AID-OAA-A-11-00041	Child Survival Health Grants Program Cooperative Agreements. Guatemala, Curamericas	113
AID-OAA-A-11-00042	Child Survival Health Grants Program Cooperative Agreements. Ghana, Catholic Relief Services	113
AID-OAA-A-11-00054	Child Survival Health Grants Program Cooperative Agreements. Sierra Leone, Concern World wide	113
AID-OAA-A-11-00056	Child Survival Health Grants Program Cooperative Agreements. Rwanda, World Relief	113
AID-OAA-A-11-00057	Child Survival Health Grants Program Cooperative Agreements. Timor Leste, Health Alliance International	113
AID-OAA-A-11-00058	Child Survival Health Grants Program Cooperative Agreements. Malawi, Save the Children	113
AID-OAA-A-12-00076	Child Survival Health Grants Program Cooperative Agreements. Kenya, HealthRight International	113
AID-OAA-A-12-00078	Child Survival Health Grants Program	113

Agreement Number Index

Agreement Number	Agreement Name	Page Number
AID-OAA-A-12-00089	Cooperative Agreements. Kenya, Concern Worldwide Child Survival Health Grants Program	113
AID-OAA-A-12-00091	Cooperative Agreements. Benin, Catholic Relief Services Child Survival Health Grants Program	113
AID-OAA-A-12-00092	Cooperative Agreements. India, Save the Children Child Survival Health Grants Program	113
AID-OAA-A-12-00093	Cooperative Agreements. Benin, MCDI Child Survival Health Grants Program	113
AID-OAA-A-12-00094	Cooperative Agreements. Pakistan, Mercy Corps Child Survival Health Grants Program	113
AID-OAA-C-12-00040	Grant Management Solutions (GMS 2) Project	77
GHA-A-00-08-00003	MEASURE Evaluation Phase III	15
GHA-A-00-09-00006	Child Survival Health Grants Program	113
GHA-G-00-06-00001	Cooperative Agreements. Niger, Concern Worldwide Food and Agriculture Organization of the United Nations (FAO) Umbrella Grant	123
GHA-G-00-06-00002	The Global Alliance for Improved Nutrition (GAIN)	114
GHA-G-00-07-00007	UNICEF MCH Umbrella Grant	82
GHA-G-00-08-00005	STOP TB Partnership	98
GHA-G-00-08-00006	International Federation of Red Cross and Red Crescent Societies (IFRC) Umbrella	93
GHA-G-00-09-00003	World Health Organization Consolidated Grant	17
GHA-G-00-09-00003	World Health Organization Consolidated Grant/Maternal, Child, and Adolescent Health and Development (WHO/MCA)	121
GHA-G-00-09-00003/ GHA-G-00-06-00001	IDENTIFY	125
GHA-G-00-09-00007	Africa Program for Onchocerciasis Control (APOC)	84
GHA-T-00-07-00004	Malaria Vaccine Development Program (MVDP). National Institute of Allergy and Infectious Diseases (NIAID)/ NIH	94
GHA-T-00-08-00002	MEASURE US Census Bureau	29
GHA-T-00-08-00002	U.S. Census Bureau Participating Agency Program Agreement (PAPA)	60
GHA-T-00-08-00007	Malaria Vaccine Development Program (MVDP). • Walter Reed Army Institute of Research (WRAIR) Umbrella	94
GHA-T-00-09-00004	Malaria Vaccine Development Program (MVDP). Naval Medical Research Center (NMRC)	94
GHH-A-00-09-0007	Livelihood and Food Security Technical Assistance (LIFT)	63
GHH-I-00-07-00029/ OAA-TO-12-00009	Project SEARCH GBV Evaluation TO - Tathmini GBV (Futures Group)	65
GHH-I-01-07-00059	AIDS Support and Technical Assistance Resources (AIDSTAR) Sector I, Task Order #1 John Snow, Inc.	55
	AIDS Support and Technical Assistance Resources	56

