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General Grant Information

Country	Belize												
Grant Number	BEL-910-G02-H Component HIV/AIDS Round												
Grant Title	Accelerating the Pace: I	Accelerating the Pace: Reaching Marginalized and Vulnerable Populations with Critical Services											
Principal Recipient	United Nations Develop	Inited Nations Development Programme											
Grant Status	Active - Phase II												
Grant Start Date	01 Jan 2011	Grant End Date	31 Dec 2015										
Current* Phase Start Date	01 Jan 2013	Current* Phase End Date	31 Dec 2015	Latest Rating	A1								
Current* Phase Signed Amount	\$ 2,590,863	Current* Phase Committed Amount	\$ 2,503,209	Current* Phase Disbursed Amount	\$ 2,503,209								
Cumulative Signed Amount	\$ 5,520,782	Cumulative Committed Amount	\$ 5,433,128	Cumulative Disbursed Amount	\$ 4,680,759								
				% Disbursed	86%								
Time Elapsed (at the end of the latest reporting period)	48 months	Proposal Lifetime	Not Available	% of Grant Duration	80%								

^{*} Latest Phase if grant is closed

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1. Program Description and Contextual Information

1.1. Grant Summary - Web

With estimated adult HIV prevalence of 2.1 percent, Belize has the highest HIV prevalence in Central America and the third highest in the Caribbean after the Bahamas and Haiti (2007 World Development Indicators, World Bank). Belize faces a number of factors that may drive the HIV epidemic: it has significant rates of poverty, unemployment, chronic malnutrition, drug abuse and violence, and is highly vulnerable to economic and disaster shocks despite being classified by the World Bank as an upper-middle income country. Belize has a significant "brain drain" situation: the departure of many professionals, including health care workers, for other countries hampers the provision of adequate health care. The program supported by this grant aims to provide a targeted response to these challenges and to halt the spread of HIV in Belize. Target populations include young people aged 15-24 and most at-risk groups (such as men who have sex with men and female sex workers) in the two worst affected districts, Belize and Stann Creek.

1.2. Country Latest Statistics			
Background and Health Spending	Estimate	Year	Source
Population, total	324,060	2012	The World Bank Group (Data latest 2013 (update: 2012
Birth rate, crude (per 1,000 people)	24	2011	The World Bank Group (Data latest 2013 (update: 2011
Death rate, crude (per 1,000 people)	4	2011	The World Bank Group (Data latest 2013 (update: 2011
External resources for health (% of total expenditure on health)	4	2011	The World Bank Group (Data latest 2013 (update: 2011
Health expenditure per capita (current US\$)	262	2011	The World Bank Group (Data latest 2013 (update: 2011
Health expenditure, private (% of GDP)	2	2011	The World Bank Group (Data latest 2013 (update: 2011
Health expenditure, public (% of GDP)	4	2011	The World Bank Group (Data latest 2013 (update: 2011
Health expenditure, public (% of government expenditure)	13	2011	The World Bank Group (Data latest 2013 (update: 2011
Health expenditure, public (% of total health expenditure)	66	2011	The World Bank Group (Data latest 2013 (update: 2011
Health expenditure, total (% of GDP)	6	2011	The World Bank Group (Data latest 2013 (update: 2011
Hospital beds (per 1,000 people)	1	2011	The World Bank Group (Data latest 2013 (update: 2011
Life expectancy at birth, total (years)	76	2011	The World Bank Group (Data latest 2013 (update: 2011
Nurses and midwives (per 1,000 people)	2	2010	The World Bank Group (Data latest 2013 (update: 2010
Physicians (per 1,000 people)	1	2010	The World Bank Group (Data latest 2013 (update: 2010
Community health workers (per 1,000 people)	1	2009	The World Bank Group (Data latest 2013 (update: 2009
HIV/AIDS	Estimate	Year	Source
AIDS Orphans Number estimate	3,000	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
Annual number of AIDS deaths Number estimate	500	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
Estimated HIV prevalence, adult (15-49 years old)(%)	2	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
Estimated number of people needing antiretroviral therapy based on 2010 WHO guidelines	2,200	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
People living with HIV Number estimate	4,600	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
Reported number of people receiving antiretroviral therapy	1,358	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
People currently on ART	1,040	2014	Mid-2014 Global Fund Results

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1.3. Comments on Key Discrepancies between Approved Proposal and Grant

A slight downward revision in the budget has been made through reducing the unit cost of condoms during clarifications.

1.5.	Conditions	Precedent					
CP #	СР Туре	Condition Precedent	Functional Area	Tied To	Terminal Date	Is curr ently met?	Comments
	Condition Precedent	1. Condition(s) Precedent to First Disbursement (Terminal Date as stated in block 7A of the Face Sheet) The first disbursement of Grant funds by the Global Fund to the Principal Recipient is subject to the satisfaction of each of the following conditions: a. the delivery by the Principal Recipient to the Global Fund of a statement confirming the bank account into which the Grant funds will be disbursed as indicated in block 10 of the face sheet of this Agreement; and	Finance	Disbursem ent	01.Dec.10	Met	This condition has been fulfilled prior to the first disbursement. Please see DDMF#1 for details.
	Condition Precedent	Condition(s) Precedent to First Disbursement (Terminal Date as stated in block 7A of the Face Sheet) The first disbursement of Grant funds by the Global Fund to the Principal Recipient is subject to the satisfaction of each of the following conditions: b. the delivery by the Principal Recipient to the Global Fund of a letter signed by the Authorized Representative of the Principal Recipient setting forth the name, title and authenticated specimen signature of each person authorized to sign disbursement requests under Article 10 of the Standard Terms and Conditions of this Agreement and, in the event a disbursement request may be signed by more than one person, the conditions under which each may sign.	Others	Disbursem ent	01.Dec.10	Met	This condition has been fulfilled prior to the first disbursement. Please see DDMF#1 for details.
	Condition Precedent	Conditions Precedent to Second Disbursement (Terminal Date as stated in block 6A of the Face Sheet): The second disbursement of Grant funds by the Global Fund to the Principal Recipient is subject to the satisfaction of each of the following conditions: a. the delivery by the Principal Recipient to the Global Fund of a completed version of an appropriate monitoring and evaluation assessment tool, as approved by the Global Fund, which has been prepared by the Principal Recipient in consultation with the Program stakeholders ("M&E Assessment Tool");	M&E	Disbursem ent	15.Jul.11	Met	MESS Tool report submitted by the PR on 4-May-2011

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CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is curr ently met?	Comments
	Condition Precedent	Conditions Precedent to Second Disbursement (Terminal Date as stated in block 6A of the Face Sheet): The second disbursement of Grant funds by the Global Fund to the Principal Recipient is subject to the satisfaction of each of the following conditions: b. the delivery by the Principal Recipient to the Global Fund of an updated plan for monitoring and evaluating Program activities (the "Updated M&E Plan") that includes, without limitation, a description of activities that will be implemented to strengthen the monitoring and evaluation system for the Program and a budget for such activities, which incorporates the recommendations made by Program stakeholders upon completion of the M&E Assessment Tool;	M&E	Disbursem ent	15.Jul.11	Met	Updated M&E Plan was sent by the PR to the GF on 19 July 2011. It is currently being reviewed by the GF
	Condition Precedent	Conditions Precedent to Second Disbursement (Terminal Date as stated in block 6A of the Face Sheet): The second disbursement of Grant funds by the Global Fund to the Principal Recipient is subject to the satisfaction of each of the following conditions: c. the delivery by the Principal Recipient to the Global Fund of a revised budget for the period beginning with the Program Starting Date and ending with the Program Ending Date (the "Revised Program Budget") if the amendments incorporated into the Updated M&E Plan necessitate amendments to the Program budget that was approved by the Global Fund as of the effective date of this Agreement; and	M&E	Disbursem ent	15.Jul.11	Met	The amendments to the M&E Plan did not reuqire any changes to the budget. However, the PR reprogrammed the funds budgeted for ARVs in Year 1 for the purchase of 2 CD4 count machines, so a revised budget was necessary. The revised budget was approved through IL2 on 15 August 2011.
	Condition Precedent	Conditions Precedent to Second Disbursement (Terminal Date as stated in block 6A of the Face Sheet): The second disbursement of Grant funds by the Global Fund to the Principal Recipient is subject to the satisfaction of each of the following conditions: d. the written approval of the Global Fund of the Updated M&E Plan and Revised Program Budget (the latter only being applicable if condition c. of this sub-section is applicable).	M&E	Disbursem ent	15.Jul.11	Met	The revised M&E Plan has been approved by the GF on 17-Aug-2011.
	Condition Precedent	By no later than 30 April 2011, the Principal Recipient shall deliver to the Global Fund a revised plan for the procurement, use and supply management of Health Products (the "Revised PSM Plan") consistent with Article 18 of the Standard Terms and Conditions of this Agreement. The Principal Recipient acknowledges and agrees that the disbursement by the Global Fund or use by the Principal Recipient of Grant funds for the procurement of Health Products for the second year of the Program is subject to the written approval by the Global Fund of the Revised PSM Plan.	Procureme nt	Procureme nt	30.Apr.11	Met	The revised version of the PSM Plan (excluding the provisions related to ARVs) was approved by the Global Fund in January 2012. The latest communication from the PR indicates that the PR wishes to purchase ARVs using funds other than those of the Global Fund program. Therefore, there is no longer a need to have the ARVs included in the PR's PSM Plan, and the condition will thus be considered approved.

