## **2018 TCA**

|            |   | 2018 TCA  |         |   |  |  |         |
|------------|---|---|---------|---|--|--|---------|
| Country    | Programmatic<br>Area (2018, see           | Activity  | Partner | Mil   | lestones   | Expected Outcome   |         |
| ·          | Tab 7)                                    |   |         | Pre-Joint Appraisal   |  | ,  | TOTAL   |
| Madagascar | Data                                      | Support AEFI surveillance coordination and implementation AEFI committee at national level trained to do the causlaity assessment   | WHO     | Monthly report avalilable timely  | AEFI Surveillance improved with at least 80% of the serious cases of AEFI investigated   | 80% of serious AEFI are investigated, managed according to national guidelines, with causal linkage established  |         |
| Madagascar | Vaccine-Specific<br>Support               | Support strengthening of New Vaccines surveillance(MBP Hib and rotavirus, CHUMET Sentinel Site) and implementation of Congenital Rubella Syndrome surveillance  | WHO     | Monthly report avalilable timely  | New vaccine surveillance assessed  | The report on the epidemiological and economic impact of new vaccines is available; The report on the epidemiological and economic impact of new vaccines is available; Document on retrospective record review of CRS indicating the burden of CRS produced /available  |         |
| Madagascar | Program Implementation /Coverage & Equity | Support coordination, planning and implementation of strengthening routine immunization strategies (REC approach, MCHW, AVW,). Monitoring and evaluation cMYP, EPI annual plan, (supportive supervision) particularly in HSS2 districts supported by WHO. Support HSS2 monitoring .  Support the development of the annual plan based on the  | WHO     | ICC meeting and supportive supervision reports available;   | EPI plan and HSS 2 plan monitored  Revised cMYP available and shared   | Improvements in immunization coverage are inclusive of the children in the most marginalized, remote and poorest communities and overall inequities within the immunization program are reduced  |         |
| Madagascar | Program Implementation /Coverage & Equity | current situation and cMYP orientations.  Technical support in 6 priority regions (Alaotra Mangoro, Anosy, Betsiboka, Melaky, Itasy et Ihorombe) for: Support RI strengthening in districts Support capacity building at decentralized level in REC strategy Support health system strengthening to improve service delivery, vaccine coverage and equity improvement;  | WHO     | The 06 supported regions update situation analysis and main bottlenecks identified Micro plan updated for all districts in supported regions and Reach Every Child strategy implemented and monitored Data quality improvement plan implemented to help improve immunization coverage   | Immunization coverage and equity improved at least in 80% supported priority districts. Monthly data analysis conducted at regional level and feed back provided to district for corrective action   | Improvements in immunization coverage are inclusive of the children in the most  |         |
| Madagascar | Program Implementation /Coverage & Equity | Support capacity building of EPI managers at all levels: MLM Training, DQS and training of Health workers: immunization in practice and VPD and AEFI surveillance. Monitoring and evaluation particularly in HSS2 targeted districts supported by WHO (supportive Supervision, periodic and semi-annual review, data quality improvement, etc.)   | WHO     | Improvements in immunization coverage in the most low performing districts,   | Improvements in immunization coverage in the most low performing districts,  | Improvements in immunization coverage are inclusive of the children in the most marginalized, remote and poorest communities and overall inequities within the immunization program are reduced  |         |
| Madagascar | Data                                      | Contribute to the promotion of the use of high quality data for better decision-making. He will also support the coordination between different stake holders including internal and external partners working within data agenda in the country.  Support Implementation of the Data Quality Improvement Plan.  Support data analysis and monitoring of the country's EPI performance, particularly in REC districtsTechnical support and monitoring at regional and district level aiming at improving data quality ( DQS,).  | WHO     | Data Quality Improvement Plan<br>available. Periodic data analysis and<br>DQS conducted at all levels   | Data quality Improved in 50% of districts  | Data quality Improvement in 50% of districts   | 885,314 |
| Madagascar | Vaccine-Specific<br>Support               | Support implementation of National coverage survey  Support the establishment of NITAG to facilitate decision making for vaccine introduction or reorientation of the program. Ensure the orientation of the members of the NITAG constituted   | WHO     | High Level Mission to Advocate for the Implementation of NITAG  | Presence of a decree establishing NITAG, with designation of members.  | Decision to introduce a new vaccine or change strategies is based on independent scientific evidence   |         |