Agreement Number	Agreement Name	Page Number
GHH-I-01-07-0068	(AIDSTAR) Sector II, Task Order #1 Management Sciences for Health	
GHH-I-02-07-00032 TO-02	Project SEARCH: John Hopkins University Task Order 2 (R2P)	67
GHH-I-02-07-00070	AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II, Task Order #2 Training Resources Group	57
GHN-A-00-07-00014	Health and Immunization Response Support (NGO's: Polio Eradication, Immunization)	108
GHN-A-00-08-00004	TREAT TB	103
GHN-A-00-08-00006	Child Survival Health Grants Program Cooperative Agreements. India, CARE	113
GHN-A-00-08-00008	Child Survival Health Grants Program Cooperative Agreements. Afghanistan, World Vision	113
GHN-A-00-08-00010	Child Survival Health Grants Program Cooperative Agreements. Pakistan, Aga Khan Foundation	113
GHN-A-00-08-00011	Child Survival Health Grants Program Cooperative Agreements. Liberia, Curamericas	113
GHN-A-00-09-00002	PREVENT	126
GHN-A-00-09-00010	PREDICT	124
GHN-A-00-09-00015	RESPOND	127
GHN-A-00-09-00017	Child Survival Health Grants Program Cooperative Agreements. Mozambique, World Relief	113
GHN-A-00-09-00019	Child Survival Health Grants Program Cooperative Agreements. Nepal, Health Right	113
GHN-I-01-09-00006	TB Task Order 2015	100
GHN-I-03-07-00003	Health Care Improvement Project (HCI)	130
GHN-T-00-06-00001	Centers for Disease Control and Prevention IAA Agreement II	83
GHO-A-00-09-00016	Preventive Technologies Agreement (PTA)	66
GHS-A-00-04-00014	Medicines for Malaria Venture	95
GHS-A-00-04-00016	Malaria Vaccine Development Program (MVDP). Malaria Vaccine Initiative	94
GHS-A-00-07-00021	Fistula Care	104
GHS-A-00-07-00025	Child Survival Health Grants Program Cooperative Agreements. India, CRWRC	113
GHS-A-00-08-00002	Maternal and Child Health Integrated Program (MCHIP)	109
GHS-A-00-08-00005	Child Survival Health Grants Program Cooperative Agreements. Burundi, Concern Worldwide	113
GHS-A-00-08-00012	Global Alliance for TB Drug Development	97
GHS-A-00-09-00003	Promoting the Quality of Medicines (PQM)	133
GHS-A-00-09-00004	Health Research Challenge for Impact (HRCI)	115
GHS-A-00-09-00008	Child Survival Health Grants Program Cooperative Agreements. Ecuador, Center for Human Services	113
GHS-A-00-09-00009	Child Survival Health Grants Program	113

Agreement Number Index

Agreement Number	Agreement Name	Page Number
GHS-A-00-09-00011	Cooperative Agreements. Bangladesh CRWRC Child Survival Health Grants Program	113
GHS-A-00-09-00012	Cooperative Agreements. Honduras, Child Fund International Child Survival Health Grants Program	113
GHS-A-00-09-00013	Cooperative Agreements. Uganda, Medical Teams International Child Survival Health Grants Program	113
GHS-A-00-09-00014	Cooperative Agreements. Zambia, Save the Children NetWorks: Building Capacity for Sustained Net Coverage and Use	96
GHS-A-00-09-00015	Translating Research into Action (TRAction) Project	119
GPO-C-00-08-00008	MEASURE Phase III, Demographic and Health Surveys (DHS)	16
GPO-A-00-04-00019	The Population Council Product Development Agreement (PC-PDA)	40
GPO-A-00-05-00041	Microbicides Partnership Program	64
GPO-A-00-07-00003	The Fertility Awareness-Based Methods (FAM) Project	36
GPO-A-00-08-00001	Program Research for Strengthening Services (PROGRESS)	41
GPO-A-00-08-00002	Building Actors and Leaders for Advancing Community Excellence in Development (BALANCED) Project	22
GPO-A-00-08-00005	CONRAD Proprietary Product Research and Development (PPRD)	61
GPO-A-00-08-00006	Knowledge for Health (K4Health)	28
GPO-A-00-08-00007	Responding to the Need for Family Planning through Expanded Contraceptive Choices and Program Services (RESPOND)	45
GPO-A-00-09-00003	MEASURE Evaluation III PRH Associate Award	30
GPO-A-00-09-00004	Bayer HealthCare USAID Contraceptive Security Initiative	43
GPO-A-00-09-00006	CapacityPlus	44
GPO-A-00-09-00007	Strengthening Health Outcomes through the Private Sector (SHOPS)	48
GPO-I-03-05-00032	Supply Chain Management System (SCMS)	58
GPO-I-06-05-00040	Health Policy Initiative Costing Task Order	59
OAA-A-00029	IPM Combination Contraceptive and Anti-HIV Vaginal Ring	33
OAA-A-10-00002	Increasing Age of Marriage	39
OAA-A-10-00009	Inform Decision-Makers to Act (IDEA) – PRB Population Reference Bureau	27
OAA-A-10-00010	Health, Environment, Livelihood, Population and Security (HELPS) Project	24
OAA-A-10-00020	TB Care - 1	101
OAA-A-10-00021	TB Care - 2	102
OAA-A-10-00030	Support for International Family Planning Organizations (SIFPO/PSI)	47
OAA-A-10-00040	WASHPlus: Supportive Environments for Healthy Communities	110
OAA-A-10-00050	End Neglected Diseases (END) in Africa: Family Health	85