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CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is curr ently met?	Comments
	Condition Precedent	By no later than 31 May 2012, the Principal Recipient shall deliver to the Global Fund baseline values and targets, in form and substance satisfactory to the Global Fund, for outcome indicators 5 and 6 that have baseline values indicated as "TBD" in the Performance Framework attached to Annex A of this Grant Agreement ("% of female sex workers reporting the use of a condom with their most recent client" and "% of men reporting the use of condom the last time they had anal sex with a male partner", respectively).	M&E	Other	31.May.12	Met	All relevant information in support of this condition has been submitted, and the Global Fund has formally confirmed this condition as fulfilled on 13 June 2012.
	Condition Precedent	The Principal Recipient acknowledges and agrees that prior to the use by the Principal Recipient of Grant Funds to finance viral load testing of PLWHA receiving ART, the Principal Recipient shall inform the Global Fund of the total cost of conducting this activity, including a detailed breakdown of such cost. In the event that the total cost is below the estimated cost indicated in the detailed budget approved by the Global Fund as of the effective date of this Agreement, the difference in cost may be reduced from the maximum amount of Grant funds specified in block 7 of the Face Sheet of this Agreement or re-allocated to the Program, subject to written approval by the Global Fund.	Finance	Other		Met	The PR provided the required documentation in support of this special condition on 10 February 2012. The Global Fund formally approved this documentation and cleared the condition on 14 February 2012.

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Precedent and had Pri rep Co pro con the lift that Ag to the	ne Principal Recipient acknowledges as entered into this Agreement with the incipal Recipient in reliance on the presentation by the Country coordinating Mechanism that the funds rovided under this Agreement do not constitute more than 65% of the funds for enational HIV/AIDS program in Belize. The Principal Recipient becomes aware at the funds provided under this greement are in fact or are anticipated be materially higher than this amount, e Principal Recipient shall promptly outfiy the Global Fund.	Legal	Other	Met	According to the Budget approved by the Government of Belize for the Fiscal year 2011-2012 (April 2011-March 2012) the following funds for the contribution of the National HIV/AIDS Program are indicated: a) Ministry of Health, an approved budget ascending to BZD 1,488,745 (US\$744,372.50); b) Ministry of Labor with a budget approved for the HIV Workplace Education Program (BZD 10,000; equivalent to USD 5,000) c) Youth for the Future: salary for the HIV Manager Unit (BZD 27,060; equivalent to USD 13,530) d) A grant from UNFPA for HIV prevention with YFF (BZD 50,000; equivalent to USD 25,000) Against this, the total contribution for the HIV/AIDS program for the period April 2011 – March 2012: Q2-Q5 is of USD 787,903. Being the Global Fund Round 9 Budget for the same period (Q2 to Q5) of USD 1,703,753 / GF: USD 1,703,753 + Government USD 787,903). The GF believes that the difference of 6% (difference of 3% over the 65%) is not materially high. However, there is also a Government budget allocated for the NAC Secretariat, the Ministry of Education and Youth (HFLE department) and the Ministry of Human Development and Social Transformation that hasn't been specified, being those institutions performing activities contributing to the National HIV/AIDS Program as well. Therefore, the total national contribution to the HUV/AIDS program is higher than the 32% indicated by current figures. At the Phase 2 renewal request the Belize was complying with counterpart financing requirement showing 45% of projected spending for 2013-2015, higher than the 40% threshold for upper-lower middle income countries. The information reported was supported by official public data and sources in formation to observed trends and projected expenditure. General government funding starts at approximately USD 750,000 (BZ\$ 1.5 million) in 2010 and it will reach about USD 950,000 (BZ\$ 1.9 million) in 2015, according to observed trends and projected expenditure. General government health expenditure has been growing faster than GDP and it wil

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CI #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is curr ently met?	Comments
	Condition Precedent	Phase 2 - Special Condition 1: By no later than 30 June 2013 the Principal Recipient shall submit to the Global Fund the following documents, which shall be in form and substance satisfactory to the Global Fund: a. A diagnosis of the situation of MARPs in Belize (in particular MSM, SW and Young people aged 11-24) and in particular presenting the issues impeding prevention outreach activities and those related to access to treatment (the "Situation Diagnosis"). The Situation Diagnosis shall be prepared in collaboration with the Government, the National AIDS Commission and relevant technical partners such as PAHO/WHO and UNAIDS; b. A Plan on how the program can address the issues identified in the Situation Diagnosis through the reprogramming of US\$ 427,025 originally allocated to HSS Information System in i) scaling up prevention efforts of BCC outreach and schools, particularly those addressed to MSM and FSW, ii) STI Diagnosis and Treatment activities targeted at vulnerable populations, iii) Support for orphans and Vulnerable Children and iv) Strengthening of civil society and institutional capacity building. Such a Plan shall be prepared in collaboration with the Government, the National AIDS Commission and relevant technical partners such as PAHO/WHO and UNAIDS.	M&E	Other	30.Jun.13	Met	The documentation was sent on time and in a quality manner. The Global Fund approved on 12 August 2013 US\$ 211,973 for the following interventions: 1. Increase of MSM targets (from 450 to 825) reached with an improved BCC intervention package through more resources and new methods to identify and recruit MSM. 2. Increase of FSW targets (from 228 to 418) reached with an improved package of HIV prevention services and innovative pilot to reach non-attached FSW. 3. Positive prevention for PHIV: target of 375 PHIV reached via home visits with nutrition and psycho-social support. 4. Increase in the target of MARPS (from 646 to 926) diagnosed and treated for STI, implying 4,630 persons screened for STI (ratio 5:1). 5. CSS component with the development of a national HIV prevention framework and action plan; educators training and communication products for S&D reduction The Global Fund approved on 23 October 2013 the following interventions: 6. Conduct a meta-data analysis for determining the MSM population and modes of transmission of HIV in Belize: US\$ 30,000 with additional resources provided by UNAIDS & PAHO. 7. Expanding services to increase the quality of life of persons with HIV including 50 children and vulnerable population to be implemented by C-NET+: US\$ 67,500 (food packages) and US\$ 39,660 (counselling services) 8. Scale-up targets in OVC participating in the conditional cash transfer scheme: US\$ 33,000 for 50 additional children. The Global Fund did not approve a total of US\$ 44,880 that can still be reprogrammed. UNDP agreed to finance 2 consultancy to conduct National Composite Policy Index (NCPI); ii) US\$ 20,000: consultancy to cost NSP/NOP and M&E plans. IL#5 updates the SB and PF. UNDP and the CCM continue to work on this but overall this condition is considered as fulfilled.

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CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is curr ently met?	Comments
	Condition Precedent	Phase 2 - Special Condition 2: The Principal Recipient acknowledges and understands that the Global Fund has entered into this Agreement with the Principal Recipient in reliance on the representation by the Country Coordinating Mechanism that the funds provided under this Agreement do not constitute more than 65% of the funds for the national HIV/AIDS program in Belize. If the Principal Recipient becomes aware that the funds provided under this Agreement are in fact or are anticipated to be materially higher than this amount, the Principal Recipient shall promptly notify the Global Fund.	Legal	Other		Met	The Country is complying with counterpart financing requirement showing 45% of projected spending for 2013-2015, higher than the 40% threshold for upper-lower middle income countries. The information reported is supported by official public data and sources. Government funding starts at approximately USD 750,000 (BZ\$ 1.5 million) in 2010 and it will reach about USD 950,000 (BZ\$ 1.9 million) in 2015, according to observed trends and projected expenditure. General government health expenditure has been growing faster than GDP and it will continue to grow, all things being equal. On the other hand, contribution from PEPFAR is expected to decrease over the same period: resources dropped from USD 1.01 million in 2011 to USD 941.87 in 2012, and sources in coordination of the regional office expect a 15% reduction for 2013 (USD 800), and continue up to 2015 with the same annual amount.
	Condition Precedent	Phase 2 - Special Condition 3: Article 13(b)(1) of the Standard Terms and Conditions of this Agreement should read as follows: "(1) Periodic Reports. Not later than 45 days after the close of each semester of the Principal Recipient's fiscal year, the Principal Recipient shall submit to the Global Fund, in form and substance satisfactory to the Global Fund, a periodic report on the Program. The report shall reflect (i) financial activity during the semester in question and cumulatively from the beginning of the Program until the end of the reporting period; and (ii) a description of progress towards achieving the agreed-upon milestones set forth in Annex A. The Principal Recipient shall explain in the report any variance between planned and actual achievements for the period in question."	Legal	Other		Met	This Special Condition was endorsed by UNDP as no final agreement on STCs reflecting ADCD has been reached between GF and UNDP headquarters. No particular action to be taken.

