

General SSF Information

Country	Indonesia				
SSF Agreement Number	IND-H-NAC	Component	HIV/AIDS	Last Round	09
SSF Title	Indonesia Response to HIV: Government and Civil Society Partnership in Thirty-three Provinces				
Principal Recipient	National AIDS Commission of Indonesia				
SSF Status	Active - Period 2				
SSF Start Date	01 Jul 2010	SSF End Date	30 Jun 2015		
Current* Implementation Period Start Date	01 Jul 2012	Current* Implementation Period End Date	30 Jun 2015	Latest Rating	
Current* Implementation Period Signed Amount	\$ 29,111,074	Current* Implementation Period Committed Amount	\$ 19,980,032	Current* Implementation Period Disbursed Amount	\$ 19,980,032
Cumulative Signed Amount	\$ 46,387,191	Cumulative Committed Amount	\$ 37,256,149	Cumulative Disbursed Amount	\$ 37,256,149
				% Disbursed	100%
Time Elapsed (at the end of the latest reporting period)	42 months				

* Latest Implementation Period if SSF is closed

New GPR Report - Table of Contents

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1. Program Description and Contextual Information

1.1. Grant Summary - Web

Indonesia, which had approximately 193,000 adults living with HIV in 2005, has an overall adult prevalence of about 0.1 percent. However, the epidemic is concentrated among most-at-risk groups and not yet generalized among the population. The program supported by this grant aims to reduce HIV-related illness and death in 33 provinces of Indonesia and to strengthen health and community systems so that performance can be improved. The program targets people who inject drugs and their partners, prisoners, women who sell sex and their clients, men who have sex with men, male-to-female transgender people, and people living with HIV and their families. The program plans to reduce HIV transmission among these key populations through the provision of prevention services and by increasing the meaningful participation of community-based organizations to ensure that social support and interventions are effective and reach vulnerable and marginalized populations.

1.2. Country Latest Statistics

Background and Health Spending	Estimate	Year	Source
Nurses and midwives (per 1,000 people)	1	2012	The World Bank Group (Data latest 2013 (update: 2012)
Physicians (per 1,000 people)		2012	The World Bank Group (Data latest 2013 (update: 2012)
Population, total	246,864,191	2012	The World Bank Group (Data latest 2013 (update: 2012)
Birth rate, crude (per 1,000 people)	18	2011	The World Bank Group (Data latest 2013 (update: 2011)
Death rate, crude (per 1,000 people)	7	2011	The World Bank Group (Data latest 2013 (update: 2011)
External resources for health (% of total expenditure on health)	1	2011	The World Bank Group (Data latest 2013 (update: 2011)
Health expenditure per capita (current US\$)	95	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)	1	2011	The World Bank Group (Data latest 2013 (update: 2011)
Health expenditure, public (% of government expenditure)	5	2011	The World Bank Group (Data latest 2013 (update: 2011)
Health expenditure, public (% of total health expenditure)	34	2011	The World Bank Group (Data latest 2013 (update: 2011)
Health expenditure, total (% of GDP)	3	2011	The World Bank Group (Data latest 2013 (update: 2011)
Life expectancy at birth, total (years)	69	2011	The World Bank Group (Data latest 2013 (update: 2011)
Hospital beds (per 1,000 people)	1	2010	The World Bank Group (Data latest 2013 (update: 2010)
HIV/AIDS	Estimate	Year	Source
AIDS Orphans Number estimate	13,000	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
Annual number of AIDS deaths Number estimate	15,000	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
Estimated HIV prevalence, adult (15-49 years old)(%)		2012	UNAIDS Report on the Global AIDS 2012 Epidemic
Estimated number of people needing antiretroviral therapy based on 2010 WHO guidelines	100,000	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
People living with HIV Number estimate	380,000	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
Reported number of people receiving antiretroviral therapy	24,410	2012	UNAIDS Report on the Global AIDS 2012 Epidemic
People currently on ART	33,384	2014	Mid-2014 Global Fund Results

1.3. Comments on Key Discrepancies between Approved Proposal and Grant

1.5. Conditions Precedent

CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is currently met?	Comments
	Condition Precedent	<p>1. Condition Precedent to First Disbursement (Terminal Date as stated in block 7A of the Face Sheet)</p> <p>The first disbursement of Grant funds by the Global Fund to the Principal Recipient is subject to 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.</p>	Finance	Disbursement	15.Jul.10	Met	
	Condition Precedent	<p>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:</p> <p>a. delivery by the Principal Recipient to the Global Fund, of finalized financial and management policies and procedures of the Principal Recipient, in form and substance satisfactory to the Global Fund, including, but not limited to the following:</p> <p>i. standardized reporting templates and chart of accounts; and</p> <p>ii. a plan stipulating how these policies and procedures will be communicated to all relevant staff at both the central and provincial levels and how they will be included in the relevant training modules;</p> <p>b. delivery by the Principal Recipient to the Global Fund of evidence, in the form and substance satisfactory to the Global Fund, that a computerized accounting system is in place and functioning.</p>	Finance	Disbursement	15.Feb.10	Met	No CPs for SSF grant agreement. Met before consolidation to SSF.
	Condition Precedent	<p>The disbursement of Grant funds by the Principal Recipient to Sub-recipients is subject to satisfaction of each of the following condition:</p> <p>a) the delivery by the Principal Recipient to the Global Fund of a completed assessment, in form and substance satisfactory to the Global Fund, of that Sub-recipient's capacity to implement Program activities, report and account for the use of the Grant funds, including but not limited to the following:</p> <p>i) financial and Management systems; and</p> <p>ii) suggested measures for strengthening Sub-recipient's capacity, including recruitment of finance staff where applicable.</p> <p>b) the delivery by the Principal Recipient to the Global Fund of evidence, in form and substance satisfactory to the Global Fund, that the Principal Recipient finalized its policies and procedures regarding Sub-recipients' financial management and oversight.</p>	Finance	Disbursement	31.Mar.10	Met	No CPs for SSF grant agreement. Met before consolidation to SSF.

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Last Updated on: 22 August 2014

CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is currently met?	Comments
	Condition Precedent	<p>SPECIAL TERMS AND CONDITIONS FOR THIS AGREEMENT</p> <p>1. No later than 31 December 2010 the Principal Recipient shall deliver to the Global Fund evidence, in form and substance satisfactory to the Global Fund, that</p> <p>a. the Principal Recipient has established a fixed assets register with unique tagging for all assets purchased with Global Fund funding; and</p> <p>b. the Principal Recipient has established a plan for conducting the annual physical verifications of the fixed assets.</p>	Procurement		31.Dec.10	Met	No CPs for SSF grant agreement. Met before consolidation to SSF.

CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is currently met?	Comments
	Condition Precedent	<p>STC 1:</p> <p>1. Within three months from signing this Agreement, the Principal Recipient shall provide to the Global Fund, in form and substance satisfactory to the Global Fund, evidence that it has collaborated with, and monitored Family Health International's progress in developing the web-based logistics management information system to ensure timely and efficient implementation as planned.</p>	Procurement	Other	31.Mar.13	Met	<p>TWe noted that the PR has established the web-based Logistics Management Information System (LMIS) as planned (i.e. www.kpan.or.id/logistik) in April 2013 to monitor data of stock distribution (e.g. Condoms, Alcohol swabs, etc) and warehouse stock balance. The PR has conducted 4 (four) batches of trainings in May 2013 for District Aids Commission-staff in all SRs to operate the web-site.</p> <p>However, based on LFA walkthrough during the Vol for the previous reporting period (i.e. Semester 6), we noted several control weaknesses as follows:</p> <ul style="list-style-type: none"> - The system could not detect duplication of data input by the SRs. There are no parameters set in the system to limit the entry input by SRs; should the SR erroneously input data multiple times, the system would record this as an addition; - There was no strict cut-off period set in the system to lock the dateline. We noted that the SRs still can revise and update the data after the reporting cut-off date, resulting in data collated by the PR not being accurate as there is potential subsequent data revision and update; and - For any duplication, revision and updates stated above, there is no authorization required and audit trail provided by the system to track these changes or inaccuracy. <p>In order to resolve this, the PR had hire website consultant (i.e. contract No: 014/SKONS/ADSDMPP-KPAN/XII/2013 on February 2014). Based on our further review and walkthrough in the current Vol, we noted that :</p> <ul style="list-style-type: none"> - LMIS has able to lock any data input after closing of the reporting period to avoid duplication of data input. The Logistic coordinators (i.e Mr Joko Yuniarto and Mr Abel Yan Bastian) will lock the period of report submission two weeks after end of the quarter. After the system is locked, SR provinces will be unable to revise or add the achievement result without permission from the PR. - The PR use authorisation levels and passwords in order to revise any data reported by SR provinces. - The system is also able to deny data being input with same amount in the same day in order to prevent duplication of data. <p>Therefore this STC is considered as "Resolved"</p>
	Condition Precedent	<p>STC 2:</p> <p>2. No later than 30 June 2013, the Principal Recipient shall provide to the Global Fund, in form and substance satisfactory to the Global Fund, evidence that the Principal Recipient's remuneration scheme is aligned with the Global Fund Budgeting Guidelines.</p>	Finance	Other	30.Jun.13	In Progress	<p>The CCM is currently undertaking a salary survey to develop a remuneration scheme.</p> <p>Given that the expected date to complete the survey report is by January 2014, the Country Team agrees to extend the deadline for this SC to 31 March 2014.</p>

CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is currently met?	Comments
	Condition Precedent	STC 3: 3. Together with each Progress Update and Disbursement Request, the Principal Recipient shall provide, in form and substance satisfactory to the Global Fund, evidence of best efforts to find alternative domestic sources of funding for payment of incentives to outreach workers.	Finance	Other		Met	<p>This STC will be reported with each PU/DR.</p> <p>The PR explained that the process of finding alternative sources of funding starts by approaching public figures through workshops in regards to the planning and budgeting guidelines and updated policy related to HIV-AIDS programme. In the workshop, the PR would also educate the people on how to be effective lobbyists hoping that the government becomes more aware of HIV-AIDS programme and inaugurate more policies that support HIV-AIDS programme.</p> <p>The PR has placed efforts to find alternative sources of funding as follows:</p> <ol style="list-style-type: none"> 1. The PR has developed guideline planning and budgeting for HIV-AIDS program which was finalized at end of August 2013. 2. The PR has advocated the Ministry of Home Affairs to support the following policies: <ol style="list-style-type: none"> a. Regulation of the Ministry of Home Affairs No. 27, 2013 re: Local Government Budgeting Plans for 2014 guiding to budget allocation for HIV-AIDS programme with the possibility to fund incentives for outreach workers. b. Instruction of MOHA No. 444.24/2259/SJ dated on 3 May 2013 to the governor and city mayors re-strengthening local AIDS Commissions and community empowerment. Instruction No. 5 states that the "HIV-AIDS programmed must be articulated in a Strategic Plan and Work Plan of Local government bodies". 3. The PR conducted workshops in September 2013 in Jakarta and Bali with government funding to socialize the finalized aforementioned guideline and the updated Ministry of Home Affairs (MOHA) policies as mentioned above. 4. Coordinating with the Ministry for People Welfare has issued a letter to Governors and City mayors, No.13-264-Menkokesra/XII/2012 dated 28 December 2012. The letter states that starting January 2014, Governors, City Mayors, and Heads of KPAP shall provide Local Government Budget ("APBD") to KPA provinces and districts that are no longer funded by TGF since 20 November 2012 to continue any HIV-AIDS programmes.

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CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is currently met?	Comments
	Condition Precedent	STC 4: 4. Together with the Progress Update and Disbursement Request submitted for the second half of each calendar year, the Principal Recipient shall provide to the Global Fund, in form and substance satisfactory to the Global Fund, the results of the annual outcome surveys (combined sero-surveillance and behavioral studies) conducted for such calendar year.	M&E	Other		In Progress	<p>This special term and condition is due in the next reporting period (i.e. July – December 2013).</p> <p>Currently, the PR-NAC has coordinated with the PR MoH their plan regarding the implementation of the combined sero-surveillance and behavioral studies. PR NAC and PR MoH, have conducted a coordinating meeting on June 3, 2013 to select some areas which will be the sites for implementation of the integrated Behavior Survey and Sero Surveillance. In addition, MoH has engaged with World Health Organization (WHO) in the process of developing the design and method of the studies. The post-behavioral studies plan to be conducted in October 2013 with government funds (APBN) and the data of the sero-surveillance and behavioral studies is expected to be completed in December 2013.</p>
	Condition Precedent	STC 5: 5. Prior to disbursement of Grant funds for the procurement of technical and management assistance consultancy services, the Principal Recipient shall provide to the Global Fund, in form and substance satisfactory to the Global Fund, justification and supporting documentation to support the transparent selection of consultants for such services, including with respect but not limited to the following: a. Mapping conversion and data updating, b. Synchronization data with stakeholder, c. Development of SMS gateway for RR online, and d. Development methods and monitoring tools for human resource program quality in prison and community.	Others	Other		Met	<p>The PR has taken the following actions to support the transparent selection of consultants for such services:</p> <ol style="list-style-type: none"> 1. Procurement process performed by PR NAC has been conducted in accordance with Presidential Degree No. 70, as a guideline for government goods/services procurement; and 2. Consultants procured under direct appointment were communicated to the Global Fund for approval prior to the continuation to the contracting process (e.g. Synchronization data with stakeholders performed by PT. Biztek).
	Condition Precedent	STC 6: Prior to disbursement of Grant funds for the development of the NSP Client Reporting System, the PR shall provide to the Global Fund, in form and substance satisfactory to the Global Fund, detailed terms of reference for such system and a detailed budget not exceeding the amount approved by the Global Fund for this purpose.	M&E	Other		Met	<p>Budget for the development of the NSP-Client Reporting System did not exceed the amount approved by the Global Fund.</p> <p>Furthermore, it is noted that there are savings from the funds allocated for this activity due to fact that reporting system of NSP-Client has been integrated with SIHA (HIV-AIDS Information system in Primary Health care).</p> <p>The savings totaling USD 18,284 are as follows: - USD 9,398 from activity “workshop cohort NSP system development”; and - USD 8,886 from activity “socialization of finalize cohort NSP system”.</p>

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CP #	CP Type	Condition Precedent	Functional Area	Tied To	Terminal Date	Is currently met?	Comments
	Condition Precedent	STC 7: Prior to any procurement of Health Products, the Principal Recipient shall provide to the Global Fund, in form and substance satisfactory to the Global Fund, evidence that, in order to avoid potentially non-competitive, non-transparent procurement process and unreasonably higher supplier prices as compared to the international market prices, it has not disclosed ceiling prices in connection with such procurement.	Procurement	Procurement		Met	The PR has conducted procurement process without major issues that may lead to potentially non-competitive and non-transparent process. The procurement process has complied with the Presidential Decree (Perpres) No. 70/2012 as a guideline for government goods/services procurement. In addition, the following are noted; - The PR has obtained reasonable price compared to the market price during the procurement process. - The PR has provided reasonable justification for proposing a winning candidate with a relatively higher proposed price than other bidders. - During the procurement review, there was no disclosure of the ceiling price in connection with such procurement.
	Condition Precedent	STC 8: At least one month prior to the first disbursement of funds for training activities to be conducted during the Implementation Period, the Principal Recipient shall deliver to the Global Fund plans, in form and substance satisfactory to the Global Fund, for such training activities (the "Training Plan"). The Training Plan shall include, but will not be limited to, a detailed budget and assumptions for all training activities under the Program, procedures for the Principal Recipient's financial oversight over expenditures to finance training activities and controls to protect Grant funds for training from the risk of misuse or diversion.	Others	Other	01.Mar.13	Met	PR has submitted the training plan on 7 February 2013. The training plan was approved by the Country Team on 26 February. This STC is considered as met.
	Condition Precedent	At least one month prior to the first disbursement of funds for training activities to be conducted during the Implementation Period, the Principal Recipient shall deliver to the Global Fund plans, in form and substance satisfactory to the Global Fund, for such training activities (the "Training Plan"). The Training Plan shall include, but will not be limited to, a detailed budget and assumptions for all training activities under the Program, procedures for the Principal Recipient's financial oversight over expenditures to finance training activities and controls to protect Grant funds for training from the risk of misuse or diversion.	Others	Disbursement		Met	The Training Plan for 2013-2015 was submitted to the Global Fund on 5 February 2013 and was approved through email on 26 February 2013. The first disbursement was transferred on 27 February 2013 and received on 5 March 2013.
	Condition Precedent	For the avoidance of doubt, the Principal Recipient acknowledges that the amount set forth in block 8 of the face sheet of this Agreement represents the total funding for this Grant from the start of the first Implementation Period to the end of the current Implementation Period, and, therefore, nothing in this Agreement shall be interpreted to mean that the entire amount in block 8 of the face sheet of this Agreement is available during the current Implementation Period.	Finance	Other		Met	The PR informed that they are aware that nothing in this Agreement shall be interpreted to mean that the entire amount in block 8 of the face sheet of this Agreement is available during current Implementation.
	Condition Precedent	Article 4 of the Standard Terms and Conditions is amended to change the term "Implementation Period" to "Grant Term" in the second sentence.	Others	Other		Met	The PR informed that they are aware of the article 4 of the Standard Terms and Conditions is amended to change the term "Implementation Period" to "Grant Term" in the second sentence.

