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**EpiC**  
Meeting Targets and  
Maintaining Epidemic Control

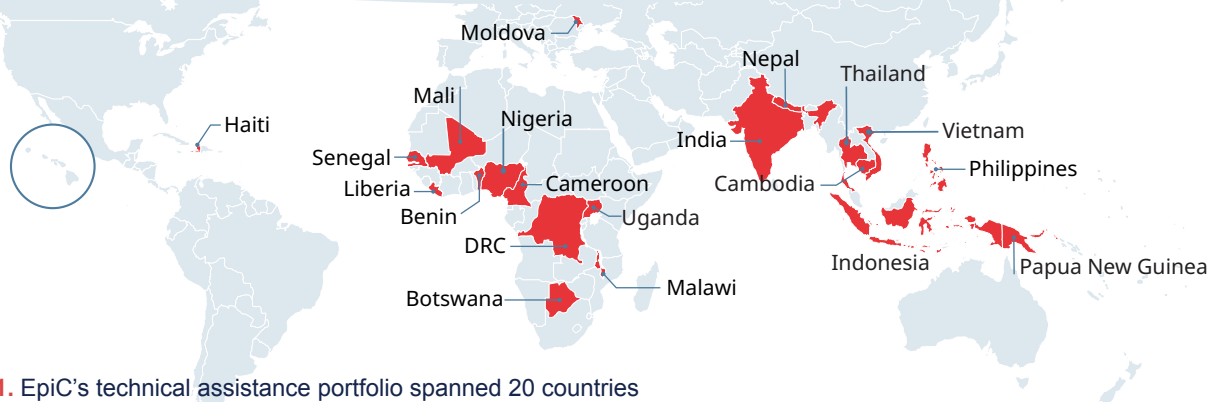
# EpiC and the Global Fund Collaborated to Mitigate the Impact of COVID-19 on Essential Health Services

December 2024

## Overview

As of October 2021, the Global Fund to Fight AIDS, Tuberculosis and Malaria had approved over US\$3.3 billion for 115 countries and 16 multicountry programs through its COVID-19 Response Mechanism (C19RM). The grants were designed to support country responses to COVID-19 through critical tests, treatments, and medical supplies; protect frontline health workers; adapt lifesaving HIV, tuberculosis (TB), and malaria programs; and reinforce fragile health systems. As the largest donor to the Global Fund, the U.S. Government provided additional investments to promote the quality of programming. As part of this effort, USAID worked through partners — including the Meeting Targets and Maintaining Epidemic Control (EpiC) project — to provide comprehensive technical assistance to the Global Fund's principal recipients to roll out C19RM activities and ensure that Global Fund resources effectively contributed to the U.S. COVID-19 Global Response and Recovery Framework to end the pandemic; mitigate its harm to people and societies; and deliver health, humanitarian, and development outcomes to enable a global recovery.

EpiC provided technical assistance to support the work of the Global Fund's principal recipients in 20 countries to fill gaps identified in their country plans. This technical assistance was in support of C19RM grant-funded activities and was approved by principal recipients before plans were finalized.



**Figure 1.** EpiC's technical assistance portfolio spanned 20 countries



The C19RM funds were designed to provide structural support so that health systems did not collapse during the emergency COVID-19 response period. Together with USAID's investment in COVID-19 response, the Global Fund portfolio served to stabilize health systems during the emergency response period. As the world recovered from the pandemic, the C19RM portfolio evolved to focus on strengthening health systems, pandemic preparedness, and the recovery of other health programs.

EpiC provided technical assistance in the areas of public finance management, program planning, medical oxygen ecosystem strengthening, supply chain strengthening, COVID-19 prevention and vaccination, human resource management, and laboratory diagnostics and mitigated the impact of the pandemic on Global Fund-supported HIV, TB, and malaria programs. Technical assistance was provided at the national, subnational, and facility levels. This brief summarizes key achievements from the Global Fund and USAID's investments during the emergency response and recovery periods.

## Benin

Technical assistance from EpiC helped bolster Benin's response to COVID-19 by strengthening the country's laboratory and diagnostic networks. This support included helping the Ministry of Health (MOH) to develop a framework and guiding documents to establish a national laboratory network; set up a database of equipment for medical imaging services; and develop communication and contingency plans and resource mobilization plans to reduce the impact of future epidemics on HIV, TB, and malaria programs.

Technical assistance from EpiC also helped stabilize Benin's health systems during the pandemic by strengthening the HIV, hepatitis, and TB screening system. Key achievements included setting up pilot sites for community distribution of antiretroviral (ARV) drugs, building the capacity of 30 national trainers in HIV and TB screening strategies, and training 400 health workers to enter data into the national AlafiaComm community health data management platform for TB co-infection screening. EpiC also strengthened the capacity of the National Tuberculosis Control Program in the search, identification, and preventive treatment of children in close contact with TB patients. Additionally, EpiC developed national guidelines for respiratory infection prevention and control among health workers, as well as psychosocial support for TB patients.

## Botswana



With funding from USAID, EpiC supported the MOH — the principal Global Fund recipient — to maintain essential health services and strengthen the community response during the COVID-19 pandemic. EpiC supported the MOH to implement activities designed to reduce the impact of the COVID-19 pandemic on health programs and bolster community response and pandemic preparedness. To optimize the Global Fund's C19RM investment in Botswana, EpiC supported the MOH in rethinking and adapting Global Fund resources to meet their dynamic needs during the COVID-19 pandemic.

The funds were used to mitigate the impact of COVID-19 on HIV and TB programs, with an emphasis on health system strengthening. EpiC Botswana provided technical and operational assistance to the Botswana MOH and National AIDS and Health Promotion Agency (NAHPA) to promote adherence to technical



standards and guidelines for COVID-19 program implementation. At the district level, EpiC trained testers on HIV testing and counselling services as well as on the recommended changes to the Botswana National HIV Testing Services Guidelines of 2016, with the goal of closing testing gaps. EpiC also trained TB treatment supporters and volunteers on TB treatment monitoring for clients receiving multimonth dispensing of medication and conducted support group sessions for men who have sex with men on the prevention and treatment of COVID-19, TB, and HIV. The project designed and deployed a social media tool for self-assessment with links to care services based on the signs and symptoms of TB and COVID-19.



The HIV and TB programs included differentiated HIV testing and the training of TB treatment supporters. Despite the pandemic, HIV and TB services continued without interruption, and community TB testing services remained accessible. Training modules also addressed issues such as gender-based violence.