| Madagascar | Vaccine-Specific<br>Support               | Support the preparation of the measles-rubella vaccination campaign plan and the development of the proposal to GAVI  | WHO     | Situation analysis made to support decision making for the organization of an MR campaign or to introduce the M2 and Proposal submitted on time to GAVI   | Proposal submitted to GAVI is approved   | GAVI approval for the MR campaign proposal   |         |
| Madagascar | Program Implementation /Coverage & Equity | Technical support in 04 priority regions (Atsinanana, Analanjirofo, Bongolava, Diana) for: Support RI strengthening in districtsSupport capacity building at decentralized level in REC strategy; Support health system strengthening to improve service delivery, vaccine coverage and equity improvement  | WHO     | The 04 supported regions update situation analysis and main bottlenecks identified Micro plan updated for all districts in supported regions and Reach Every Child strategy implemented and monitored Data quality improvement plan implemented to help improve immunization coverage   | Immunization coverage and equity improved at least in 80% supported priority districts. Monthly data analysis conducted at regional level and feed back provided to district for corrective action   | Improvements in immunization coverage are inclusive of the children in the most marginalized, remote and poorest communities and overall inequities within the immunization program are reduced.  All HF have microplans monitored for implementation  |         |
| Madagascar | Program                                   | · · · · · · · · · · · · · · · · · · ·   | WHO     | External review of the EPI  | External review Report isavailable and   | cMYP and PTA updated according   |         |
| Madagascar | /Coverage &<br>Equity                     | Coverage survey and external review data to redesign the annual plan and cMYP.  Support vaccine management to improve availability, utilization and reduce Vaccine wastage: Support EPI program and regions in vaccine management using the appropriate tools: distribution to regions and districts, adequate availability, good utilization, wastgate reduction, temperature monitoring, Support the EPI program in the analysis of vaccine management data for corrective action. Support evaluation of vaccine management in various internal and external reviews, Support the implementation of recommendations from Vaccine Management Assessments.                    | WHO     | and in each region, which takes into  | results / recommendations are used for updating the planning  Improvement of the different vaccine management indicators at the central level and in each region: Availability of vaccines, adequacy rate, utilization rate, Vaccine wastage rate  | to the recommendations of the External Review  a. National Logistics Working Groups (NLWGs) review vaccine stocks at central and subnational levels (e.g. to districts) on a regular basis (e.g. monthly, quarterly), identify priority actions, and address problems; b. Vaccine wastage rate reduced: i. Reduction of wastage through adoption and implementation of adequate policies, ii. Closed vial wastage reduced, iii. Prevention of stock outs once vaccine is avaialble at national level |         |
| Madagascar | Supply Chain                              | -Technical support for regular update on the EVM Improvement Plan implementation and monitoring of progress - Technical support for cold chain inventory update and performance analysis - Support the CCEOP (2018 - 2019) implementation process. Technical support to the in-country CCEOP Project Management Team (PMT) for installation and maintenance warranty of cold chain equipment and training of MPH staff Support the effective use of Stock Management Tool and Vaccine Visibility Tool ( Viva tool) to facilitate supply adequacy and optimization - Support the National Vaccine Store focused improvement initiatives including EVM-self assessment at NVS". | UNICEF  | -SOPs for MoH EPI program at all levels developed Cold chain inventory updated '- CCEOP Operational deployment plan and deviation plan to support procurement and installation of new equipment developed '-Quarterly EVM improvement Plan implementation update available '- Quarterly analysis of reports from stock Management Tool is shared and Viva tool introduced | -CCEOP costed deployment plan for the procurement and installation of new equipment completed and support provided for supplier in the process & implemenation of ODP '-Updated cold chain inventory data available. '- Both SMT and Viva tool are regularly used and monthly update shared. Data visibility increased to ensure optimal stock level meeting supply adequacy. '- Support provided to improve the NVS as per the EVM recommendations. | Contribute to the strengthening of immunization supply chains to improve availability of potent vaccines   |         |