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2. Key Grant Performance Information

2.1. Program I	npact and	Outcom	ne Indicat	ors												
Year 1 Yea	2 Year	3 Yea	ır 4 Ye	ar 5 Y	ear 6	Year 7	Year 8	Year 9	Year 10	Year 1	1 Year	12 Year	13 Yea	ır 14 Ye	ar 15	
2011 201	2 201	3 20	14 20	15 2	2016	2017	2018	2019	2020	2021	2022	2 202	23 20	24 2	025	
Goal 1	To halt	the spre	ad of HIV	/ in Beliz	e, with a	special	emphasi	s on mo	st at-risk	populati	ons and	young p	eople ag	ed 15-24	•	
mpact indicato	r	% c	of young w	vomen ar	nd men a	ged 15-2	4 who are	HIV infe	cted			Ва	aselines			
											Valu			Year		
											0.77	%	<u> </u>	2009		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 1	
Target	0.76%	0.75%	0.63%	0.62%	0.61%											
Result	0.64%			0.60%												
Data source of Results																
mpact indicato	r	Per	centage c	of adults a	and child	ren with H	IV know	n to be or	treatmen	ıt	'	Ba	selines		<u>'</u>	
			months af								Valu			Year		
											75.6	%		2009		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 1	
Target	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	
	D: P: 76%	D: P: 77%	D: P: 78%	D: P: 79%	D: P: 80%	D: P: %										
Result	N:	N:	N:	N: 116	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	
	D: P: 64%	D: P: %	D: P: %	D: 243 P: 48%	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	
Data source of Results																
Outcome indica	itor				ed 15-24	who had	sex with	more tha	n one par	tner		Ва	aselines			
		in tr	ne last ye	ar							Valu	е	Year			
											10.4	1	<u> </u>	2009		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 1	
Target	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	
	P: 10%				P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	
Result	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	
	P: 3%	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	P: %	
Data source of Results																
Outcome indica	itor	% c	of young w	vomen ar	nd men w	ho had s	ex before	the age	of 15		<u>'</u>	Ba	aselines			
			, 0					J			Valu			Year		
											7.8%	6		2009		
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 1	
Target	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	N: D:	
	D: P: 8%	D: P: %	D: P: %	D: P: 7%	D: P: %	D: P: %	D: P: %	P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	
Result	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	N:	
	D: P: 5%	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	D: P: %	
Data source of																
Results																

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Outcome indicate	or					-49 expre	ressing accepting attitudes Baselines								
		tow	ards peor	ole with H	IV						Valu	ne		Year	
											8.19	%	<u></u>	2009	
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	N: D: P: 10%	N: D: P: %	N: D: P: %	N: D: P: 14%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: 19%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Data source of Results															
Outcome indicate	or								n one sex	ual		Ва	aselines		
			tner in the ir last sex			eporting	the use o	f a condo	m during		Valu	re		Year	
											72.4	%	<u> </u>	2009	
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	N: D: P: 74%	N: D: P: %	N: D: P: %	N: D: P: 76%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: 26%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Data source of Results			, .									,.			
Outcome indicate	or			sex worke	ers repor	ting the u	se of a co	ondom wi	th their mo	ost		Ba	aselines		
		rec	ent client								Valu	ıe		Year	
											81.	6	<u> </u>	2010	
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	Baselin e establis hed	N: D: P: %	N: D: P: 84%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	82														
Data source of Results															
Outcome indicate	or				e use of	condom t	he last tin	ne they h	ad anal se	ex		Ba	aselines		
		with	n a male p	artner							Valu			Year	
				Ti	Ti .	1	1	1			82.	3	1	2010	
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	Baselin e establis hed	D:	N: D: P: 85%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	82														
Data source of Results															
Outcome indicate	or							eived an	HIV test in	n		Ва	aselines		
		the	last 12 m	onths and	d who kn	ow their r	esults				Valu	re		Year	
											36.5	5%	<u> </u>	2009	
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15
Target	N: D: P: 39%	N: D: P: %	N: D: P: %	N: D: P: 43%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: 41%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Data source of Results															

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Outcome indicat	Outcome indicator Number of adults and children with advanced HIV infection currently									Baselines						
	receiving antiretroviral therapy								Value Year							
												907	•	2012		
	Year 1	Year	2 Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year	10	Year 11	Year 12	Year 13	Year 14	Year 15
Target			1,516	1,960	2,200											
Result																
Data source of Results																

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2.2.	Prog	ramma	tic	Per	form	ance
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2.2.1. Reporting Periods										
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
N/A	01.Jan.11 30.Jun.11	01.Jul.11 31.Dec.11	01.Jan.12 30.Jun.12	01.Jul.12 31.Dec.12	01.Jan.13 30.Jun.13	01.Jul.13 31.Dec.13	01.Jan.14 30.Jun.14	01.Jul.14 31.Dec.14		

2.2.2. Program Objectives, Service Delivery Areas and Indicators

Objective 1 - HIV: To reduce the sexual transmission of HIV among MARPs (young people, MSMs, FSWs)

Prevention: Behavioral Change Communication - Community Outreach

Indicator 1.1 - Number of young people aged 11-20 years reached with life skills-based HIV education in secondary education settings

	Base	eline	ls Top 10	Is Training indicator? (Y/N)	
	Value	Year	indicator? (Y/N)		
Level 3-People reached	3343	2012	Top 10 Equ.	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	0	600	6,600	4,600	600	3,100	3,100	4,600
Result	0	592	3,343	2,939	345	3,217	Pending result	4,919
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	4,600	5,600						
Result								

Indicator 1.2 - Number of young people 11-24 out-of-school reached with life skills-based HIV/AIDS education in out-of-school settings

	Base	eline	ls Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 3-People reached	294	2012	Top 10 Equ.	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
Target	0	0	600	600	600	600	600		600
Result	0	0	294	725	608	676	Pending result		603
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16	
Target	600	600							
Result									

Indicator 1.3 - Number of MSM reached with a defined package of HIV prevention services

	Base	eline	ls Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 3-People reached	151	2012	Top 10 Equ.	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
Target	300	300	300	300	75	113	157		160
Result	300	204	372	309	78	113	Pending result		200
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16	
Target	160	160							
Result									

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Indicator 1.4 - Number of FSW reached with a defined package of HIV prevention service	es	
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	Baseline		Is Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 3-People reached	81	2012	Υ	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	150	150	150	150	38	57	80	81
Result	150	191	254	264	40	57	Pending result	269
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	81	81						38
Result								

Prevention: Condom Distribution

Indicator 1.5 - Number of free male condoms distributed to end-users in the last 12 months

	Base	eline	ls Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 3-People reached	427,421	2009	Υ	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	194,850	389,700	194,850	389,700	194,850			
Result	103,248	390,686	136,664	368,756	Pending result			

Prevention: Counseling and testing

Indicator 1.6 - Number of HIV testing and counseling services provided (including pre and post-test counseling)

	Base	eline	ls Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 3-People reached	11723	2009	Y	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	5,000	12,000	5,000	11,000	5,500			
Result	7,584	12,780	7,244	14,950	Pending result			

Prevention: STI diagnosis and treatment

Indicator 1.7 - Number of cases of sexually transmitted infections treated amongst MSM and FSW

	Base	eline	Is Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 3-People reached	N/A	2010	N	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	169	538	449	909	340			
Result	64	134	149	149	9 Pending result			

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Objective 2 - HIV: To improve the quality of life and livelihood conditions of poor households directly affected by HIV and AIDS

