HP+
HEALTH POLICY PLUS

Better Policy for Better Health

HEALTH POLICY PLUS
SEMI-ANNUAL REPORT

October 2018 – March 2019

USAID Agreement No.	AID-OAA-A-15-00051
Location	Washington, D.C.
Title	Health Policy Plus
Activity Description	Health Policy Plus (HP+) is a five-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-15-00051, beginning August 28, 2015. The project's HIV activities are supported by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). HP+ is implemented by Palladium, in collaboration with Avenir Health, Futures Group Global Outreach, Plan International USA, Population Reference Bureau (PRB), RTI International, the White Ribbon Alliance for Safe Motherhood (WRA), and ThinkWell.
Main Program Message	HP+ improves health outcomes by advancing sustainable health policy; financing; stewardship, transparency, and accountability; and advocacy for reproductive health and family planning, HIV, and maternal, newborn, and child health efforts at the global, national, and subnational levels.
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Date of Award	August 28, 2015
End Date of Activity	August 27, 2020
Ceiling Price	$184,984,745

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ABBREVIATIONS

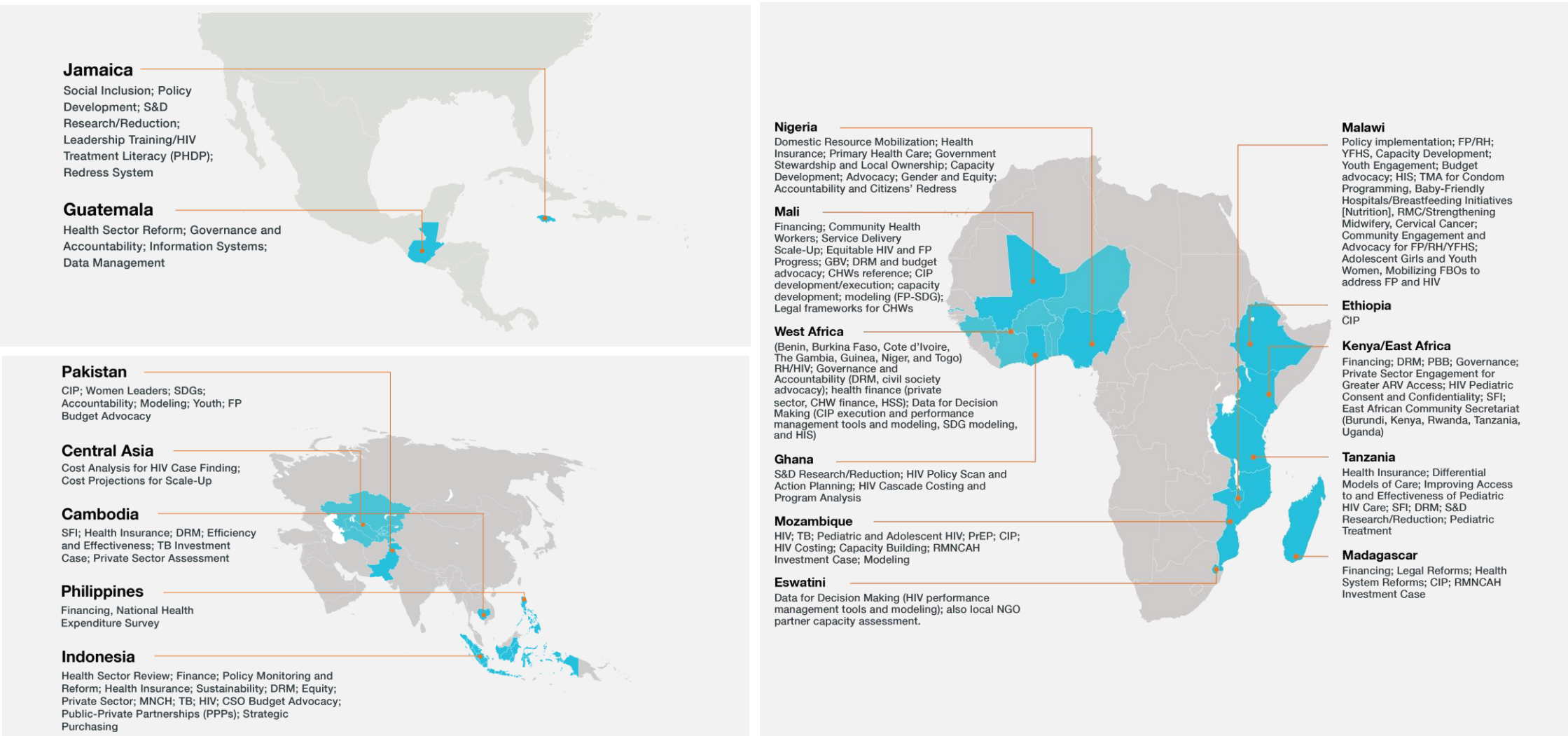|	
AIDS	acquired immune deficiency syndrome
ALIANMISAR	National Alliance of Indigenous Women's Organizations for Reproductive Health
BHCPF	Basic Health Care Provision Fund
CIP	costed implementation plan
CSO	civil society organization
DRP	Developing Radio Partners
FCFA	Central African CFA franc
FCT	Federal Capital Territory
FP-SDGs	family planning-sustainable development goals
HEP+	Health and Education Policy Plus
HIV	human immunodeficiency virus
HP+	Health Policy Plus
IMG	International Management Group
IR	intermediate result
JAxJS	Young Artists for Social Justice
M&E	monitoring and evaluation
MOH	Ministry of Health
MOPH	Ministry of Public Health
NPHCDA	National Primary Health Care Development Agency
PEPFAR	U.S. President's Emergency Plan for AIDS Relief
PHCUOR	Primary Health Care Under One Roof
SDGs	Sustainable Development Goals
SRH	sexual and reproductive health
USAID	U.S. Agency for International Development
WAHO	West African Health Organization
WRA	White Ribbon Alliance for Safe Motherhood
YFHS	youth-friendly health services

PROGRESS REPORT

Across the globe, in 45 countries (Figure 2), the Health Policy Plus (HP+) project is working to advance U.S. Agency for International Development (USAID) policy priorities in health, including family planning and reproductive health, HIV, and maternal and newborn health, in partnership with 967 government, development, nongovernmental, and civil society organizations worldwide (Figure 1). To date, HP+ has achieved a total of 850 results, 206 of which were recorded during this last reporting period, October 2018–March 2019. Over the same six months, HP+ achieved 17 additional cost-share results valued at US$1.4 million, bringing the number of cumulative cost-share results to 82. Total USAID funding through March 2019 was US$122 million and total cost share was US$12.5 million, or 13 percent of project expenditures.

Figure 1. HP+ at-a-Glance: Life of Project

HP+ AT-A-GLANCE
Life of Project

850 project results

967 partners collaborated

90 policies, operational strategies, and legal/regulatory frameworks developed, revised, adopted, implemented, monitored, and/or evaluated

39 policies are gender-responsive, reflecting principles of equity and/or human rights

33 policies support accountable and transparent stewardship for health

Over **US$371.6 million** mobilized via domestic resource mobilization

US$1 billion mobilized with HP+ support from Global Fund and other donors

45 countries hosting HP+ activities (field- and core-funded)

Figure 2. Where We Work

Jamaica
Social Inclusion; Policy Development; S&D Research/Reduction; Leadership Training/HIV Treatment Literacy (PHDP); Redress System

Guatemala
Health Sector Reform; Governance and Accountability; Information Systems; Data Management

Pakistan
CIP; Women Leaders; SDGs; Accountability; Modeling; Youth; FP Budget Advocacy

Central Asia
Cost Analysis for HIV Case Finding; Cost Projections for Scale-Up

Cambodia
SFI; Health Insurance; DRM; Efficiency and Effectiveness; TB Investment Case; Private Sector Assessment

Philippines
Financing, National Health Expenditure Survey

Indonesia
Health Sector Review; Finance; Policy Monitoring and Reform; Health Insurance; Sustainability; DRM; Equity; Private Sector; MNCH; TB; HIV; CSO Budget Advocacy; Public-Private Partnerships (PPPs); Strategic Purchasing

Nigeria
Domestic Resource Mobilization; Health Insurance; Primary Health Care; Government Stewardship and Local Ownership; Capacity Development; Advocacy; Gender and Equity; Accountability and Citizens' Redress

Mali
Financing; Community Health Workers; Service Delivery Scale-Up; Equitable HIV and FP Progress; GBV; DRM and budget advocacy; CHWs reference; CIP development/execution; capacity development; modeling (FP-SDG); Legal frameworks for CHWs

West Africa
(Benin, Burkina Faso, Cote d'Ivoire, The Gambia, Guinea, Niger, and Togo) Financing; DRM; PBB; Governance RH/HIV; Governance and Accountability (DRM, civil society advocacy); health finance (private sector, CHW finance, HSS); Data for Decision Making (CIP execution and performance management tools and modeling, SDG modeling, and HIS)

Ghana
S&D Research/Reduction; HIV Policy Scan and Action Planning; HIV Cascade Costing and Program Analysis

Mozambique
HIV; TB; Pediatric and Adolescent HIV; PrEP; CIP; HIV Costing; Capacity Building; RMNCAH Investment Case; Modeling

Eswatini
Data for Decision Making (HIV performance management tools and modeling); also local NGO partner capacity assessment.

Malawi
Policy implementation; FP/RH; YFHS, Capacity Development; Youth Engagement; Budget advocacy; HIS; TMA for Condom Programming, Baby-Friendly Hospitals/Breastfeeding Initiatives [Nutrition], RMC/Strengthening Midwifery, Cervical Cancer; Community Engagement and Advocacy for FP/RH/YFHS; Adolescent Girls and Youth Women, Mobilizing FBOs to address FP and HIV

Ethiopia
CIP

Kenya/East Africa
Financing; DRM; PBB; Governance; Private Sector Engagement for Greater ARV Access; HIV Pediatric Consent and Confidentiality; SFI; East African Community Secretariat (Burundi, Kenya, Rwanda, Tanzania, Uganda)

Tanzania
Health Insurance; Differential Models of Care; Improving Access to and Effectiveness of Pediatric HIV Care; SFI; DRM; S&D Research/Reduction; Pediatric Treatment

Madagascar
Financing; Legal Reforms; Health System Reforms; CIP; RMNCAH Investment Case

Abbreviations: S&D: Stigma and Discrimination; PHDP: Positive Health, Dignity, and Prevention; CIP: Costed Implementation Plan; SDGs: Sustainable Development Goals; FP: Family Planning; SFI: Sustainable Financing Initiative; DRM: Domestic Resource Mobilization; TB: Tuberculosis; MNCH: Maternal, Newborn, and Child Health; CSO: Community Service Organization; GBV: Gender-Based Violence; CHWs: Community Health Workers; RH: Reproductive Health; HSS: Health Systems Strengthening; HIS: Health Information Systems; PrEP: Pre-Exposure Prophylactics; RMNCAH: Reproductive, Maternal, Newborn, Child, and Adolescent Health; NGO: Non-Governmental Organization; YHFS: Youth-Friendly Health Services; TMA: Total Market Approach; RMC: Respectful Maternity Care; FBO: Faith-Based Organization; PBB: Program-Based Budgeting; ARV: Antiretroviral Therapy.

For more than two decades, HP+ and its predecessor projects have been working to advance health policies that improve equity, access, availability, and information. The project has supported the provision of accessible, affordable healthcare for vulnerable citizens; the ability of youth to advocate for themselves to access targeted health services; and advancements in respectful maternity care, universal health coverage, and rights and protections for individuals living with HIV.

HP+ is building on previous years to support the provision of sustainable health financing mechanisms, improve access to high-quality services, engage the private sector, and generate evidence to support advocacy for increased domestic resources for health. By mobilizing over US$95 million in domestic health resources across Africa and Central Asia this reporting period, the project is turning policy into action and creating sustainable change on the journey to self-reliance.

The project has strengthened the accountability of governments to their citizens by promoting transparent management and monitoring of health systems and budgets and supported an empowered and engaged civil society. It continues to strengthen the evidence base for decision-making and ensure that local solutions feed into global policy dialogue by sharing best practices, fostering independent data use, and creating effective models and tools that strengthen health reform worldwide.

Our ability to realize any of these achievements hinges on the project's diverse partnerships, our focus on issues of gender and equity, and our expertise in strengthening the capacity of individuals and institutions to sustain and increase self-reliance of local health systems performance.

ADVANCING HEALTH POLICIES THAT IMPROVE EQUITY, ACCESS, AVAILABILITY, AND INFORMATION (IR1)

DEVELOPING, REVISING, ADOPTING, IMPLEMENTING, AND MONITORING HEALTH POLICIES

Over the past six months, HP+ supported the development, revision, adoption, implementation, and monitoring of national, subnational, and operational health policies throughout multiple countries. Among other policy achievements, the project:

- Contributed to the establishment of a rural network of community health workers within the Malian healthcare system as part of the country's historic health reforms
- Supported the creation of a national labor training and certification system in Guatemala
- Helped Nigeria to adopt social health insurance agency laws supported by multisectoral working groups in several states
- Supported community groups to develop and implement action plans to promote access to youth-friendly health services in Malawi
- Assisted in ensuring the inclusion of people living with HIV within national social health insurance schemes in Cambodia

Figure 3 provides an overview of the project's major policy achievements over the past six months.

Figure 3. Policies, Plans, and Strategies Developed, Revised, Adopted, Implemented, and Monitored

POLICY

DEVELOPED/REVISED

Cambodia, by Prime Minister resolution, supported the inclusion of people living with HIV within social health insurance and developed a social protection monitoring and evaluation framework and manual

Kenya costed its malaria strategy and developed a financial sustainability plan

Mali helped to finalize the National Network of Key Populations' strategic plan

Nigeria's Federal Capital Territory developed a resource mobilization plan to implement its strategic health development agenda

Nigeria developed regulations and operational guidelines for state health care boards and social health insurance agencies

Malawi developed a scorecard to monitor implementation of its adolescent girls and young women strategy

Kyrgyz Republic developed and adopted the National Programme on Social Procurement

Afghanistan established the Afghan Midwifery and Nursing Council

West Africa revised Burkina Faso's Reproductive Health Policies, Standards, and Protocols

Malawi's costed implementation plan (CIP) was revised to include priority interventions and acceleration districts

Nigeria revised a rapid diagnostic tool to better assess implementation status of the Primary Health Care Under One Roof policy

West Africa supported the revision of a law protecting the rights of people living with HIV in Burkina Faso

ADOPTED

Guatemala created a national labor training system and implemented regulations governing certification

Madagascar adopted a decree to enforce the new family planning/reproductive health law

Nigeria adopted social health insurance agency laws in two states (Eboyni and Osun)

West Africa developed and validated Guinea's second CIP

Malawi adopted the Monitoring, Evaluation, and Health Information Systems Strategy

Nepal integrated respectful maternity care into their new Safe Motherhood and Reproductive Health Rights Bill

IMPLEMENTED/MONITORED

Guatemala implemented the Model of Health Care and Management

Nigeria established multi-sectoral working groups in three states to support advocacy for universal health coverage

Madagascar conducted a semi-annual review to monitor implementation of the country's CIP

Malawi monitored health sector performance and the implementation of the Health Sector Strategic Plan II and conducted a final review workshop of its CIP

ADVOCACY FOR ACTION

During this period, HP+ worked to strengthen individual and institutional capacity to develop, implement, and monitor policies and improve advocacy efforts and their impact on policy action.