| Madagascar               | Demand<br>Promotion                                | -Develop a risk communication plan for immunization and a social data research action plan on immunization;  '-Technical support for the integration of evidence-based demand promotion activities into the EPI's annual operational plans  '-Technical support for the development of tools for monitoring implementation of demand generation activities '-Technical support for the implementation of the social data research action plan on immunization   | UNICEF             | -Risk communication plan for immunization and social data research action plan on immunization developed;  '-Evidence-based demand promotion activities into the EPI's annual operational plans   | -Tools for monitoring implementation of<br>demand generation activities developed;<br>'-Social data research action plan on<br>immunization implemented   | Countries implement and monitor evidence-based demand promotion strategies as part of their Annual EPI Operational Plan Countries have risk/crisis communication plans that include capacity to respond rapidly to vaccine-related events, including AEFIs, rumours, or misconceptions. |           |
|--------------------------|--|---|--------------------|---|---|---|-----------|
| Madagascar               | Financing  | -Support requests analysis to avoid discrepancies between planning, forecasting and funding allocated; '-Support analysis of supporting document to ensure Funds are managed in a transparent and accountable manner; '-Provide information to support advocacy for local resource mobilization for financing and traditional vaccine procurement '-Support in country report on expenditures and cash flow monitoring. '-Support region/ district capacity building to ensure appropriate funding planning and execution | UNICEF             | -Districts financial support requests are analysed before funds allocation to prevent discrepancies between activities and fund allocation '-Material and information needed for pledge and advocacy regarding local funds mobilization for vaccine procurement (cofinancing and traditional vaccine) available | -Report on expenditures monitored and corrective actions recommended to prevent delays in justification  '-Government account for vaccine (traditional vaccine and cofinancing) in Copenhagen monitored and situation documented                                    | Funds are better allocated to district and regions for activities implementation based on microplans  MoH commitment to pay traditional vaccin and cofinance improves   |           |
| Madagascar               | Program<br>Implementation<br>/Coverage &<br>Equity | -Support DPEV to update tools for REC implementation (micro plan and monitoring tools)  '-Technical support to the national REC coordination committee  '-Technical support to periodic monitoring meeting including identification of bottleneck and propose corrective action at central level  '-Technical support for developement and implemention of special strategies to reach hard-to-access children,  '-Support for strengthening technical capacity of EPI stakeholders: MLM,                                 | UNICEF             | -Monthly data analysis conducted at<br>central level and feed back provided<br>to regions for corrective action<br>'-Tools for REC monitoring available   | -At least 80% of priority districts have identified in their micro plans vulnerable / unreached population and the strategies to reach them are in place to improve coverage and equity   | Improvements in immunization coverage are inclusive of the children in the most marginalized, remote and poorest communities and overall inequities within the immunization program are reduced   | 1,059,210 |
| Madagascar               | Program<br>Implementation<br>/Coverage &<br>Equity | -Support RI strengthening in 4 low performing selected regions (Atsimo Andrefana, Androy, Vakinakaratra and Sava) 'Support capacity building at decentralized level in REC strategy; '-Support health system strengthening to improve service delivery, vaccine coverage and equity improvement   | UNICEF             | -The 04 supported regions update situation analysis and main bottlenecks identified '-Micro plan updated for all districts in supported regions and Reach Every Child strategy implemented and monitored  | -Immunization coverage and equity improved at least in 80% supported priority districts. Monthly data analysis conducted at regional '-level and feed back provided to district for corrective action   | Improvements in immunization coverage are inclusive of the children in the most marginalized, remote and poorest communities and overall inequities within the immunization program are reduced   |           |
| Madagascar               | Program<br>Implementation<br>/Coverage &<br>Equity | <ol> <li>Support DPEV in the development of tools to carry out situation analysis in urban area</li> <li>Ensure that the REC Guide include the specifics needs of Urban approach</li> </ol>   | UNICEF             | Updated REC guide include specificities in Urban poor and marginalized /excluded is available   | On going monitoring and the implementation of the strategy with identification of bottlenecks and strategy update, REC Urban approach is scaled up in 7 additional urban areas  |   |           |