Care and Support: Care and support for the chronically ill

Indicator 2.1 - Number of adults and children living with HIV who receive care and support services outside health facilities during the reporting period

	Base	eline	ls Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 3-People reached	504	2012	N	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
Target	0	0	1,500	2,000	250	675	425		800
Result	0	0	504	1,556	642	939	Pending result		392
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16	
Target	450	850							

Care and Support: Support for orphans and vulnerable children

Indicator 2.2 - Number of orphans and vulnerable children 0-17 years whose households received free basic external support in caring for the child (cash transfer)

	Base	eline	ls Top 10	Is Training
	Value	Year	indicator? (Y/N)	indicator? (Y/N)
Level 3-People reached	94	2012	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
Target	0	100	200	200	150	250	250		250
Result	0	70	94	190	274	278	Pending result		250
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16	
Target	300	300							
Result									

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Objective 3 - HIV: To improve the coverage and quality of the continuum of care for HIV infected and affected populations

Treatment: Antiretroviral treatment (ARV) and monitoring

Indicator 3.1 - Number of adults and children with advanced HIV infection currently receiving antiretroviral therapy

	Base	eline	ls Top 10	Is Training
	Value	Year	indicator? (Y/N)	indicator? (Y/N)
Level 3-People reached	883	2010	Y	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	895	957	999	1,054	1,103			
Result	1,333	1,358	907	1,040	Pending result			

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Objective 4 - HIV: To solve capacity weaknesses at all levels in the national response to HIV and AIDS

Supportive environment: Strengthening of civil society and institutional capacity building

Indicator 4.1 - Number of professional service providers reached with skill-improvement training events

	Base	eline	ls Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 1-People trained	N/A	2010	N	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	10	270	497	977	400			
Result	141	255	219	704	Pending result			

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Objective 5 - HSS: To enhance the expansion of access to health care and improved quality and uptake of services, including HIV/AIDS
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HSS: Information System

Indicator 5.1 - Percentage of public health facilities reporting core indicators within 30 days of end of quarter

	Base	eline	ls Top 10	Is Training	
	Value Year		indicator? (Y/N)	indicator? (Y/N)	
Level 2-Service Points supported	0	2010	N	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	N: 1 D: 23 P: 4%		D: 23		N: 11 D: 23 P: 48%	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: 15 D: 23 P: 65%	D: 23		-	Pending result	N: D: P: %	N: D: P: %	N: D: P: %

HSS: Service delivery

Indicator 5.2 - Laboratory turn around time for CD4 count (days)

	Base	eline	Is Top 10	Is Training	
	Value Year		indicator? (Y/N)	indicator? (Y/N)	
Level 2-Service Points supported	10	2008	N	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	10	10	9	8	7			
Result	4	2	2	1	Pending result			

Indicator 5.3 - Average outpatient wait time at Central Medical Laboratory (minutes)

	Base	eline	Is Top 10	Is Training
	Value	Year	indicator? (Y/N)	indicator? (Y/N)
No Level	60	2008	N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	55	50	45	40	35			
Result	11	10	9	8	Pending result			

HSS: Medical Products, Vaccines and Technology

Indicator 5.4 - Number of key staff trained in drug quantification and use of SOPs

	Baseline		ls Top 10	Is Training	
	Value	Year	indicator? (Y/N)	indicator? (Y/N)	
Level 1-People trained	3	2008	N	N	

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	0	0	15	30	15			
Result		0	0	0	Pending result			

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Prevention: Counseling and testing

Indicator 5.5 - Number of HIV testing and counselling services provided (including pre and post-test counselling)

	Base	eline	ls Top 10	Is Training
	Value	Year	indicator? (Y/N)	indicator? (Y/N)
Level 3-People reached	7244	2012	Top 10 Equ.	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target					7,000	12,100	7,000	12,200
Result					14,958	29,648	Pending result	16,828
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	7,000	12,300						
Result								

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2.2.3. Cumulative Progress To Date

Latest reporting due period: 8 (01.Jul.14 - 31.Dec.14)

SDA	HIV: To reduce the	sexual transmi	SSION OF IT	iv among i	WARPS (yo	Juliy p		<u> </u>		
DUA	Prevention: Behavi	oral Change Co	mmunica	tion - Comi	munity Ou	treach				
ndicator 1.1	- Number of young people a	ged 11-20 years	reached	with life sk	ills-based	HIV ed	ducation	in seco	ndary edu	cation setting
		Та	rget	Re	sult				90,3	
		Period	Value	Period	Value	0%	30%	60%	100% 90%	
Level 3-Peopl	le reached	8	4,600	8	4,919		100	100		107%
Indicator 1.2	- Number of young people 1	1-24 out-of-sch	ool reache	ed with life	skills-bas	ed HIV	/AIDS ed	ducation		school settin
		Та	rget	Re	sult		4.5		100% 90%	
		Period	Value	Period	Value	0%	30%	60%	00%	
Level 3-Peopl	le reached	8	600	8	603					100%
l!! (4 0	Namel and CMOM association	olds a datha a dar		1107						
naicator 1.3	- Number of MSM reached w					ces			9	
			rget		sult		ယ္	စ္	100% 90%	
		Period	Value	Period	Value	0%	30%	60%	0%	
Level 3-Peopl	le reached	8	160	8	200					120%
ndicator 1.4	- Number of FSW reached w	ith a defined pa	ckage of I	HIV prever	ntion servi	ces				
			rget	1	sult	T			90	
		Period	Value	Period	Value	-	30%	60%	100% 90%	
Level 3-Peopl	le reached	8	81	8	269	0%	%	%	%	120%
2010101000	- Todollou	0	01	0	203					12070
SDA	Prevention: Condo	m Distribution								
Indicator 1.5	- Number of free male condo	oms distributed	to end-us	ers in the l	ast 12 mo	nths				
		Та	rget	Re	sult				90 (
		Period	Value	Period	Value	0%	30%	60%	100% 90%	
						_	<u> </u>	- 6		
Level 3-Peopl	le reached	4	389.700	4	368.756					95%
Level 3-Peopl	le reached	4	389,700	4	368,756					95%
<u>'</u>	le reached Prevention: Counse		,	4	368,756					95%
SDA	Prevention: Counse	eling and testin	g		· ·	and po	st-test c	ounselii	ng)	95%
SDA		eling and testin	g vices prov	/ided (inclu	ıding pre a	and po	st-test c	ounselii		95%
SDA	Prevention: Counse	eling and testin counseling ser Ta	g vices prov	vided (inclu	iding pre a					95%
SDA Indicator 1.6	Prevention: Counse - Number of HIV testing and	eling and testin counseling ser Ta Period	g vices prov rget Value	rided (inclu Re Period	uding pre a sult Value	and po	st-test c	ounselii 60%	ng) 100%	
SDA Indicator 1.6	Prevention: Counse - Number of HIV testing and	eling and testin counseling ser Ta	g vices prov	vided (inclu	iding pre a					95%
SDA Indicator 1.6 Level 3-Peopl	Prevention: Counse - Number of HIV testing and le reached	eling and testin counseling ser Ta Period 4	g vices prov rget Value 11,000	rided (inclu Re Period	uding pre a sult Value					
SDA Indicator 1.6 Level 3-Peopl	Prevention: Counse - Number of HIV testing and le reached Prevention: STI dia	eling and testin counseling ser Ta Period 4 gnosis and trea	g vices prov rget Value 11,000	rided (inclu Re Period 4	sult Value 14,950	0%	30%			
SDA Indicator 1.6 Level 3-Peopl	Prevention: Counse - Number of HIV testing and le reached	eling and testin counseling ser Ta Period 4 gnosis and trea	yvices prov riget Value 11,000	rided (inclu Re Period 4	uding pre a sult Value 14,950 ongst MSI	0%	30%		100%	
SDA Indicator 1.6 Level 3-Peopl	Prevention: Counse - Number of HIV testing and le reached Prevention: STI dia	eling and testin counseling ser Ta Period 4 gnosis and trea	g vices prov rget Value 11,000	rided (inclu Re Period 4	sult Value 14,950	0%	30% FSW	60%	100%	
Level 3-Peopl	Prevention: Counse - Number of HIV testing and le reached Prevention: STI dia	eling and testin counseling ser Ta Period 4 gnosis and trea	yvices prov riget Value 11,000	rided (inclu Re Period 4	uding pre a sult Value 14,950 ongst MSI	0%	30%			