Agreement Number	Agreement Name	Page Number
OAA-A-10-00051	International 360 (FHI 360) End Neglected Diseases (END) in Asia: Family Health International 360 (FHI 360)	86
OAA-A-10-00059	Support for International Family Planning Organizations (SIFPO/MSI)	46
OAA-A-10-00060	Biodegradable Contraceptive Implants	31
OAA-A-10-00062	Inform Decision-Makers to Act (IDEA) - ASPEN	26
OAA-A-10-00066	Terikunda Jekulu	42
OAA-A-10-00067	Health Policy Project (HPP)	25
OAA-A-10-00068	Combination Contraceptive and Anti-HIV Vaginal Ring	32
OAA-A-10-00071	Impact on Marriage: Program Assessment of Conditional Cash Transfers in India (IMPACCT) Project	38
OAA-A-10-00072	Facilitating Regulatory Pathways for Approval of Multipurpose Prevention Technologies	35
OAA-A-10-00073	Gender Roles, Equality, and Transformations (GREAT) Project	37
OAA-A-11-00012	PEER HEALTH	144
OAA-A-11-00015	Leadership, Management, and Governance (LMG)	49
OAA-A-11-00020	International AIDS Vaccine Initiative (IAVI)	62
OAA-A-11-00021	Systems for Improved Access to Pharmaceuticals and Services (SIAPS)	134
OAA-A-11-00024	Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls (E2A)	50
OAA-A-11-00025	Global Health Fellows Program II (GHFP-II)	12
OAA-A-11-00031	Strengthening Partnerships, Results and Innovation in Nutrition Globally (SPRING)	117
OAA-A-11-00048	ENVISION RTI	87
OAA-A-11-00050	Accelovate	118
OAA-A-11-00051	HealthTech V	116
OAA-A-11-00064	SILCS Cervical Barrier + Tenofovir (TFV) Gel	34
OAA-A-11-00073	Saving Lives at Birth: A Grand Challenge for Development. John Snow, Inc. (JSI)	111
OAA-A-12-000023	IS APS: The Partners Demonstration Project	69
OAA-A-12-00005	Food and Nutrition Technical Assistance III (FANTAIII)	120
OAA-A-12-00007	Saving Lives at Birth: A Grand Challenge for Development. Columbia University	111
OAA-A-12-00012	Saving Lives at Birth: A Grand Challenge for Development. Grameen Foundation USA	111
OAA-A-12-00020	IS APS: Situkulwane Lesiphephile - Safe Generations	72
OAA-A-12-00021	IS APS: Impact Evaluation of SILC on Child Household Well- being	71
OAA-A-12-00022	IS APS: Project START	70
OAA-A-12-00024	IS APS: The Kabeho Study	76
OAA-A-12-00026	IS APS: REach	73
OAA-A-12-00027	IS APS: ENGAGE4HEALTH	75
OAA-A-12-00028	IS APS: Thol'impilo: Bringing People into Care	74
OAA-A-12-00031	Health and Immunization Response Support (NGO's: Polio	107