EpiC started supporting the MOH to implement Global Fund projects in February 2023. Plans are in place to hand over these activities funded by the Global Fund to the MOH, although continued support from EpiC has been requested for the next Global Fund Grant Cycle (GC7) due to significant implementation progress and an impressive absorption rate. EpiC Botswana has successfully supported the MOH to complete Global Fund projects and has built and maintained strong relationships with the MOH and other implementing partners — including subrecipients of the Global Fund.

## Cambodia



With support from the Global Fund, EpiC Cambodia implemented COVID-19 vaccination campaigns for people living with HIV (PLHIV). In addition, EpiC increased Cambodia's HIV/AIDS programming capacity, including access to lifesaving antiretroviral therapy (ART), HIV and sexually transmitted infection (STI) testing, and prevention services; and designed social and behavior change communication (SBCC) materials to raise awareness for pre-exposure prophylaxis (PrEP), HIV self-testing (HIVST), and COVID-19.

To maintain access to ART services during the COVID-19 pandemic, EpiC supported Cambodia's National Center for HIV/AIDS, Dermatology, and STDs (NCHADS) in reviewing its previously used motivational counseling training curriculum and developing a new one. EpiC led a three-day training of trainers workshop for 27 health care providers and community-based organizations: NCHADS, Catholic Relief Services, Khmer HIV/AIDS NGO Alliance (KHANA), Men's Health Cambodia (MHC), Men's Health Social Service, Cambodia Women for Peace and Development (CWPD), AIDS Healthcare Foundation (AHF), Friends International, Mith Samlanh, and Korsang.

EpiC Cambodia provided technical support to NCHADS to maintain and increase access to HIV testing modalities and prevention services. Technical assistance was provided to NCHADS to review and update its peer-driven intervention (PDI)+ implementation guidelines in English and Khmer and to conduct a two-day training workshop on HIVST for 36 new outreach and field workers to bolster capacity.



*NCHADS trained 62 outreach workers and online counselors*

NCHADS also trained 62 outreach workers and online counselors from CWPD, MHC, and AHF on using the online reservation application (ORA) to link hard-to-reach key populations with access to HIV services. With EpiC Cambodia's support, NCHADS organized an annual review of ORA implementation

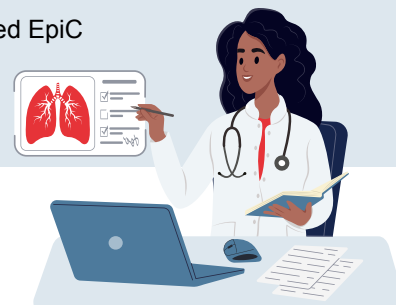
in Kampong Cham and Kampong Speu provinces, which included 49 participants across 18 sites; conducted on-site training at four new PrEP sites at ART facilities and community-based organizations in Pursat, Tbong Khmum, Kampong Thom, and Phnom Penh; and hosted network meetings between providers and outreach workers on PrEP.



EpiC Cambodia's technical assistance supported NCHADS's data collection on the reasons why men who have sex with men and transgender people stopped using PrEP and conducted an acceptability and feasibility assessment of implementing long-acting injectable cabotegravir (CAB-LA) as PrEP. EpiC provided technical support to NCHADS's Data Management Unit and KHANA to conduct skills building on prevention for 115 individuals across health care facilities and 232 outreach workers and field staff from 10 provinces.

EpiC implemented SBCC activities to increase awareness of PrEP, HIVST, and COVID-19 through posters, shirts, promotional events, and educational videos. EpiC Cambodia designed, printed, and distributed 432 posters on COVID-19 vaccination for PLHIV across 72 ART sites nationwide. Technical assistance also supported community-based organization efforts to promote pop-up testing and promotional events and NCHADS's production of six educational videos about motivational counseling for health care providers.

The government of Cambodia in partnership with the PEPFAR- and USAID-funded EpiC project has since assumed these activities as part of the national HIV response.



## Cameroon



In Cameroon, USAID funds were instrumental in supporting COVID-19 programming by enhancing health care capacity for oxygen therapy and combating misinformation through social and behavior change communication. These funds also helped to mitigate the impact of COVID-19 on HIV, TB, and malaria programs by supporting the implementation of COVID-19 control measures in health facilities, thereby maintaining attendance for these services.

USAID funds improved outbreak readiness by strengthening health system surveillance and response capacities, particularly in terms of risk communication. EpiC also achieved significant milestones, such as revising risk communication plans, training health care staff and community leaders, and developing regulatory frameworks for oxygen therapy. These activities in Cameroon were implemented in close collaboration with the MOH. EpiC handed over all risk communication plans, training materials, and regulatory frameworks to the respective entities at the MOH.

## Democratic Republic of Congo (DRC)



USAID funding was used to help stabilize the DRC's health systems by supporting COVID-19 programming during the pandemic response and recovery periods. EpiC DRC assisted with the development and implementation of new technologies that strengthened the supply chain system, addressing delays in customs clearance for COVID-19 commodities and health care products and ensuring an easier distribution process, which facilitated a quicker recovery post-pandemic. Notably, EpiC bolstered the capacity of the laboratory system by supporting the MOH's Department of Health Laboratory (DLS) to develop and disseminate the Guidelines for Good Execution of Laboratory Analysis (GBEA) and the draft guide for the proper management of biological waste generated by laboratories. Furthermore, the project provided technical and financial support to the Oxygen Technical Working group, which coordinates investments in medical oxygen production and distribution, to ensure resources were available during the pandemic and recovery periods.

Technical assistance also enhanced the MOH's leadership in C19RM activities and strengthened coordination and oversight with integral stakeholders for effective implementation of HIV, TB, malaria, and COVID-19 response activities.

The C19RM reinvestment process in May 2022 focused on Human Resource for Health (HRH) capacity building but did not address fundamental issues such as workforce size, composition, skills, geographical distribution, and performance management. EpiC DRC addressed these gaps by enhancing HRH management in the country. Activities included updating the health worker database, implementing Integrated Human Resources (iHRIS) software, and deploying digital attendance monitoring systems. The initiative included governance improvements and created a replicable model for other provinces. It generated critical HRH data to support government efforts.

By supporting these key COVID-19 initiatives, EpiC alleviated the burden of COVID-19 on the DRC's HIV, TB, and malaria programs. For instance, EpiC DRC provided updated guidelines for health workers to continue service delivery for patients with HIV, malaria, or TB during the pandemic. Technical assistance also supported the development of an integrated country performance framework to track COVID-19 activities and their specific impacts on the HIV epidemic and to monitor HIV, TB, and malaria response activities. EpiC DRC then conducted field monitoring and oversight visits to better understand implementation progress and identify areas for further improvement across the three diseases.