In **Nigeria**, advocacy efforts yielded significant policy achievements in this reporting period. As a result of HP+ advocacy, the governor of Ebonyi State inaugurated a governing board to oversee the state's health insurance agency and committed to fund its implementation. Similarly, in Abia State, HP+ successfully advocated to the governor and commissioner for health for the establishment of a state health insurance agency governing board. Meanwhile, in Osun State, HP+ collaborated with local and national actors to urge the Osun State governor to commit his administration to remitting funds deducted from the basic salaries of public servants to the state health insurance agency. The advocacy efforts that HP+ supported resulted in authorization of a 1.5 percent deduction from all public servants' salaries in the state as a flat rate enrollment premium, which will be used to support accessible, affordable healthcare for vulnerable citizens.

In **Madagascar**, HP+ successfully advocated to government representatives to adopt the country's new reproductive health/family planning law's application decree that had stalled in the implementation process. In October, the application decree—which HP+ supported the Family Health Directorate of the Ministry of Public Health (MOPH) and the Family Planning Law committee to draft, and had been awaiting adoption since August 2018—was the focus of a discussion between the HP+ Madagascar team and high-level government representatives at a World Contraception Day event in Antsirabe. At the event, HP+ advocated to the MOPH to sign the decree in order to advance the law, which removes the requirement of spousal consent for youth and women to obtain contraception. As a result of these advocacy efforts, the Minister of Health signed the application decree and presented it to the Government Council, which formally adopted the decree in December.

Spotlight: Mali's Historic Passage of Sweeping Health Reforms

Community health workers in Mali.
Credit: Amaru Photography.

On February 25, the president of Mali, Ibrahim Boubacar Keïta, announced a series of ground-breaking reforms to the Malian health system: provision of free family planning services, emergency primary healthcare, preventative and curative healthcare for children under five, and care for pregnant women, including delivery; the implementation of a rural network of community health workers; and an increase in the national budget for health. HP+ Mali has been working with community health program stakeholders to advance these policy wins since 2016.

The establishment of a rural network of community health workers within the national healthcare system is a critical development—in 2015, these workers were responsible for liaising with 3 million Malians, or 40 percent of the total population living in rural areas. HP+ Mali has undertaken several analyses that revealed the full cost of these workers and the gap in financing that currently exists and developed a tool to map the distribution of community health workers. These analyses and tools continue to inform advocacy efforts in Mali.

In **Malawi**, where two-thirds of the population is under the age of 24, youth successfully advocated for a change in policy at the Namkumba Health Centre in Mangochi to reserve Saturdays for the administration of youth-friendly health services. Previously, the dedicated youth services day fell during the school week, which posed a barrier for those attending school. As a result of these HP+-supported advocacy efforts, youth in Mangochi have increased access to and awareness of youth-friendly health services in their community.

Spotlight: In Niger, an Inspired Chief Translates Words into Action

Chief Mansour (seated, right) conducting the March 3 meeting of local village chiefs and community leaders in Niger.

When Chief Kane Maiguizo Mansour left the three-day family planning regional advocacy workshop in July 2018, he was inspired. The meeting, organized by HP+ in collaboration with local partners, had brought together community leaders from Francophone West Africa to advocate for acceptance of family planning methods in the region. Following the meeting, the chief of Tessaoua, a city in Niger's southern Maradi region, wanted to do more than discuss the complexities of achieving the demographic dividend in plenary sessions; he wanted to bring the messages of the advocacy work to his people in real, concrete terms.

Chief Mansour's approach was two-fold: to raise awareness of family planning issues and to translate the lessons into tangible results. Within his community, he first organized a meeting to disseminate knowledge and best practices, with HP+ support, that brought together 152 local village chiefs, 98 community leaders, and a representative from Niger's Ministry of Health (MOH). The chief's second initiative was to set up a system of collecting millet from every household under his purview to be sold in order to fund family planning needs, the emergency evacuation of pregnant women experiencing prenatal complications, and purchase of essential drugs and medicines. As of this writing, 26 tons of millet have been collected—translating to 4 million CFA francs (FCFA), or approximately US$6,900.

The sale of the grain, the chief explained, "will allow us to assist people as long as we have something in our hands. It is unacceptable that a woman or her family starts to beg in the city of Tessaoua seeking help for assistance or medical evacuation." Moving forward, HP+ will continue to support the advocacy efforts of Chief Mansour and his peers to mobilize their communities in innovative and inspiring ways.

PARTNERING FOR CHANGE

HP+ succeeded in forming new—and bolstering existing—partnerships for the purposes of achieving policy action in the following regions:

Spotlight: Advocacy Prompts Unprecedented Hiring of Midwives in Malawi

A midwife in Malawi discusses health facility conditions at a citizen hearing organized by WRA Malawi in October 2018.

Midwives are a critical component in the provision of timely care in the pre-pregnancy, pregnancy, childbirth, and postpartum continuum, but in order to ensure that the quality of these services is sustained, sufficient numbers of midwives need to be providing skilled care. At a January 25 meeting of parliamentarians in Malawi, convened by HP+ partner the White Ribbon Alliance for Safe Motherhood (WRA), a representative from the Department of Human Resources Management and Development reported that 925 midwives were recruited, and 303 midwives were promoted during fiscal year 2018/2019. This success, which extends beyond the government's initial commitment to hire 800 midwives, is attributable in large part to the WRA's 2016 Bedside Midwives report that highlighted a critical shortage in the provision of midwives in Malawi. At that time, only 3,240 midwives were providing midwifery services to 4.1 million women of reproductive age—a gap of more than 20,000 as required to meet World Health Organization recommended standards. At the January meeting, WRA Malawi praised the government's progress to date and asked for continued support through approval of an increased budget to recruit, train, and retain more midwives, and the creation of a district-level nursing and midwifery pathway.

Kenya: HP+ supported Kenya's National Malaria Control Programme to develop the next iteration of its national malaria strategy—one that includes, for the first time, a financial sustainability plan. The financial sustainability plan outlines resource needs, resource availability, and opportunities to help Kenya close what it estimates to be a Ksh 24 billion gap in funding needed to implement the plan. The resulting *Costed Kenya Malaria Strategy 2019–2023* guides the country's malaria control strategy for the next five years, aiming to reduce malaria incidence and death by at least 75% (of 2016 levels) by 2023. In Kenya, it is estimated that three-quarters of the population is at risk for malaria.

Nigeria: In addition to mobilizing resources, during this reporting period HP+ supported interagency collaboration between the National Health Insurance Scheme and the National Primary Healthcare Development Agency for implementation of the Basic Healthcare Provision Fund (BHCPF); assisted in the inauguration of BHCPF steering committees in Ebonyi State and the Federal Capital Territory (FCT); and strengthened collaboration between the Osun State MOH, the Primary Health Care Development Board, and the State Social Health Insurance Agency in Osun.

West Africa: HP+ worked in close collaboration with the Amplify-FP project—in an implementing partnership of the USAID Regional West Africa Regional Health Office—to strengthen relationships between the projects and the West Africa Health Organization (WAHO). A November meeting with WAHO's new director general featured fruitful discussion on topics including strengthening collaboration with WAHO's network of champions, WAHO's important involvement in implementation of the Dakar Declaration, monitoring of country commitments, and collaboration with HP+'s West African Health Informatics Team.

INCREASING SUSTAINABLE, PREDICTABLE, AND ADEQUATE FINANCING FOR HEALTH PROGRAMS AND POLICY (IR2)

HP+ supports health financing reform for universal access to high-quality services, the mainstreaming of vertical programs into health financing arrangements, engagement of the private sector to reach universal coverage, and the generation of evidence and advocacy for increased domestic resources for health. Over the past six months, we have employed a diverse range of tools and approaches to accelerate progress toward these goals—improving access to health and education in Guatemala by increasing the efficiency of those sectors and mobilizing nearly US$95.7 million in domestic health resources across Africa and Central Asia.
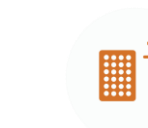
Nearly US$95.7 million mobilized

INCREASING DOMESTIC RESOURCES FOR HEALTH

Mobilizing funds. As a result of undertaking concentrated work to strengthen program-based budgeting, HP+ Kenya's 26 focus counties increased their allocation to health by approximately US$92.9 million (Ksh 9.32 billion) in one fiscal year, representing the bulk of the nearly $95.7 million HP+ helped to mobilize this period (Figure 4). The counties' total combined health allocation for fiscal year 2018/19 now stands at close to US$700 million. In Niger, HP+-supported advocacy trainings spurred the WAHO network of champions to develop an action plan and work alongside Niger's ministries of health and finance to increase budget allocations for family planning. As a result, Niger's MOH reallocated over US$340,000 (200 million FCFA) to purchase contraceptives in 2019 (up from 62 million FCFA in 2018).

Setting the stage for policy implementation. Demonstrating the critical need for short-term technical assistance to help country governments move from policy development to policy implementation, HP+ has worked with the Kyrgyz Republic's government to develop the legal and regulatory framework, tools, and capacity needed to implement a social procurement law that was originally signed in 2017. The Kyrgyz Republic MOH has now put in place a National Program on Social Procurement and standards for implementing HIV- and tuberculosis-related services through social contracting, and the ministry's Republican AIDS Center has allocated nearly US$43,000 (3 million Kyrgz Somm) to social contracting for HIV-related services this year.

Figure 4. Nearly US$95.7 Million Mobilized

HEALTH	FAMILY PLANNING	HEALTH	HIV	FAMILY PLANNING
KENYA ~ US$92.9 mil	**NIGER** ~ US$340,000	**NIGERIA** ~ US$2.4 mil	**KYRGYZ REPUBLIC** ~ US$43,000	**CÔTE D'IVOIRE** ~ US$2,500 *(of a ~US$25,000 commitment)*

Similarly, insufficient funding of the health insurance scheme serving Nigeria's FCT has significantly limited its reach, effectiveness, and the quality of care delivered by providers, resulting in a loss of confidence in the scheme by providers and health maintenance organizations. To address these issues, HP+ supported the planning and execution of an advocacy event that led the territory's administration to approve the release of 770 million Naira (approximately US$2,126,820). This amount will offset debts owed to the health management organizations,

enabling them to pay overdue reimbursements to health facilities. Participants at the event in which the release of funds was announced expressed a renewed confidence in the scheme and its ability to honor its obligations. With HP+ support, the FCT also mobilized the 100 million Naira (approximately US$286,000) needed to access the country's Basic Health Care Provision Fund (see Spotlight on page 10). Lastly, a private sector company dispersed US$2,500 to support family planning activities in Côte d'Ivoire—the first tranche of what is intended to be a larger commitment and an important step toward fostering domestic corporate responsibility (see Spotlight below).

Spotlight: When the Private Sector and Sustainable Development Converge

Unlikely ally makes voluntary family planning possible for more than 120 women in Cote d'Ivoire

The International Management Group (IMG)—a private company—committed to donating 15 million FCFA (approximately US$25,000) to fund family planning activities in Côte d'Ivoire this year. As part of this commitment, the company provided 1.4 million FCFA (about US$2,500) in support to private clinic Les Grâces (pictured) for the provision of free family planning sessions. During the sessions, 300 men and women were sensitized on family planning issues and 121 women were provided with voluntary contraception, including long-term methods. IMG's donation followed a regional workshop that HP+ West Africa organized to educate private sector decision-makers about the demographic dividend and the need to increase investments in family planning.

During the opening ceremony of the free clinic days, IMG's director reiterated the commitment to sustain the activity. He thanked USAID and HP+ for raising IMG's awareness of the importance of investing in family planning as part of corporate social responsibility and improving maternal and child health to achieve the demographic dividend in Côte d'Ivoire.

IMPROVING HEALTH FINANCING EFFICIENCY AND EFFECTIVENESS

This reporting period, Health and Education Policy Plus (HEP+) successfully worked with the Guatemalan government to earmark Departmental Development Council-managed funds to support health and education projects. The regulation—formally put into place by the Guatemalan government in early 2019 after years of coordinated policy work by HEP+ and its partners—represents a high-level policy change that will ensure the transparent funding, planning, and execution of health and education infrastructure projects. HEP+ is also supporting Guatemala's MOH in a new effort to efficiently construct and finance public health facilities, aiming to close a current gap of over 3,775 health posts and improve access for the country's most vulnerable populations. The program establishes strategic alliances between the ministry and local governments in which municipalities contribute the needed land for construction and the ministry provides support to build the health facilities.

Family Planning Financing Roadmap in Its Second Year

The Family Planning Financing Roadmap helps stakeholders identify potential pathways for sustainable family planning financing. Since its launch in April 2018, the roadmap has had:

- 1,978 unique visitors, 63 percent of which came from outside the United States
- 25,111 page views
- 3,967 sessions

Progress Update: Health Financing in Southeast Asia

Ground-Breaking Survey in the Philippines to Expand Healthcare Coverage and Financial Protections

In November 2018, the Philippines kicked off its first-ever National Health Expenditure Survey with HP+ support. This initial survey is a crucial step forward for the country, offering hope for expanded healthcare and financial protections for its nearly 105 million people. Data collected through the survey will provide a deeper understanding of the country's National Health Insurance Program's reach and effectiveness. It will inform implementation of the country's Universal Health Care Law and other areas of reform, including national and local government spending around specific priority health areas like maternal and child health, tuberculosis, and respiratory infections. The first round of data collection is currently in progress, with 60 percent of household and close to 20 percent of facility data collection complete. During this phase, HP+ is focusing on strengthening the capacity of the Philippine Department of Health's Health Policy Development and Planning Bureau to conduct future survey rounds using domestic resources. Among other efforts, HP+ is supporting Department of Health to develop a Data Demand and Information Use strategy that outlines the governing structure for managing and transferring data collection.

Prime Minister Approves Financing Action for Cambodia's Integrated HIV and AIDS Response

In a major policy implementation step, Cambodia's prime minister approved a resolution directing operational funding for the HIV response and other key advancements—notably the eligibility of all people living with HIV to receive a Health Equity Card and recognition of the important role played by civil society organizations in efforts to combat HIV. The resolution also guides the MOH to amend policies to enable health centers and hospitals to use their own funds for HIV activities, in addition to funds allocated by the national budget. This achievement is the culmination of an extensive effort by HP+ Cambodia and its health advisors, who are embedded at the National AIDS Authority (NAA), to advance health financing policy implementation for Cambodians living with HIV. These efforts include assisting Cambodia's ministries of health and economy and finance and the NAA to collectively operationalize portions of the decree, resulting in recent guidance issued by the NAA in April 2019.

Strong Partnerships Leaving a Sustainable Mark on Indonesia's Health Sector

HP+ Indonesia continues to expand its partnership with the government of Indonesia to improve maternal and newborn health and HIV outcomes. The project's work with Balitbangkes—the MOH's research institute—to support deep-dive quantitative analyses is strengthening institutional capacity and informing maternal and newborn health policy-making in the country. HP+ and other development partners are also providing technical assistance to Bappenas—Indonesia's planning ministry—to cost the health sector components of its forthcoming *National Medium-Term Development Plan*, thereby strengthening the ministry's capacity to conduct future cost analyses independent of external support.

To meet national HIV goals through policy regulatory improvements, HP+ is supporting the MOH's HIV sub-directorate to generate evidence to improve efficient HIV spending. The project is also working in two high-burden USAID-priority provinces (Jakarta and Papua) to develop unit costs for each step in the HIV cascade—disaggregated by sub-population and district—to help overcome chronic HIV programmatic challenges.

Spotlight: Strengthening and Expanding Health Insurance in Nigeria

"HP+, with the support of USAID, has been a reliable partner to us in our quest to operate sustainable health insurance in the FCT."