2. Key Grant Performance Information

2.1. Program Impact and Outcome Indicators

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
2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025

Goal 1 To reduce HIV related morbidity and mortality in thirty three provinces of Indonesia and to strengthen community and health systems in order to improve performance.

Impact indicator	% of adults and children who are still on treatment after 6 months, 1, 2, 3, 5 years from the initiation of treatment														Baselines	
															Value	Year
															64%	2008

	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	67%	72%	77%	82%	87%										
Result															
Data source of Results															

Impact indicator	STI (gonorhea) prevalence among direct female sex workers														Baselines	
															Value	Year
															34.52%	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		30%		28%											
Result		38													
Data source of Results															

Impact indicator	STI (gonorhea) prevalence among transvestite sex workers														Baselines	
															Value	Year
															29.11%	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		23%		20%											
Result		29													
Data source of Results															

Impact indicator	STI (gonorhea) prevalence among MSM														Baselines	
															Value	Year
															17.33%	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		8%		7%											
Result		21													
Data source of Results															

Impact indicator	HIV prevalence among female sex workers														Baselines	
															Value	Year
															8.12%	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		5%		4%											
Result		9													
Data source of Results															

Impact indicator	HIV prevalence among IDUs											Baselines			
												Value		Year	
												40%		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		38%		35%											
Result		42													
Data source of Results															

Outcome indicator	% of female and male sex workers reporting the use of a condom with their most recent client											Baselines			
												Value		Year	
												66.58%		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		70%		80%											
Result		68													
Data source of Results															

Outcome indicator	% of men reporting the use of condom the last time they had anal sex with a male partner in the last 6 months											Baselines			
												Value		Year	
												52.09%		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		65%		70%											
Result		61													
Data source of Results															

Impact indicator	Percentage of IDUs who are not sharing needles and syringes at the last injection											Baselines			
												Value		Year	
														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		To be determined by 31 Dec 2010		To be determined by 31 Dec 2010											
Result		87													
Data source of Results															

2.2. Programmatic Performance

2.2.1. Reporting Periods

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
N/A	01.Jul.10 31.Dec.10	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

2.2.2. Program Objectives, Service Delivery Areas and Indicators

Objective 1 - To reduce HIV among key population at higher risk many of who are young, through provision of prevention services (PR-MoH, NAC, NU)

Prevention: Behavioral Change Communication - Community Outreach

Indicator 1.1 - Number of IDUs reached through Needle Syringe Programme

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
Level 3-People reached	23723	2009	Y	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	8,236	17,832	27,709	37,584				
Result	9,802	12,387	12,279	11,711				

Indicator 1.2 - Number of IDUs currently enrolled in drug dependency program and stay at least 1 month (implemented by civil society)

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	340	2007	Y	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target		425						
Result	212	405						

Indicator 1.3 - Number of prisoners who receive Harm Reduction intervention (except Methadone)

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	4035	2009	Y	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	3,859	8,514	6,600	13,197				
Result	24,571	59,909	25,362	57,576				

Indicator 1.4 - Number of people trained on local advocacy, peer education and outreach

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	N/A	2010	Y	Y

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	192	144	192	144				
Result	1,578	941	1,224	1,805				

Indicator 1.5 - Number of condoms distributed to outlets

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level	253198	2009	Y	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	3,861,015	10,995,864	21,077,475	33,996,630				
Result	2,932,885	11,410,711	17,551,453	26,305,072				

Objective 3 - To address systemic challenges to improve performance in achieving universal access for prevention and care support and treatment (PR-MoH, NAC)

HSS: Information system & Operational research

Indicator 3.1 - Number and percentage of districts submitting timely quarterly reports to the province during the last quarter

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)													
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8					
Level 0-Process/Activity Indicator	35	2009	N	N													
Target	82	90	110	123													
Result	60	78	103	102													

Indicator 3.2 - Number of supervisory visits conducted by provincial staff to districts/cities level

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)													
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8					
Level 0-Process/Activity Indicator	Not Available	2010	N	N													
Target	202	202	274	274													
Result	221	346	468	435													

Objective 4 - To increase meaningful participation of community based organization and people living with HIV in ensuring that social support and intervention are effective and reach vulnerable and marginalized population (PR-NU, NAC)

Supportive Environment: Strengthening of Civil Society

Indicator 4.1 - Number of public sector partners and civil society organizations (including community based organizations) supported (trained) to implement HIV/AIDS response program

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)												
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
No Level	47	2008	N	N												
Target	18	29	38	47												
Result	19	67	202	372												

Indicator 4.2 - Number of national community networks receiving financial support

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)												
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
No Level	3	2009	N	N												
Target	5	5	5	5					N: 5 D: 5 P: 100%	N: % D: % P: %	N: % D: % P: %	N: % D: % P: %				
Result	6	6	6	6					N: 4 D: 5 P: 80%	N: % D: % P: %	N: % D: % P: %	N: % D: % P: %				

Indicator 4.3 - Number of partnership forum established at provincial level

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)												
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
No Level	0	2010	N	N												
Target	21	21	21	21												
Result	23	60	156	265												

Objective 5 - To expand effective interventions to achieve universal access to prevention of HIV infection and care, support, and treatment for key affected populations at higher risk.

Key Populations

Indicator 5.1 - Number and percentage of People Who Inject Drugs reached through Needle Syringe Program

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)													
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8					
No Level	12297	December 2011	Top 10 Equ.	N													
Target	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: 11,400 D: 28,500 P: 40%	N: 19,502 D: 32,503 P: 60%	N: 21,776 D: 33,501 P: 65%	N: 23,451 D: 33,501 P: 70%									
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: 6,150 D: 28,500 P: 22%	N: 8,485 D: 32,503 P: 26%	N: 7,281 D: 33,510 P: 22%	N: D: P: %									
Target	N: 25,126 D: 33,501 P: 75%	N: 26,801 D: 33,501 P: 80%	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: %	N: D: P: %
Result	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: %	N: D: P: %	N: D: P: %	N: D: P: %

Indicator 5.2 - Number and percentage of prisoners reached by IEC and peer education on HIV/STI prevention

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)													
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8					
No Level	55365	December 2011	N	N													
Target	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	40,000	N: 79,189 D: 89,988 P: 88%	N: 80,989 D: 89,988 P: 90%	N: 85,489 D: 89,988 P: 95%									
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	52,141	N: 12,594 D: 61,574 P: 21%	N: 50,455 D: 89,988 P: 56%	N: D: P: %									
Target	N: 89,988 D: 89,988 P: 100%	N: 89,988 D: 89,988 P: 100%	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: %	N: D: P: %
Result	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: %	N: D: P: %	N: D: P: %	N: D: P: %