Through ongoing collaboration and partnership with the DRC MOH and other local stakeholders, EpiC DRC prepared a robust transition plan to continue the activities supported by the Global Fund. For instance, EpiC co-developed frameworks such as a Country Coordinating Mechanism (CCM) website for increased communication and synergy. As part of capacity building, EpiC hosted training sessions for government staff and health workers on the implementation of iHRIS; increased the MOH's participation in oversight and implementation activities; and provided ongoing technical assistance to other government entities, including the Financial Management and Support Unit (CAGF) and the Strategic Monitoring Committee (CSS), to improve procedures for fund disbursement, data collection, and overall program management. Equally important, EpiC DRC also engaged local stakeholders by collaborating with the Provincial Health Division and health zones to fully integrate them into the management and oversight of the health and supply chain systems.

## Haiti

In Haiti, EpiC coordinated with the Global Fund principal recipient — the United Nations Development Programme (UNDP) — to improve access to medical oxygen in the Nord, Nord-Ouest, and Nord-Est departments by supporting the production and transportation of medical oxygen to facilities. EpiC provided technical support, including the maintenance and repair of six oxygen-generating plants located at hospitals in the northern region and the training of technicians to operate the plants, as well as financial support upon request for the transportation of oxygen from the production site to facilities. EpiC also created and distributed standard operating procedures to ensure effective and safe handling of the oxygen-generating plants.

EpiC organized two workshops in 2024 with representatives of health care facilities to design an oxygen distribution network in the northern region of Haiti. Such a network will allow oxygen produced locally at hospitals to be distributed via local transporters to other facilities that lack their own oxygen-generating plants.

A transition plan was prepared to hand over these USAID-supported activities to the MOH, local health departments, and health facilities. As part of this transition plan, EpiC is designing a site-management model and business plan to be implemented at two oxygen-generating sites. The main objective of this approach is to help these sites generate additional revenue from oxygen production to support continued facility management and operations after the project ends. EpiC is also transferring capacity and skills to MOH biomedical technicians and hospital operators to enable them to perform maintenance and repairs on the oxygen generators after the project closes.





# India

In India, EpiC primarily supported the safeguarding of HIV services and programs from disruptions caused by the COVID-19 pandemic through a nationwide cluster-based Strategic Expertise Support Unit (SETU). From October 2022 until September 2023, EpiC supported 281 technical and program experts at the national level and across 10 SETU clusters in providing technical assistance to the National AIDS Control Organization (NACO) and 20 State AIDS Control Societies (SACs) across India for the implementation of India's National AIDS Control Program (NACP) Phase-V priorities. Through SETU, EpiC strengthened India's HIV programming capacity, helping to sustain HIV epidemic control and address comorbidities, including TB and COVID-19 among key populations and PLHIV. Specifically, EpiC's technical assistance through SETU included service delivery for key populations and PLHIV to continue uninterrupted supply and access to essential HIV prevention and treatment services during the pandemic and post-pandemic recovery periods. EpiC also supported the SACS efforts to organize integrated health camps and facilitate complimentary training and workshops to strengthen NACP's outreach activities that promoted index testing and virtual intervention.

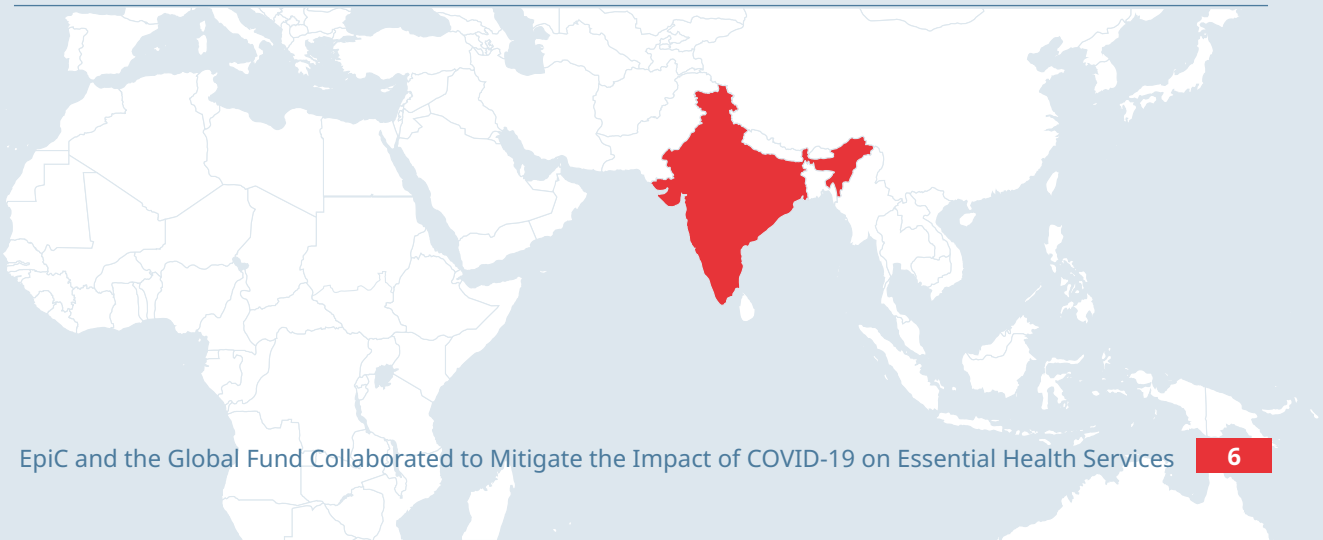
Through SETU, funded by the Global Fund, EpiC India successfully facilitated two rounds of Project Monitoring Committee (PMC) meetings with 1,740 representatives across the SACs, NACO, and nongovernmental organizations (NGOs) to review HIV programs and refine areas of technical assistance.



*EpiC India supported SACS community champion training for 225 key populations and PLHIV across nine states*

Assisting SACs with their organization and facilitation of NACO's integrated STI, HIV, TB, and hepatitis C campaigns, SETU coordinated with health care facilities, prepared reports, and conducted data analysis in 20 states across India. Through SETU, EpiC India also supported NACO's 360-degree performance review of 20 SACs and assisted them in strengthening the first pillar of the UN's 95-95-95 target goals for ending the HIV epidemic—that 95 percent of PLHIV know their status. To strengthen capacity and empower local communities, EpiC India supported SACS community champion training for 225 key populations and PLHIV across nine states; facilitated national capacity-building training on HIV prevention, upskilling more than 100 staff; trained 40 SETU team members across eight states on HIV prevention; and hosted Harm Reduction and Drug Use hybrid training for 91 staff members of the SACS-funded NGOs, implementing targeted intervention for HIV prevention among key populations.