– Dr. Ahmed Danfulani, Program Manager, FCT Health Insurance Scheme

In early April of this year, HP+ staff participated in a Palladium-sponsored policy forum where experts gathered to discuss the current state and future directions of Nigeria's BHCPF. During the event, HP+ Nigeria Country Director Onoriode Ezire (far left) shared important insights into the BHCPF and HP+'s work; HP+'s Arin Dutta (second from left) moderated the panel discussion.

Late in 2018, Nigeria's Federal Capital Territory Health Insurance Scheme broke new ground, holding its first ever stakeholders' meeting. The meeting, which was co-convened with HP+, led to the release of over US$2.1 million in stalled funds and new political commitments by some of the FCT's top leaders. The release of funds and subsequent settlement of overdue payments to service providers and health management organizations is helping to restore confidence in the health insurance scheme and facilitating greater access to high-quality healthcare for the FCT's estimated 2.2 million inhabitants.

In addition, HP+ is working with local partners to establish and strengthen the various mechanisms and fulfill requirements for states to access domestic resources through the country's BHCPF. The BHCPF is a health financing reform that seeks to provide Nigerians, especially the poor and vulnerable, with a basic minimum package of healthcare services. However, the BHCPF includes eligibility criteria that each state must meet in order to participate in the fund, which includes establishment of a state agency board and payment of 100 million Naira (US$286,000) in counterpart funding. HP+ is assisting the FCT administration in developing strategies for enrolling informal sector beneficiaries and strengthening information communication technologies and management of claims.

Elsewhere in Nigeria, HP+ supported strengthening of the Eboyni's state agency board governance by helping board members to better understand their roles and responsibilities in implementing key health reforms. Mr. Okoro Uchenna Okoro, chairman of Nigeria's Ebonyi State Primary Health Care Development Board, commented, "We now have a clear roadmap of what we need to do as a team, the structures we need to put in place to improve our performance, and the activities we need to undertake to achieve better health outcomes for our people."

IMPROVING THE POLICY ENVIRONMENT FOR PUBLIC STEWARDSHIP, ACCOUNTABILITY, AND TRANSPARENCY (IR3)

Over the past six months, HP+ has promoted accountability by supporting the development or revision, adoption, implementation, and/or monitoring of various health-related policies and regulatory frameworks; promoting transparent management and monitoring of health systems and budgets; and supporting an empowered and engaged civil society to participate in policy development, implementation, and monitoring.

PROMOTING EFFECTIVE, TRANSPARENT, AND LOCAL MANAGEMENT AND MONITORING OF HEALTH BUDGETS AND SYSTEMS

Governments have a duty to provide high-quality public health services to their citizens and to ensure that private health services are well-regulated. To do so, governments and country stakeholders need mechanisms and systems in place to effectively manage and monitor health systems and health budgets that promote citizen engagement and improve transparency.

This reporting period, two Tanzanian community service organizations that HP+ trained in 2018, Sikiki and the Community Health and Development Initiative, collaborated to conduct a budget analysis on government allocations to the health sector in Tanzania. The result of this analysis—an important tool in holding the government accountable for health sector resource allocation—was produced as a policy brief with technical support from HP+.

In Indonesia, a template developed by HP+ for HIV budget advocacy was used by community service organizations to advocate for funding from local governments for HIV prevention programs. The US$200,000 proposal, developed by four community service organizations from the provinces of Jakarta and Papua, provides local organizations with increased opportunities to sustain and expand their HIV prevention services through diversification of funding sources, minimizing their reliance on donor support.

Spotlight: Hundreds of Self-Taught Guatemalans Receive National Certifications

Noemí Par Socoj Lish receiving her certificate at the March event

As part of the national labor training system, which seeks to regulate and conduct professional development both within and outside of school systems to respond to the labor demands of the productive sector, Guatemala's Ministry of Education launched a national competency certification system this reporting period, with HEP+ support. HEP+ was responsible for documenting occupational standards and identifying the methodology, processes, key actors, and ideal conditions needed to successfully implement certification of competencies.

The certificates offer formal recognition of people's learned skills, potentially opening doors to better and more dignified job opportunities. In Guatemala, where formal schooling is still a challenge, this type of certification is one innovative path to address informal employment.

These efforts culminated at a March event in the city's capital presided over by Guatemalan President Jimmy Morales at which 361 Guatemalans were certified in vocational skills such as backstrap and pedal loom weaving, oil painting, blacksmithing, forging and decoration, artisanal fishing, leather boots craft manufacturing, and professional cooking.

Noemí Par Socoj Lish, who was certified in backstrap loom weaving at the event, spoke on behalf of everyone who received their certificate that day: "Thank you for the support of the ministers. I learned weaving when I was 10 years old. At 12, I started to weave, working to help my family with household expenses. With this work I raised my eight children."

This reporting period, Malawi developed a scorecard tool to monitor implementation of the country's adolescent girls and young women strategy. The scorecard, which can be used at the national and district levels, aims to track indicators related to gender and the health, education, employment, and well-being of adolescent girls and young women to support implementation of the strategy and track its progress. The tool can also be used to help refine existing indicators and create additional ones during future reviews, further tailoring its effectiveness and reach.

Spotlight: HP+ Mentee Becomes Community Mentor

Vincent Thom (left) speaks at an HP+ event in Malawi.

Vincent Thom, a 28-year-old youth advocate from Malawi's Phalombe district, had a great deal to report when he rejoined his cohort of HP+-trained youth champions in November 2018. In the six months that had elapsed since he and 24 others had been trained by HP+ in sexual and reproductive health and youth-friendly health services (YFHS) policy and advocacy, Vincent had been tirelessly working to improve conditions in his district. Phalombe, which has the highest total fertility rate in all of Malawi, had not been providing YFHS in health facilities due to several challenges, including poor health worker attitudes and lack of private space.

To address this gap in services, Vincent used his knowledge and skills to train and mentor district youth network members, adolescent girls and young women, and traditional leaders in SRH/YFHS leadership and advocacy. With the support of a US$2,000 Her Voice Fund grant that he secured to support the training of 30 adolescent girls and young women and the guidance of HP+ advocacy materials, the youth champion was able to improve YFHS in his district. In addition to contributing to the development of a district-level YFHS strategy, youth advocates in Phalombe are now participating in monthly health facility supervision visits.

"As a youth champion, I appreciate the training the HP+ offered me," Vincent explained. "This training has enlightened my work—especially on how to engage the authorities using good strategies, systems, structures, and relevant strategic documents." By engaging in participatory processes to ensure policy implementation of YFHS and holding healthcare providers and district leadership accountable for their actions, Vincent and his mentees are taking ownership of their clinics and communities.

In Nigeria, HP+ provided technical and financial assistance to the National Primary Health Care Development Agency (NPHCDA) to revise its rapid diagnostic tool to effectively monitor and track states' compliance with the national Primary Health Care Under One Roof (PHCUOR) policy. PHCUOR is a policy for the integration of all primary

healthcare services under one authority to reduce fragmentation in healthcare management and service delivery. The rapid diagnostic tool is a revision of the NPHCDA-developed state self-assessment tool that enables states to assess their compliance across the nine policy pillars and identify areas for improvement.

SUPPORTING AN EMPOWERED AND ENGAGED CIVIL SOCIETY

Citizens have a role to play in ensuring government transparency and holding leaders accountable for upholding their commitments. How citizens interact with government can increase or decrease the likelihood that leaders will improve stewardship, accountability, and transparency. Having strong structures and processes in place can make these interactions positive and productive and, in turn, improve service quality and health outcomes.

In Guatemala, the national network of Young Artists for Social Justice (JAxJS) has emerged as a space for youth to advocate for themselves through art. The network's aim is to achieve more effective implementation of policies to improve conditions and access to sexual and reproductive health, nutrition, and education services for young people in Guatemala. At the local level, the effectiveness of JAxJS advocacy efforts had been stymied due to structural mechanisms that resulted in interventions having to be carried out via local civil society networks. To mitigate this challenge and connect advocates directly, HP+ supported the network to identify and form local groups in five regions and to coordinate efforts with existing departmental mechanisms. This expansion will allow for identification and creation of alliances at the local level, increasing the effectiveness and reach of the advocate network and underpinning its long-term sustainability.

Figure 5. 84 Trainings, 2,423 People Trained Across IRs

Trainings Across IRs (October 2018 – March 2019)

CAMBODIA:
- Trained the National Social Protection Council's General Secretariat on the M&E framework and indicators (March)

INDONESIA:
- Held an inaugural dissemination symposium to present findings from MNH evidence summaries (November)
- Facilitated workshop to train MNH research groups on preparing articles for journal publication (February)
- Facilitated workshop on using HIV cascade analytics for budget advocacy (October)
- Trained CSOs to develop budgets to request funds from local governments for HIV prevention programs (February)
- Facilitated workshop to launch midterm development plan costing process (March)
- Held roundtable on HIV strategic purchasing for government stakeholders (March)

KYRGYZSTAN:
- Trained MOH staff in social contracting (February)

MALAWI:
- Facilitated workshop for CSOs to harmonize budget advocacy efforts and messages (January)
- Facilitated workshop for FBOs to develop faith-based HIV messaging targeting men and boys (January)
- WRA facilitated workshops on What Midwives Want strategy for midwives, clinicians, and journalists (January and February)
- WRA trained 33 chapter members on accountability for advocacy (January and February)
- Trained 356 district hospital clinicians, community promoters, and support staff on the baby-friendly hospital initiative and breastfeeding skills (February)
- Trained 60 youth to strengthen policy engagement an coordination efforts (March)
- Trained 23 youth champions on the demographic dividend (March)

MADAGASCAR:
- Oriented members of the MOPH's Family Health Directorate on the CIP Performance Dashboard (February)
- Trained civil society partners on AFP SMART (October, December)

MALI:
- Facilitated workshop to reduce HIV-related stigma and discrimination among stakeholders in media, security, and justice sectors (December)

JAMAICA:
- Conducted social contracting workshop for CSOs involved in the HIV response (March)

KENYA:
- Trained county health, planning, and finance officers on program-based budgeting (November)

NIGERIA:
- Trained multi-sectoral TWG on advocacy and health financing (January)
- Facilitated workshops to outline and define learning approaches for the BHCPF TOT curriculum (January)
- Trained state health insurance agency governing boards on advocacy, leadership roles, domestic resource mobilization, and policy implementation (January – March)

GUATEMALA:
- Trained MOH officials on use of Tableau (March)

WEST AFRICA:
- Facilitated workshop to integrate IDSR data into the DHIS2 platform (November)

Abbreviations: CSO: Community Service Organization; TOT: Training of Trainers; CIP: Costed Implementation Plan; MNH: Maternal and Newborn Health; FBO: Faith-Based Organization; AFP: Advance Family Planning; SMART: Specific, Measurable, Attainable, Relevant, and Time-Bound; TWG: Technical Working Group; IDSR: Integrated Disease Surveillance and Response; DHIS2: District Health Information System 2.

Spotlight: The Journey to Self-Reliance Takes Many Forms

Taking ownership, securing new funding, and cascading trainings are all part of the journey to a sustainable health system

In several instances, HP+ support has given rise to local partners taking ownership and securing new funding after the project's initial engagement has ended. A community radio program in Malawi is expanding its reach and audience; HP+-trained facilitators are cascading a key training deeper into Kenyan counties to strengthen health budgeting; and previously informal groups of family planning champions are registering as local entities and building on past wins in Nigeria.

Innocent, Community Manager at Chiluda Community Radio, Malawi. Photo by Amaru Photography for HP+.

The success of HP+'s work with Developing Radio Partners (DRP) in Malawi led to the group securing new funding for the expansion of their community radio broadcasts about YFHS. With HP+ support, DRP trained and mentored teams of adolescents over a two-year period to produce weekly programs that are aired by community radio stations in three districts. Last year, DRP added two more stations, raising the project's audience to more than 3 million listeners. Building on this success, DRP received US$30,000 from the Conservation, Food & Health Foundation, based in Boston, to fund similar activities at two additional stations.

Participants at a deep dive meeting, Kenya. Photo by Theresa Ndavi/HP+.

Trainers trained by HP+ Kenya on program-based budgeting were later engaged by the USAID-funded Afya Zwaidi and Afya Pwani projects to train others at the county and subcounty levels. To increase domestic resource mobilization, and thus strengthen the sustainability of Kenya's health system, building the capacity of the county governments in planning and budgeting, with a focus on program-based budgeting, is needed to ensure that there is a clear linkage between the programs' funding levels and results.

Members of Eboyni State's Family Planning Advocacy Working Group, Nigeria.

Over the course of a year and a half, HP+ successfully increased state-level funding for family planning in Nigeria while also establishing a lasting contingent of energized and effective family planning advocates across three states—Sokoto, Bauchi, and Ebonyi. HP+ engaged these Family Planning Advocacy Working Groups in preliminary sustainability actions, including formal registration with the Corporate Affairs Commission, selection of group leaders, and internal fundraising mechanisms. Now, energized and committed to sustaining their momentum, the groups are charging forward. They are turning their focus toward ensuring the release of committed funds, exploring new sources for domestic resource mobilization, and positioning themselves as advocacy hubs in their respective states, with the aim of expanding their advocacy efforts beyond family planning.

ADVANCING SUSTAINABLE DEVELOPMENT GOALS THROUGH GLOBAL LEADERSHIP AND ADVOCACY (IR4)

HP+ serves as a conduit to advance best practices and global advocacy agendas, strengthening the evidence base for decision-making and ensuring that local solutions feed into global policy dialogue.

ADVANCING BEST PRACTICES

From producing peer-reviewed journal articles and conversing on social media to convening global gatherings and implementing tried-and-tested approaches, HP+ is developing and sharing best practices worldwide. Over the past six months, HP+:

Launched a six-part policy webinar series in December. The series—which spans this reporting period and the next—covers a range of topics, including an assessment of Indonesia's national insurance plan, an introduction of policy advocacy models, and lessons from the West Africa Health Informatics Team.

Offered best-practice solutions to address barriers to HIV epidemic control. HP+ staff organized or were invited presenters on four additional webinars offering best-practice solutions for some of the most challenging barriers to HIV epidemic control. HP+ organized webinars to explore HIV-related stigma and discrimination in health facilities and how to use landscaping to help meet the President's Emergency Plan for AIDS Relief local organization funding target and co-hosted a webinar with USAID, the Joint United Nations Programme on HIV/AIDS, and the Global Fund to Fight AIDS, Tuberculosis, and Malaria to discuss how to sustain the role of civil society in national HIV responses in the face of declining external funding. HP+ staff also presented the project's *Children's Consent Framework* as part of a United Nations Children's Fund webinar on children's ability to access HIV care and treatment.

Published a special journal series on stewardship in *Public Administration and Development*. Two of the five articles in the series were authored by HP+ staff: an introductory overview about stewardship and health systems strengthening and an article on family planning stewardship with a total market approach.