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Objective 2	HIV: To improve the qual	ity of life	and livelih	ood condit	ions of po	or ho	usehold	s directly	y affected	by HIV and	
SDA	Care and Support: Care a	are and Support: Care and support for the chronically ill									
Indicator 2.1 - Number	er of adults and children liv	ving with	HIV who re	eceive care	and supp	ort se	rvices o	utside h		ilities during the	
		Та	ırget	Re	sult				90%		
		Period	Value	Period	Value	0%	30%	60%	100% 90%		
Level 3-People reache	ed	8	800	8	392					49%	

SDA	Care and Support: Support	ort for orp	hans and	vulnerable	children						
Indicator 2.2 - Number of orphans and vulnerable children 0-17 years whose households received free basic external support in caring for the child (cash transfer)											
		Target Result									
		Period	Value	Period	Value	0%	30%	60%	00%		
Level 3-People reache	ed	8	250	8	250					100%	

Objective 3	IIV: To improve the coverage and quality of the continuum of care for HIV infected and affected populations									
SDA	Treatment: Antiretroviral	eatment: Antiretroviral treatment (ARV) and monitoring								
Indicator 3.1 - Number	Indicator 3.1 - Number of adults and children with advanced HIV infection currently receiving antiretroviral therapy									
		Та	arget	Re	sult				10 90%	
		Period	Value	Period	Value	0%	30%	60%	° 00%	
			1 411 414			•	I &	I &	0	

Objective 4	HIV: To solve capacity weaknesses at all levels in the national response to HIV and AIDS									
SDA	upportive environment: Strengthening of civil society and institutional capacity building									
Indicator 4.1 - Number	Indicator 4.1 - Number of professional service providers reached with skill-improvement training events									
		Та	arget	Re	sult				100%	
	Period Value Period Value 8 8 8 8 8									
Level 1-People trained	I	4	977	4	704					72%

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Objective 5	HSS: To enhance the e	expansion o	f access to	health ca	re and imp	roved	quality	and upt	ake of serv	vices, including
SDA	HSS: Information Syst	em								
Indicator 5.1 - Pe	rcentage of public health fa	cilities repo	rting core	indicators	within 30 d	days of	f end of	quarter		
		Ta	arget	Re	sult				10 90%	
		Period	Value	Period	Value	0%	30%	60%	100%	
Level 2-Service P	pints supported	4	N: 9 D: 23 P: 39.1 %	4	N: 9 D: 23 P: 39.1 %					100%
SDA	HSS: Service delivery									
Indicator 5.2 - La	boratory turn around time f	or CD4 cour	nt (days)							
		Та	arget	Re	sult				10 90%	
		Period	Value	Period	Value	0%	30%	60%	100%	
Level 2-Service P	oints supported	4	8	4	1.4					120%
Indicator 5.3 - Av	erage outpatient wait time a	at Central M	edical Lab	oratory (mi	inutes)					
		Ta	arget	Re	sult		ω	6	10 90%	
		Period	Value	Period	Value	0%	30%	60%	100%	
No Level		4	40	4	8.3					120%
SDA	HSS: Medical Products	s, Vaccines	and Techn	ology						
Indicator 5.4 - Nu	mber of key staff trained in	drug quant	ification an	nd use of S	OPs					
		Ta	arget	Re	sult			Т	10 90%	
		Period	Value	Period	Value	0%	30%	60%	100%	
Level 1-People tra	ined	4	30	4	0					0%
SDA	Prevention: Counselin	g and testin	ıg							
Indicator 5.5 - Nu	mber of HIV testing and co	unselling se	rvices pro	vided (incl	uding pre	and po	st-test o	ounsel	· ·	
		Та	arget	Re	sult				10 90%	
		Period	Value	Period	Value	0%	30%	60%	100%	
Level 3-People re	ached	8	12,200	8	16,828					120%

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2 3	Financ	ial Darf	ormanca

2.3.1. Grant Financial Key Performance Indicators (K	(PIs)		
Grant Duration (months)	60 months	Grant Amount	5,433,128 \$
% Time Elapsed (as of end date of the latest PU)	80%	% disbursed by TGF (to date)	86%
Time Remaining (as of end date of the latest PU)	12 months	Disbursed by TGF (to date)	4,680,759 \$
Expenditures Rate (as of end date of the latest PU)	92%	Funds Remaining (to date)	752,369 \$

2.3.2.	Program	Bud	lget
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	Budget Period 1	Budget Period 2	Budget Period 3	Budget Period 4	Budget Period 5	Budget Period 6	Budget Period 7	Budget Period 8
Period Covered From:	01.Jan.11	01.Apr.11	01.Jul.11	01.Oct.11	01.Jan.12	01.Apr.12	01.Jul.12	01.Oct.12
Period Covered To:	31.Mar.11	30.Jun.11	30.Sep.11	31.Dec.11	31.Mar.12	30.Jun.12	30.Sep.12	31.Dec.12
Currency:	USD							
Cumulative Budget Through:	184,522	592,958	979,201	1,419,088	1,888,279	2,335,553	2,826,603	2,611,770
Summary Period Budget:	184,522	408,436	386,243	439,887	469,191	447,274	491,050	352,115

Expenditure Categories

Program Activities

Implementing Entities

	Budget Period 9	Budget Period 10	Budget Period 11	Budget Period 12	Budget Period 13	Budget Period 14	Budget Period 15	Budget Period 16
Period Covered From:	01.Jan.13	01.Apr.13	01.Jul.13	01.Oct.13	01.Jan.14	01.Apr.14	01.Jul.14	01.Oct.14
Period Covered To:	31.Mar.13	30.Jun.13	30.Sep.13	31.Dec.13	31.Mar.14	30.Jun.14	30.Sep.14	31.Dec.14
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	2,912,419	3,194,702	3,450,046	3,676,276	4,072,146	4,416,449	4,603,310	4,781,187
Summary Period Budget:	300,651	282,283	255,344	226,230	395,870	344,303	186,861	177,877

Expenditure Categories

Program Activities

Implementing Entities

	Budget Period 17	Budget Period 18	Budget Period 19	Budget Period 20	Budget Period 21	Budget Period 22	Budget Period 23	Budget Period 24
Period Covered From:	01.Jan.15	01.Apr.15	01.Jul.15	01.Oct.15	01.Jan.16	01.Apr.16	01.Jul.16	01.Oct.16
Period Covered To:	31.Mar.15	30.Jun.15	30.Sep.15	31.Dec.15	31.Mar.16	30.Jun.16	30.Sep.16	31.Dec.16
Currency:	USD							
Cumulative Budget Through:	4,995,123	5,253,506	5,474,646	5,646,491	5,646,491	5,646,491	5,646,491	5,646,491
Summary Period Budget:	213,936	258,383	221,140	171,845				

Expenditure Categories

Program Activities

Implementing Entities

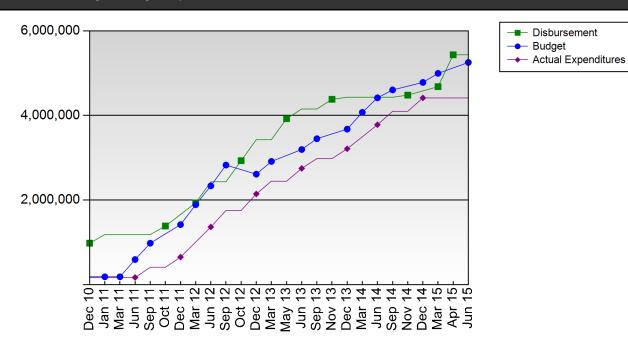
- Comments and additional information

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2.3.3. Program Expenditures					
Period PU8: 01.Jul.14 - 31.Dec.14	Actual Cash Outflow	Cumulative Budget	Cumulative Cash Outflow	Variance	Reason for variance
1. Total cash outflow vs. budget	\$ 634,490	\$ 4,781,187	\$ 4,414,568	\$ 366,619	
1a. PR's Total expenditure	\$ 270,706		\$ 1,785,110		
1b. Disbursements to sub-recipients	\$ 363,784		\$ 2,629,458		
1c. Expenditure Adjustments					Reason for adjustments
2. Pharmaceuticals & Health Product expenditures vs budget			\$ 613,771		
2a. Medicines & pharmaceutical products					
2b. Health products and health equipment			\$ 613,771		

2.3.4. Cumulative Program Budget, Expenditures and Disbursement to Date



2.4. Progress Update and Disbursement Information

Rating	Description				
A1 Exceeding expectations					
A2	Meeting expectations				
B1	Adequate				
B2	Inadequate but potential demonstrated				
С	Unacceptable				

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end-users.

