



## **STATUS REPORT ON GLOBAL FUND PROJECT**

### **QRA-H-CARICOM 1122**

**“Removing barriers to accessing HIV and Sexual and Reproductive Health Services for key populations in the Caribbean”**



**THIRTY-FOURTH (34<sup>th</sup>) MEETING OF THE  
PRIORITY AREAS COORDINATING COMMITTEE:  
(PACC)**

**TWENTY-EIGHTH (28<sup>th</sup>) MEETING OF THE  
EXECUTIVE BOARD**

**April – June 2018**



**4<sup>th</sup> – 6<sup>th</sup> SEPTEMBER, 2018**

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## 1. Introduction

The Caribbean Community (CARICOM) Secretariat and Global Fund awarded a three (3) year Grant Agreement on 12 October, 2016, entitled “*Removing barriers to accessing HIV and sexual and reproductive health services for key populations in the Caribbean*”: The Grant which bears the Number 1122, falls under the Global Fund to Fight AIDS, Tuberculosis and Malaria programme.

In 2001, the Conference of Heads of Government established the Pan Caribbean Partnership against HIV and AIDS (PANCAP) as one of the two Health Pillars for the Caribbean Region. While CARPHA focuses on general health issues, PANCAP concentrates on unifying the regional response to HIV through coordination of regional stakeholders, resource mobilization and the development of regional public goods.

In January 2016, in keeping with its resource mobilization function, PANCAP (through its Regional Coordinating Mechanism) submitted a Concept Note to the Global Fund to Fight Tuberculosis, Malaria and HIV and AIDS. In response to PANCAP’s request for funding, the Global Fund AIDS approved a budget of **US\$ 5,223,227** for the implementation of a three-year Regional project on Human Rights.

The overarching **goal** of the PANCAP Global Fund Project is to contribute to the removal of barriers that impede access to HIV and sexual and reproductive health services for key populations, thereby promoting the achievement of regional HIV targets.

In order to achieve the goal of the project, PANCAP Coordinating Unit works in collaboration with the Caribbean Public Health Agency and the PAN American Health Organization to achieve the following **objectives**:

1. To reduce HIV-related stigma and discrimination and promote human rights through high-level advocacy for an enabling legal and policy environment; and
2. To increase access to HIV and health services for key populations and improve their retention on the continuum of care.

The **key interventions** of the Project include:

1. Legal and policy environment assessment and law reform;
2. Policy advocacy on legal rights
3. Development and implementation of health legislation, strategies and policies;
4. Routine reporting; and
5. Analysis, review and transparency

The project targets sixteen beneficiary countries which are Antigua and Barbuda, The Bahamas, Barbados, Belize, Dominica, Dominican Republic, Grenada, Guyana, Haiti, Jamaica, Montserrat, St. Kitts and Nevis, Saint Lucia, St. Vincent and the Grenadines, Suriname and Trinidad and Tobago.

The Caribbean Community Secretariat serves as the Principal Recipient (PR) of the Global Fund Project. In order to fulfil its function, the PR established a Project Management Unit to manage the implementation of the project by the sub-recipient and sub-sub recipient. Internally, the PMU is supported by the Project Advisory Group and the Project Management Team, which provides operational oversight to the Project Management Unit. Externally, the **Regional Coordinating Mechanism (RCM)** represents the Pan Caribbean Partnership and it provides policy guidance and strategic management to the project. In fulfilling its functions, the RCM is assisted by the **Priority Areas Coordinating Committee (PACC)**. As part of its functions, the Principal Recipient is required to submit periodic reports to the RCM and the PACC on the progress of project implementation to inform policy development and strategic planning of the regional response to HIV.

This Regional Grant will continue to provide a unique opportunity for collaborating with civil society and state actors, international partners and technical agencies to develop programs that can address the needs of key populations thereby addressing the more general need to rapidly diminish the HIV epidemic in an effective and sustainable manner. Importantly, the collaborative effort between PANCAP and CVC/COIN are aligned towards achieving the common agenda and shared measures, but also afford the

opportunity for formalizing partnerships and institutional strengthening that can sustain these programs beyond the scope and project cycle of Global Fund support.

## 2. PROGRAMMATIC ACHIEVEMENT BY STRATEGIES

In order to achieve the project objectives, key strategies were identified by the partnership through a consultative process to address the observed gaps in the regional response, see **Table 1**. The project activities target the **sixteen (16)** PANCAP beneficiary countries **six: (6)** of which are not eligible for country grants from the Global Fund based on the World Bank operational classification of economies based on gross national income per capita).