After eleven months of SETU's robust and integral HIV safeguarding, EpiC India facilitated the SETU handover to NACO in November 2023. As part of this process, EpiC India coordinated a multistakeholder meeting with NACO, senior officials from the Program Monitoring and Response (PMR) Division and Prevention Divisions of NACO, and the USAID India Health team. During this meeting, EpiC India delivered SETU's project documentation, which included various meeting notes, presentation slides, operational guidelines, endline assessment findings, and end-of-project reports.





# Indonesia

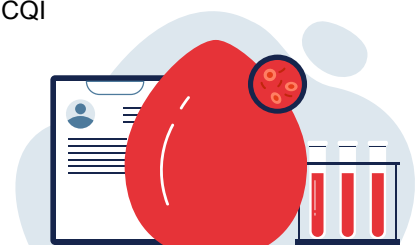


In Indonesia, EpiC provided technical assistance to strengthen the country's health systems during the COVID-19 pandemic by focusing on improving HIV data management, expanding service delivery options, and enhancing treatment continuity. A key accomplishment was the development and implementation of an Excel-based data migration tool that enabled 162 facilities across Jakarta, Banten, and West Java provinces to successfully transition to the new national HIV patient record system (SIHA 2.1). EpiC further supported 137 USAID-supported and 25 Global Fund-supported facilities in verifying and reporting HIV testing and treatment data, ensuring data quality and completeness during the transition.

To maintain essential HIV services during the pandemic, EpiC introduced several service delivery innovations. The project established facility-based HIVST within index testing services across 15 health care facilities in Jakarta and supported Bekasi City Hospital in providing home-based ARV services to 880 PLHIV. EpiC also facilitated the introduction of West Java's Global Fund Jak-Anter, a home-based ARV delivery initiative. Additionally, the project developed multimonth dispensing (MMD) technical guidance and continuous quality improvement (CQI) resources on tenofovir, lamivudine, and dolutegravir (TLD).

EpiC placed significant emphasis on HIV treatment continuity, collaborating with Global Fund subrecipients to train 135 tracing personnel in Jakarta and Greater Jakarta. Through the "Lost and Link" initiative, the project successfully reengaged 378 PLHIV whose treatment was interrupted. EpiC conducted comprehensive ART retention analyses across 137 facilities and supported a national retention consultation meeting that engaged 300 participants from 253 facilities across 34 provinces, strengthening the national HIV treatment cascade.

These interventions not only helped maintain essential HIV services during the pandemic but also contributed to the strengthening of sustainable health systems. The MOH has since integrated many of these tools and approaches into the national HIV response, including the endorsed TLD CQI guide, MMD technical guidance, and SIHA 2.1 implementation, ensuring their long-term sustainability and impact.



# Liberia



HIV services were severely hampered during the height of the COVID-19 pandemic in Liberia, threatening gains in treatment access, continuity, and viral suppression. Even though the national program, with EpiC facilitation, immediately fast-tracked 36 MMD initiatives to minimize clinic contact, as well as adolescent ART clinics for the unique needs of adolescents in high-volume facilities and the optimization of the pediatric regimen with dolutegravir, the care of clients at risk of advanced disease was still an imminent challenge. To strengthen the health system to be more responsive to the fast-evolving effect of COVID-19 on the care of PLHIV, EpiC led the revision of treatment guidelines to standardize the standard operating procedures on differentiated service delivery (DSD) and MMD, with the provision of a desktop job aid. EpiC led the revision of the treatment guidelines by providing technical assistance in collaboration with stakeholders of the National AIDS Control Program.

Through the development of the guidelines and follow-up training for higher cadres of health workers, DSD and MMD coverage was enhanced. Through the leveraging of better access and client-centered care, the management of HIV-associated comorbidities was improved, leading to an overall better quality of life for PLHIV on treatment. The national viral suppression increased from below 70 percent to over 80 percent by December 2024.



The C19RM funds were designed to stabilize the health system during the pandemic with minimal disruptions to HIV testing and treatment services. Access to HIV testing services was sustained through outreach measures outlined in the treatment and DSD guidelines. Treatment linkage and continuity were also sustained with minimal disruptions. Most importantly, the rollout of ART services to the community with client-led support for routine viral load testing opened new horizons for potentially sustainable approaches for community engagement in the response.

EpiC's activities in Liberia informed the government-led discussions during the Global Fund Grant Cycle-7 negotiations. A national road map and work plan were developed to scale up the successful use of DSD and MMD across the country.

The training of 130 medical doctors across all 15 counties of Liberia has helped the NACP to ensure that all high-volume clinics in every county have a medically qualified and HIV-trained supervisor to support the management of clients with or at risk of developing advanced HIV progression. In addition, all peripheral clinics, including private and faith-based organizations offering HIV treatment services, without a medically qualified ART clinician have been linked to a neighboring referral facility with capacity to provide this service. These trained medical doctors are now available to support the NACP, as it clusters the country into regional hubs for referrals for advanced HIV disease management. The regional hubs are anticipated to be implemented using host government resources in collaboration with the Global Fund's principal recipient in Liberia, Plan International.


## Malawi

With funding from USAID, EpiC helped the Malawi MOH to assess needs and mitigate COVID-19 transmission, morbidity, and mortality. As part of its capacity-building strategy, EpiC Malawi hired a consultant who assisted the MOH in developing and finalizing a procurement manual in September 2023. The manual addresses areas of conflict between the MOH's procurement regulations and C19RM grant agreements. Utilizing the manual as a framework, EpiC hired an engineering firm, InfraWorks Development Limited (IDEV), to provide project management services for various infrastructure development projects under the Global Fund's C19RM grant and quality assurance services for other projects such as renovated laboratories and isolation wards, which are managed by other agencies. By contracting a consultant and engineering firm to work with the MOH and other stakeholders, EpiC Malawi fostered better coordination, planning, and monitoring at the country level.



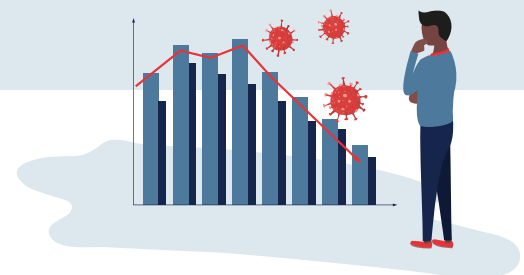
EpiC also provided technical assistance to support community interventions with the intent of scaling up surveillance and case investigation activities. Specifically, EpiC supported the National TB and Leprosy Eradication Program (NTLEP) through TB Local Organization Networks (LONS) to scale up COVID-19/TB bidirectional screening and surveillance. This included tracking and case investigation by strengthening the capacity of existing networks of health workers to screen and facilitate referral for COVID-19 testing and vaccination. EpiC Malawi also sub-granted Development Aid from People to People (DAPP) in Machinga, Mangochi, and Mulanje and Partners in Hope (PIH) in Lilongwe, Chikwawa, and Nsanje to implement COVID-19 and TB bidirectional screening, leading to significant achievements. Notably, DAPP and PIH trained a total of 1,221 health care workers, which included facility staff; community health workers; Find cases Actively, Separate safely and Treat effectively (FAST) promoters; volunteers; and support staff. With EpiC support, DAPP increased its risk communication and community engagement, reaching 272,769 people across townships in Malawi's southern region: Mangochi, Machinga, and Mulanje.