								Last	Updated on:	
	F	rogress Up	dates		Disbursement Information					
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
0	01.Jan.11 -			N/A	1	01.Dec.10 - 31.Aug.11	979,202	\$ 979,201	08 Dec 2010	
	Summary of Progress					s for variance be	etween PR Req	uest and Actual	Disbursement	
	N/A - this is the first disbursement request, and no progress update is available at this time.				been disk	the first disburse oursed. The \$1 did d amount is due to	fference betwee	n the requested		
	F	rogress Up	dates			Di	sbursement In	formation		
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
1	01.Jan.11 - 30.Jun.11			B1	2	01.Jul.11 - 31.Mar.12	480,203	\$ 406,777	17 Oct 2011	
	Su	mmary of P	rogress		Reason	s for variance be	etween PR Req	uest and Actual	Disbursement	
This is the first Progress Update for the Program, covering the initial six months of implementation (P1, 1-Jan-2011 to 30-June-2011). The performance of the PR in the first semester was very strong, with an average 'All Indicator' performance of 101% and a 'Top 10 Indicator' performance of 99%. Despite this overall strong programmatic performance at the end of P1, the 'Quantitative Indicator Rating" (as calculated according to the 'Grant Rating Methodology') is 'B1' because one(1) 'Top 10' indicator received a rating of 'B2' (i.e. 30% to 59%achievement): - "Number of free male condoms distributed to endusers in the last 12 months" (P1 target: 194,850, P1 result: 103,248, 53% achievement). The lower than planned result is due to the late procurement of male condoms (the delays were caused by the slower than expected start-up of the Program). As a result, the PR was successful in distributing 189,216 condoms to the District Distribution Points (97% of target), but there was not sufficient time prior to the end of P1 for the District Distribution Points to distribute condoms further down the line to endusers. As a result, free male condoms distributed to end-users reached the amount of 103,248 units in P1 (53% of target). The PR plans to catch up on condom distribution in P2. The Regional Team agrees with the quantitative indicator rating, even though it understands the reasons behind the low result for thi sindicator in P1. The Regional Team believes that the PR can					period). The treatment of the distance of the distance of the difference of confirm disburser. The Registance of the difference of the dif	nount budgeted for the disbursement period by the PR is USD also did not roll of the unspent funds finally paid by the PR in t	amount request d minus the cast 480,203. Ver to its recommon P1. It recommon P1. It recommon July 2011 and any amounts for P2). It further resolute the nounts and amounts and amounts and paymeursement of 100,00% of the amount of July to Debursing 65% of nt period and the din July 2011 for at it should disbut potential of increnditures and calready amount	ted by the PR eqh balance. The to mended disburse mended disburs committed for the both the activities ecommended disbursement perunts paid in July he LFA is US\$ 2 e amount of fundints for activities power of the difference between the difference betwe	uals the budget otal requested ment amount ing 100% of the experiod of July is postponed bursing 55% of riod and the sum 2011. The total 59,715. Is necessary to postponed from it further PR in July 2011 P2 activities. It ween the ed committed luled for P2. The difference based is burn rate in the PR for or 69% of the	

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	Progress Updates						Disbursement Information				
P	U	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
2		01.Jul.11 - 31.Dec.11			B1	3	01.Jan.12 - 30.Sep.12	988,884	\$ 546,968	27 Mar 2012	

Summary of Progress

This is the second Progress Update for the Program, covering six months of implementation (P2 from 1-Jul-2011 to 31-Dec-2011). The programmatic performance of the PR in the second semester of 2011 was very strong, with an average 'All Indicator' activities planned in P3;

performance of the PR in the second semester of 2011 was very strong, with an average 'All Indicator' performance of 95% and a 'Top 10 Indicator' performance of 105%. Based on the 'Grant Rating Methodology', this level of performance corresponds to a 'Quantitative Indicator Rating' of "A1". This is a significant improvement in programmatic performance since the previous reporting period (which ended on 30 June 2011), when the program's indicator performance rating was "B1".

The improved programmatic performance in P2 compared to the previous period is due to a number of factors:

- Firstly, the PR's strong efforts to catch up with program implementation after a slow start of the program activities in the beginning of 2011 (and notably the PR's efforts to speed up the distribution of free male condoms that was significantly delayed due to the condoms' late procurement in P1).
- Secondly, significant work completed by the PR in reaching the most-at-risk populations, which in Belize has been extremely challenging due to the major stigma and discrimination of the MARPs, especially men who have sex with men.
- Thirdly, an improvement in data completeness and reporting at the SR level as SRs become more familiar with the Global Fund reporting requirements and increase their compliance with them.

The Regional Team agrees with the 'Quantitative Indicator Rating', even though it is concerned with a possibility of incorrect classification of some indicators as being tied to the Global Fund grant. The performance trends of these indicators will be closely monitored by the Global Fund in the lead-up to Phase 2, and the targets will be revised to reflect the actual funding sources and programmatic achievements.

Despite the strong programmatic performance, due to the major management actions at the PR level, the overall rating of the Program was downgraded to

Reasons for variance between PR Request and Actual Disbursement In preparing its forecast, the PR took into consideration 1) roll-over from

In preparing its forecast, the PR took into consideration 1) roll-over from Year 1 correponding to activities that were not implemented in Year 1 but will be carried out in the disbursement period; 2) commitments made in Year 1 but paid after 31 December 2011; 3) amount corresponding to the activities planned in P3; and 4) the full amount of the budget for the buffer period (July to September 2011). The forecast presented by the PR did not have a break-down of these four categories, and it was impossible during the review to identify each of the amounts. Moreover, the forecast amount presented in the PU/DR did not correspond to the forecast sent by the PR in a separate document identifying line by line the activities to be implemented during the disbursement period.

Due to the lack of clarity in the PR's forecasted expenditures for the disbursement period, the Global Fund requested from the PR the following information: a) Detail of expenditures incurred during January 2012; b) a list of commitments as of the moment of the LFA review; and c) a list of activities for which a procurement / contracting process was initiated and a list of requisition of services / supplies presented by SRs.

In making its disbursement decision, the Global Fund took into consideration the verified rolled-over amounts from 2011 and commitments and paid amounts for activities scheduled in P3. In addition to these amounts, the Global Fund decided to disburse only a portion, or 75%, of the budgeted funds for the disbursement period that were not already committed or spent by the PR, based on the low level of overall budget expenditure. Finally, in the absence of the approved PSM Plan including the updated ARV quantifications, the LFA recommended withholding the funds budgeted for the procurement of ARVs in the disbursement period, together with a corresponding 7% UNDP management fee on that amount.

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Progress Updates						Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
3	01.Jan.12 - 30.Jun.12			B1	4	01.Jul.12 - 31.Dec.12	1,153,583	\$ 996,973	01 Oct 2012	

Summary of Progress

Programmatic performance has been adequate with the average performance of 75% for all indicators and an average performance on top ten indicators of 89%. Given that there are 2 ton ten indicators

89%. Given that there are 2 top ten indicators (indicator 1.1 and 1.2) with less than 60% achievement, the programmatic Rating for this Grant is B1.

Financial Performance: During P3, the budget execution was of 78% in comparison to 58% during P2 and the cumulative execution as of P3 was of 58%, in comparison with 46% as of P2. As of the PU/DR submission, the PR had already committed 969K for the next disbursement period evidencing an increased trend in financial execution which is expected to continue in the future. Out of an overall sub-execution of USD 973K, almost 80% of the total sub-execution (USD 775K) corresponds to the sub-execution of activities to be implemented by Government sub-recipients.

Overall performance: All Special conditions have been met. Although there are a number of Management actions that are still in progress, the overall program management has improved during P3, therefore we maintain the B1 rating for this grant.

Reasons for variance between PR Request and Actual Disbursement

The current disbursement covers 6 months only (end of Phase 1); UNDP reported in June 2012 a shortage of cash mainly due to its financial system in which every contract signed is entered as a commitment, and the entire amount is deducted from the cash balance. Given these reasons, the RT decided to follow the LFA recommendation but applied a less severe adjustment (-15%) on the forecast amount with no firm supporting evidence (#2 below):

1.Liabilities, commitments and forecasted expenditures verified by LFA until 31 Dec 2012 as having adequate supporting evidence: + 968,701 2.PR forecasted expenditure with no firm supporting evidence as included in the approved budget for the period (US\$ 1,625,933 – US\$ 968,701): + 771,047

3.PR Forecasted expenditures beyond 31 December 2012 (after Phase 1 ending date): - (48,156)

4. Adjustment on Item #2 (85% applied): - (108,434)

5. Adjusted forecast (1+2+3+4) = 1,532,557

6.Cash balance: - (586,185)

7. Recommended disbursement = 996,973

	Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
4	01.Jul.12 - 31.Dec.12		-	A2	5	01.Jan.13 - 31.Mar.14	1,490,365	\$ 993,923	14 May 2013	

Summary of Progress

The programmatic performance of the PR has been good, with an average 'All Indicator' performance of 88% and a 'Top 10 Indicator' performance of 103%. Based on the 'Grant Rating Methodology', this level of performance corresponds to a 'Quantitative Indicator Rating' of "A2" which is a considerable improvement from P3.