Indicator 5.3 - Number and percentage of PWIDs enrolled in Community Based Drug Dependency Treatment Program

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)										
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8		
No Level	735/425 (172.9%)	December 2011	N	N										
Target	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %					120		N: D: P: %	N: 72 D: 120 P: 60%	N: 91 D: 140 P: 65%	
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %					78		N: D: P: %	N: 120 D: 158 P: 76%	N: D: P: %	
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16						
Target	N: 105 D: 150 P: 70%	N: 113 D: 150 P: 75%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %						
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %						

Prevention: Condom Distribution

Indicator 5.4 - Number of condoms distributed by outlets

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)									
	Value	Year			Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	
No Level	1755143	December 2011	N	N									
Target									3,500,000	5,089,246	5,089,246	5,089,246	
Result									5,542,697	4,343,167	4,944,678		
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16					
Target	5,089,246	5,089,246											
Result													

Objective 6 - To improve health sector service delivery in the context of HIV and tackle critical health systems constraints**Routine data collection, analysis and use****Indicator 6.1 - Number and percentage of districts submitting timely quarterly reports to the province during the last quarter**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
No Level	103/137 (75.2%)	December 2011	N	N								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
Target	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: 119 D: 159 P: 75%	N: 115 D: 141 P: 82%	N: 120 D: 141 P: 85%	N: 114 D: 130 P: 88%				
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: 108 D: 159 P: 68%	N: 124 D: 141 P: 88%	N: 115 D: 141 P: 82%	N: D: P: %				
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16				
Target	N: 120 D: 130 P: 92%	N: 130 D: 130 P: 100%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %				
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %				

Mentoring and supervision**Indicator 6.2 - Number and percentage of districts supervised by provincial staff**

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)								
	Value	Year										
No Level	468	December 2011	Top 10 Equ.	N								
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8				
Target	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: 159 D: 159 P: 100%	N: 141 D: 141 P: 100%	N: 141 D: 141 P: 100%	N: 130 D: 130 P: 100%				
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: 143 D: 159 P: 90%	N: 137 D: 141 P: 97%	N: 141 D: 141 P: 100%	N: D: P: %				
	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16				
Target	N: 130 D: 130 P: 100%	N: 130 D: 130 P: 100%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %				
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %				

Objective 7 - To increase the meaningful participation of community based organizations and people living with HIV to ensure that social support and interventions are effective and reach vulnerable and marginalized populations.

HSS: Community Systems Strengthening

Indicator 7.1 - Number and percentage of districts in which civil society organization and public sectors with functional partnership forum

	Baseline		Is Top 10 indicator? (Y/N)	Is Training indicator? (Y/N)
	Value	Year		
No Level			N	N

	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8
Target	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: 16 D: 159 P: 10%	N: D: P: %	N: 40 D: 141 P: 28%	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: 14 D: 159 P: 9%	N: D: P: %	N: 38 D: 141 P: 27%	N: D: P: %

	Period 9	Period 10	Period 11	Period 12	Period 13	Period 14	Period 15	Period 16
Target	N: 90 D: 130 P: 69%	N: 130 D: 130 P: 100%	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %
Result	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %	N: D: P: %

2.2.3. Cumulative Progress To Date

Latest reporting due period : 7 (01.Jul.13 - 31.Dec.13)

Objective 1	To reduce HIV among key population at higher risk many of who are young, through provision of prevention services (PR-MoH, NAC, NU)
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SDA	Prevention: Behavioral Change Communication - Community Outreach
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Indicator 1.1 - Number of IDUs reached through Needle Syringe Programme

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 3-People reached	4	37,584	4	11,711						31%

Indicator 1.2 - Number of IDUs currently enrolled in drug dependency program and stay at least 1 month (implemented by civil society)

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	2	425	2	405						95%

Indicator 1.3 - Number of prisoners who receive Harm Reduction intervention (except Methadone)

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	4	13,197	4	57,576						120%

Indicator 1.4 - Number of people trained on local advocacy, peer education and outreach

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	4	144	4	1,805						120%

Indicator 1.5 - Number of condoms distributed to outlets

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
No Level	4	33,996,630	4	26,305,072						77%

Objective 3	To address systemic challenges to improve performance in achieving universal access for prevention and care support and treatment (PR-MoH, NAC)
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SDA	HSS: Information system & Operational research
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Indicator 3.1 - Number and percentage of districts submitting timely quarterly reports to the province during the last quarter

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 0-Process/Activity Indicator	4	123	4	102						83%

Indicator 3.2 - Number of supervisory visits conducted by provincial staff to districts/cities level

	Target		Result		0%	30%	60%	90%	100%	
	Period	Value	Period	Value						
Level 0-Process/Activity Indicator	4	274	4	435						120%

Objective 4 To increase meaningful participation of community based organization and people living with HIV in ensuring that social support and intervention are effective and reach vulnerable and marginalized population (PR-NU, NAC)

SDA Supportive Environment: Strengthening of Civil Society

Indicator 4.1 - Number of public sector partners and civil society organizations (including community based organizations) supported (trained) to implement HIV/AIDS response program

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	4	47	4	372						120%

Indicator 4.2 - Number of national community networks receiving financial support

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	5	N: 5 D: 5 P: 100 %	5	N: 4 D: 5 P: 80 %						80%

Indicator 4.3 - Number of partnership forum established at provincial level

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	4	21	4	265						120%

Objective 5 To expand effective interventions to achieve universal access to prevention of HIV infection and care, support, and treatment for key affected populations at higher risk.

SDA Key Populations

Indicator 5.1 - Number and percentage of People Who Inject Drugs reached through Needle Syringe Program

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	7	N: 21,776 D: 33,501 P: 65 %	7	N: 7,281 D: 33,510 P: 21.7 %						33%

Indicator 5.2 - Number and percentage of prisoners reached by IEC and peer education on HIV/STI prevention

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	7	N: 80,989 D: 89,988 P: 90 %	7	N: 50,455 D: 89,988 P: 56.1 %						62%

Indicator 5.3 - Number and percentage of PWIDs enrolled in Community Based Drug Dependency Treatment Program

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	7	N: 72 D: 120 P: 60 %	7	N: 120 D: 158 P: 75.9 %						120%

SDA Prevention: Condom Distribution


Indicator 5.4 - Number of condoms distributed by outlets

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	7	5,089,246	7	4,944,678						97%

Objective 6 To improve health sector service delivery in the context of HIV and tackle critical health systems constraints


SDA Routine data collection, analysis and use

Indicator 6.1 - Number and percentage of districts submitting timely quarterly reports to the province during the last quarter

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	7	N: 120 D: 141 P: 85.1 %	7	N: 115 D: 141 P: 81.6 %						96%

SDA Mentoring and supervision


Indicator 6.2 - Number and percentage of districts supervised by provincial staff

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	7	N: 141 D: 141 P: 100 %	7	N: 141 D: 141 P: 100 %						100%

Objective 7 To increase the meaningful participation of community based organizations and people living with HIV to ensure that social support and interventions are effective and reach vulnerable and marginalized populations.