Figure 6. HP+'s Reach, October 2018–March 2019
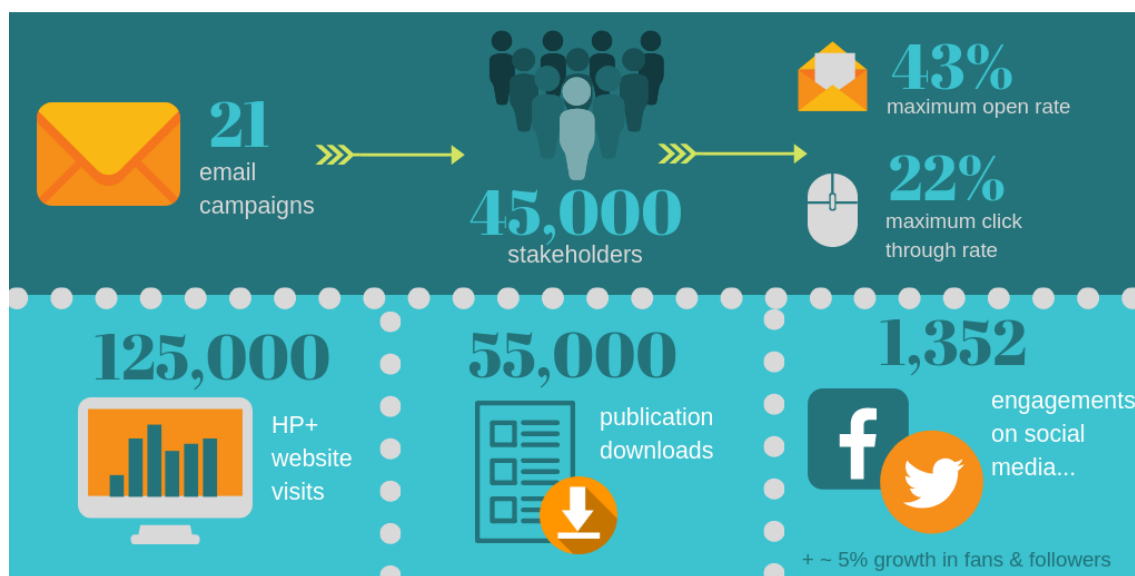
Advanced respectful maternity care in humanitarian settings. As a result of advocacy by HP+ consortium partner WRA and others, the newly released *Inter-Agency Field Manual*—the authoritative guide in crises—includes a

Respectful Maternity Care Charter, representing an acknowledgement by the humanitarian community that human rights need to be respected from the onset of an emergency.

Figure 7. HP+ Global Knowledge Sharing at-a-Glance

Submitted 49 abstracts and several organized side session applications to eight international conferences. Of those, 24 were accepted as oral presentations, 17 were accepted and presented in poster format, and five satellite sessions were accepted—one for the Prince Mahidol Award Conference and four for the International Health Economics Association Conference (of which two will be delivered).

Engaged in global knowledge sharing. HP+ staff were present at and contributed to Health Systems Global in Liverpool, the International Conference on Family Planning in Kigali, HIVR4P2018 in Madrid, the Prince Mahidol Award Conference in Bangkok, and the 5th Annual African Health Economics and Policy Association Conference in Accra (Figure 7). Topics spanned project expertise, including advancing the total market approach to achieve family planning market growth and the feasibility of integrating HIV services into health insurance schemes. In addition to the conference presentations and meetings, HP+ staff also shared conference experiences on social media and via blog posts.

Contributed to regional, national, and subnational dialogues. HP+ staff also participated in a number of meetings at regional, national, and subnational levels. For example, in the latter half of 2018, HP+ presented results from an Ouagadougou Partnership regional application of the Family Planning-Sustainable Development Goals (FP-SDGs) model as well as the policy and financing actions and reforms needed to realize the potential benefits of scaling-up family planning.

Supported a local civil society network in reaching a global audience. HEP+ supported Guatemala's National Alliance of Indigenous Women's

Advocates and decision-makers from the Ouagadougou Partnership countries are using documentation of the West Africa FP-SDGs application to support policy change, increased financing for family planning, and more.

Organizations for Reproductive Health (ALIANMISAR) to develop, carry out, and document a study to show how multisectoral collaboration has improved culturally relevant public health services, particularly for indigenous women. The results of the study were presented at the Partnership for Maternal, Newborn, and Child Health Partners Forum in India in December 2018 and in a HEP+ and ALIANMISAR co-authored journal article published in *BMJ*.

Empowered the next generation of demographers. HP+ collaborated with the University of Malawi's Chancellor College and partners to design a semester-long course on modeling and data utilization for policy-making for fourth-year demography students. Students' improved understanding of setting policy goals and conducting policy analysis, implementation, and planning will help to prepare them as leaders in government and advocacy.

HP+ METHODS, TOOLS, AND APPROACHES

GLOBAL

Total Market Approach Projection Tool: Developed and refined the advocacy tool that estimates the health and economic impact of commercial sector investments in family planning. The revised tool includes new features that give users the power and flexibility to use high-level inputs aligned with national strategies or to factor in a more nuanced snapshot of their family planning markets.

GHANA

CIP Performance Monitoring Dashboard: Assisted Ghana's MOH to establish a CIP Performance Dashboard, which enables data aggregation and visualization of collected performance data related to family planning.

MADAGASCAR

Public Funds Flow Chart: Conducted and disseminated a public funds flow analysis to detail allocations and disbursements of health resources, examine bottlenecks in the financial management structure, and, ultimately, inform Madagascar's national health and health financing policies.

CIP Gap Analysis Tool: Applied the CIP gap analysis tool and methodology in Madagascar and disseminated results of the 2016–2020 CIP gap analysis application to the MOPH's Department of Family Health, which will use the information for resource mobilization during an advocacy event later this year.

MALI

FP Goals Model: Assisted, along with Track20, Mali's National Directorate of Health to apply the model to identify the interventions most likely to increase the country's modern contraceptive prevalence rate and lead to the development of a short list of strategic activities for the country's new CIP.

Gender and Sexual Diversity Curriculum: Translated into French and, along with the Kaye Regional Secretariat of the National AIDS High Council, used the curriculum to sensitize members of the region's police force and judicial system to ensure that they are better equipped to provide services to key populations without stigma or discrimination.

FP-SDGs Model: Adapted the model to the Malian context, informing future dissemination of results to high-level ministry officials by Mali's Health Planning Cell, which serves both the Ministry of Health and Public Hygiene and the Promotion of Women, Children, and the Family.

NIGERIA

Fiscal Space Analysis Tool: Developed and applied the tool to analyze historical revenues and expenditure on health, develop scenarios based on five fiscal space pillars, and model five-year health revenue projections for Nigeria's FCT. The tool will be used to expand FCT government funding for healthcare, helping to close the projected US$243 million funding gap for the territory's Strategic Health Development Plan II.

> **Interagency Gender Working Group Gender Analysis Tool:** Adapted and applied the tool in four states—Abia, Osun, Ebonyi, and the FCT—to identify gender and equity barriers to the rollout of the BHCPF. The results and recommendations of the analysis will be used to inform the development of gender- and equity-sensitive approaches and health insurance operationalization.

TANZANIA

CIP Priority Map, Key Performance Indicators, and Performance Dashboard: Developed a CIP priority map with key results for monitoring and key performance indicators and established a CIP Performance Dashboard to support the immediate performance monitoring of Tanzania's 2019–2023 CIP.

Total Facility Approach to Reduce HIV-Related Stigma and Discrimination: HP+ adapted and implemented, in coordination with local partners, a three-phase approach to combat HIV-related stigma and discrimination in health facilities. The project also collaborated with local stakeholders to create a participatory training curriculum for facility staff based on global tools adapted to fit the context and address baseline survey findings. Adaptation included the addition of a new focus on youth seeking HIV and other sexual and reproductive health services. HP+ implemented the training in two district hospitals with a combined 526 facility staff. An _endline evaluation showed significant reductions_ in stigmatizing attitudes and behaviors among health facility staff.

FOSTERING INDEPENDENT DATA USE

HP+ investments in strengthening individual and institutional capacities of host-country partners evolve into local partners using project-generated data to inform evidence-based advocacy agendas and influence decision-making. Over the past six months, data generated by HP+ has supported local partners to:

Increase health spending in Cameroon. HP+ supported Cameroon's MOPH to collect and analyze data from approximately 70 percent of the country's health facilities to estimate needs related to infrastructure, supplies, and human resources. The findings from this analysis were used by the MOPH to call on government stakeholders and donors for continued support of the advancement of universal health coverage and to inform future costing efforts to prioritize health resource allocation and spending.

Strengthen Mozambique's national HIV response. Mozambique's National Council to Combat HIV and AIDS used findings from an HP+ training needs assessment to inform the development of new training modules for provincial- and district-level staff.

Take ownership over the implementation of Madagascar's family planning roadmap. Madagascar's MOPH used data from the CIP performance dashboard to develop its 2019 workplan, drawing on the dashboard for up-to-date information and validated interventions, strengthening country ownership of the CIP performance monitoring process.

Garner support for youth-focused reproductive health services in Mali. Malian youth ambassadors used data from the HP+-developed RAPIDWomen model to advocate to decision-makers for YFHS. The Minister for the Promotion of Women, Children, and the Family and the Minister of Youth and Citizen Construction—who co-chaired the National Youth Forum on Reproductive Health where the youth presented the data—both declared their support for further investments in youth-related programs.

Reducing HIV stigma and discrimination in Tanzania. Tanzania's National AIDS Control Programme revised the national _Facilitator's Guide for Training Health Workers on Stigma and Discrimination Reduction_, using content drawn from the HP+ participatory training guide _Towards Stigma-Free Health Facilities in Tanzania: A Guide for Trainers_.

Spotlight: Generating Data to Support a More Country-Driven HIV Response

Local organizations, like this HIV testing center, and their staff are the backbone of national HIV responses.
Photo courtesy Elizabeth Glaser Pediatric AIDS Foundation.

In response to USAID's plan to increase funding for local "indigenous" organizations, HP+ developed two new surveys to collect information and analyze the readiness of these entities to directly receive funding from the U.S. Government. These tools—a general survey aimed at local organizations working in health, education, and social services and a targeted survey for local providers of accounting, auditing, and payroll services—were essential in enabling HP+ to map a large number of organizations in a short period of time. HP+ developed, pre-tested, and refined the survey tools—working with USAID and pre-testers—to gather data on key readiness criteria such as donor experience, funding/revenue, focus areas and services, and geographic range. These tools will provide USAID with data to support a more country-driven response to HIV, underpinning a key element of long-term sustainability.

CHALLENGES

Over the past six months, the project faced several challenges that required adaptive management to overcome.

Political challenges related to planned national elections and cultural sensitivities regarding certain project-related topics in the family planning sphere, have slowed progress in some countries. In mid-March, a cyclone devastated the central area of Mozambique, impacting project activities. HP+ also faced some challenges as a result of the U.S. Government shutdown in late 2018/early 2019.

From an operational perspective, delays in USAID and Mission approval of workplans and products have, at times, impacted activity and funding timelines, as have staff turnover and changes in government ministry structures in some countries. Staff changes at HP+ headquarters and in HP+ field offices also posed challenges, particularly with regard to staff recruitment. Other operational challenges included difficulties coordinating with implementing partners, identifying shifting priorities of host-country ministries of health and finance, accessing crucial data, and/or government partners lacking an understanding of USAID procurement policies.

In response, HP+ used and is continuing to use tools, such as the Collaborating, Learning, and Adapting Framework, to work with Missions and country counterparts to address such challenges and adapt accordingly.

ANNEXES

ANNEX A. HP+ PROJECT MANAGEMENT

Table 1. HP+ Project Management and Technical Leadership

HP+ Project Management	
Project Leadership Team	
Director	Suneeta Sharma
Deputy Director – Family Planning/Reproductive Health	Jay Gribble
Deputy Director – HIV	Sara Bowsky
Deputy Director – Finance and Operations	Jay Mathias
Deputy Director – Field Programs	Barbara Rieckhoff
Technical Leadership Team	
Capacity Development	Anne Jorgensen
Health Financing	Arin Dutta
Monitoring, Evaluation, and Learning	Nicole Judice
Communications and Knowledge Management	Annmarie Leadman
Maternal Health Advisor	Elena Ateva
Gender Technical Advisor	Charlotte Feldman Jacobs
Stigma and Discrimination	Laura Nyblade
Stewardship and Accountability	Alyson Lipsky (formerly Derick Brinkerhoff)
Finance and Operations Support	
Senior Manager	Rick Gobantes
Program Operations Managers	Shreejana Ranjitkar, Alpha Ba, Jason Milliski, Stephanie Mlynar

Table 2. HP+ Core-Funded Activity Management

Core Activity	Activity Manager
Activities	
P1.1 Costed Implementation Plans for Family Planning	Christine Lasway
P1.2 Understanding the Policy and Financial Implications of Expanding Method Choice	Erin McGinn
P1.3 Translate Malawi's National Youth-Friendly Health Policy and Strategy for Local Audiences to Support Uptake of Family Planning/Reproductive Health Services by Young Women Ages 15–19	Jay Gribble
P1.4 Strengthening Gender-Based Violence Policy Implementation for Improved Health Outcomes	Beth Rottach
P1.5 Marshalling the Evidence for Health Governance: Policy and Regulation Thematic Working Group	Shreeshant Prabhakaran
P1.6 Transition Policy for Family Planning Commodities	Dara Carr
P1.7 Strengthening Local Decision Making for Family Planning	Alyson Lipsky
P1.9 Using Costed Implementation Plans for Family Planning Investments to Influence Investments in the Global Financing Facility	Elise Lang
P1.10 Toward Greater Sustainability: Planning for Transition	Dara Carr
P1.12 Understanding Policy Barriers to Supportive Male Engagement in Family Planning	Beth Rottach
P1.13 Improving the Legal and Regulatory Environment for Integrating Vertical Programs, Including Family Planning, into Universal Health Coverage	Elise Lang
P1.14 Promoting Corporate Workplace Health Policies to Expand Access for Family Planning and Reproductive Health Services	David Wofford
P1.15 Understanding Equity in the Use of Family Planning at Subnational Levels	Kaja Jurczynska
P1.16 Family Planning, Population Dynamics, and Violent Extremism	Kaja Jurczynska
P2.1 Incorporating Family Planning into Universal Health Coverage Efforts: Latin America and the Caribbean	Arin Dutta
P2.2 Costing Harmonization for Normative Interventions: Technical Meeting and Consensus Guidance	Arin Dutta
P2.3 Supporting the Development of U.S. Agency for International Development (USAID)/Population and Reproductive Health Financing Framework for Family Planning	Arin Dutta
P2.4 Understanding the Long-Term Financing Needs for Family Planning in the Context of Universal Health Coverage Programs	Tom Fagan
P2.5 Achieving Family Planning Market Growth and Sustainability through a Total Market Approach	Kate Klein

P2.6 Roadmap to Advance Understanding of Family Planning Financing	Cathy Cantelmo
P2.7 Family Planning Financing Meeting in Sub-Saharan Africa	Elise Lang
P2.9 Applying Catalytic Investments to Stimulate Domestic Resource Mobilization for Family Planning	Elise Lang
P2.10 Applying Blended Financing to Family Planning in Middle-Income Countries: Opportunities to Crowd-In Private Capital	Sayaka Koseki
P2.11 Actuarial Analysis of the Implications of Integrating Family Planning Services in National Health Insurance Schemes	Shreeshant Prabhakaran/Arin Dutta
P2.12 Performing Secretariat Role for the Family Planning Financing Reference Team	Andrew Carlson
P2.13 High-Impact Practice Brief on Family Planning Financing	Tom Fagan
P2.14 Financing Family Planning and Reproductive Health Services in Complex Humanitarian Settings	Pascal Saint-Firmin
P2.15 Improving the Technical Efficiency of Family Planning Programs at the Country Level	Cathy Barker
P2.16 Private Health Sector Assessment and Healthcare Federation Establishment in Liberia	Sayaka Koseki/Arin Dutta
P3.1 Accountability and Women's Leadership	Anne Jorgensen
P3.2 Promoting Government Transparency and Accountability for FP2020 Commitments	Alyson Lipsky/Christin Stewart
P3.3 Working with Community Leaders to Improve Accountability for Family Planning: A Health Systems Approach	Sara Stratton
P3.4 Accountability and the Law	Alyson Lipsky
P3.5 Intergenerational Mentoring for Emerging Family Planning Champions	Laura Brazee
P4.1 Promoting Accountability for the Sustainable Development Goals	Suzy Sacher
P4.2 Enhancing Policy Models: Expanding DemDiv and Using Existing Models to Focus on Youth	Ellen Smith
P4.3 Modeling the Improvement of Health Outcomes Due to Youth Use of Family Planning	Lauren Morris
P4.4 Updating Data for the ImpactNOW Model	Kaja Jurczynska
P4.5 International Conference on Family Planning, Global Leadership, and Dissemination	Jay Gribble
P5.1 Monitoring and Evaluation Support to HP+	Nicole Judice
P5.2 Communications and Knowledge Management	Annmarie Leadman
P5.3 Enhancing and Maintaining Spectrum Suite of Policy Models	Bob McKinnon
P5.4 Rapid Response (POP)	Jay Gribble