Additionally, EpiC Malawi's technical assistance strengthened Malawi's COVID-19 diagnostic systems. EpiC provided support to the MOH National Public Health Reference Laboratory (NPHRL) to strengthen laboratory capacity through laboratory quality management system (LQMS) training. In November 2022, the Public Health Institute of Malawi (PHIM) reported that over 90 percent of new staff at the NPHRL had not completed LQMS training. In response, EpiC Malawi supported a 10-day LQMS training event in March and June 2023 for 31 NPHRL staff members across laboratory specialties, which included HIV, TB–leprosy, biochemistry, nutrition, influenza, microbiology, genomics, and parasitology.

## Mali



With an increasingly volatile security situation and economic degrowth rendering Mali vulnerable to additional external shocks, EpiC supported stakeholders of Mali's CCM in their coordinated response to mitigate the effects of the COVID-19 pandemic on HIV, TB, and malaria. EpiC Mali supported policy, planning, and coordination; human resources for health, monitoring, evaluation, and learning; and the health information system, all of which helped to stabilize the health system during the pandemic recovery period.

As part of this support, EpiC aided CCM Mali in strengthening collaboration and coordination of assistance from key donors, including bilateral assistance investments from the U.S. Government and Global Fund grants. With increased synergy between integral stakeholders, CCM maximized health impacts, mitigating the burden of COVID-19 on Mali's health systems. EpiC Mali also supported CCM in its interactions with local stakeholders. Through USAID funding, CCM Mali trained 34 people across civil society, including key populations and communities, the private sector, and local NGOs, building their capacity in understanding Global Fund guidelines and approaches. EpiC also helped CCM Mali to host meetings with the public sector and civil society organizations, simultaneously raising the awareness of their respective responsibilities regarding their commitment to various CCM initiatives and increasing their collaboration. With EpiC's financial and technical support, CCM Mali hosted CCM secretariat-led technical meetings and workshops, which allowed civil society representatives to provide feedback on decisions and recommendations to the CCM board. In turn, civil society representatives from CCM Mali shared decisions and recommendations from CCM Mali board meetings and technical activities with their local and regional constituents, thus creating successful trickle-down communication.

Bolstering human resources for health, EpiC Mali assisted the CCM with training and hiring mechanisms. With EpiC support, CCM Mali trained 31 CCM members, including 17 new members on the values, principles, and guidelines of the Global Fund and the CCM. As such, EpiC Mali helped to promote the sustainability of CCM mandates. EpiC also partnered with CCM Mali to hire a national consultant who created a map of governance platforms within the health sector and developed a strategic positioning plan for the CCM.

EpiC's technical assistance in Mali strengthened CCM Mali's monitoring, evaluation, learning, and health information system. EpiC Mali supported the CCM in organizing a retreat for the Strategic Monitoring Commission members. During the retreat, members revitalized and reviewed the strategic monitoring plan, improving the committee's overall functioning. Additionally, EpiC provided technical assistance to CCM to train 28 members of the Strategic, Monitoring, and Evaluation committee, reorienting members on the Global Fund guidelines, monitoring tools, and the monitoring and evaluation plan for the upcoming 2024–2026 fiscal year. Lastly, EpiC Mali assisted CCM with its site visits in the Kayes and Koulikoro regions, Western Mali, and in Bamako, the capital region. Through these site visits, EpiC Mali contributed to improving the performance of Global Fund grants in all three regions.

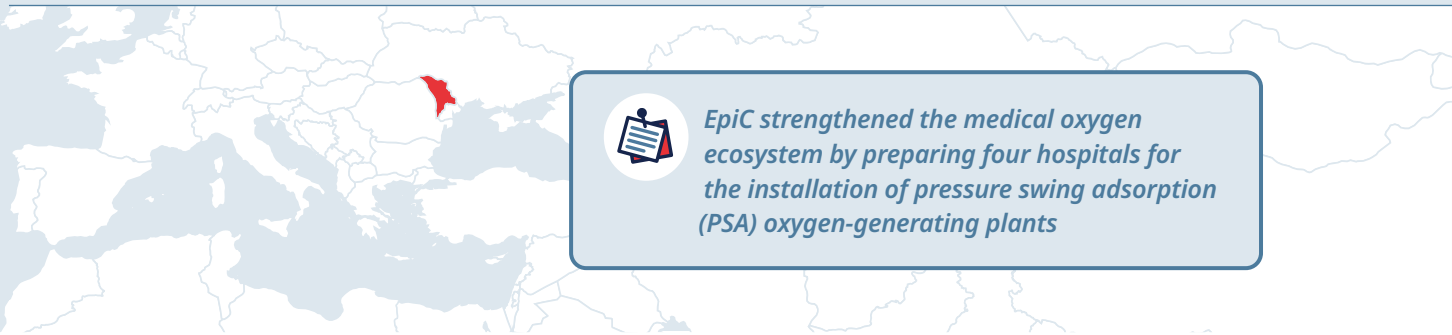


# Moldova

In Moldova, EpiC strengthened the medical oxygen ecosystem by preparing four hospitals for the installation of pressure swing adsorption (PSA) oxygen-generating plants. USAID funded EpiC to complement the Global Fund's investment in these plants at the four supported hospitals. EpiC prepared sites at these hospitals, which included the installation of plinths, fencing, roofs, and the manifold system; piping to connect the PSA oxygen-generating plants to existing medical gas piping systems in the hospitals; and electrical upgrades to connect the plants to the hospital electrical grid. At the Clinical Hospital of the MOH in Chisinau, EpiC also installed 16 new oxygen outlets at patient beds.



To prepare each site, EpiC worked in collaboration with the Global Funds' principal recipient and procurement partner. The Global Fund-procured PSA oxygen-generating plants have been successfully installed and commissioned, resulting in readily available oxygen to support any future spikes in demand, with 180 total bedside oxygen outlets installed across the four hospitals. In addition, the hospitals will be able to reduce the amount of funds spent on cylinder procurement and refills as they will now be able to produce oxygen on site and fill cylinders.