| Madagascar               | Program<br>Implementation<br>/Coverage &<br>Equity | Support the development of REC microplans in urban areas, effective implementation and monitoring of progress in urban priority districts to improve immunization coverage among the urban poor and marginalized/ excluded;   | UNICEF             | 1. Specific Micro plans in urban priority districts to reach vulnerable (urban poor and marginalized /excluded) are available and implemented in Tana ville 2. Implementation of planned activities and results are monitored and assessed in Antananarivo and lessons learned documented                       | Implementation of planned activities and results are monitored and assessed quarterly to improve coverage in Urban poor and marginalized /excluded at least in Antananarivo   | Improvement in immunization coverage in the urban targeted  |           |
| Madagascar               | Program<br>Implementation<br>/Coverage &<br>Equity | <ol> <li>Support RI strengthening in targeted region implementing REC approach in urban settings (Analamanga, Vatovavy Fitovinany/VV7V, Boeni and Haute -Matsiatra);</li> <li>Support capacity building at decentralized level in urban settings REC strategy;</li> <li>Support health system strengthening to improve service delivery, vaccine coverage and equity</li> </ol>   | UNICEF             | 1. The 04 supported regions update situation analysis and main bottlenecks identified 2. Specific Micro plan updated for all districts in supported regions   | 1. Reach Every Child strategy implemented and monitored 2. Immunization coverage and equity improved at least in 80% of supported priority districts. 3. Monthly data analysis conducted at regional level and feed back provided to district for corrective action | linedilities within the   |           |
| Madagascar<br>Madagascar | Data<br>Supply Chain                               | strengthening of national health information system (HIS) and establishing of robust and sustainable integrated systems, focusing on implementation of tools and building capacity for better quality and use of immunisation data  Phase 1: Prepare, plan, align, configure (weeks 1-6)  | University of Oslo | Analysis framework & methodolgy and draft costing tool for field pilot  |   |   | 19,361    |
| Madagascar<br>Madagascar | Supply Chain<br>Supply Chain                       | Phase 2: In-country data collection (weeks 3-12) Phase 3: Data analysis and presentation (weeks 12-16)  | 12I<br>12I         | delivered  Transportation costs database delivered; Results analysis and  |   |   |           |
| Madagascar               | Supply Chain                                       | Support MoH and collaborate with ICC immunization technical partners to identify EPI priorities and ensure they   | JZI                | presentation  | Criteria for priority activities and for DRSP / SDSP identified.  |   |           |
| Madagascar               | Supply Chain                                       | are included in planning.  Provide technical support to DPEV, SLMV and with HPV multiagency partners to initiate planning and development of the strategy for the Gavi application and national scale-up of HPV   |                    | A-16 Amd 1  | A document for national scale-up of HPV vaccine developed.  |   |           |
| Madagascar               | Supply Chain                                       | vaccine.  Strengthen in-country capacity (DDS, DPEV) in technical and financial management processes for Gavi HSS2.   | JSI                | A-16 Amd 1 A-16 Amd 1   | Technical assistance provided to increase capacity for financial absorption and reduction of non-documented or non-eligible expenses.   |   |           |
| Madagascar               | Supply Chain                                       | Co-facilitate training for EPI staff at various levels in HSS management (funded through HSS).  | JSI                | A-16 Amd 1  | Technical support for procedural management trainings provided to EPI staff in HSS2 priority districts.   |   |           |
| Madagascar               | Supply Chain                                       | Assist with post-training supportive supervision and coaching.  | 1SI                |   | Supervision visits conducted in HSS2 priority district; coaches' performance monitored with DPEV and DDS.   |   |           |
| Madagascar               | Supply Chain                                       | Work with DPEV and DDS and liaise with partners, including COMARESS, Mahefa, Mikolo, and others to help prioritize and harmonize support across the districts that receive Gavi support, including improving RI implementation and processes, updating micro-plans and monitoring HSS implementation.   | JSI                | A-16 Amd 1 A-16 Amd 1   | Technical assistance provided for the development and availability of microplans for all SDSP supported by Gavi.  |   |           |
| Madagascar               | Supply Chain                                       | Provide TA for realistic allocation and coordination of local and donor-provided resources to support immunization strengthening approaches such as RED/REC and PIRI linked   | JSI                |   | Support provided in collaboration with DPEV, coaches, and partners for REC implementation in priority districts.  |   |           |