P5.5 Core Support for Gender Advisor	Jay Gribble
P5.6 Reproductive Health Supplies Coalition: USAID Core Operating Support	Jay Gribble
P5.7 Technical Learning Exchange	Annmarie Leadman
P5.8 Policy Forums and Webinars	Annmarie Leadman
Maternal, Newborn, and Child Health (MNCH)-Specific Activities	
Promoting High-Quality Maternal Healthcare (Core MNCH White Ribbon Alliance for Safe Motherhood)	Elena Ateva
Core Maternal Health Data Modeling	Jay Gribble

Core Activity	Activity Manager
HIV-Specific Activities	
H1.1 Policy Scan and Action Planning	Sara Bowsky
H1.2 Policy Environment HIV (combined with H1.1)	Sara Bowsky
H1.3 Policy Scan and Action Planning: Consent for HIV Testing and Treatment and Disclosure of Personal HIV Data for Individuals Who Have Not Reached the Age of Legal Capacity (Policy Scan and Action Planning Child and Adolescent HIV Consent Module)	Kip Beardsley
H1.4 Sustainability Initiatives	Dara Carr
H1.5 TOMS++	Dara Carr
H2.2 Tanzania Sustainable Financing Initiative	Bryant Lee
H2.3 Sustainable Financing Initiative, Global	Arin Dutta
H2.4 Kenya Sustainable Financing Initiative	Nicole Judice
H2.5 Cambodia Sustainable Financing Initiative	Shreeshant Prabhakaran
H2.6 Sustainable Financing Analysis	Sara Bowsky
H2.7 Sustainable Financing Initiative Ethiopia	Tom Fagan
H2.8 Sustainable Financing Initiative Rwanda	Tom Fagan
H2.9 Sustainable Financing Initiative Cameroon	Elise Lang
H2.10 Sustainable Financing Initiative Nepal	Arin Dutta

H3.1 Global Fund Technical Assistance 1	Ron MacInnis
H3.2 Global Fund Technical Assistance 2	Ron MacInnis
H4.1 Health Facility Stigma and Discrimination Reduction Package	Becca Mbuya-Brown
H5.1 Gender and Sexual Diversity Trainings	Ryan Ubuntu Olson
H5.2 Gender and Sexual Diversity Trainings 2	Anne Jorgensen
H6.1 Establish Baseline Estimates of Adolescents Living with HIV Transitioning to Adult Care and Treatment and Identifying Programmatic and Policy Barriers and Enablers of Transitioning to Adult Care and Treatment	Sara Bowsky
H6.2 Establish Baseline Estimates of Viral Suppression among Pediatric and Young Adult Clients Living with HIV (0–24 Years Old) by Antiretroviral Regimen and Identify Programmatic Contributors and Barriers to Implementation of the Viral Load Cascade	Sara Bowsky
H7.1 Pre-Exposure Prophylaxis Modeling	Katharine Kripke

Table 3. HP+ Country Management

Country Activity Personnel for Country Programs			
Region/Country	Funding Source	Country Activity Manager	Country Director
Africa			
Africa Regional	HIV	Helen Cornman	N/A
Ethiopia	POP	N/A	N/A
eSwatini	HIV	Elizabeth Nerad	N/A
Ghana	HIV	Barbara Rieckhoff	Modibo Maiga
Kenya and East Africa	POP/HIV/Malaria	Beth Rottach (previously Nicole Judice)	Stephen Muchiri
Madagascar	POP/MNCH	Laura Hurley	TBD (previously Nirina Ranaivoson)
Malawi	POP/HIV/MNCH/Nutrition	Erin McGinn	Olive Mtema
Mali	POP/HIV/MNCH	Sara Stratton	Seydou Traore
Mozambique	POP/HIV/MNCH	Ricardo Silva	N/A
Nigeria	POP/MNCH/HIV	Iryna Reshevska	Onoriode Ezire
Sahel Regional	MNCH	TBD	N/A
Tanzania	HIV/MNCH	Bryant Lee	Marianna Balampama
West Africa Health Informatics Team	Development Lab	Elizabeth Nerad	N/A
West Africa	POP/HIV	Carol Miller	Modibo Maiga
Asia and Middle East			
Cambodia	HIV/tuberculosis (TB)/POP/MNCH	Shreeshant Prabhakaran	Yann Derriennic
Central Asia Republics	HIV	Nicole Judice	N/A
Indonesia	POP/MNCH/HIV	Sayaka Koseki	Kristina Yarrow (previously Palupi Widjajanti)
Kyrgyzstan	TB	Nicole Judice	N/A
Pakistan *(CLOSED)*	POP	Beth Rottach *(formerly)*	Rahal Saeed Korejo *(formerly)*
Philippines	POP/TB/MNCH	Rebecca Ross	N/A
Latin America and the Caribbean			
Guatemala	POP/MNCH/Education/Nutrition	Polly Mott	Herminia Reyes
Jamaica	HIV	Bethany O'Connor	Sandra McLeish

ANNEX B. HP+ COMPLETED PRODUCTS

Orange highlighting indicates publications completed during this reporting period, October 1, 2018–March 31, 2019

Core-Funded Products	Publication Date by Reporting Period
Project-Wide (Allocable)	
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Accelerating Progress toward Sindh's FP2020 Goals	SAR 3
Fostering Media Engagement in Family Planning	SAR 3
Cultivating Male Champions for Family Planning	SAR 3
The Impact of Population Growth on Development in Sindh	SAR 3
Saving Lives in Sindh: Achieving Family Planning Goals	SAR 3
Women's Leadership Initiative in Sindh: Stories of Personal Growth	SAR 3
Achievements of the Women's Leadership Initiative in Sindh	SAR 3
A Summary of the Costed Implementation Plan (CIP) on Family Planning for Sindh	SAR 2
Financing the Sindh Costed Implementation Plan (CIP): Strengths and Gaps	SAR 2
Focus on Peace and Prosperity: Invest in Family Planning to Achieve the SDGs and Achieve Peace and Prosperity	SAR 2
Focus on the Planet: Invest in Family Planning to Achieve the SDGs, Avert Natural Disasters, and Ensure Sustainable Growth	SAR 2
Health Policy Plus: Pakistan	SAR 2
Women's Leadership for Achieving Sindh's Family Planning 2020 Commitments: Capacity Development and Action for Collective Outcomes	SAR 2
Focus on the Planet: Invest in Family Planning to Achieve the SDGs and Protect Pakistan's Natural Resources	SAR 1
Focus on People: Invest in Family Planning to Achieve the SDGs and Safeguard Pakistan's People	SAR 1
The Sustainable Development Goals: 17 Reasons to Invest in Family Planning in Pakistan	SAR 1
17 Reasons to Invest in Family Planning in Pakistan: Accelerating Achievement of the Sustainable Development Goals	QR2
Tanzania, The Republic of	
Mainstreaming HIV Services in Tanzanian Health Insurance	SAR 5
Assessment of Policies that Promote or Inhibit Effective Provider–Client HIV Testing Interactions for Adolescents in Tanzania	SAR 5
Mobile Technology and Citizen Engagement: The Sauti Yangu, Afya Yangu Experience	SAR 5

Achieving HIV Testing Goals for Adolescents in Tanzania: A Literature Review of Key Promoting and Inhibiting Factors	SAR 5
Tanzania's Improved Community Health Fund: An Analysis of Scale-Up Plans and Design	SAR 5
Financial Implications of Paying for Maternal and Neonatal Healthcare Services for Vulnerable Populations in Tanzania	SAR 4
Maternal Health Services in Tanzania: Determinants of Use and Related Financial Barriers from 2015-16 Survey Data	SAR 4
Health Policy Plus: Tanzania	SAR 3
Actuarial Study of the Proposed Single National Health Insurance Scheme in Tanzania: A Summary Brief	SAR 3
Analysis of the Government of Tanzania's Budget Allocation to the Health Sector for Fiscal Year 2017/18	SAR 3
Beyond Abuja: A Primer on Approaches for Timely and Targeted Health Budget Advocacy--Building on the Tanzania Experience	SAR 2
Budget Scrutiny: Tanzania SFI ROI (Presentation)	QR4
Tanzania Budget 2016/17: Preliminary Analysis of the Health Allocation (Presentation)	QR4
West Africa	
Investir dans la planification familiale pour accélérer le progrès vers les objectifs de développement durable (ODD) : Focus sur L'afrique de L'ouest	SAR 5
Investing in Family Planning to Accelerate Progress toward the SDGs: Focus on West Africa	SAR 5
Plan D'action National Budgetise en Faveur de L'espacement des Naissances de la Mauritanie 2019–2023	SAR 5
Plan d'Action National Budgétisé de Planification Familiale de la Guinée 2019-2023	SAR 5
Automating Data Collection to Enable Rapid Response to Emerging Disease Outbreaks	SAR 4
Building Capacity to Automate Data Quality Validations	SAR 4
Promoting One Health Approaches through Integrated Data Systems	SAR 4
Rapport de la Revue du plan d'action en faveur de l'espacement des naissances 2014-2018	SAR 4
Planification familiale au Niger : Plan opérationnel 2018	SAR 4
Plan national d'accélération de planification familiale du Burkina Faso 2017-2020	SAR 4
Contribuer à l'atteinte du Dividende Démographique au Burkina Faso (Contributing to the Achievement of the Demographic Dividend in Burkina Faso)	SAR 2
Contribuer à l'atteinte du Dividende Démographique en Côte d'Ivoire (Contributing to the Achievement of the Demographic Dividend in Côte d'Ivoire)	SAR 2
West Africa Health Informatics Team (English and French)	SAR 1
Burkina Faso Family Planning M&E Framework	QR4
Peer-Reviewed Journals	
Stewardship and health systems strengthening: An overview (*Public Administration and Development*)	SAR 5
Special Issue: Stewardship and Development (*Public Administration and Development*)	SAR 5
Government Stewardship and Primary Health Care in Guatemala Since 1996 (*Public Administration and Development*)	SAR 4
Strengthening Family Planning Stewardship with a Total Market Approach: Mali, Uganda, and Kenya Experiences (*Public Administration and Development*)	SAR 4
Effect of Family Planning Interventions on Couple Years of Protection in Malawi (*International Journal of Gynecology & Obstetrics, February 2018*)	SAR 3
A Reporting System to Protect the Human Rights of People Living with HIV and Key Populations (*Health and Human Rights Journal, December 2017*)	SAR 3
Deconstructing gender: Evidence on How Programmes Address Gender Inequalities to Improve Health (*Development in Practice, November 2017*)	SAR 3
A Review of Measures of Women's Empowerment and Related Gender Constructs in Family Planning and Maternal Health Program Evaluations in Low- and Middle-Income Countries (*republished by BMC Pregnancy and Childbirth, November 2017*)	SAR 3

Using a Model to Explore the Demographic Dividend (published by the *International Union for the Scientific Study of Population as part of their quadrennial scientific conference October 2017*)	SAR 3
Can Differentiated Care Models Solve the Crisis in HIV Treatment Financing? Analysis of Prospects for 38 Countries in Sub-Saharan Africa (*Journal of the International AIDS Society, July 2017*)	SAR 2
Changing Hearts and Minds: Results from a Multi-Country Gender and Sexual Diversity Training (*PLoS ONE, September 2017*)	SAR 2
Family Planning in Latin America's Universal Health Coverage Agenda (*Global Health: Science and Practice, September 2017*)	SAR 2
The Cost of Voluntary Medical Male Circumcision in South Africa (*PLoS ONE, October 2016*)	SAR 1
Deconstructing Gender: Evidence on How Programs Address Gender Inequalities to Improve Health (*Development in Practice, December 2016*)	SAR 1
Estimating Client Out-of-Pocket Costs for Accessing Voluntary Medical Male Circumcision in South Africa (*PLoS ONE, October 2016*)	SAR 1
Impact and Cost of Scaling Up Voluntary Medical Male Circumcision for HIV Prevention in the Context of the New 90-90-90 HIV Treatment Targets (*PLoS ONE, October 2016*)	SAR 1
Perceived, Anticipated and Experienced Stigma: Exploring Manifestations and Implications for Young People's Sexual and Reproductive Health and Access to Care in North-Western Tanzania (*Culture, Health and Sexuality, February 2017*)	SAR 1
The Relationship between Health Worker Stigma and Uptake of HIV Counselling and Testing and Utilization of Non-HIV Services: The Experience of Male and Female Sex Workers in Kenya (*AIDS Care, March 2017*)	SAR 1
Age Targeting of Voluntary Medical Male Circumcision Programs Using the Decision Makers' Program Planning Toolkit (DMPPT) 2.0 *(PLoS ONE)**	QR4
Assessing Progress, Impact, and Next Steps in Rolling Out Voluntary Medical Male Circumcision for HIV Prevention in 14 Priority Countries in Eastern and Southern Africa through 2014 *(PLoS ONE)**	QR4
The Cost and Impact of Voluntary Medical Male Circumcision in South Africa: Focusing the Program on Specific Age Groups and Provinces *(PLoS ONE)**	QR4
The Economic and Epidemiological Impact of Focusing Voluntary Medical Male Circumcision for HIV Prevention on Specific Age Groups and Regions in Tanzania *(PLoS ONE)**	QR4
Government Stewardship of the for-Profit Private Health Sector in Afghanistan (*Health Policy and Planning*)	QR4
Modeling Costs and Impacts of Introducing Early Infant Male Circumcision for Long-Term Sustainability of the Voluntary Medical Male Circumcision Program *(PLoS ONE)**	QR4
Modeling the Impact of Uganda's Safe Male Circumcision Program: Implications for Age and Regional Targeting *(PLoS ONE)**	QR4
Voluntary Medical Male Circumcision for HIV Prevention in Malawi: Modeling the Impact and Cost of Focusing the Program by Client Age and Geography *(PLoS ONE)**	QR4
Voluntary Medical Male Circumcision for HIV Prevention in Swaziland: Modeling the Impact of Age Targeting *(PLoS ONE)**	QR4
Global Trends in Family Planning Programs, 1999–2014 (*International Perspectives on Sexual and Reproductive Health*)	QR3
Partnerships for Policy Development: A Case Study from Uganda's Costed Implementation Plan for Family Planning (*Global Health: Science and Practice*)	QR3
Voluntary Medical Male Circumcision for HIV Prevention: New Mathematical Models for Prioritizing Sub-Populations by Age and Geography (*PLoS ONE*) [1]	QR3
The HIV Treatment Gap: Estimates of the Financial Resources Needed versus Available for Scale-up of Antiretroviral Therapy in 97 Countries from 2015 to 2020 (*Journal Article, PLoS Medicine, November 2015*)	QR2

Explanation of Reporting Periods: QR1 = August 28–December 31, 2015; QR2 = January 1, 2016–March 31, 2016; QR3 = April 1, 2016–June 30, 2016; QR4 = July 1, 2016–September 30, 2016; SAR1 = October 1, 2016–March 31, 2017; SAR2 = April 1, 2017–September 30, 2017; SAR3 = October 1, 2017–March 31, 2018

Journal article footnotes:
*Submission of these eight HPP co-authored articles, part of a collection of 17 journal articles, to PLoS ONE by the USAID-funded Project SOAR was reported in the HP+ Third Quarter Report. The articles, published in July 2016, are now publicly available via the PLoS ONE website.
[1] A collection of 17 journal articles, including an editorial summarizing the collection, was submitted to PLoS ONE by the USAID-funded Project SOAR and officially launched by the journal at the International AIDS Conference in July 2016. HPP staff members are co-authors on a number of the manuscripts and many of them draw on work that began under HPP

ANNEX C. HP+ RESULTS

Result Headlines for Period between October 1, 2018 and March 30, 2019

Please note: In alignment with the HP+ Performance Monitoring Plan, some results are reported under more than one indicator. Total results adjusted for multi-indicator reporting equals 206.