Agreement Number Index

Agreement Number	Agreement Name	Page Number
	Eradication, Immunization)	
OAA-A-12-00047	Advancing Partners and Community-based Family Planning	51
OAA-A-12-00057	MalariaCare	90
OAA-A-12-00058	Health Communication Capacity Collaborative (HC3)	23
OAA-A-12-00080	Health Finance and Governance Project (HFG)	132
OAA-A-12-00101	Applying Science to Strengthen and Improve Systems (ASSIST)	131
OAA-C-10-00049	Global Health Support Initiative-II (GHSI-II)	13
OAA-C-11-00161	African Strategies for Health (ASH)	140
OAA-C-13-00032	Global Health Technical Assistance Bridge Project: GH Tech Bridge III	14
OAA-G-11-00058	Saving Lives at Birth: A Grand Challenge for Development. Monash University	111
OAA-G-11-00060	Saving Lives at Birth: A Grand Challenge for Development. Johns Hopkins University	111
OAA-G-11-00061	Saving Lives at Birth: A Grand Challenge for Development. Operative Experience, Inc	111
OAA-G-11-00062	Saving Lives at Birth: A Grand Challenge for Development. Baylor College of Medicine	111
OAA-G-11-00063	Saving Lives at Birth: A Grand Challenge for Development. PATH	111
OAA-G-11-00064	Saving Lives at Birth: A Grand Challenge for Development. Duke University	111
OAA-G-11-00065	Saving Lives at Birth: A Grand Challenge for Development. Rice University	111
OAA-G-11-00066	Saving Lives at Birth: A Grand Challenge for Development. Save the Children	111
OAA-G-11-00068	Saving Lives at Birth: A Grand Challenge for Development. Population Council	111
OAA-G-11-00069	Saving Lives at Birth: A Grand Challenge for Development. Diagnostics for All	111
OAA-G-11-00071	Saving Lives at Birth: A Grand Challenge for Development. Jhpiego	111
OAA-G-11-00072	Saving Lives at Birth: A Grand Challenge for Development. Partners for Development	111
OAA-G-12-00020	Onchocerciasis Elimination Program of the Americas (OEPA)	88
OAA-IO-11-00004	Saving Lives at Birth: A Grand Challenge for Development. WHO	111
OAA-M-11-00005	Knowledge Management Services	10
OAA-TO-10-00064	USAID DELIVER Project (Deliver II) Task Order 4	21
OAA-TO-11-00012	Deliver Project for Malaria	89
OAA-TO-11-00015	DELIVER - Emerging Pandemic Threats Task Order 6	122
OAA-TO-11-00039	Indoor Residual Spraying 2 Task Order #4	92
OAA-TO-11-00060	Project SEARCH: Population Council Task Order (HIVCore)	68
OAA-TO-1200030	Global Health Professional and Organizational Development (GHPOD)	11