SDA HSS: Community Systems Strengthening

Indicator 7.1 - Number and percentage of districts in which civil society organization and public sectors with functional partnership forum

	Target		Result		Progress					
	Period	Value	Period	Value	0%	30%	60%	90%	100%	
No Level	7	N: 40 D: 141 P: 28.4 %	7	N: 38 D: 141 P: 27 %						95%

2.3. Financial Performance

2.3.1. Grant Financial Key Performance Indicators (KPIs)

Grant Duration (months)	60 months	Grant Amount	37,256,149 \$
% Time Elapsed (as of end date of the latest PU)	70%	% disbursed by TGF (to date)	100%
Time Remaining (as of end date of the latest PU)	18 months	Disbursed by TGF (to date)	37,256,149 \$
Expenditures Rate (as of end date of the latest PU)	83%	Funds Remaining (to date)	

2.3.2. Program Budget

	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.Jul.10	01.Oct.10	01.Jan.11	01.Apr.11	01.Jul.11	01.Oct.11	01.Jan.12	01.Apr.12
Period Covered To:	30.Sep.10	31.Dec.10	31.Mar.11	30.Jun.11	30.Sep.11	31.Dec.11	31.Mar.12	30.Jun.12
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	2,615,151	5,475,071	7,110,937	9,622,637	11,740,081	14,987,299	16,814,157	18,892,860
Summary Period Budget:	2,615,151	2,859,920	1,635,866	2,511,700	2,117,444	3,247,218	1,826,858	2,078,703

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.Jul.12	01.Oct.12	01.Jan.13	01.Apr.13	01.Jul.13	01.Oct.13	01.Jan.14	01.Apr.14
Period Covered To:	30.Sep.12	31.Dec.12	31.Mar.13	30.Jun.13	30.Sep.13	31.Dec.13	31.Mar.14	30.Jun.14
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	18,821,048	21,699,414	26,555,329	28,676,389	30,833,037	33,208,756	37,737,453	39,472,137
Summary Period Budget:	2,040,935	2,878,366	4,855,915	2,121,060	2,156,648	2,375,719	4,528,697	1,734,684

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.Jul.14	01.Oct.14	01.Jan.15	01.Apr.15	01.Jul.15	01.Oct.15	01.Jan.16	01.Apr.16
Period Covered To:	30.Sep.14	31.Dec.14	31.Mar.15	30.Jun.15	30.Sep.15	31.Dec.15	31.Mar.16	30.Jun.16
Currency:	USD	USD	USD	USD	USD	USD	USD	USD
Cumulative Budget Through:	41,290,233	42,747,437	45,322,063	46,634,762	46,634,762	46,634,762	46,634,762	46,634,762
Summary Period Budget:	1,818,096	1,457,204	2,574,626	1,312,699				

Expenditure Categories

Program Activities

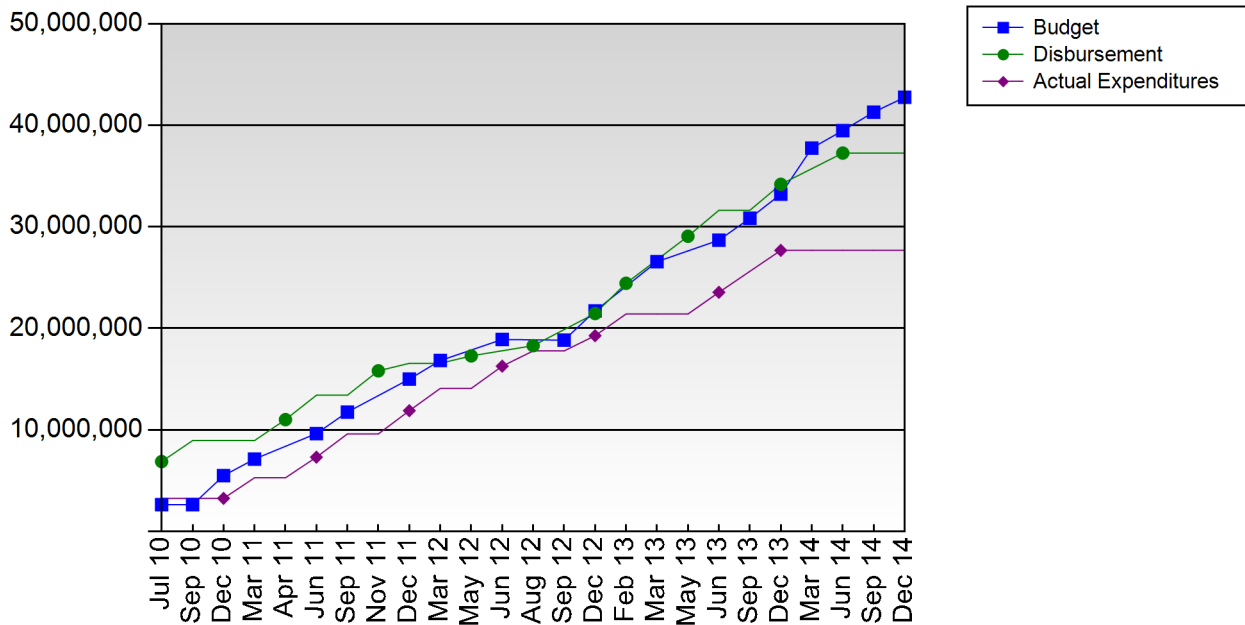
Implementing Entities

- Comments and additional information

2.3.3. Program Expenditures

Period PU7: 01.Jul.13 - 31.Dec.13	Actual Cash Outflow	Cumulative Budget	Cumulative Cash Outflow	Variance	Reason for variance
1. Total cash outflow vs. budget	\$ 4,135,714	\$ 33,208,756	\$ 27,673,976	\$ 5,534,780	
1a. PR's Total expenditure	\$ 1,739,263		\$ 11,027,914		
1b. Disbursements to sub-recipients	\$ 2,396,451		\$ 16,642,549		
1c. Expenditure Adjustments			\$ 3,512		Reason for adjustments
2. Pharmaceuticals & Health Product expenditures vs budget	\$ 1,024,206		\$ 3,121,220		
2a. Medicines & pharmaceutical products					
2b. Health products and health equipment	\$ 1,024,206		\$ 3,121,220		

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
C	Unacceptable

Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
0	01.Jul.10 -		N/A	1	01.Jul.10 - 31.Mar.11	7,110,936	\$ 6,863,366	01 Jul 2010	
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
				The PR request does not reflect the estimated cash balance amounting to: US\$ 247,570 (which should have subtracted from its request).					

Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
1	01.Jul.10 - 31.Dec.10		A1	2	01.Jan.11 - 30.Sep.11	4,308,812	\$ 4,134,436	15 Apr 2011	
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>The overall rating attached to the performance for the reporting period spanning from 1 June to 31 December 2010 is A1.</p> <p>The A1 rating corresponds to an average performance for all indicators of 107% for the reporting period. The top ten indicators show an average achievement of 111% for the same period.</p> <p>Out of the 10 indicators applicable for the reporting period, the PR has achieved or exceeded more than 100% of the intended targets for 8 indicators as follows:</p> <ul style="list-style-type: none"> – Number of IDUs reached through Needle Syringe Program (119%) – Number of IDUs currently enrolled in drug dependency program and stay at least 1 month (implemented by civil society) (100%) – Number of prisoners who receive Harm Reduction intervention (except Methadone) (637%) – Number of people trained on local advocacy, peer education and outreach (822%) – Number of supervisory visits conducted by provincial staff to districts/cities level (109%) – Number of public sector partners and civil society organizations (including community based organizations) supported (trained) to implement HIV/AIDS response program (106%) – Number of national community networks receiving financial support (120%) – Number of partnership forum established at provincial level (110%) <p>The PR achieved above 70% of the intended targets for 2 indicators as follows:</p> <ul style="list-style-type: none"> – Number of condoms distributed to outlets (76%) – Number and percentage of districts submitting timely quarterly reports to the province during the last quarter (73%) <p>We note the PR's proposed actions to improve the performance of the two indicators mentioned above as follows:</p> <ul style="list-style-type: none"> – Engaging SSRs under PR-NU and PR-IPPA to serve as new condom outlets; – Collaborating with the Clinton Health Access Initiative (CHAI) to develop a more effective condom logistics and distribution system to ensure availability of condom stocks at all outlets and to monitor condom logistics particularly in areas with a large number of key populations; – Engaging strategic local stakeholders to support the effectiveness of public condom distribution; and – Conducting intensified technical assistance for staff at the local AIDS commissions to improve their capability regarding the quality and timeliness of report submission, especially for provinces with high staff turnover. 				<p>The amount released by the Global Fund was calculated as follows:</p> <p>PR's Disbursement Request US\$ 4,308,812.35</p> <p>Adjustments:</p> <p>Adjustment to PR's foreign currency exchange US\$ 382,028</p> <p>Adjustment to the PR's expenditures: (US\$ 1,219)</p> <p>Adjustment to the PR's proposed obligation: (US\$ 474,751)</p> <p>Adjustment to the PR's proposed carry forward: (US\$ 80,433)</p> <p>Total Adjustments: US\$ 174,376</p> <p>Final amount to be released: US\$ 4,134,436</p>					

Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
2	01.Jan.11 - 30.Jun.11			A1	3	01.Jul.11 - 31.Mar.12	5,121,034	\$ 4,808,353	28 Nov 2011
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
<p>The performance of this grant continued to consolidate during semester 2 with an A1 rating. Out of 10 indicators, the PR achieved or exceeded more than 100% of the intended targets for 7 indicators. The PR had achieved above 85% of the intended targets for 2 indicators. The PR did not achieve the intended target for 1 indicator of "Number of IDUs reached through Needle Syringe Program (not cumulative): 69%". The under-achievement of this indicator is mainly due to the inaccurate estimation of the size of the IDU population which was used to set up the target for this program. Targets should be adjusted to be more realistic within the next reporting period and for the coming Phase 2 review. In addition, the PR also plans to strengthen the socialization of harm reduction interventions and programs to the local authorities and to the IDUs themselves in provinces which still impose jail sentences for drug users. The PR will also map IDU populations to better reach them.</p>					<p>The grant continued to perform strongly scoring an A1 rating while the corresponding cumulative disbursement at the end of June 2011 stands at 76%. The under spending is essentially due of the existence of efficiencies linked to the procurement of condoms and lubricants owing to lower unit costs (USD 1 million). The second major reason is relating to the postponement and of training activities for another USD 1 million. The series of trainings is important and should be carried out. The amount forecasted for semester 3 (July to December 2011) contains the budgetary provisions relating to carry forward activities, outstanding obligations and approved reprogrammed activities as verified by the LFA. Amount as budgeted in the Semester 3 HIV SSF Budget: USD 5,364,662 Outstanding obligations of the PR: USD 546,718</p> <p>Outstanding obligations of SRs: USD 39,263 Carry forward activities of the PR: USD 413,776 Carry forward activities of SRs: USD 57,493 Reprogrammed activities of the PR: USD 588,364 Reprogrammed activities of SRs: USD 47,614 Adjustment to the semester 3 budget due to reprogramming: (USD133,507) Total: USD 6,924,383 The total forecasted amount by the PR is USD 8,751,241 which includes USD 6,924,386 for 3emester 3 in addition to a three- month buffer.</p> <p>Based on the adjusted forecasted amount and on the adjusted cash balance, the LFA recommends a disbursement of only USD 4,808,353. The regional team agrees with LFA recommendation. The disbursement includes the level of funding worth of USD181,494 necessary to conduct trainings for the period spanning from January to March 2011(contained in the buffer period). The PR is requested not to use this budget until the updated training plan covering that period is approved by the Global Fund. The regional team - to save on transition cost - believes an extra transfer within few weeks of USD181,494 will not be possible before the end of the year.</p>				
Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
3	01.Jul.11 - 31.Dec.11			A2	4	01.Jan.12 - 29.Sep.12	3,220,739	\$ 1,469,962	04 May 2012
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
<p>The PR continues to show good progress, with a quantitative indicator rating of B1. The 'All Indicator' rating is A1 and the 'Top Ten Indicator' rating is A2. The reason the quantitative indicator is B1 is due to one of the top ten indicators having a rating of B2 (1.1 Number of IDUs reached through Needle Syringe Programme). Out of the 9 indicators reported, the PR achieved or exceeded targets for 6 indicators, achieved above 60% of the intended targets for 2 indicators, and did not achieve the intended target for one indicator as stated above. The under achievement of the above indicator is mainly due the decrease in the number of IDUs in the year 2009 estimation (92,346 IDUs) compared to the year 2006 estimation (143,050 IDUs). As this is a problem affecting all PRs implementing grants in the HIV/AIDS program, it has been agreed that the baseline and targets will be revised as part of the upcoming Grant Renewal (currently scheduled for June 2012).</p>					<p>The amount forecasted for semester 4 (January to June 2012) contains the budgetary provisions relating to carry forward activities, outstanding obligations and approved reprogrammed activities as verified by the LFA. Amount as budgeted in the Semester 4 HIV SSF Budget: USD 3,905,561 Outstanding obligations of the PR: USD 761,329</p> <p>Carry forward activities of the PR: USD 568,561</p> <p>Reprogramming Activities of the PR: USD 368,488 Total forecasted amount verified by LFA: USD 5,603,938</p> <p>The total forecasted amount by the PR is USD 7,792,814. Based on the adjusted forecasted amount and on the adjusted cash balance, the Global Fund has approved a disbursement of only USD 1,469,962. The grant continued to perform well scoring a B1 rating (adjusted by the Country Team to A2) while the corresponding cumulative disbursement at the end of December 2011 stands at 91%. The under spending is essentially due to efficiencies linked to the procurement of condoms and lubricants owing to lower unit costs (USD 1.96 million), the delay of training activities for USD 779,505, and savings from activities that could not be implemented due to time and human resource constraints amounting to USD 1.29 million.</p>				

Progress Updates					Disbursement Information				
PU	PU Period			TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
3	01.Jul.11 - 31.Dec.11			A2	4.1	01.Jul.12 - 30.Sep.12	1,139,773	\$ 1,005,356	16 Aug 2012
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
<p>The PR continues to show good progress, with a quantitative indicator rating of B1. The 'All Indicator' rating is A1 and the 'Top Ten Indicator' rating is A2. The reason the quantitative indicator is B1 is due to one of the top ten indicators having a rating of B2 (1.1 Number of IDUs reached through Needle Syringe Programme). Out of the 9 indicators reported, the PR achieved or exceeded targets for 6 indicators, achieved above 60% of the intended targets for 2 indicators, and did not achieve the intended target for one indicator as stated above. The under achievement of the above indicator is mainly due the decrease in the number of IDUs in the year 2009 estimation (92,346 IDUs) compared to the year 2006 estimation (143,050 IDUs). As this is a problem affecting all PRs implementing grants in the HIV/AIDS program, it has been agreed that the baseline and targets will be revised as part of the upcoming Grant Renewal (currently scheduled for June 2012).</p>					<p>This disbursement is for Q9 of the 6-month Phase 1 extension of the grant, which is the buffer period of the last disbursement (DR 4). The Renewal extension of this grant was signed on June 27, 2012 with a start date of July 1, 2012. This disbursement is based on the previous PU (1 July - 31 December 2011) under Phase 1. DR 4 for period Q7-Q8 (January - June 2012) was processed in May without the Q9 buffer as it falls outside of the original Phase 1 period. The PR has now informed us that they are running out of cash, and therefore the intent of this current disbursement is to cover the Q9 buffer while awaiting submission of the next Progress update. The grant renewal request was submitted to the renewals panel in Jun 2012, with an overall performance rating of A1 for the first implementation period and a "Go" recommendation. However, the Panel decision for all three grant renewals requests was a "Resubmission Request". In the meantime, the Panel approved a 6-month extension for Phase 1.</p>				
Summary of Progress					Reasons for variance between PR Request and Actual Disbursement				
<p>The PR continues to show good progress, with a quantitative indicator rating of B1. The 'All Indicator' rating is A1 and the 'Top Ten Indicator' rating is B1. Out of the 9 indicators, the PR achieved or exceeded targets for 6 indicators. Low achievement of indicator "Number of Injection Drug Users (IDUs) reached through Needle Syringe Programme" (31%) are due to unwillingness of IDU to enroll in the program because of penalty and IDU has changed from using needles to other method of using drugs. PR has conducted socialization for harm reduction intervention program to the local authorities and IDUs in provinces which still impose jail sentences for drug users and continues to conduct meetings with partners and MoH to determine more accurate figures for drug users. The PR will continue to conduct trainings to outreach worker and community health centers to increase coverage, advocacy and quality of NSP services. In addition, the PR will increase regular supervision and technical guidance including the integration of monitoring and evaluation of NSP services by NAC and IPPA.</p>					<p>The grant continued to perform well scoring a B1 rating, while the cumulative expenditure amount at the end of June 2012 stands at USD 16,160,052 or 86% of cumulative budget of USD 18,862,858. The variance was mainly due to carry forward activities to be implemented in Semester 5, savings from fund supported by other sources, savings from reallocation of activities, and lower cost of health product procurement.</p> <p>The amount forecasted for Semester 5 (July to December 2012) contains budgetary provisions and outstanding obligation and carry forward activities as approved by the Global Fund Country Team.</p> <p>Amount as budgeted in the Semester 5 budget: USD 4,919,301 Outstanding Obligations: USD 136,441 Carry forward activities: USD 300,058 Total forecasted amount verified by GF: USD 5,355,800 Less Cash Balance USD 1,180,073 Less Cash in transit USD 1,005,356 Total disbursement approved by GF: USD 3,170,371</p> <p>The PR will be requested to update the cash balance at the beginning of 2013 for the Global Fund to determine the needs of additional disbursement based on approved Phase 2 budget.</p>				