1.1.1: INSTANCES OF NATIONAL- AND DECENTRALIZED-LEVEL POLICIES, OPERATIONAL STRATEGIES, AND LEGAL/ REGULATORY FRAMEWORKS DEVELOPED, REVISED, ADOPTED, IMPLEMENTED, MONITORED, AND/OR EVALUATED

Afghanistan

[9050] WRA Afghanistan contributed to the establishment of the Afghan Midwifery and Nursing Council, a regulatory body that will improve quality of care in Afghanistan

Burkina Faso

[9165] HP+ West Africa supported the revision of the Reproductive Health Policies, Standards, and Protocols in Burkina Faso in December 2018.

Cambodia

[9051] HP+ Cambodia, developed a social protection M&E framework and manual, line ministries have been trained on its use, and MEF has drafted a Prakas to support its implementation

[9044] HP+ Cambodia supported the policy process, including drafting key policy points in the Policy Agenda, that resulted in the Prime Minister issuing a Circular supporting the inclusion of PLHIV within HEF and SHI, and advocating for greater funding for CSOs

Guatemala

[9008] In Guatemala, a Model of Health Care and Management was adopted by MSPAS that aims to provide more efficient care to the individual, the family, and the community.

[9006] In January 2019, Guatemala's Ministry of Education approved and implemented regulations for the Competency Certification System, which organizes and operates the certification of labor competencies, productive sector.

[9007] In November 2018, Guatemala's Ministry of Education published regulations to create the National Labor Training System, which manages the legal and operational functions for job training resources.

Jamaica

[9042] In January 2019, HP+ Jamaica sensitized staff of the Bureau of Gender Affairs on the link between HIV and GBV, and the GBV Comprehensive Package for Health Care Workers which includes guidelines, IEC material and referral directory.

[9030] In January 2019, HP+ Jamaica sensitized the Permanent Secretary of the Ministry of Health on the link between HIV and GBV, and the GBV Comprehensive Package for Health Workers, which includes guidelines, IEC materials, and a referral directory.

Kenya-EA

[9179] HP+ Kenya supported the National Malaria Control Program by costing the Kenya Malaria Strategy 2019-2023 and developing the strategy's financial sustainability plan

Kyrgyzstan

[9222] HP+ supported the Kyrgyz Republic Ministry of Health to adopt the MOH National Programme on Social Procurement to guide the funding and implementation of social contracting in the health sector

[9221] HP+ supported the Kyrgyz Republic Ministry of Health to develop and adopt the MOH National Programme on Social Procurement to guide the funding and implementation of social contracting in the health sector

Madagascar

[9031] HP+ Madagascar supported the Family Health Directorate (DSFa) to conduct a Costed Implementation Plan (CIP) execution semi-annual review meeting to monitor the implementation of the CIP in February 2019.

[7966] On December 4th, the application decree to enforce the new RH/FP law in Madagascar, which was drafted with HP+ support to the Department of Family Health (DSFa) of the Ministry of Public Health, was adopted by the Government Council

Malawi

[7960] HP+ provided systematic support to Malawi's MOHP to monitor health sector performance and the implementation of the Health Sector Strategic Plan II (HSSP II) through the Joint Annual Health Sector Review and Report

[9192] HP+ supported the development of a scorecard to monitor implementation of Malawi's Adolescent Girls and Young Women (AGYW) Strategy

[8996] Malawi's Costed Implementation Plan for Family Planning 2016-2020 (CIP) was revised to include an addendum with priority interventions and acceleration districts identified through the application of the FP Goals model with HP+ and Track20 support

[7961] The Malawi Ministry of Health and Population adopted the Monitoring, Evaluation, and Health Information Systems (MEHIS) Strategy 2017-2022 in November 2018

Mali

[9022] On March 2, 2019, HP+ Mali helped the National Network of Key Populations in Mali to finalize their strategic plan with all member associations

[8997] On October 15-16th, 2018, HP+ Mali conducted the Mali Costed Implementation Plan (CIP) for family planning 2014-2018 final review workshop and officially launched the CIP FP 2019-2023 development process

Nepal

[9024] WRA Nepal, an HP+ partner, successfully integrated respectful maternity care in the new Safe Motherhood and Reproductive Health Rights Bill in Nepal

Nigeria

[9098] HP+ assisted FCT leadership in Nigeria to convene key stakeholders to develop and finally adopt operational guidelines for the FCT Health Insurance Scheme.

[9096] HP+ Nigeria assisted the National Primary Health Care Development Agency (NPHCDA) to revise the Rapid Diagnostic Tool to better assess implementation status of the Primary Health Care Under One Roof (PHCUOR) policy

[9099] HP+ Nigeria provided technical assistance for the development of the Standard Treatment Guide (STG) for the Federal Capital Territory (FCT)

[9100] HP+ Nigeria provided technical assistance to the FCT Primary Health Care Board (PHCB) to develop a regulation and operational guideline

[9095] HP+ Nigeria provided technical assistance to the Abia State Primary Health Care Board (PHCB) to develop their Primary Healthcare Regulation- a mandatory legislation requirement under the Primary Health Care Under One Roof (PHCUOR) policy.

[9061] HP+ Nigeria provided technical assistance to the Abia State Social Health Insurance Agency (SSHIA) to develop, review, and validate its operational guidelines.

[9069] HP+ Nigeria supported country-led advocacy efforts that resulted in the signing and passage of the State Social Health Insurance Agency law in Ebonyi state.

[9068] HP+ Nigeria supported country-led advocacy efforts that resulted in the signing and passage of the State Social Health Insurance Agency law in Osun state.

[9092] HP+ Nigeria supported FCT advocacy efforts to push the FCT health insurance bill through a public hearing -- a key step in the legislative process.

[9089] HP+ Nigeria supported FCT advocacy efforts to push the FCT health insurance bill through the second legislative reading on the Senate floor at the National Assembly.

[9091] HP+ Nigeria supported FCT advocacy efforts to push the FCT PHCB through the second legislative reading on the Senate floor at the National Assembly.

[9090] HP+ Nigeria supported FCT advocacy efforts to push the FCT Primary Health Care Board (PHCB) bill through a public hearing -- a key step in the legislative process.

[9062] HP+ Nigeria supported the National Basic Health Care Provision Fund (BHCPF) Secretariat to secure Federal Government of Nigeria (FGON) approval of the BHCPF Operations Manual

[9109] Using Fiscal Space Analysis findings, Nigeria's Federal Capital Territory developed a Resource Mobilization Plan (RMP) to implement its 5-year strategic health development plan (SHDP II).

West Africa

[9158] HP+ West Africa supported the development and validation of Guinea's second CIP for FP in November 2018

[9154] HP+ West Africa supported the revision of the Law N ° 030-2008 / AN 20 May 2008 on the fight against HIV / AIDS and protection of the rights of people living with HIV / AIDS in Burkina Faso in November 2018

1.1.2: INSTANCES OF STRENGTHENED CAPACITY OF GOVERNMENT AGENCIES/INSTITUTIONS TO DEVELOP, IMPLEMENT, MONITOR, AND EVALUATE NATIONAL AND DECENTRALIZED POLICIES, OPERATIONAL STRATEGIES, AND LEGAL AND REGULATORY FRAMEWORKS

Cambodia

[9049] In March 2019, the National Social Protection Council in Cambodia called an inter-ministerial meeting to finalize the strategy for ICT integration for SHI reforms based on options developed by HP+ and a previous workshop to discuss the way forward

1.2.1: INSTANCES OF POLICIES, PLANS, OR PROCEDURES THAT ARE GENDER- RESPONSIVE AND/OR REFLECT PRINCIPLES OF EQUITY AND/OR HUMAN RIGHTS DEVELOPED, REVISED, ADOPTED, IMPLEMENTED, MONITORED, AND/OR EVALUATED (SUBSET OF 1.1.1)

Burkina Faso

[9166] HP+ West Africa supported the revision of the Reproductive Health Policies, Standards, and Protocols in Burkina Faso in December 2018.

Cambodia

[9052] HP+ Cambodia, developed a social protection M&E framework and manual, line ministries have been trained on its use, and MEF has drafted a Prakas to support its implementation.

Jamaica

[9043] In January 2019, HP+ Jamaica sensitized staff of the Bureau of Gender Affairs on the link between HIV and GBV, and the GBV Comprehensive Package for Health Care Workers which includes guidelines, IEC material and referral directory.

[9041] In January 2019, HP+ Jamaica sensitized the Permanent Secretary of the Ministry of Health on the link between HIV and GBV, and the GBV Comprehensive Package for Health Workers, which includes guidelines, IEC materials, and a referral directory.

Madagascar

[9032] HP+ Madagascar supported the Family Health Directorate (DSFa) to conduct a Costed Implementation Plan (CIP) execution semi-annual review meeting to monitor the implementation of the CIP in February 2019.

[7967] On December 4th, the application decree to enforce the new RH/FP law in Madagascar, which was drafted with HP+ support to the Department of Family Health (DSFa) of the Ministry of Public Health, was adopted by the Government Council

Malawi

[9223] HP+ supported the development of a scorecard to monitor implementation of Malawi's Adolescent Girls and Young Women (AGYW) Strategy

[8999] Malawi's Costed Implementation Plan for Family Planning 2016-2020 (CIP) was revised to include an addendum with priority interventions and acceleration districts identified through the application of the FP Goals model with HP+ and Track20 support

[7962] The Malawi Ministry of Health and Population adopted the Monitoring, Evaluation, and Health Information Systems (MEHIS) Strategy 2017-2022 in November 2018

Mali

[9203] On March 2, 2019, HP+ Mali helped the National Network of Key Populations in Mali to finalize their strategic plan with all member associations

[9185] On October 15-16th, 2018, HP+ Mali conducted the Mali Costed Implementation Plan (CIP) for family planning 2014-2018 final review workshop and officially launched the CIP FP 2019-2023 development process

Nepal

[9025] WRA Nepal, an HP+ partner, successfully integrated respectful maternity care in the new Safe Motherhood and Reproductive Health Rights Bill in Nepal

West Africa

[9159] HP+ West Africa supported the development and validation of Guinea's second CIP for FP in November 2018

[9155] HP+ West Africa supported the revision of the Law N ° 030-2008 / AN 20 May 2008 on the fight against HIV / AIDS and protection of the rights of people living with HIV/AIDS in Burkina Faso in November 2018

1.3.1: INSTANCES OF ADVOCACY EFFORTS CONTRIBUTING TO POLICY ACTIONS

Madagascar

[8979] Following HP+ Madagascar advocacy to the Director of Partnership and the Director of the Cabinet during World Contraception Day, the RH/FP application decree was adopted by the Government Council in December 2018.

Malawi

[9071] As a result of WRA Malawi advocacy, the Government of Malawi's Department of Human Resources Management and Development reported that 925 midwives were recruited and 303 midwives were promoted during fiscal year 2018/2019

[9014] Youth participants in the grassroots Youth Friendly Health Services Strategy intervention in Mangochi, Malawi successfully advocated for the local health center to set aside Saturdays for YFHS

Niger

[9182] Following a regional workshop with religious leaders organized by HP+ West Africa in July 2018, the head religious leader of TESSAOUA in Niger set up a system to collect millet to be sold for funds for FP, emergency evacuation, and essential drugs.

Nigeria

[9139] HP+ Nigeria contributed to advocacy efforts that convinced the Osun State Governor to commit government buy-in for the funding and implementation of the State Social Health Insurance Scheme.

[9146] HP+ Nigeria successfully advocated to the Governor and Commissioner for Health of Ebonyi State to establish a Governing Board of the State Health Insurance Agency (SSHIA) and commit $US 2.2 million for the agency to operationalize the PHCB policy

[9138] HP+ Nigeria supported advocacy efforts that led to the inauguration of a Governing Board of Abia State Health Insurance Agency

1.3.2: INSTANCES OF NEW OR STRENGTHENED PARTNERSHIPS AND IMPROVED COLLABORATION FOR THE PURPOSES OF ACHIEVING POLICY ACTION, PARTICULARLY SOUTH-TO-SOUTH, AMONG CSOS, GOVERNMENT AGENCIES, NONGOVERNMENTAL ORGANIZATIONS, AND/OR UNIVERSITY PARTNERS

Nigeria

[9144] HP+ Nigeria provided technical support for the establishment and inauguration of the Basic Healthcare Provision Fund (BHCPF) Steering Committee for the FCT, a multisectoral group responsible for ensuring stewardship of the BHCPF in the state

[9142] HP+ Nigeria provided technical support to Ebonyi State Government to inaugurate the Basic Healthcare Provision Fund (BHCPF) Steering Committee, a multisectoral group responsible for its stewardship at the state level

[9147] HP+ Nigeria strengthened interagency collaboration between National Health Insurance Scheme (NHIS) and National Primary Healthcare Development Agency (NPHCDA) for the implementation of the Basic Healthcare Provision fund (BHCPF)

[9143] HP+ strengthened inter-agency collaboration between the Osun State Ministry of Health, Primary Healthcare board, and State Social Health Insurance Agency in Nigeria towards implementation of health reforms and initiatives in Osun.

West Africa

[9153] HP+ West Africa strengthened the partnership between HP+, the USAID West Africa Regional Health Office, the Amplify FP Project, and the West Africa Health Organization (WAHO)

1.3.3: INSTANCES OF STRENGTHENED CAPACITY OF INDIVIDUALS AND INSTITUTIONS TO DEVELOP AND IMPLEMENT ADVOCACY STRATEGIES FOR POLICY DEVELOPMENT, IMPLEMENTATION, AND MONITORING

Madagascar

[8981] Members of civil society trained in AFP SMART by HP+ Madagascar in December 2018 showed increased capacity to conduct advocacy in health and WASH.

[8980] Members of civil society trained in AFP SMART by HP+ Madagascar in October 2018 showed increased capacity to conduct advocacy for FP and other health areas.

1.4.1: INSTANCES OF MULTISECTORAL STRUCTURES, POLICIES, AND/OR STRATEGIES THAT FACILITATE EXPANSION OF HEALTH SERVICES IN SUPPORT OF BROADER DEVELOPMENT GOALS DEVELOPED, ADOPTED, IMPLEMENTED, MONITORED, AND/OR EVALUATED

Burkina Faso

[9167] HP+ West Africa supported the revision of the Reproductive Health Policies, Standards, and Protocols in Burkina Faso in December 2018.