Project Number	Agreement Name	Page Number
936-3080.01	Health and Immunization Response Support (UNICEF Polio, EPI Grant)	106
936-3080.03	Health and Emergency Response Support (WHO: Polio, Immunizations, CS, ID)	105
936-3080.05	Health and Immunization Response Support (NGO's: Polio Eradication, Immunization)	108
936-3080.06	UNICEF MCH Umbrella Grant	82
936-3080.07	Health and Immunization Response Support (NGO's: Polio Eradication, Immunization)	107
936-3083.05	MEASURE US Census Bureau	29
936-3083.10	MEASURE Evaluation Phase III	15
936-3083.11	MEASURE Phase III, Demographic and Health Surveys (DHS)	16
936-3083.13	MEASURE Evaluation III PRH Associate Award	30
936-3084.10	Advancing Partners and Community-based Family Planning	51
936-3085.06	Bayer HealthCare USAID Contraceptive Security Initiative	43
936-3085.09	Strengthening Health Outcomes through the Private Sector (SHOPS)	48
936-3089.Ad	USAID DELIVER Project (Deliver II) Task Order 4	21
936-3090.116	Livelihood and Food Security Technical Assistance (LIFT)	63
936-3090.120	IS APS: Situkulwane Lesiphephile - Safe Generations	72
936-3090.121	IS APS: Impact Evaluation of SILC on Child Household Well-being	71
936-3090.122	IS APS: Project START	70
936-3090.123	IS APS: The Partners Demonstration Project	69
936-3090.124	IS APS: The Kabeho Study	76
936-3090.125	IS APS: REach	73
936-3090.126	IS APS: ENGAGE4HEALTH	75
936-3090.127	IS APS: Thol'impilo: Bringing People into Care	74
936-3090.128	Joint U.N. Programme on HIV/AIDS (UNAIDS III)	78
936-3090.129	Grant Management Solutions (GMS 2) Project	77
936-3090.140	Supply Chain Management System (SCMS)	58
936-3090.63	Microbicides Partnership Program	64
936-3090.66	International AIDS Vaccine Initiative (IAVI)	62
936-3090.93	U.S. Census Bureau Participating Agency Program Agreement (PAPA)	60
936-3090.Da	AIDS Support and Technical Assistance Resources (AIDSTAR) Sector I, Task Order #1 John Snow, Inc.	55
936-3090.La	AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II, Task Order #1 Management Sciences for Health	56
936-3090.Na	AIDS Support and Technical Assistance Resources (AIDSTAR) Sector II, Task Order #2 Training Resources Group	57
936-3090.Ra	Project SEARCH GBV Evaluation TO - Tathmini GBV (Futures Group)	65
936-3090.Sb	Project SEARCH: John Hopkins University Task Order 2 (R2P)	67
936-3090.Ta	Project SEARCH: Population Council Task Order (HIVCore)	64
936-3091.04	Knowledge for Health (K4Health)	28
936-3091.05	Health Communication Capacity Collaborative (HC3)	23
936-3092.09	Fistula Care	104
936-3094.08	The Global Alliance for Improved Nutrition (GAIN)	114
936-3098.22	Global Health Technical Assistance Bridge Project: GH Tech Bridge III	14

Project Number Index

Project Number	Agreement Name	Page Number
936-3099.07	Leadership, Management, and Governance (LMG)	49
936-3100.110	Africa Program for Onchocerciasis Control (APOC)	84
936-3100.118	MalariaCare	90
936-3100.13	Medicines for Malaria Venture	95
936-3100.24	Centers for Disease Control and Prevention IAA Agreement II	83
936-3100.32	Food and Agriculture Organization of the United Nations (FAO) Umbrella Grant	123
936-3100.32	IDENTIFY	125
936-3100.39	Global Alliance for TB Drug Development	97
936-3100.46	STOP TB Partnership	98
936-3100.47	TREAT TB	103
936-3100.48	International Federation of Red Cross and Red Crescent Societies (IFRC) Umbrella	93
936-3100.50	NetWorks: Building Capacity for Sustained Net Coverage and Use	96
936-3100.51	World Health Organization Consolidated Grant	17
936-3100.51	World Health Organization Consolidated Grant/Maternal, Child, and Adolescent Health and Development (WHO/MCA)	121
936-3100.52	TB Care - 1	101
936-3100.53	TB Care - 2	102
936-3100.54	Deliver Project for Malaria	89
936-3100.55	End Neglected Diseases (END) in Africa: Family Health International 360 (FHI 360)	85
936-3100.56	End Neglected Diseases (END) in Asia: Family Health International 360 (FHI 360)	86
936-3100.57	DELIVER - Emerging Pandemic Threats Task Order 6	122
936-3100.58	ENVISION RTI	87
936-3100.61	Onchocerciasis Elimination Program of the Americas (OEPA)	88
936-3100.Ea	TB Task Order 2015	100
936-3100.Gb	Indoor Residual Spraying 2 Task Order #4	92
936-3101.06	Building Actors and Leaders for Advancing Community Excellence in Development (BALANCED) Project	22
936-3101.07	Support for International Family Planning Organizations (SIFPO/MSI)	46
936-3101.08	Support for International Family Planning Organizations (SIFPO/PSI)	47
936-3101.09	Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls (E2A)	50
936-3103.04	Responding to the Need for Family Planning through Expanded Contraceptive Choices and Program Services (RESPOND)	45
936-3103.05	CapacityPlus	44
936-3104.06	Knowledge Management Services	10
936-3104.13	Systems for Improved Access to Pharmaceuticals and Services (SIAPS)	134
936-3104.14	Health Finance and Governance Project (HFG)	132
936-3104.15	Applying Science to Strengthen and Improve Systems (ASSIST)	131
936-3104.8	Promoting the Quality of Medicines (PQM)	133
936-3104.Ab	Health Care Improvement Project (HCI)	130
936-3105.06	Global Health Support Initiative-II (GHSI-II)	13