Progress Updates				Disbursement Information																		
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date														
4	01.Jan.12 - 30.Jun.12		A2	5.1	01.Jan.13 - 31.Mar.13	6,243,922	\$ 2,975,214	27 Feb 2013														
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement																		
<p>The PR continues to show good progress, with a quantitative indicator rating of B1. The 'All Indicator' rating is A1 and the 'Top Ten Indicator' rating is B1. Out of the 9 indicators, the PR achieved or exceeded targets for 6 indicators. Low achievement of indicator "Number of Injection Drug Users (IDUs) reached through Needle Syringe Programme" (31%) are due to unwillingness of IDU to enroll in the program because of penalty and IDU has changed from using needles to other method of using drugs. PR has conducted socialization for harm reduction intervention program to the local authorities and IDUs in provinces which still impose jail sentences for drug users and continues to conduct meetings with partners and MoH to determine more accurate figures for drug users. The PR will continue to conduct trainings to outreach worker and community health centers to increase coverage, advocacy and quality of NSP services. In addition, the PR will increase regular supervision and technical guidance including the integration of monitoring and evaluation of NSP services by NAC and IPPA.</p>				<p>This disbursement (#5.1) is tied to the disbursement#5. It is a disbursement to cover planned activities through the buffer period (Jan-Mar 13) based on the PRs cash balance at 31 December 2012. 2) It is based on progress update information for period ending 30-Jun-12 since this is the latest available, and the next PU/DR will be only due at the end of February 2013. For contextual information, below is included the programmatic and financial analysis of the previous disbursement #5, which was processed in November 2012 for US\$ 3,170,371.</p> <p>The forecasted expenditure for disbursement#5 in November 2012 did not take into consideration of the buffer amount (Jan-Mar 2013) since the implementation period 1 ended in December 2012. The agreement of implementation period 2 was signed in January 2013.</p> <p>The updated cash balance as at 31-Dec-12 is \$1,998,163. The actual expenditure incurred in the implementation of the Semester 4 activities is USD 2,748,991 (70 % of the budget for Semester 4). Cumulatively up to Semester 4, the PR had absorbed USD 16,160,052 or 86 % out of the total budget of USD 18,892,858.</p> <p>On account of this delay, the Country team assumes that the PR will not be able to execute the full forecast of \$4.8 million and therefore recommends a percentage adjustment to 80% on account of absorption capacity. Therefore, the disbursement recommendation is formed in the following way:</p> <table> <tr> <td>Budget for Jan-Mar 2013:</td> <td>\$ 4,855,915</td> </tr> <tr> <td>Less 20% reduction account of expenditure rate:</td> <td>(\$ 971,183)</td> </tr> <tr> <td>Obligations:</td> <td>\$ 553,445</td> </tr> <tr> <td>Carry Forward:</td> <td>\$ 535,200</td> </tr> <tr> <td>Revised Forecast:</td> <td>\$ 4,973,377</td> </tr> <tr> <td>Less Case Balance as of December 2012</td> <td>(\$1,998,163)</td> </tr> <tr> <td>Total cash needs for Jan-Mar 2013:</td> <td>\$ 2,975,214</td> </tr> </table> <p>Thus the County Team recommends a disbursement of \$ 2,975,214. The amount is different from the PR and the LFA request because PR has taken into consideration of budget amount from January to June 2013 and requested reprogramming activities which is not yet approved by the country team, while the LFA forecasted amount of Jan-Mar 2013 were done base on the estimated grant amount before the implementation period 2 agreement is signed.</p>					Budget for Jan-Mar 2013:	\$ 4,855,915	Less 20% reduction account of expenditure rate:	(\$ 971,183)	Obligations:	\$ 553,445	Carry Forward:	\$ 535,200	Revised Forecast:	\$ 4,973,377	Less Case Balance as of December 2012	(\$1,998,163)	Total cash needs for Jan-Mar 2013:	\$ 2,975,214
Budget for Jan-Mar 2013:	\$ 4,855,915																					
Less 20% reduction account of expenditure rate:	(\$ 971,183)																					
Obligations:	\$ 553,445																					
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Revised Forecast:	\$ 4,973,377																					
Less Case Balance as of December 2012	(\$1,998,163)																					
Total cash needs for Jan-Mar 2013:	\$ 2,975,214																					

Progress Updates				Disbursement Information				
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
5	01.Jul.12 - 31.Dec.12		B1	6	01.Jan.13 - 30.Jun.13	8,311,314	\$ 4,635,282	28 May 2013
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				
<p>The PR continues to show good progress, with a quantitative indicator rating of B1. The 'All Indicator' rating and the 'Top Ten Indicator' rating is B1. Out of 8 indicators, the PR had achieved more than 80% of the intended targets for 4 indicators and exceeded more than 100% of the intended targets for 2 indicators.</p> <p>Number of prisoners who are reached by Harm Reduction intervention (except Methadone) 130%. Number of condoms distributed to outlets 158%. Percentage of districts submitting timely quarterly reports to the province during the last quarter 91%. Percentage of districts supervised by provincial staff 90%. Number of National Network of KAP receiving financial support 80%. Number of districts in which civil society organization and public sectors organize partnership forum 90%. Number of PWIDs reached through Needle Syringe Program 55%. Number of PWIDs enrolled in Community Based Drug Dependency Treatment Program 65%. PR's explanation for the low achievement for 2 indicators is outlined below: Number of PWIDs reached through Needle Syringe Program The PR only achieved 55% of the intended target. The under achievement of the above indicator is mainly due to the following: a. Based on the PR's study, approximately only 42% of the PWIDs have been reached through the NSP program in the current Semester due to most of them still prefer to receive their needs for syringe from their fellow PWIDs. b. Some areas were provided with syringe services by other donors and NGOs (i.e. Alliance in West Java and HCPI in Java and Bali). c. Some of the NSP distribution from NGO to PWIDs was not well-documented. Therefore the data was not recorded in the outreach/results. PR Action Plan: The PR has made following action plans to increase the achievement and to accurately report results in the next semester (Semester 6): a. Increase frequency of outreach to PWIDs in areas without any NSP Services from one to four times a year to provide Standard Minimum Packages. b. Synchronization of data coverage with other partners in certain areas, so there will not be areas of overlap. c. Improvement in the quality of outreach and referral of PWIDs to Health Services through Continuum of Comprehensive HIV Care. c. Revision in reporting method from semester 6 by merging the L01 and L02 data and input the number of PWIDs reached by NSP program in the current period.</p> <p>Number of PWIDs enrolled in Community Based Drug Dependency Treatment Program (65%)</p> <p>The PR plans to implement this program by timely using the available funds to achieve the required targets in the next semester – where applicable as per Phase-2 Performance Framework, i.e. in Semester 7 (July - December 2013).</p>				<p>The grant continues to perform well scoring a B1 rating, while the cumulative expenditure at 31-Dec-12 stands at USD 19,262,882 which is 88% of the cumulative budget of USD 21,699,413. The variance of USD 2,436,532 is mostly due to the current period variance of \$1.9 million as well as significant efficiencies in Semester 1-3 due to lower than budgeted unit costs of health products.</p> <p>The amount forecasted for Semester 6 (July to December 2012) contains budgetary provisions and outstanding obligation and carry forward activities as approved by the Global Fund Country Team.</p> <p>Amount as budgeted in the Semester 6 budget: USD 6,976,976 Less 10% absorption reduction on non-procurement budget USD 511,532 Approved budget buffer period (July - September 2013) USD 2,156,648 Less 10% absorption reduction on non-procurement buffer budget USD 214,871 Outstanding obligations USD 660,787 Carry Forward Activities USD 715,618 Reprogramming Activities USD 169,655 Total forecast for January - June 2013 USD 9,953,281 Less Ending Cash Balance USD 2,342,785 Less cash in transit (Disbursement of USD 2,975,214</p> <p>Total disbursement approved by GF USD 4,635,282</p> <p>The PR requested a disbursement of USD 8,311,314 for the period from 1 July – 31 December 2012. The LFA recommended the disbursement of USD 7,610,496. The Country Team in principle concurs with the LFA recommendation and based on PRs absorption rate, the ending cash balance of USD 2,343,785, the disbursement of the budget for non-procurement activities (i.e. including original budget, carry forward, and reprogramming activities) will be made at 90% of the forecast amount (i.e. USD 7,199,036) – the disbursement for the budget of procurement activities and for the budget of Obligations will be made 100% rate (i.e. USD 2,754,244). The LFA did not count the cash in transition which has been taken into account by the Country Team for calculation of the disbursement. Therefore, a disbursement of USD 4,635,282 (USD 7,610,496 (recommended by LFA), less cash in transfer USD 2,975,214) has been approved for this grant.</p>				
Progress Updates				Disbursement Information				