Six (6) out of fifteen (15) indicators measured in this reporting period exceeded their targets. The Regional Team reviewed the targets during the Phase 2 renewal negotiations and discontinued eight of them (one was transfered to outcome indicator).

The programmatic performance by SDA is summarized as follows:

BCC - community outreach and schools (4 indicators): 3 indicators have shown strong performance with targets capped at 120% of achievement, one just over 100% and the last one improving over P3 performance.

Indicator 1.1: A total of 2,939 young people aged 13-18 years old out of a target of 4,600 were reached with HIV education (64%) which is an improvement from the 51% performed in P3.

Indicator 1.2: A total of 725 young people 15-24 outof-school out of a target of 600 were reached by HIV/AIDS education in out-of-school settings (120%) Following P3 reporting errors, the Country Team clarified the indicator definition with the PR for P4 and Phase 2 showing a significant improvement.

Indicator 1.3: A total of 309 MSM contacts reached with HIV/AIDS prevention programs out of a target of 300 (103%). The definition has been revised for

Reasons for variance between PR Request and Actual Disbursement

The country team rationale for disbursement is based on the following: Programmatic performance has been good with the average performance of 88% for all indicators and an average performance on top ten indicators of 103% with a quantitative programmatic rating of A2.

Financial Performance: During P4, the budget execution was of 93% in comparison to 78% during P3 with a cumulative execution of 67%, in comparison with 58% as of P3, which indicates that the program is recovering sub-execution.

Program Management: Delays in the startup and purchasing process of Health Products, Equipment and mass media campaign impacted in the completion of work plan activities on time. Delays in conducting the studies, curricula design, BBC media design, and definition of the TORs for different professionals to be hired, generated delays in the procurement processes for Communication materials, Technical assistance, and Human Resources. The delays in the presentation of the revised and updated National Treatment Guidelines and the proposal for re-allocating the budget for ARVs as part of the PSM plan also impacted the execution. Overall performance: All Special conditions have been met. Although there are a number of Management actions that are still in progress, the overall program management has improved during P4, therefore we maintain the A2 rating for this grant.

PR requested amount (US\$):

1. Year 3 budget: + US\$ 1,479,306

2. Q13 budget : + US\$ 276,683

3. Commitments as of 31 Dec: + US\$ 536,077

4. Total Forecast (1+2+3): + US\$ 2,292,066

5. Cash balance : - US\$ 801,701

6. Total PR Request (4-5): + US\$ 1,490,365

Country Team disbursement decision:

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Phase 2.

Indicator 1.4: A total of 264 FSW contacts reached with HIV/AIDS prevention programs out of a target of 150 (120%). The overachievement is due to the (i) activities not 100% financed by the grant and (ii) the definition (contacts vs indiciduals with a defined package) which has been revised for Phase 2..

Condom Distribution (indicator 1.5): A total of 368,756 free male condoms were distributed to end users out of a target of 389,700 (95%).

Testing and Counseling (indicator 1.6): The target related to testing and counseling has been overachieved with 14,950 HIV testing and counseling services provided out of a target of 11,000 (120%). PR states that the reason for the overachievement is mainly related with exceptional campaigns conducted by the MOHand participation in other massive events.

STI Diagnosis and Treatment (indicator 1.7): The target for P4 was not accomplished as there were no STI cases diagnosed and treated in P4, therefore final result, as it is annually cumulative, is that of P3, with 149 individuals tested positive and receiving treatment (16%). The main reasons for the underperformance are related to limited financial resources allocated for STI, the size of the target population in relation to the target results and the difficulties in approaching MSM due to stigma and discrimination.

Care and Support for the chronically ill (indicator 2.1): A total of 1,556 individuals received care and support services outside health facilities during Year 2012 (78%). Although the annual target has not been met, results show an improvement in the number of PLHIV engaged in psychosocial and nutritional support services compared to P3. The number of psychosocial and nutritional support services provided by the MHDST had a significant increase due to improvements in structural arrangements at the Ministry. Focal points were appointed to facilitate coordination between the Department of Human Services (responsible for indicator 2.2) and the Department of Community Rehabilitation, thus accessing more people through inter-departmental referrals.

Support for Orphans and Vulnerable Children (indicator 2.2): A total of 190 orphans and vulnerable children 0-17 years whose households received free basic external support from the National Conditional Cash Transfer Scheme to people with different social needs (BOOST Programme) out of a target of 200 (95%). A significant improvement compared with P3 has been achieved mainly due to new staff hired by the MHDST in February 2012 together with the strengthening of the referral system. The referral scheme still needs to be sharpened up for smooth implementation of activities during Phase 2.

Antiretroviral Treatment and Monitoring (indicator 3.1): The results reported during this period show 1040 adults and children with advanced HIV infection receiving ARV Therapy (99%). Considering the updated guidelines, the MOH is considering patients with a CD4 count lower than 500, which means that the target population of this indicator has been broadened. The overall reported results have decreased in comparison to the result reported as of 31st December 2011 (1,358 individuals on ART) when the depuration of the BHIS. According to the comments provided by the National AIDS Program of the Ministry of Health, a detailed work to avoid possible duplications of persons being counted, was being conducted as of the moment of the LFA visit. From the initial depuration of the BHIS database begun, thus is difficult to conclude whether results

1. Commitments: US\$ 483,654

2. Year 3 budget (Phase 2 GA): US\$ 1,485,850

3. Q13 buffer, January - March 2014 (Phase 2 GA): US\$ 283,137

4. CT forecast (1+2+3): US\$ 2,252,641

5. Cash balance: US\$ 801,801

CT recommended disbursement (4-5): US\$ 1,450,840

During the Phase 2 negotiations Special Condition #1 was included in the Grant Agreement: Reprogramming of BHIS component to MARPS before 30 June 2013. Therefore US\$ 427,025 plus the 7% UNDP overhead cost will be transfered in Q4 subject to the fulfillment of the condition.

Q2 phased transfer: US\$ 993,923

Q4 phased transfer: US\$ 456,917

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show a real improvement in access to ART.

Strengthening of Civil Society and Institutional Capacity Building (indicator 4.1): 485 professional service providers were reached with training events (72%). The main reason for the low achievement is the poor results of Semester 3 (the target for this period was accomplished by 101%). The identified issues were the lack of a designated SR for implementing these activities and changes in the program coordinators at Capacity/USAID.

Health Systems Strengthening: Three out of four targets related to HSS havereached or overachieved in P4 with:

Indicator 5.1: 9 out of 23 public health facilities are reporting core indicators within 30 days of the end of quarter (100%).

Indicator 5.2: only 1,38 days of laboratory turn around for CD4, against a target of 8 days (over 120%) . Given that the target has been reached for the entire lifetime of the Round 9 proposal, the indicator will not be consider for the Phase 2 Performance Framework,and will be measured through the M&E Plan.

Indicator 5.3: A verified 8.3 minutes of average outpatient wait time at Central Medical Laboratory (over 120%). Given that the target has been reached for the entire lifetime of the Round 9 proposal, the indicator will not be consider for the Phase 2 Performance Framework, and will be measured through the M&E Plan.

Indicator 5.4: This indicator was due for P3, and activities have not started yet. Although the planning of the training activities was completed, training activities are expected to be carried out in collaboration with PAHO/WHO and the University of Belize during Phase 2. Delays in implementation were due to a change in the target population, which shifted from pharmacists to pharmacist's assistants. This change encompassed a revision of the training curricula, which is now complete and approved.

	Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
5	01.Jan.13 - 30.Jun.13			B1	6	01.Jan.13 - 31.Mar.14	1,490,365	\$ 456,917	11 Nov 2013	

Summary of Progress

Reasons for variance between PR Request and Actual Disbursement

As of 30 June 2013 average performance of all indicators is 104% with an average on top ten of 98%.

4 out of 5 top ten or equivalent indicators have overreached target (101-120%), however indicator 1.1 underperformed with 58% achieved and therefore the overall quantitative indicator rating is B1. Results for indicator 5.5 have overperformed achieving 214%. This disbursement corresponds to the Q4 2013 phased cash transfer mentioned above.