*EpiC strengthened the medical oxygen ecosystem by preparing four hospitals for the installation of pressure swing adsorption (PSA) oxygen-generating plants*

# Nepal



EpiC provided human resource support to the Ministry of Health and Population (MOHP) in Nepal to support all Global Fund-related tasks that the MOHP is undertaking. The MOHP established a project management unit (PMU) for the Global Fund program, and the unit is staffed through funding from USAID. The MOHP provides overall leadership and guidance for the C19RM project, although the activities are primarily implemented by the Global

Fund's principal recipient, Save the Children International. With the Global Fund's support, the MOHP was able to establish and staff its PMU to oversee all Global Fund-supported HIV, TB, and malaria programs. EpiC's support to the PMU at the MOHP for human resources strengthened the MOHP's capacity to implement and monitor pandemic recovery activities along with the overall AIDS, TB, and malaria program.





# Nigeria

In Nigeria, USAID funding was used to complement the Global Fund C19RM grant to enhance the country's COVID-19 response. EpiC provided technical support to the principal recipient of the Global Fund C19RM grant — the National Agency for the Control of AIDS (NACA) and its subrecipients — as well as the CCM to strengthen grant implementation and coordination across three priority areas: operational, management support, and capacity building; the oxygen ecosystem; and supply chain and logistics management.



The technical assistance addressed staffing gaps among the principal recipients, enhanced staff capacity, strengthened accountability, fostered collaboration, enabled data-driven decision-making, and built sustainable systems, ensuring efficient grant execution and a scalable health response aligned with donor expectations. Through targeted interventions and the embedding of staff within NACA, the Nigeria Centre for Disease Control and Prevention (NCDC), and the CCM, significant operational improvements were achieved, which strengthened payment processes, grant management, and project monitoring. Tools were deployed to streamline processes, address delays, and improve both electronic and manual filing systems. Hands-on support and mentoring helped clear payment backlogs, as logistics and financial issues no longer hindered project implementation. Capacity development efforts equipped civil society organizations (CSOs) to effectively plan, execute, and document activities, supported by newly developed communication strategies for CSOs and the CCM. CCM knowledge management was enhanced through the inauguration of a communication task team and the revitalization of communication channels. At the NCDC, procurement systems were reviewed, aligned with global standards, and strengthened to address identified gaps. These accomplishments, achieved by leveraging embedded technical assistance, position these institutions to deliver future programs more efficiently and with greater impact.



*Capacity development efforts equipped civil society organizations (CSOs) to effectively plan, execute, and document activities, supported by newly developed communication strategies for CSOs and the CCM.*

EpiC significantly contributed to strengthening Nigeria's medical oxygen ecosystem through the review, finalization, and launch of the National Oxygen Strategy (2023–2027) in collaboration

with the Federal Ministry of Health and Social Welfare (FMOH) and the national oxygen technical working group (United for Oxygen) and the development of a harmonized national training curriculum and rollout plan for hypoxemia management and medical oxygen use. As part of efforts for the sustainability of Global Fund oxygen investments, EpiC supported the development of a distribution plan for oxygen equipment and collaborated with the FMOH to develop a memo for the sustainability of oxygen investments, approved at the 64th National Council on Health (NCH), to allow hospitals to set up dedicated accounts to manage oxygen-related investments.

Additionally, EpiC assisted NACA in developing a standard operating procedure (SOP) for inventory and asset management, reviewed and updated 17 of NCDC's warehousing SOPs, and supported the development of logistics management information system (LMIS) tools for COVID-19 bidirectional testing. Technical assistance also included the creation of a digital inventory tool to enhance state-level reporting and data utilization across 36 states and the federal capital territory, strengthening supply chain management and ensuring sustainable health interventions. These efforts addressed systemic gaps, improved operational efficiency, and fortified institutional capacity for long-term health system resilience.





# Papua New Guinea (PNG)

In Papua New Guinea, EpiC primarily supported two major activities: implementation of a diagnostic network optimization (DNO) study and strengthening of COVID-19 surveillance systems.



EpiC implemented a large-scale DNO study across 18 of PNG's 22 provinces to better understand the existing diagnostic network for COVID-19, TB, and HIV (viral load and early infant diagnosis). The study was critical during the COVID-19 response, as it identified the national diagnostic capacity and current utilization rates for COVID-19 testing and facilitated the development of operational plans and scenarios that could optimize the network and improve access, utilization rates, and efficiencies. The DNO study also revealed infrastructure and capacity gaps, as well as opportunities for improvement in the existing diagnostic network. As a result, PNG has a better understanding of the diagnostic network for other infectious diseases, including HIV and TB. Operational plans that have been developed will therefore benefit all three disease programs and will ensure efficiency and optimization across diagnostic services for HIV, TB, and COVID-19, which utilize the existing GeneXpert network in PNG.

The USAID-funded surveillance system support work in PNG was critical to improve COVID-19 surveillance, data management, and data use during the pandemic. Funds were used to conduct a rapid assessment of the existing COVID-19 surveillance systems and identify gaps and opportunities for improvement. Through this funding, EpiC supported the national response and improved the COVID-19 surveillance system before making recommendations to migrate to a longer-term, open-source solution in District Health Information System Software 2 (DHIS-2). EpiC supported the country to develop the Outbreak Information Management System (OIMS) based on DHIS-2 that will serve as the national disease surveillance data management platform. EpiC supported the migration of existing COVID-19 records to the new platform for improved data management and use. Efforts to improve COVID-19 surveillance have led to the introduction of DHIS-2 into PNG. With its introduction, there are now efforts to leverage the platform to support case-based surveillance from other programs, such as HIV, to improve centralized data management and increase data access and use.



*EpiC supported the national response and improved the COVID-19 surveillance system before making recommendations to migrate to a longer-term, open-source solution in District Health Information System Software 2 (DHIS-2).*



# Philippines

In the Philippines, EpiC provided complementary technical assistance and support to the C19RM grant at the national and local levels in four technical areas: improving COVID-19 facility-based case triaging and management, strengthening the medical oxygen ecosystem, building resilience and preventing burnout among health care workers, and strengthening laboratory diagnostic capacities. By addressing these priority areas, EpiC Philippines helped minimize the incidence of comorbidities, increased diagnostic capacities for COVID-19, and enhanced the health workforce's capacity and readiness, ultimately strengthening the health system's resilience and pandemic preparedness.

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**After implementation of technical assistance activities, EpiC shared and handed over its key accomplishments to the Philippines' Department of Health (DOH) and initiated conversations with key national and local stakeholders to adopt, replicate, and scale various activities.**

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To improve the triaging and management of COVID-19 in health facilities, including general and critical care, EpiC Philippines facilitated complimentary C19RM training for health care workers in collaboration with the Philippine Business for Social Progress (PBSP), the Global Fund's principal recipient in the country. For instance, EpiC trained respiratory therapists on how to use, manage, and maintain Global Fund-donated mechanical ventilators. EpiC further supplemented these training courses with regular coordination, supportive supervision visits, and learning sessions with trained staff. Through these measures, EpiC fostered knowledge exchange efforts. With USAID funding, EpiC also provided technical assistance to PBSP for vendor contracting, warranty, and service agreements, ensuring that recipient hospitals received the support needed after the installation of their medical equipment and other commodities.