Cambodia

[9047] HP+ Cambodia supported the policy process, including drafting key policy points in the Policy Agenda, that resulted in the Prime Minister issuing a Circular supporting the inclusion of PLHIV within HEF and SHI, and advocating for greater funding for CSOs

Guatemala

[9187] The Government of Guatemala formed the Technical Table for the Decentralization Process (METROPODES), a collaborative body to generate the necessary guidelines to promote an integrated process to implement decentralization in the country.

Madagascar

[9033] HP+ Madagascar supported the Family Health Directorate (DSFa) to conduct a Costed Implementation Plan (CIP) execution semi-annual review meeting to monitor the implementation of the CIP in February 2019.

[7968] On December 4th, the application decree to enforce the new RH/FP law in Madagascar, which was drafted with HP+ support to the Department of Family Health (DSFa) of the Ministry of Public Health, was adopted by the Government Council

Nigeria

[9217] HP+ Nigeria provided technical support to the Abia State Ministry of Health in the establishment of a multisectoral working group, in support of advocacy and actions toward mobilizing resources for universal health coverage

[9218] HP+ Nigeria provided technical support to the Ebonyi State Ministry of Health in the establishment of a multisectoral working group, in support of advocacy and actions toward mobilizing resources for universal health coverage

[9216] HP+ Nigeria provided technical support to the Osun State Ministry of Health in the establishment of a multisectoral working group, in support of advocacy and actions toward mobilizing resources for universal health coverage

West Africa

[9160] HP+ West Africa supported the development and validation of Guinea's second CIP for FP in November 2018

[9156] HP+ West Africa supported the revision of the Law N ° 030-2008 / AN 20 May 2008 on the fight against HIV / AIDS and protection of the rights of people living with HIV / AIDS in Burkina Faso in November 2018

1A: NUMBER OF WORKSHOPS AND TRAININGS SESSIONS HELD RELATED TO POLICY DEVELOPMENT, IMPLEMENTATION, POLICY ANALYSIS, GENDER EQUALITY AND HUMAN RIGHTS, AND ADVOCACY

Cambodia

[9207] HP+ supported the National Social Protection Council - General Secretariat of Cambodia with a half day introductory training on the M&E framework and indicators on March 26, 2019.

Indonesia

[9199] HP+ organized a capacity development workshop for MNH research groups within the Indonesian Ministry of Health Research Institute Balitbangkes to help prepare their articles for journal publication.

[9197] Indonesian Ministry of Health Research Institute Balitbangkes held an inaugural dissemination symposium in Jakarta with HP+ support to present preliminary research findings from MNH evidence summaries and receive feedback from government policy-maker

Kyrgyzstan

[9220] HP+ conducted training for Ministry of Health of Kyrgyz Republic on social contracting

Madagascar

[7980] HP+ Madagascar conducted a training of civil society partners on AFP SMART in December 2018 to strengthen their capacity to advocate for health and WASH

[7979] HP+ Madagascar conducted a training of civil society partners on AFP SMART to strengthen their capacity to advocate for family planning and MNCH in October 2018

[9037] HP+ provided an orientation to three members of the Madagascar MOPH's Family Health Directorate on the CIP Performance Dashboard.

Malawi

[9072] 19 Youth in Ntchisi, Malawi participated in a youth network training on engaging with district decision-making structures, effective coordination, meaningful youth engagement in policy-making, and holding duty bearers accountable

[9141] 20 Youth in Lilongwe, Malawi participated in a youth network training on engaging with district decision-making structures, effective coordination, meaningful youth engagement in policy-making, and holding duty bearers accountable

[9140] 21 Youth in Dowa, Malawi participated in a youth network training on engaging with district decision-making structures, effective coordination, meaningful youth engagement in policy-making, and holding duty bearers accountable

[7971] HP+ facilitated a workshop for CSOs in Malawi to jointly plan and harmonize their budget advocacy efforts and messages for the coming year to advance integration of FP budgeting and programming within DIPs

[7972] HP+ led a message development workshop with six FBOs in Malawi to draft faith-based messages targeting men and boys for HIV testing, treatment, and retention

[7973] HP+ Malawi trained 28 clinicians from Mzimba district hospital in Malawi to promote breastfeeding and make the hospital baby-friendly

[7974] HP+ Malawi trained 29 clinicians from Nkhata Bay district hospital in Malawi in February 2019 on breast feeding knowledge and skills.

[7977] HP+ Malawi trained 29 clinicians from Rumphi district hospital in Malawi to promote breastfeeding and make the hospital baby-friendly

[8987] HP+ trained 30 community promoters from Mzimba district in Malawi in February 2019 on breast feeding knowledge and skills.

[8988] HP+ trained 30 community promoters from Nkhata Bay district in Malawi in February 2019 on breast feeding knowledge and skills.

[8986] HP+ trained 30 community promoters from Rumphi district in Malawi in February 2019 on breast feeding knowledge and skills.

[8990] HP+ trained 60 support staff from Mzimba district hospital in Malawi in February 2019 on breast feeding knowledge and skills.

[8989] HP+ trained 60 support staff from Nkhata Bay district hospital in Malawi in February 2019 on breast feeding knowledge and skills.

[7978] HP+ trained 60 support staff from Rumphi district hospital in Malawi in February 2019 on breast feeding knowledge and skills.

[9058] In March 2019, HP+ trained 23 Youth Champions in Malawi on policy advocacy to achieve the demographic dividend.

[9210] White Ribbon Alliance for Safe Motherhood Malawi facilitated a workshop with midwives, clinicians and journalists in Dowa to introduce the What Midwives Want strategy and inform an advocacy agenda to recruit and retain more midwives

[9211] White Ribbon Alliance for Safe Motherhood Malawi facilitated a workshop with midwives, clinicians and journalists in Zomba to introduce the What Midwives Want strategy and inform an advocacy agenda to recruit and retain more midwives

[9209] White Ribbon Alliance for Safe Motherhood Malawi provided a chapter strengthening training to strengthen 15 chapter members' skills in Zomba to conduct accountability for advocacy and contribute to advocacy work in their communities

[9208] White Ribbon Alliance for Safe Motherhood Malawi provided a chapter strengthening training to strengthen 18 chapter members' skills in Dowa to conduct accountability for advocacy and contribute to advocacy work in their communities

Mali

[9017] HP+ Mali and the Kaye Regional Secretariat of the National AIDS High Council held a workshop in Kayes between December 12-14, 2018 related to gender equality and human rights for key populations to reduce HIV-related stigma and discrimination

1B: NUMBER OF ADVOCACY EVENTS

Madagascar

[8978] HP+ Madagascar approached the Director of Partnership and the Director of the Cabinet to advocate for speeding up the process within the MOH to sign the RH/FP application decree and convince the Minister to defend the decree at the Government Council

[9040] On March 5th, 2019, during the celebration of the national water week, HP+ Madagascar facilitated a debate on the WASH sector to advocate for investments and the importance of public-private partnerships for WASH

Malawi

[9212] White Ribbon Alliance for Safe Motherhood Malawi presented their advocacy strategy to the DHMT and DEC in Dowa in order to receive approval to conduct activities in the district

[9213] White Ribbon Alliance for Safe Motherhood Malawi presented their advocacy strategy to the DHMT in Zomba in order to receive approval to conduct activities in the district

Mali

[9055] At the 4th National Youth Forum on Reproductive Health in Bamako from December 11-12, 2018, HP+ Mali supported youth ambassadors to use the RAPIDWomen tool to advocate for their reproductive health with decision-makers

[9021] HP+ Mali co-organized an advocacy event with religious and political leaders to support the abandonment of female genital mutilation, circumcision and child marriage on February 20, 2019

[9002] In October 2018, HP+ Mali organized an advocacy event with female leaders to advance political commitment against gender-based violence

[9019] On February 5, 2019, HP+ Mali participated in a panel at a sub-regional round table on "Mobilization for the Eradication of female genital mutilation: Challenges, Lessons Learned, and Perspectives"

[9020] On February 7, 2019, National Network for the Development of Young Girls and Women of Mali (RENADJEF) and HP+ Mali co-organized an inter-generational debate on the fight against female genital mutilation and circumcision

[9018] On January 30-31, 2019, HP+ Mali conducted an advocacy event with local leaders to present results from a financial analysis on CHW to advocate for increased domestic funding for the CHW program in Mali

[9016] On October 16, 2018, HP+ Mali officially launched the Costed Implementation Plan (CIP) 2019-2023 development process with the minister's declaration of the importance of FP for Mali's social and economic development

West Africa

[9162] HP+ conducted advocacy on the role of religion as a strategy against stigma and discrimination during the 4th regional meeting on key populations in Togo in November 2018

[9163] HP+ West Africa led two advocacy sessions during the Ouagadougou Partnership Annual Meeting in Senegal in December 2018

[9169] HP+ West Africa participated in an Interparliamentary committee meeting with ECOWAS, Mauritania, and Chad to advocate for the implementation of the Ouagadougou Declaration for adequate financing of health and development policies in December 2018.

2.1.1: ANNUALIZED VALUE OF DOMESTIC BUDGET ALLOCATIONS INCREASED YEAR- TO-YEAR OR NEWLY FUNDED FOR HEALTH FROM THE PUBLIC SECTOR

Kenya-EA

[9204] HP+ Kenya's 26 focus counties increased budget allocation to health by KShs 9.32 billion (US$ 92.9 million) from the 2017/18 budget to the 2018/19 budget.

Kyrgyzstan

[9219] The Kyrgyz Republic MOH's Republican AIDS Center allocated approximately US $43,000 to social contracting to purchase HIV prevention and other related services from CSOs

Niger

[9181] Following advocacy by HP+ West Africa and a multisectoral committee including the WAHO Network of Champions, the Government of Niger signed a 2019 budgetary reallocation for 200 million FCFA for the purchase of contraceptives in November 2018

Nigeria

[9101] HP+ Nigeria supported the Federal Capital Territory (FCT) Health and Human Services Secretariat (HHSS) to access 100 million Naira to pay its BHCPF counterpart funding as part of the implementation of its Resource Mobilization Plan.

[9145] HP+ Nigeria supported the planning and execution of an advocacy event that resulted in the payment of outstanding capitation fees (770 Million Naira) to health maintenance organizations in the FCT

2.1.2: ANNUALIZED VALUE OF RESOURCES FROM THE PRIVATE SECTOR INCREASED YEAR-TO-YEAR, REDIRECTED, OR NEWLY FUNDED FOR HEALTH.

Côte d'Ivoire

[9178] Following a regional workshop with the private sector organized by HP+ West Africa, IMG, a private enterprise, financed FP services in Cote d'Ivoire in December 2018

2.2.1A: INSTANCES OF STRENGTHENED CAPACITY OF GOVERNMENT LEADERS TO PRIORITIZE AND EXECUTE HEALTH BUDGETS

Guatemala

[9009] In Guatemala, the government approved a regulation for the administration and distribution of the financial resources assigned to the Development Councils with emphasis on health and education.

[9191] The Ministry of Health of Guatemala approved a new typology for sanitary infrastructure projects, which promotes government coordination with citizens to efficiently construct and finance public health services.

2A: NUMBER OF TRAINING SESSIONS AND WORKSHOPS ON HEALTH FINANCE

Indonesia

[9196] Government officials, CSOs, and facility staff working on HIV in Papua, Indonesia attend HP+ workshop on how to use HIV cascade analytics, including costs and impact modelling, for budget advocacy

[9195] HP+ disseminated HIV unit cost results for Jakarta with key stakeholders in Indonesia and strengthened their capacity to understand, analyze, and use cost data for strategic planning and budgeting.

[9201] HP+ Indonesia kicked off the costing of the health portion of the new Midterm Development Plan (2020-2024; RPJMN) by bringing together all relevant government representatives within the Ministry of Health, Ministry of Planning, and others.

[9200] HP+ Indonesia raised awareness, knowledge, and collaboration among key GOI stakeholders around HIV strategic purchasing through a roundtable discussion.

[9198] HP+ strengthened the capacity of CSOs in Indonesia to develop budgets to request funds from local governments for HIV prevention programs through a budget advocacy training.

Jamaica

[9046] In March 2019, HP+ held a workshop with Jamaica CSOs involved in the HIV response to present current developments of major HIV funders and sensitized on social contracting with the Government, issues of sustainability, and resource mobilization.

Kenya-EA

[9176] HP+ Kenya trained a cohort of trainers from Kisumu County's health and finance and planning departments on planning and budgeting in November 2018.

[9175] HP+ Kenya trained a cohort of trainers from Mombasa County's health and finance and planning departments on planning and budgeting in November 2018.

Nigeria
[9128] HP+ Nigeria trained the multisectoral Ebonyi State Health Financing, Equity and Investment Technical Working Group (HFE&I technical working group) on advocacy and health financing.

3.1.1: NUMBER OF HEALTH-RELATED POLICY OR REGULATORY FRAMEWORKS DEVELOPED, ADOPTED, IMPLEMENTED, MONITORED AND/OR EVALUATED THAT PROMOTE ACCOUNTABILITY AND TRANSPARENCY (SUBSET OF 1.1.1)

Afghanistan

[9054] WRA Afghanistan contributed to the establishment of the Afghan Midwifery and Nursing Council, a regulatory body that will improve quality of care in Afghanistan

Burkina Faso

[9168] HP+ West Africa supported the revision of the Reproductive Health Policies, Standards, and Protocols in Burkina Faso in December 2018.

Madagascar

[9034] HP+ Madagascar supported the Family Health Directorate (DSFa) to conduct a Costed Implementation Plan (CIP) execution semi-annual review meeting to monitor the implementation of the CIP in February 2019.

[7969] On December 4th, the application decree to enforce the new RH/FP law in Madagascar, which was drafted with HP+ support to the Department of Family Health (DSFa) of the Ministry of Public Health, was adopted by the Government Council

Malawi

[9225] HP+ supported the development of a scorecard to monitor implementation of Malawi's Adolescent Girls and Young Women (AGYW) Strategy

Mali

[9186] On October 15-16th, 2018, HP+ Mali conducted the Mali Costed Implementation Plan (CIP) for family planning 2014-2018 final review workshop and officially launched the CIP FP 2019-2023 development process

Nigeria

[9214] HP+ Nigeria assisted the National Primary Health Care Development Agency (NPHCDA) to revise the Rapid Diagnostic Tool to better assess implementation status of the Primary Health Care Under One Roof (PHCUOR) policy

[9215] HP+ Nigeria provided technical assistance to the Abia State Primary Health Care Board (PHCB) to develop their Primary Healthcare Regulation- a mandatory legislation requirement under the Primary Health Care Under One Roof (PHCUOR) policy.

West Africa

[9161] HP+ West Africa supported the development and validation of Guinea's second CIP for FP in November 2018

[9157] HP+ West Africa supported the revision of the Law N ° 030-2008 / AN 20 May 2008 on the fight against HIV / AIDS and protection of the rights of people living with HIV / AIDS in Burkina Faso in November 2018

3.2.1: INSTANCES OF HEALTH BUDGET AND/OR SYSTEM MANAGEMENT AND MONITORING TOOLS BEING USED BY COUNTRY STAKEHOLDERS

Guatemala

[9188] The Human Rights Ombudsman (PDH) of Guatemala used tools developed and implemented by civil society networks to oversee the monitoring of educational quality.