| Madagascar               | Supply Chain                                       | with Gavi assistance.  Support coaches to improve implementation, monitoring and supportive supervision of RED/REC and PIRI strategies, including participating in coaching meetings.   |                    | A-16 Amd 1  | Coaches providing feedback to regions at least monthly.   |   |           |
| Madagascar               | Supply Chain                                       | Work closely with immunization coaches to identify and develop strategies for districts receiving Gavi support where other partners are not present   | JSI                | A-16 Amd 1  | Coaches using data to better target Gavi support to districts.  |   |           |
| Madagascar               | Supply Chain                                       | other partners are not present.  In collaboration with other partners, support DPEV staff in IEC and social mobilization to improve communications materials and community engagement and partnership approaches for immunization.  | JSI                | A-16 Amd 1  | Package of REC community materials developed in collaboration with DPEV, Unicef, COMARESS, USAID bilaterals.  |   | 485,597   |
|                          |  | approacties for ittilitutiiZatiOff.   |                    | A-16 Amd 1  |   |   |           |

| Madagassar           | Cumply Chain | Contribute to harmonization and ensuring production and  | lci      | 1  | Communication materials available for                                       |  | l I     |
|----------------------|--------------|--|----------|--|---|--|---------|
| Madagascar           | Supply Chain | Contribute to harmonization and ensuring production and distribution of communications materials in order to reach       | JSI      |  | Communication materials available for distribution and use with prioritized |  |         |
|                      |              | hard to reach populations.   | 101      | A-16 Amd 1   | under-served people.  |  |         |
| Madagascar           | Supply Chain | Provide RI orientation and training to CSOs and COMARESS, including: TA with supportive monitoring to build CSO's skills | JSI      |  | COMARESS supports RI strengthening and their data reporting is improved.    |  |         |
|                      |              | in identifying newborns and tracking under-vaccinated  |          |  | <b>3</b>  |  |         |
|                      |              | children to reduce defaulters, involving community leaders and conducting dialogues that will improve partnership with   |          |  |   |  |         |
|                      |              | service delivery.  |          |  |   |  |         |
| Madagascar           | Supply Chain | Build CSOs' skills in immunization and vaccine advocacy.   | JSI      | A-16 Amd 1   | Community advocacy guide used by  |  |         |
|                      |              | · ·  |          | A-16 Amd 1   | COMARESS and CSO partners.  |  |         |
| Madagascar           | Supply Chain | Support monitoring/evaluating of achievements in advocacy and community engagement for vaccination.                      | JSI      |  | of CSOs at national and sub-national level carried out (with COMARESS) to   |  |         |
|                      |              | , , ,  |          | A-16 Amd 1   | evaluate and support improvements.  |  |         |
| Madagascar           | Supply Chain | Support the DDS to review HSS-2 indicators and reporting on a quarterly basis which is linked with the "Cadre de         | JSI      |  | DDS holding review meetings and providing reports on status of activities.  |  |         |
|                      |              | Performance" already drafted with DDS as part of HSS2 based  |          |  | providing reports on states or delivities.                                  |  |         |
|                      |              | on agreed reporting schedule to Gavi.  |          | A-16 Amd 1   |   |  |         |
| Madagascar           | Supply Chain | Support development of framework for tracking HSS  | JSI      | A-10 Amu 1   | DDS using procedural module and   |  |         |
|                      |              | activities.  |          | A-16 Amd 1   | indicators to monitor and report HSS2 implementation.                       |  |         |
| Madagascar           | Supply Chain | Work with DDS and DPEV to improve reporting, including for:  | JSI      | A TO AIRU I  | DDS and DPEV reporting, including data                                      |  |         |
|                      |              | annual work plan achievements and progress, accomplishments aligned with allocation of Gavi funding and                  |          |  | summary/ visualization, to Gavi improved.                                   |  |         |
|                      |              | updates to Gavi.   |          | A-16 Amd 1   | improved.   |  |         |