EpiC also provided technical assistance to strengthen both clinical and nonclinical aspects of the Philippines' medical oxygen ecosystem. EpiC conducted a series of training and orientation events for oxygen management systems, including oxygen therapies, engineering safety measures, infection prevention and control, and the forecasting of oxygen commodities. Through field visits and learning sessions, EpiC also advocated for investments in advanced medical oxygen sources to promote a more sustainable and reliable oxygen supply, especially during public health emergencies.



One of EpiC's most notable contributions to the C19RM grant in the Philippines was providing technical assistance to protect the health care workforce by building mental and psychological health resilience and preventing burnout among health care workers and by increasing knowledge on infection prevention and control strategies to prevent COVID-19 transmission to frontline medical staff and within the health facility. To mitigate the psychological impact of the pandemic among health care workers, EpiC created a holistic mental health package that included information dissemination, psychological first-aid training, advocacy and communication, wellness rooms, and facility-based mental health resilience teams. As a result, during the Healthy Pilipinas Awards ceremony, the DOH recognized EpiC for its role in piloting novel interventions to inform and improve mental health programming among hospital staff.

EpiC also helped strengthen the Philippines' laboratory system, in turn further enhancing the health system's capacity and resilience. EpiC helped the Global Fund's C19RM principal recipient to assess hospitals and laboratories that were preparing to receive Global Fund-donated diagnostic equipment and other related devices. In addition, EpiC trained laboratory personnel on how to collect, handle, package, and transport specimens. While this training specifically focused on COVID-19, laboratory technicians who received the training can apply the learned knowledge and skills to other infectious diseases.



# Senegal



In Senegal, EpiC's technical assistance was designed to complement the Global Fund's C19RM grant. EpiC supported the coordination, planning, and monitoring of COVID-19 interventions at the local and national levels and strengthened sustainable interventions that mitigated the impact of COVID-19 on HIV, TB, and malaria programs.

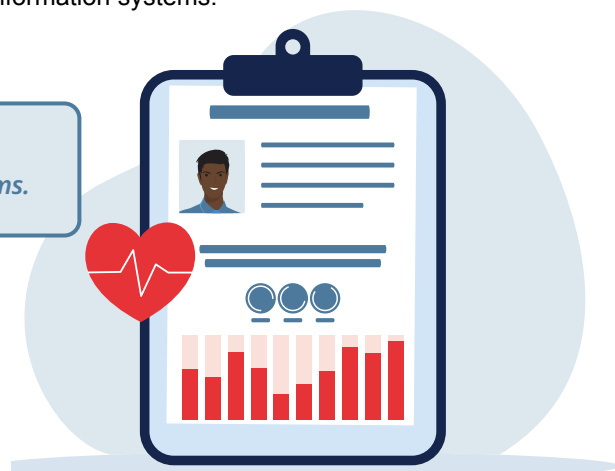
EpiC complimented the Global Fund by collaborating with stakeholders in workshops, meetings, and field supervision missions targeted at improving the implementation of COVID-19 interventions. EpiC Senegal co-hosted a national workshop with the MOH to assess and monitor the implementation of the C19RM program and identify lessons learned to improve the upcoming Global Fund Grant Cycle (GC7). Through this workshop, the MOH and Global Fund CCM determined how they could use USAID funding to enhance Senegal's C19RM grant. EpiC similarly supported the CCM during the C19RM assessment and upgrade workshop by helping review the technical and financial status of C19RM implementation, identifying impediments to activities, and harmonizing the CCM's communication plan and strategic framework. EpiC also provided technical and financial assistance to CCM to host workshops with subpartners on program implementation.

With EpiC's assistance, CCM also conducted two supportive missions in Sédhiou and Ziguinchor to assess the implementation of Global Fund activities. During these missions, CCM discovered that the main obstacles to Global Fund implementation were related to stock management and laboratory strengthening, with a need to improve viral load sample transportation; a lack of qualified human resources; and issues in coordinating community activities for HIV, TB, and malaria programs. EpiC Senegal worked with the Directorate of General Administration and Equipment (DAGE) to conduct quarterly supportive supervision visits in 14 health regions to assess the use of C19RM funds and verify information, collect financial documentation, and enter data into the financial and accounting management software owned by the MOH.

In addition to supporting C19RM activities, EpiC provided technical assistance to mitigate the impact of COVID-19 on HIV, TB, and malaria programs. For instance, EpiC helped community-led monitoring by conducting two supportive supervision events in the Tambacounda Health District in eastern Senegal. EpiC supported community associations to facilitate virtual meetings that targeted key populations. Championing localization efforts, EpiC supported the National AIDS Council Secretariat (CNLS) in training community actors on how to distribute ARV drugs within the framework of differentiated service delivery. Notably, EpiC used funding to support the CNLS pilot study that assessed private pharmacies' provision of HIV self-tests in Dakar, Thies, and Ziguinchor. Technical assistance also strengthened human resources engaged during the pandemic and helped train health care providers on data collection and reporting using the DHIS-2 platform. This, in turn, reinforced their capacity for program management using health information systems.



*EpiC provided technical assistance to mitigate the impact of COVID-19 on HIV, TB, and malaria programs.*





# Thailand

In Thailand, EpiC carried out six main activities to support COVID-19 programming and mitigate the impacts of the pandemic on HIV, TB, and/or malaria services. EpiC's activities included 1) strengthening TB services and routine reporting; 2) documenting and sharing lessons learned from the COVID-19 response in migrant areas for future replication in other Thai provinces; 3) supporting community-based surveillance and response mechanisms for COVID-19 and other emerging diseases; 4) enhancing virtual communication capacity regarding COVID-19, HIV, and TB; 5) improving health literacy and case management; and 6) providing technical support to improve procurement and supply chain management. These activities were crucial in stabilizing Thailand's health systems.

EpiC Thailand contributed to the overall health system strengthening by improving information management. During the COVID-19 pandemic, the MOH Division of Tuberculosis focused on routine TB activities, services, and reporting. Supporting these efforts, EpiC provided technical assistance through a data management workshop, which strengthened and built the capacity and skills of TB staff members. As a result, TB staff improved their data analysis skills, which they plan to implement in the National TB Information Program (NTIP), improving its overall effectiveness.