The amount corresponds to the activities approved through the successful completion of condition #1 of the Grant Agreement.

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	Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
6	01.Jul.13 - 31.Dec.13			A1	06.0.0	01.Jan.14 - 31.Mar.15	359,192		N/A	

Summary of Progress

In general, output indicators continued to demonstrate high levels of achievement. Specifically, the indicator 1.1 "Number of young people aged 11-20 years reached with life skills-based HIV education in secondary education settings" has for the first time reached and surpassed its target in this period. The implementation of activities for this indicator has been difficult to reach historically due to the significant influence of religious organizations in Belize. For example, during Phase 1 Christian religious institutions rejected the HLFE curricula because of the sexuality component. Consequently, the program has also for the first time reached

and is exploring and assessing ways to further incorporate sustainability during the remaining period of Phase II. This is focused mainly on two aspects: 1) Assessing needs and developing national capacities within the SRs and beyond to strengthen the national HIV/AIDS response and meet any capacity gaps easing the transition towards the NFM; and, 2) Working to scale-up any key and innovative development initiatives notably BOOST to assess and strengthen the Social Protection system in the country as a whole.

and/or surpassed all of the indicators being measured. The PR has also invested in sustainability

Reasons for variance between PR Request and Actual Disbursement

Based on a good performance of A1, the CT is recommending a disbursement to cover 100% of year 4 activities and buffer amounting to US \$1,286,214, plus commitments of US\$ 256,522. In addition, the CT is recommending adding the unallocated

amount of savings from year one of US\$ 209,000 to the AFD which will be reserved for a later cash transfer. The CT is working closely with the PR in order to reprogram these savings.

Given the high cash balance, the CT is conditioning the cash transfer on a lower cash balance in Q3 and the successful reprogramming of the savings.

	Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
6	01.Jul.13 - 31.Dec.13			A1	06.0.1	01.Jan.14 - 31.Mar.15	359,192	\$ 100,000	24 Nov 2014	

Summary of Progress

In general, output indicators continued to demonstrate high levels of achievement. Specifically, the indicator 1.1 "Number of young people aged 11-20 years reached with life skills-based HIV education in secondary education settings" has for the first time reached and surpassed its target in this period. The implementation of activities for this indicator has been difficult to reach historically due to the significant influence of religious organizations in Belize. For example, during Phase 1 Christian religious institutions rejected the HLFE curricula because of the sexuality component. Consequently, the program has also for the first time reached and/or surpassed all of the indicators being measured. The PR has also invested in sustainability efforts

and is exploring and assessing ways to further incorporate sustainability during the remaining period of Phase II. This is focused mainly on two aspects: 1) Assessing needs and developing national capacities within the SRs and beyond to strengthen the national HIV/AIDS response and meet any capacity gaps easing the transition towards the NFM; and, 2) Working to scale-up any key and innovative development initiatives notably BOOST to assess and strengthen the Social Protection system in the country as a whole.

Reasons for variance between PR Request and Actual Disbursement

The total amount scheduled to be disbursed for this period was US\$570,039, but due to a high cash balance, no cash transfer has been made so far on this dusbursement decision in 2014.

As per the recent cash balance submitted by the PR, the total amount remaining in the PR bank accounts as of 31 October 2014 was US\$360,284.89. The PR's projected expenses for Q4 (according to the list of commitments sent 7 November 2014)

total US\$212,727.90 and budgeted activities for Q1 of 2015 total US\$213,936, so it is our intent to transfer enough money to cover projected expenditures (212,727.90 + 213,936 = US\$426,639.90) until the next annual funding decision is made.

Considering the amount of money currently in the PR account, the CT has elected to transfer only US\$100,000 as buffer, instead of the full previously scheduled amount of US\$570,039.

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2.5. Contextual Information

					Last Updated on:						
	F	Progress Up	dates			Disbursement Information					
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursemen Date		
6	01.Jul.13 - 31.Dec.13			A1	06.0.2	01.Jan.14 - 31.Mar.15	359,192	\$ 200,000	04 Mar 2015		
	Su	mmary of P	rogress		Reason	s for variance be	etween PR Rec	quest and Actua	l Disbursemen		
In general, output indicators continued to demonstrate high levels of achievement. Specifically, the indicator 1.1 "Number of young people aged 11-20 years reached with life skills-based HIV education in secondary education settings" has for the first time reached and surpassed its target in this period. The implementation of activities for this indicator has been difficult to reach historically due to the significant influence of religious organizations in Belize. For example, during Phase 1 Christian religious institutions rejected the HLFE curricula because of the sexuality component. Consequently, the program has also for the first time reached and/or surpassed all of the indicators being measured. The PR has also invested in sustainability efforts and is exploring and assessing ways to further incorporate sustainability during the remaining period of Phase II. This is focused mainly on two aspects: 1) Assessing needs and developing national capacities within the SRs and beyond to strengthen the national HIV/AIDS response and meet any capacity gaps easing the transition towards the NFM; and, 2) Working to scale-up any key and innovative development initiatives notably BOOST to assess and strengthen the Social Protection system in the country as a whole.				UNDP incon the fordecided to UNDP Be Annual F	n the updated cas dicated that they l rm "Fund resourc to release the sch elize has the fund unding Decision i	had a "resource e overview". Giveduled \$200,00 s necessary to	balance" of \$40, ven this, the Cour of cash transfer to	286 as reported ntry Team has o ensure that			
	F	Progress Up	dates			Di	sbursement In	formation			
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursemen Date		
7	01.Jan.14 - 30.Jun.14								N/A		
	Su	mmary of P	rogress		Reasons for variance between PR Request and Actual Disbursement						
		Prograss Un	ndatas		Disbursement Information						
PU	Progress Updates TGF Rating		DR	DR Period Covered	PR Request	Disbursement Amount	Disbursemen Date				
8	01.Jul.14 - 31.Dec.14			A1	10	01.Jan.15 - 31.Dec.15	980,430	\$ 752,369	02 Apr 2015		
	Su	mmary of P	rogress		Reason	Reasons for variance between PR Request and Actual Disbursement					

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Title	Explanatory Notes
a. Governance (CCM, Civil Society, Donor and Partner Related – LFA, Secretariat, etc)	purposes of Global Fund financing in light of its composition and representation. NAC members are therefore also CCM members. The NAC is comprised of representatives from all key stakeholder groups i.e., representatives of government that include the Ministries of Health, Education, Labor, Human Development and Tourism, as well as PLWHAs, the business sector, youth, other non-governmental organizations (NGOs), faith-based organizations (FBOs), community-based organizations (CBOs), and representatives of district AIDS committees. The UN agencies and other such entities serve as technical partners to the national counterparts. The CCM has a good representation, functions well, and is actively engaged in the oversight of the Global Fund program. The LFA in Belize is a 'fly-in' LFA (the LFA services in Belize are provided by the PwC team from Argentina). Despite the remoteness of the LFA office from the country, the quality of the services provided by the LFA and their understanding of the country realities are strong. The Global Fund Regional Team (FPM and PO) went on a country mission in May 2011. The mission was successful in: delivering key messages on the Global Fund and program implementation to national authorities (MoH, NAC), training the PR and SRs on the new PU/DR
	forms, discussing progress of the PR in fulfilling CPs, and establishing strong working relationships with key in-country stakeholders (PR, SRs, CCM, LFA, MoH, PAHO).
c. External Factors (Political Environment, Currency FI Disasters, etc)	Ctuations, Natural Belize is a parliamentary democracy and a member of the Commonwealth of Nations. The head of state is currently Queen Elizabeth II, represented in the country by a governor-general, who must be a Belizean. The primary executive organ of government is the cabinet, led by a prime minister who is head of government. The current Prime Minister of Belize is Dean Barrow, a former foreign minister and the head of the United Democratic Party. Barrow is also Belize's first black prime minister. Belize is prone to hurricanes and tropical storms that hit the country between July and November. The latest major hurricane (hurricane Richard) hit Belize in October 2010, resulting in an estimated damage of \$18 million, but not claiming any lives.
d. Other (National Programs, SWAPS, Corruptive Envi	
2.6. Phase 2/ Periodic Review Grant Renewal	Pagammandation Catagory
Performance Rating Rationale for Phase 2/ Periodic Review Recommen	Recommendation Category
Nationale for Finase 21 Feriodic Review Recommen	anon Jalegory
Rationale for Phase 2/ Periodic Review Recommen	lation Amount
	Time-bound Actions
Issues	Description

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