| Madagascar           | Supply Chain | Provide guidance to DPEV staff and coaches to build their capacity in data summary, management and use so they are       | JSI      |  | DPEV data summaries improved and staff/coaches use data to provide          |  |         |
|                      |              | equipped to ensure that appropriate and quality  |          |  | feedback to regions at least monthly.                                       |  |         |
| Madagascar           | Supply Chain | immunization services are being offered.  Fournir des conseils au personnel de la DPEV et de la DDS                      | JSI      | A-16 Amd 1   | Data summaries and visuals available for                                    |  |         |
| Madagascai           | Заррту спат  | pour assurer qu'ils sont en relation avec les OSC et les   | 331      |  | DPEV staff, coaches and DDS and rolled-                                     |  |         |
|                      |              | communautés dans les populations sous-vaccinées, tel   |          |  | out to regions/ districts to improve data                                   |  |         |
|                      |              | qu'identifiées par l'utilisation des données.  |          |  | management.   |  |         |
|                      |              | Provide guidance to DPEV staff and DDS to ensure they are  |          |  |   |  |         |
|                      |              | liaising with CSOs and communities in under-vaccinated populations, as identified through data use.                      |          | A-16 Amd 1   |   | A-16 Amd 1   |         |
| Madagascar           | Advocacy     | CSO platforms have improved governance and operations  | CRS      | CSO platforms have democratically-<br>elected leadership             |   | CSO platforms have improved                                    |         |
|                      |              |  |          | lelected leadership  |   | functionality  |         |
| Madagascar           | Advocacy     | CSO platforms have improved governance and operations  | CRS      | CSO platforms have strategies and plans created by members           |   | CSO platforms have improved                                    |         |
|                      |              |  |          | plans created by members   |   | functionality  |         |
| Madagascar           | Advocacy     | CSO platforms have improved governance and operations  | CRS      | CSO platforms have increased   |   | CSO platforms have improved                                    |         |
|                      |              |  |          | member engagement  |   | CSO platforms have improved functionality                      |         |
| Madagascar           | Advocacy     | CSO platforms have improved governance and operations  | CRS      | CSO platforms meet member  |   | CSO platforms have improved                                    |         |
| Madagascar           | Advocacy     | CSO platforms and member organizations have improved   | CRS      | expectations CSO platforms establish and                             |   | functionality  |         |
|                      |              | monitoring, evaluation, accountability and learning (MEAL)   |          | implement MEAL systems   |   | CSO platforms have improved                                    |         |
| Madagascar           | Advocacy     | CSO platforms and member organizations have improved   | CRS      | CSO platforms track and report their                                 |   | functionality  |         |
|                      |              | monitoring, evaluation, accountability and learning (MEAL)   |          | contributions to the GVAP  |   | CSO platforms have improved                                    |         |
| Madagascar           | Advocacy     | CSO platforms and member organizations have improved   | CRS      | CSO platform annual reports  |   | functionality  |         |
|                      |              | monitoring, evaluation, accountability and learning (MEAL)   |          |  |   | CSO platforms have improved                                    |         |
| Madagascar           | Advocacy     | CSO platforms and member organizations have improved   | CRS      | CSO platforms contribute to regional                                 |   | functionality  |         |
|                      |              | monitoring, evaluation, accountability and learning (MEAL)   |          | and global evidence base   |   | CSO platforms have improved                                    |         |
| Madagascar           | Advocacy     | CSO platforms have increased access to Gavi HSS funding  | CRS      | CSO platforms jointly develop Gavi                                   |   | functionality  |         |
|                      |              |  |          | HSS proposals with EPI/MOH   |   | CSO platforms have improved                                    |         |
| Madagascar           | Advocacy     | CSO platforms have increased capacity to secure diversified  | CRS      | CSO platforms implement resource                                     |   | functionality  |         |
|                      |              | funding  |          | mobilization plans   |   | CSO platforms have improved                                    |         |