Grant Performance Report

External Print Version

IND-H-NAC

Last Updated on: 22 August 2014

PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date
6	01.Jan.13 - 30.Jun.13		B1	7	01.Jul.13 - 30.Sep.14	10,141,806	\$ 3,077,134	24 Jun 2014
Summary of Progress				Reasons for variance between PR Request and Actual Disbursement				

Following the analysis of the overall performance of the Program, including the implementation of activities, and management actions, as well as program management during the Period from 1 January – 30 June 2013, the Global Fund has decided to give the Principal Recipient a B1 rating. We expect PR to reach more People Who Inject Drugs through Needle Syringe Program and to reach prisoners with IEC and peer education on HIV/STI prevention so that the performance rating of the PR could improve in the next semester.

The overall grant rating is B1, while the expenditure of Semester 6 stands at USD 4,275,380 which is 61% of the total budget of USD 6,976,976. The variance is largely due to delay in procurement of minimum service packages and its distribution. The cumulative budget utilization at the end of June 2013 stands at 82%.

The amount forecasted for Semester 3 and 4 (July 2013 – June 2014) and the buffer period (July – September 2014) contains budgetary provisions relating to contractual commitments and outstanding advances, cash outflows carried over to this disbursement period, projected overspending. Given the absorption rate of 61% during Semester 6, the country team has made an adjustment of 20% on the non-procurement budget for Q13-Q15 and 15% and 10% on the non-procurement of budget for Q16 and Q17, respectively. Less 15% has been adjusted to the total amount of approved carried forward and reprogramming activities (G. and H. in table below). The Country Team has reviewed reprogramming activities requested by the PR (USD 1,132,321) and has approved an amount of USD 800,503. The reprogramming for "High Level Workshop for Mayor/Regent" with the total budget of USD \$73,508 is not approved. Detail of reprogramming approval is included in Annex 1 to this ML.

The PR requested USD 10,141,806 for the period from 1 July 2013 – 30 September 2014. However, based on the adjusted forecasted amount, including adjusted exchange rate, and on the adjusted cash balance, an annual disbursement decision of USD 8,193,809 has been approved. In line with the Global Fund's new policy on annual disbursement decisions, disbursements may be made in tranches based on updated cash balance during the year. In this case, we are approving disbursement in two tranches as noted in the following table:

A. Original budget Q13 (Jul-Sep 2013): USD 2,156,648
 B. Original budget Q14 (Oct-Dec 2013): USD 2,375,719
 C. Original budget Q15 (Jan-Mar 2014): USD 4,528,697
 D. Original budget Q16 (Apr-Jun 2014): USD 1,734,684
 E. Buffer period budget Q17(Jul-Sep 2014): USD 1,818,096
 F. Contractual Commitments and Outstanding Advances: USD 1,740,718
 G. Cash outflows carried over to this Disbursement Period: USD 980,851
 H. Reprogramming: USD 800,503
 I. Projected overspending: USD 672,455
 J Less Projected savings and cancelled activities: USD -920,325
 K. Less 20% absorption adjustment on budget amount of Q13-Q15 for non-procurement budget (\$6,873,889): USD -1,374,778
 L. Less 15% on carry forward and reprogramming activities (G. and H.) based on cumulative absorption rate: USD -267,203
 M. Less 15% absorption adjustment on budget amount of Q16 for non-procurement budget (\$1,648,017): USD -247,203
 N. Less 10% absorption adjustment on budget amount of Q17 for non-procurement budget (\$1,720,383): USD -172,038
 O. Total Forecast Outflows: USD 13,826,824
 P. Less cash ending balance (PR+SR): USD 5,633,015
 Q. Annual Disbursement Commitment Decision: USD 8,193,809

Tranche 1 of USD 5,116,675 covers July 2013 - March 2014 to be released in November 2013

Original budget Q13-Q15: USD 9,061,064
 Contractual Commitments and Outstanding Advances: USD 1,740,718
 Cash outflows and reprogramming carried over to this Disbursement Period: USD 1,732,028
 Projected overspending: USD 399,831
 Less Projected savings and cancelled activities: USD - 549,369
 Less 20% absorption adjustment on budget amount of Q13-Q15 for non-procurement budget (\$6,873,889): USD - 1,374,778
 Less 15% on carry forward and reprogramming activities based on cumulative absorption rate: USD - 259,804
 Less cash ending balance (PR+SR): USD -5,633,015

Tranche 2 of USD 3,077,134 covers April - September 2014 to be released in

April 2014
 Original budget Q16-Q17: USD 3,552,780
 Cash outflows carried over to this Disbursement Period: USD 49,326
 Projected overspending: USD 272,624
 Less Projected savings and cancelled activities: USD - 370,956
 Less 15% on carry forward based on cumulative absorption rate: USD - 7,399
 Less 15% absorption adjustment on budget amount of Q16 for non-procurement budget (\$1,648,017): USD - 247,203
 Less 10% absorption adjustment on budget amount of Q17 for non-procurement budget (\$1,720,383): USD -172,038

Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
6	01.Jan.13 - 30.Jun.13		B1	7.1	01.Jan.14 - 30.Sep.14	10,141,806	\$ 5,116,675	10 Dec 2013	

Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>Following the analysis of the overall performance of the Program, including the implementation of activities, and management actions, as well as program management during the Period from 1 January – 30 June 2013, the Global Fund has decided to give the Principal Recipient a B1 rating. We expect PR to reach more People Who Inject Drugs through Needle Syringe Program and to reach prisoners with IEC and peer education on HIV/STI prevention so that the performance rating of the PR could improve in the next semester.</p>				<p>Release of second tranche under the annual disbursement decision.</p>					

Progress Updates				Disbursement Information					
PU	PU Period		TGF Rating	DR	DR Period Covered	PR Request	Disbursement Amount	Disbursement Date	
7	01.Jul.13 - 31.Dec.13		B1					N/A	

Summary of Progress				Reasons for variance between PR Request and Actual Disbursement					
<p>The PR's programmatic performance was adequate during semester 7, with a quantitative indicator rating of B1. The 'All Indicator' rating is B1 and the 'Top Ten Indicator' rating is B1.</p> <p>The PR is still struggling to achieve a top ten indicator which is affecting the overall programmatic performance. CT expects PR to reach more People Who Inject Drugs through Needle Syringe Program and to reach prisoners with IEC and peer education on HIV/STI prevention so that the performance rating could improve in the next semester.</p>									

2.5. Contextual Information	
Title	Explanatory Notes

2.6. Phase 2/ Periodic Review Grant Renewal	
Performance Rating	Recommendation Category
Rationale for Phase 2/ Periodic Review Recommendation Category	
Rationale for Phase 2/ Periodic Review Recommendation Amount	

Time-bound Actions	
Issues	Description