Indonesia

[9202] A budget template developed by HP+ for HIV budget advocacy was used by Indonesian CSOs to advocate for funding from local governments for HIV prevention programs worth $200,000

3.3.1: INSTANCES OF CSOS AND NETWORKS ENGAGING IN PARTICIPATORY PROCESSES, INCLUDING PARTICIPATORY MEDIA COVERAGE, TO IMPROVE POLICY IMPLEMENTATION, MONITORING, REFORM, OR FIDUCIARY TRANSPARENCY

Guatemala

[9010] In Guatemala, the network of Young Artists for Social Justice (JAxJS) expanded its involvement at the local level to advocate for the implementation of health, nutrition, and education policies aimed at young people and children.

3.3.2: INSTANCES OF CIVIL SOCIETY ORGANIZATIONS USING BUDGET AND/OR SOCIAL OR GENDER AUDIT TOOLS TO ANALYZE BUDGETS, TRACK EXPENDITURES, OBTAIN CITIZEN INPUT, AND PRESENT KEY POLICY FINDINGS

Tanzania, United Republic of

[7975] Using HP+ training on budget analysis, two CSOs conducted Government of Tanzania budget analyses on allocations to health and budget release and execution performance, producing a policy brief on this topic for FY 2018/19.

3.3.3: INSTANCES OF IMPACTED POPULATION(S) ENGAGED IN POLICY DEVELOPMENT, IMPLEMENTATION, MONITORING, AND/OR EVALUATION, WITH A PARTICULAR FOCUS ON POOR AND OTHER VULNERABLE POPULATIONS, INCLUDING WOMEN AND YOUTH

Guatemala

[9011] In Guatemala, the Ministry of Education certified 361 self-taught people in occupational areas based on the labor competencies certification with the support of the President and Ministers of Economy, Labor and Development.

Malawi

[9013] A youth champion trained in advocacy by HP+ in Malawi initiated joint monitoring and supervision of YFHS in health facilities, and trained youth networks to hold health facilities accountable

Nigeria

[9137] HP+ Nigeria facilitated the involvement of women's groups in the public hearing for FCT Primary Health Care Board and Health Insurance bills

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3A: NUMBER OF WORKSHOPS AND TRAINING EVENTS HELD FOR CIVIL SOCIETY LEADERS THAT PROMOTE ACCOUNTABLE AND TRANSPARENT STEWARDSHIP

Jamaica

[9048] In March 2019, HP+ sensitized CSOs linked to the HIV response and key Government representatives on HP+ Jamaica Social Contracting (SC) activities and identified concerns in developing a SC framework and costing of HIV services by CSOs.

3B: NUMBER OF WORKSHOPS AND TRAINING EVENTS HELD FOR GOVERNMENT OFFICIALS THAT PROMOTE ACCOUNTABLE AND TRANSPARENT STEWARDSHIP

Guatemala

[9189] The officials of the Ministry of Health (MSPAS) of Guatemala directly involved in the development and administration of information systems received training on the use of Tableau for the business area (Business Intelligence).

Nigeria

[9205] HP+ Nigeria facilitated a workshop to train the Osun State Primary Healthcare Board (SPHCB) management team and staff on their roles and responsibilities in PHCUOR/BHCPF implementation including leadership, management and advocacy skills.

[9151] HP+ Nigeria facilitated a workshop for the National Health Insurance Scheme to finalize a Training of Trainers on the Basic Healthcare Provision Fund

[9150] HP+ Nigeria facilitated a workshop for the National Primary Healthcare Development Agency to finalize a Training of Trainers on the Basic Healthcare Provision Fund

[9130] HP+ Nigeria provided technical support to the governing board of Ebonyi State Primary Healthcare Development Agency for the review of Vision, Mission and Goals, clarification on roles and responsibilities towards achieving PHCUOR compliance

[9133] HP+ Nigeria strengthened the capacity of Osun State Health Insurance Agency to develop an informal sector enrollment plan and strategy in Osun

[9132] HP+ Nigeria strengthened the capacity of the governing board of Abia and Ebonyi State Health Insurance Agency to implement their statutory roles

[9152] HP+ Nigeria trained National Health Insurance Scheme and National Primary Healthcare Development Agency staff to translate developed training content into a standardized training manual

[9129] HP+ Nigeria trained the Management Team of the Ebonyi State Primary Healthcare Board (SPHCB) to implement structures that will facilitate the fulfillment of their mandates.

[9131] HP+ Nigeria strengthened the capacity of the Osun State Steering Committee on their roles & responsibilities, including leadership, management, advocacy skills

Tanzania, United Republic of

[9074] In April 2018, 27 health facility staff (6 male/21 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9115] On April 11, 2018, 27 health facility staff (5 male/22 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9116] On April 12, 2018, 29 health facility staff (4 male/25 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9117] On April 13, 2018, 44 health facility staff (20 male/24 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9118] On April 14, 2018, 26 health facility staff (14 male/12 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9119] On April 16, 2018, 30 health facility staff (12 male/28 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9120] On April 17, 2018, 35 health facility staff (7 male/28 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9080] On April 18, 2018, 27 health facility staff (4 male/23 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9087] On April 19, 2018, 34 health facility staff (13 male/21 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9081] On April 19, 2018, 8 health facility staff (6 male/2 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9088] On April 20, 2018, 34 health facility staff (9 male/25 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9082] On April 20, 2018, 9 health facility staff (4 male/5 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9083] On April 21, 2018, 16 health facility staff (6 male/10 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9102] On April 21, 2018, 34 health facility staff (9 male/25 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9104] On April 23, 2018, 45 health facility staff (15 male/30 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9105] On April 23, 2018, 50 health facility staff (20 male/30 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9103] On April 23, 2018, 55 health facility staff (21 male/34 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9084] On April 24, 2018, 16 health facility staff (8 male/8 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9121] On April 26, 2018, 29 health facility staff (9 male/20 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9122] On April 27, 2018, 12 health facility staff (4 male/8 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9107] On April 27, 2018, 31 health facility staff (13 male/18 female) were trained on stigma and discrimination reduction at Turiani (St. Francis Bwagala) District Hospital in Morogoro, Tanzania.

[9108] On April 28, 2018, 48 health facility staff (10 male/38 female) were trained on stigma and discrimination reduction at Turiani (St. Francis Bwagala) District Hospital in Morogoro, Tanzania.

[9123] On April 28, 2018, 5 health facility staff (4 male/1 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9110] On April 30, 2018, 38 health facility staff (10 male/28 female) were trained on stigma and discrimination reduction at Turiani (St. Francis Bwagala) District Hospital in Morogoro, Tanzania.

[9124] On April 30, 2018, 4 health facility staff (2 male/2 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9076] On April 4, 2018, 29 health facility staff (5 male/24 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9077] On April 5, 2018, 34 health facility staff (12 male/22 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9078] On April 6, 2018, 39 health facility staff (12 male/27 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9079] On April 7, 2018, 27 health facility staff (14 male/13 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9075] On March 27, 2018, 29 health facility staff (11 male/18 female) were trained on stigma and discrimination reduction at Kilosa District Hospital in Morogoro, Tanzania.

[9111] On May 1, 2018, 17 health facility staff (10 male/17 female) were trained on stigma and discrimination reduction at Turiani (St. Francis Bwagala) District Hospital in Morogoro, Tanzania.

[9125] On May 1, 2018, 6 health facility staff (2 male/4 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9112] On May 2, 2018, 35 health facility staff (12 male/23 female) were trained on stigma and discrimination reduction at Turiani (St. Francis Bwagala) District Hospital in Morogoro, Tanzania.

[9126] On May 2, 2018, 9 health facility staff (4 male/5 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9127] On May 3, 2018, 11 health facility staff (4 male/7 female) were trained on stigma and discrimination reduction at Turiani (St. Franis Bwagala) District Hospital in Morogoro, Tanzania.

[9113] On May 3, 2018, 48 health facility staff (19 male/29 female) were trained on stigma and discrimination reduction at Turiani (St. Francis Bwagala) District Hospital in Morogoro, Tanzania.

[9114] On May 4, 2018, 35 health facility staff (14 male/21 female) were trained on stigma and discrimination reduction at Turiani (St. Francis Bwagala) District Hospital in Morogoro, Tanzania.

West Africa

[9066] In November 2018, HP+ strengthened the capacity of data managers in Abuja, Nigeria to integrate IDSR data into the DHIS2 platform.

[9073] In November 2018, HP+ strengthened the capacity of data managers in Lagos, Nigeria to integrate IDSR data into the DHIS2 platform.

4.1.1: BEST PRACTICES IN HEALTH POLICY, ADVOCACY, FINANCING, AND GOVERNANCE (INCLUDING THOSE THAT PROMOTE GENDER EQUALITY, EQUITY, AND HUMAN RIGHTS) DOCUMENTED AND/OR DISSEMINATED

Côte d'Ivoire

[9180] HP+ West Africa documented and disseminated the successful practice of private sector engagement following IMG financing family planning in Cote d'Ivoire after a private sector workshop in December 2018

Global

[9026] As a result of advocacy by WRA, an HP+ partner, the Inter-agency working group on reproductive health in crisis integrates Respectful Maternity Care in their updated field manual and prioritizes it in their research agenda

[9063] HP+ developed and disseminated a brief on how investments in FP can boost achievement of the SDGs across Ouagadougou Partnership countries

[8984] HP+ Madagascar and HP+ Mali presented its application of the CIP performance dashboard at ICFP in Kigali, Rwanda in November 2018

[8983] HP+ Madagascar presented at ICFP in Kigali, Rwanda in November 2018 on its approach to adaptive advocacy that led to a new rights-based law being adopted in the country and broadened access to family planning services

Malawi

[8994] HP+ provided technical support to Chancellor College, University of Malawi to finalize the course curriculum on policy models and data utilization that will be offered to fourth-year demography students

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4.2.1: INSTANCES IN WHICH INSTITUTIONS USE DATA AND/OR INFORMATION GENERATED WITH PROJECT ASSISTANCE FOR ADVOCACY OR DECISION MAKING

Cameroon

[9001] The Cameroon MOH uses HP+ supported data to advocate for increased spending on health

Madagascar

[9036] The head of the FP service of the Family Health Directorate at the Madagascar Ministry of Public Health used data from the CIP performance dashboard, developed with HP+ support, to develop the MOPH 2019 workplan

Mali

[9005] HP+ Mali supported youth ambassadors to use data from the HP+ Mali developed RAPIDWomen model at the 4th National Youth Forum on Reproductive Health in Bamako from December 11-12, 2018 to advocate for their reproductive health with decision-makers

Mozambique

[8998] HP+ supported Mozambique' CNCS via a Training Needs Assessment of its provincial and district staff

Tanzania, United Republic of

[9174] In Tanzania, the National AIDS Control Programme revised the national Facilitator's Guide for Training Health Workers on Stigma and Discrimination Reduction, using content drawn from the participatory training guide developed by HP+.

4.2.2: METHODS, TOOLS, APPROACHES, AND CURRICULUMS REFINED, DEVELOPED, APPLIED, AND/OR DISSEMINATED

Africa

[9059] In October and November 2018, HP+ developed and applied new survey tools in Kenya to collect preliminary data on the readiness of local organizations to receive funding directly from USAID.

Ghana

[9027] In December 2018, HP+ supported the set-up of the Performance Monitoring Dashboard for the Ghana FP Costed Implementation Plan.

Global

[9015] HP+ developed and refined the total market approach projection tool, an advocacy tool which estimates the health and economic impact of commercial sector investment in family planning, to enhance the process of setting assumptions with key stakeholders.

Madagascar

[9038] HP+ applied the CIP gap analysis tool and methodology and disseminated results of the 2016-2020 CIP gap analysis application in Madagascar in a presentation to the FP Committee.

[9039] HP+ Madagascar disseminated the public funds flow chart showing the budgeting process starting from government priorities identification to funds available for the MOPH

Mali

[9004] As part of the Costed Implementation Plan development process, HP+ Mali partnered with Track20 to apply the FP Goals model to Mali family planning intervention and objective development in December 2018

[9003] HP+ Mali and the Kayes Regional Secretariat of the National AIDS High Council held a workshop in Kayes between December 12-14, 2018 where the HP+ developed Gender and Sexual Diversity Curriculum was applied

[9023] In March 2019, HP+ Mali developed and finalized the Family Planning Sustainable Development Goal model applied to the Malian context.

Nigeria

[9097] HP+ Nigeria adapted and applied a gender and equity analysis tool in four states (Abia, Osun, Ebonyi and the FCT) in Nigeria to identify gender and equity barriers to Basic Health Care Provision Fund (BHCPF) rollout

[9135] HP+ Nigeria developed and applied a tool to analyze historical revenues and expenditure on health, develop scenarios based on the 5 fiscal space pillars, and model 5-year health revenue projections for the Federal Capital Territory (FCT)

Tanzania, United Republic of

[9029] In December 2018, HP+ supported the development of the CIP Priority Map and Key Performance Indicators for the Tanzania Family Planning Costed Implementation Plan 2019-2023.

[9170] HP+ worked with local partners in Tanzania to adapt and implement a total facility approach to reduce HIV-related stigma and discrimination in health facilities.

[9171] In Tanzania, HP+ adapted a participatory stigma and discrimination-reduction training curriculum for health facility staff, including adding a new focus on youth seeking HIV and other SRH services.

4.3.2: INSTANCES OF LOCAL AND NATIONAL BEST PRACTICES AND LESSONS LEARNED INFORMING GLOBAL INITIATIVES

Guatemala

[9012] A Case Study developed in Guatemala was presented by the ALIANMISAR to a worldwide audience and highlighted the many ways in which intersectoral collaboration fosters action and accountability.

4A: NUMBER OF PEER REVIEWED JOURNAL ARTICLES SUBMITTED AND/OR ACCEPTED

Global

[8992] HP+ publishes a special journal series on Stewardship.

4B: NUMBER OF MAJOR MEETINGS ORGANIZED OR INVITED PAPERS/PRESENTATIONS (HP+ STAFF AND OTHERS)

Global
[9070] HP+ hosted webinars to share results, tools, and lessons learned.

Uganda

[9064] HP+ accepted an invitation to present FP-SDGs model findings for the Ouagadougou Partnership region during two meetings hosted by Partners in Population and Development, Africa Regional Office

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4CI: NUMBER OF PAPERS/POSTERS/ORAL PRESENTATIONS AT PEER-REVIEWED CONFERENCES

Global

[8982] HP+ Madagascar presented an abstract entitled "Adaptive advocacy leads to a new rights-based law in Madagascar that expands access to family planning services and promotes development" at ICFP in Kigali, Rwanda in November 2018

[8993] HP+ results, tools, and models featured at key international events.

[9057] In March 2019, HP+ Mali presented results from their financial analysis of the CHW program at the 5th Annual AfHEA (African Health Economics and Policy Association) Scientific Conference in Accra, Ghana

Madagascar

[9035] HP+ Madagascar presented "The Global Financing Facility Investment Case - a PHC approach contributing to Madagascar's UHC initiative" at the African Health Economics and Policy Association conference in Accra, Ghana in March 2019

4DI: NUMBER OF HP+ MATERIALS DOWNLOADED

Global

[9173] More than 55,000 website downloads of HP+ products demonstrate wide reach of project outputs.

4DII: NUMBER OF SUBSCRIBERS TO HP+ ELECTRONIC COMMUNICATIONS VEHICLES

Global

[9177] Social media and email marketing expands global reach of HP+ body of knowledge and tools.

4EII: NUMBER OF SPIN-OFF TRAININGS CONDUCTED BY PARTICIPANTS THAT ATTENDED HP+ TRAININGS

Kenya-EA

[9106] In February 2019 trainers trained by HP+ Kenya delivered cascade trainings on planning and budgeting, including Program-Based Budgeting, at the sub-county level.