| Madagascar           | Advocacy     | CSO platforms have increased capacity to secure diversified  | CRS      | CSO platforms create and share                                       |   | functionality CSO platforms have improved                      |         |
| NA - day - a - a - a | A.I          | funding  | CDC      | marketing products   |   | functionality  |         |
| Madagascar           | Advocacy     | CSO platforms have increased capacity to secure diversified funding  | CRS      | CSO platforms have close partnership with CSO Constituency SC        |   | CSO platforms have improved                                    |         |
|                      |              |  | 000      |  |   | functionality  | 315,169 |
| Madagascar           | Advocacy     | CSO platforms have increased capacity to secure diversified funding  | CRS      | CSO platforms have a close partnership with Gavi                     |   | CSO platforms have improved                                    |         |
| Madagass             | Adverse      |  | CDC      | representatives  |   | functionality  |         |
| Madagascar           | Advocacy     | CSO platforms have increased capacity to secure diversified funding  | CRS      | CSO platforms have a close working relationship with the Francophone |   |  |         |
|                      |              |  |          | CSO platform (OAFRESS)   |   | CSO platforms have improved                                    |         |
|                      |              |  |          |  |   | CSO platforms have improved functionality                      |         |
| Madagascar           | Advocacy     | CSO platforms are recognized by MOH as key HSS partners  | CRS      | CSO platforms are knowledgeable                                      |   | CSO platforms have improved                                    |         |
|                      |              |  |          | about HSS  |   | capacity to contribute to national health sector planning and  |         |
| Madagass             | Advaces      | CSO platforms are recognized by MOU and a 1988   | CDC      | CCO work plane are to the control                                    |   | coordination   |         |
| Madagascar           | Advocacy     | CSO platforms are recognized by MOH as key HSS partners  | CRS      | CSO work plans are in line with national priorities                  |   | CSO platforms have improved capacity to contribute to national |         |
|                      |              |  |          |  |   | health sector planning and                                     |         |
| Madagascar           | Advocacy     | CSO platforms have improved capacity to promote equity   | CRS      | CSO platform have beneficiary  |   | coordination CSO platforms have improved                       |         |
| ]                    |              |  |          | accountability mechanisms  |   | capacity to contribute to national                             |         |
|                      |              |  |          |  |   | health sector planning and coordination                        |         |
| Madagascar           | Advocacy     | CSO platforms have improved capacity to promote equity   | CRS      | CSO platforms provide rights-based                                   |   | CSO platforms have improved                                    |         |
|                      |              |  |          | input into health policies   |   | capacity to contribute to national health sector planning and  |         |
|                      |              |  |          |  |   | coordination   |         |
| Madagascar           | Advocacy     | CSO platforms have improved capacity to promote equity   | CRS      | CSO platforms are gender-sensitive                                   |   | CSO platforms have improved capacity to contribute to national |         |
|                      |              |  |          |  |   | health sector planning and                                     |         |
| Madagascar           | Advocacy     | CSO platforms have improved capacity to promote equity   | CRS      | CSO platforms sensitize and mobilize                                 |   | coordination CSO platforms have improved                       |         |
| iviauagastaf         | Auvocacy     | plation is nave improved capacity to promote equity  | CIG      | vulnerable populations   |   | capacity to contribute to national                             |         |
|                      |              |  |          |  |   | health sector planning and coordination                        |         |
| Madagascar           | Advocacy     | Support to CSO platforms   | CRS      |  |   | 255.44   |         |
| Madagascar           | Financing    | Provide a broad range of financial management services   | Cardno   | Final report delivered   |   |  | 16,880  |
| Madagascar           | Financing    | Provide a broad range of financial management services   | Cardno   |  | Final report delivered  |  | 199,954 |
| L                    |              |  | <u> </u> |  |   |  | 133,334 |