Samut Sakhon, one of Thailand's coastal provinces, hosts the highest number of Burmese migrant workers in the country. In response to the unique challenges these migrant communities faced during the pandemic, the Samut Sakhon provincial health office provided migrants with equal access to COVID-19 treatment and care. EpiC documented the lessons learned from the provincial health office and provided recommendations for future pandemic preparedness and response mechanisms. This document will serve as a model for local stakeholders across the Thai government, private, and community sectors during future pandemics, helping them to establish field hospital and factory quarantines. The model could also be replicated in other provinces or areas that host migrant communities, such as Burmese migrants. As a result, EpiC strengthened the provincial office's multisectoral collaboration with local stakeholders, ensuring effective responses to COVID-19 and other emerging diseases.

During the pandemic, Thai communities proactively created their own informal surveillance and response mechanism, supporting the government's formal system. EpiC formalized three of these community-based surveillance and response mechanisms across pilot districts in Bangkok, Song Khla, and Chiang Rai, empowering communities to be more concerned about collective health. As a result, provincial health offices in these districts adopted the formalized system and developed plans for scaling up. Through the formalization, EpiC contributed to increasing the synergy and collaboration between community and local health authorities, which filled the gaps in disease response mechanisms in the provincial health office.

To strengthen capacity building among the staff in community organizations under the Global Fund, EpiC Thailand hosted training sessions on infectious diseases, which included COVID-19, HIV, TB, hepatitis B, and hepatitis C. One training session specifically targeted improved capacity building in virtual communications, helping staff enhance their skills and knowledge on effective communication about COVID-19, HIV, and TB implementation. After this training, EpiC held a technical assistance follow-up session with the organizations, providing recommendations for improving their virtual communication activities. In another training session aimed at improving health literacy and case management, staff learned about the latest information on COVID-19, HIV, TB, hepatitis B and C, and other sexually transmitted infections (STIs), which they later used to improve their health interventions and case management of COVID-19.

EpiC Thailand also provided technical support to improve the procurement and supply chain management interrupted by COVID-19. Specifically, EpiC offered recommendations to Raks Thai Foundation, a civil society organization and warehouse management program of the Global Fund principal recipient. Raks Thai Foundation implemented and shared these recommendations with its implementing partners working on HIV and TB.



## Uganda



The outbreak of the COVID-19 pandemic overburdened Uganda's health system, particularly the second wave in May 2021, which was worsened by public finance management challenges that led to poor budget absorption and delayed payment of health workers and suppliers and thus delayed accountability for funds disbursed for health activities. By March 2022, a total of 47 billion Ugandan shillings (UGX) that had been advanced to the MOH from development partners had not been accounted for, leading some partners to withhold further fund disbursements and thus creating a bottleneck in the MOH's performance.

To address this challenge, the EpiC project achieved significant milestones in strengthening Uganda's capacity for public finance management (PFM) from October 2022 to September 2023. The project focused on improving transparency, accountability, budgeting, and governance in 59 districts across five regions.

EpiC and its partners built the capacity of district local governments (DLGs) to address public finance management-related challenges that affect the flow of funds and accountability in the areas of planning and budgeting, budget execution as per development partners' guidelines, automated financial management systems usage, and completeness and accuracy of fund accounting and reporting. EpiC aligned district budgets with the National Development Plan III and government budget codes, trained districts on the use of e-cash payment methodologies, and helped in the preparation and approval of work plans and budgets. As a result, 95 percent of funds disbursed by funders were fully accounted for by the DLGs and cities assigned to the project, addressing audit queries and improving the understanding of budgeting processes.

Despite facing challenges such as slow procurement processes due to existing government policies, EpiC succeeded in mentoring districts on financial management systems and conducting quarterly budget performance reviews. Future efforts will focus on continuous mentorship for DLGs, addressing network infrastructure issues, and institutionalizing good PFM practices to sustain progress and effectively handle PFM reforms.

## Vietnam



In summer 2021, the COVID-19 Delta variant surged across Southern Vietnam, severely straining resources and the health care system. In response to the urgent need for quality health care services and to strengthen health system resilience, EpiC provided technical assistance to a) improve the mental health and wellbeing of HIV clients, b) expand community complementarity in the HIV epidemic response through social contracting, and c) improve the preparedness of the national oxygen infrastructure and capacity.

During the COVID-19 peak in 2022, EpiC undertook a comprehensive assessment of the pandemic's impact on the mental health of clients living with HIV and those at risk of acquisition to inform more holistic care. This led to the design and standardization of a mental health and psychosocial support training program and curriculum in collaboration with the Vietnam Administration of HIV/AIDS Control. The approach underlined the need for

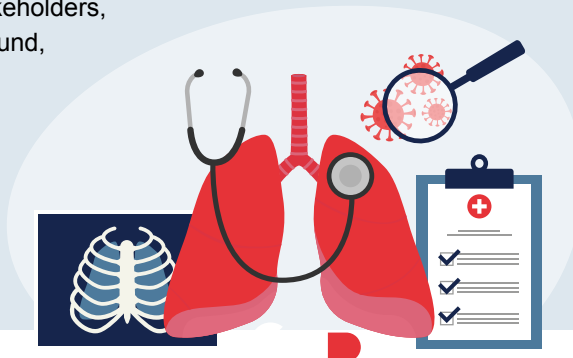


mental health service integration with routine health checkups for PLHIV and key populations, in alignment with the latest National Care and Treatment Guidelines. EpiC then trained health care staff and community supporters in focal provinces, empowering health authorities at central and provincial levels to scale mental health screening, counseling, and referral.



As part of an effort to decentralize HIV service provision and reduce the burden on public health facilities during pandemics, the Government of Vietnam also piloted social contracting in nine provinces. EpiC supported two pilot provinces, Can Tho and Kien Giang, by assessing government and community partner readiness for social contracting and tailoring technical assistance to prepare for and implement the model. In 2024, both provinces formalized social contracts with private sector partners, enabling both government- and community-led HIV service delivery. EpiC has extended support through 2025 to continue building provincial capacity to implement social contracting independently, in anticipation of revised legislation on contracting with nongovernmental entities.

To strengthen health system resilience against future pandemics and mitigate the impact of COVID-19 on patients with comorbidities, EpiC partnered with the National Tuberculosis Program (NTP) to assess the oxygen-related medical infrastructure and capacity needs across 50 provincial TB and lung hospitals throughout Vietnam. The project identified areas for improvement through online and on-site assessments, which were discussed with key stakeholders, including the MOH and its NTP, USAID, and the Global Fund, during a dissemination workshop in 2024. Feedback from the workshop has informed decision-making on resource allocation and interventions for more efficient oxygen distribution to patients with respiratory conditions beyond COVID-19.



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