Project Number	Agreement Name	Page Number
936-3105.10	Global Health Fellows Program II (GHFP-II)	12
936-3105.12	Global Health Professional and Organizational Development (GHPOD)	11
936-3107.01	The Population Council Product Development Agreement (PC-PDA)	40
936-3107.04	The Fertility Awareness-Based Methods (FAM) Project	36
936-3107.05	Program Research for Strengthening Services (PROGRESS)	41
936-3107.06	CONRAD Proprietary Product Research and Development (PPRD)	61
936-3107.07	Preventive Technologies Agreement (PTA)	66
936-3107.09	Increasing Age of Marriage	39
936-3107.10	Impact on Marriage: Program Assessment of Conditional Cash Transfers in India (IMPACCT) Project	38
936-3107.13	Gender Roles, Equality, and Transformations (GREAT) Project	37
936-3107.14	Biodegradable Contraceptive Implants	31
936-3107.15	Combination Contraceptive and Anti-HIV Vaginal Ring	32
936-3107.16	Facilitating Regulatory Pathways for Approval of Multipurpose Prevention Technologies	35
936-3107.17	Terikunda Jekulu	42
936-3107.18	IPM Combination Contraceptive and Anti-HIV Vaginal Ring	33
936-3107.19	SILCS Cervical Barrier + Tenofovir (TFV) Gel	34
936-3109.01	Health Policy Project (HPP)	25
936-3109.02	Inform Decision-Makers to Act (IDEA) – PRB Population Reference Bureau	27
936-3109.03	Health, Environment, Livelihood, Population and Security (HELPS) Project	24
936-3109.04	Inform Decision-Makers to Act (IDEA) - ASPEN	26
936-3109.Db	Health Policy Initiative Costing Task Order	59
936-3114	Child Survival Health Grants Program Cooperative Agreements	113
936-3116.05	Translating Research into Action (TRAction) Project	119
936-3116.06	Health Research Challenge for Impact (HRCI)	115
936-3116.08	HealthTech V	116
936-3116.09	Accelovate	118
936-3118	Malaria Vaccine Development Program (MVDP). Walter Reed Army Institute of Research (WRAIR) Umbrella	94
936-3118	Malaria Vaccine Development Program (MVDP). Naval Medical Research Center (NMRC)	94
936-3118	Malaria Vaccine Development Program (MVDP). Malaria Vaccine Initiative	94
936-3118	Malaria Vaccine Development Program (MVDP). National Institute of Allergy and Infectious Diseases (NIAID)/NIH	94
936-3122.07	WASHPlus: Supportive Environments for Healthy Communities	110
936-4000.01	Maternal and Child Health Integrated Program (MCHIP)	109
936-4000.09	Saving Lives at Birth: A Grand Challenge for Development	111
936-4000.10	Child Survival Health Grants Program Cooperative Agreements	113
936-4002.18	PREVENT	126
936-4002.20	RESPOND	127
936-4002.21	PREDICT	124

Project Number Index

Project Number	Agreement Name	Page Number
936-4004.02	Strengthening Partnerships, Results and Innovation in Nutrition Globally (SPRING)	117
936-4004.03	Food and Nutrition Technical Assistance III (FANTAIII)	120

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