The Programmatic achievements are presented below by Modules. The Gaps and strategies as outlined in Table 1 below were identified during Concept Note Development of the CARICOM-PANCAP Global Fund Grant.

**Table 1 – Project Strategies by Modules**

No	Gaps	Planned Strategy in Response to the Gaps
<b>Module : Removing Legal Barriers</b>		
1	Inadequate political will for law and policy reform among Heads of Government who deferred consideration of the actionable, time-bound commitments contained in the regional Justice for All declaration.	Leverage the influence of high-level CARICOM bodies
<p><b>Actual Achievements</b>  <b>April – June 2018</b></p> <ul style="list-style-type: none"> <li>PANCAP presented a brief which included the Resource Mobilisation (RM) Strategy 2018-2020 submitted to the 26th Meeting of Chief Medical Officers and was endorsed.</li> </ul> <p>The brief focused on financing challenges for HIV in the Caribbean and PANCAP's efforts to mobilise resources including the revision of its Resource Mobilisation Strategy 2018-2020 and accompanying implementation plan. The presentation also included and Update on PAHO's Regional STI Meeting which was held in May with funding from the PANCAP Global Fund grant. The presentation highlighted that domestic funding is critical to support the scaling-up of priority STIs (syphilis, Neisseria gonorrhoeae) as well as Hepatitis B and C within the HIV response. This will support the commitment of member states to ending HIV and STIs and viral hepatitis as public health problems by 2030; urged CMOs to advocate for funding to support the scaling-up services for STI as part of HIV combination prevention, emphasizing key populations, will support the achievement of the global prevention targets which the Caribbean is lagging behind; and</p>		

No	Gaps	Planned Strategy in Response to the Gaps
		<p>emphasised that the effective management and control of STIs in the general and key populations will support the achievement and maintenance of EMTCT in the region.</p> <p>Following the discussion Chief Medical Officers:  <b>Noted</b> PANCAP's efforts to transition from external donor funding to being less donor dependent and to sustain the achievements made thus far.</p> <p><b>Endorsed</b> the Revised PANCAP's Resource Mobilisation Strategy 2018-2020.  <b>Noted</b> PAHO's efforts to stimulate National action and response to priority STIs, within the HIV combination prevention approach, and <b>support</b> the operationlising of national programmes to respond.</p> <p>The RM Strategy 2018-2020 will be presented to COHSOD Ministers of Health in September 2018. In support of the RM Strategy a Programme Manager- RM will be recruited for the PCU.</p> <ul style="list-style-type: none"> <li>• Prepared brief on PANCAP's progress in relation to the 2016 UN High Level Political Declaration on AIDS for CARICOM Permanent Representative to the UN to present to the UN Review of progress. The brief highlighted the Region's achievements including the decline in AIDS-related death, increased in the number of persons on treatment (52%) and the EMTCT validation of six additional countries, implementation of new guidelines for Treat All and PrEP and preparation for piloting self-testing. It also highlighted the challenges including late diagnosis and adherence and increased in newly diagnosed cases on HIV in men, the need for laboratory strengthening and continued stigma and discrimination. The brief was presented by CARICOM's Permanent Representative to the UN.</li> <li>• Prepared brief for Lead Head for the 39th Regular Meeting of the Conference of Heads of Government, 4-6 July 2018.</li> </ul> <p>The PCU prepared a brief for Lead Head for the 39th Regular Meeting of the Conference of Heads of Government, 4-6 July 2018. The brief presented PANCAP's efforts to sustain the regional response within an environment of declining donor resources. The brief updated Heads of Government on the evaluation of the CRSF 2014-2018, the revision of PANCAP Resource Mobilisation Strategy 2018-2020, the new funding (US\$6.5 million) available from the Global Fund for a multi-country approach to HIV for the period 2019-2022.</p> <p>The brief also informed Heads of PANCAP's advocacy with Ministers of Finance through face-to-face engagement aimed at advancing the discussion with their governments to arrive at strategic decisions on how to sustain their HIV response following transition from external donor funding as well as securing a commitment from Ministers to participate in a virtual 90-minute meeting of Ministers of Finance to discuss Governments' policy regarding sustainability and financing for HIV before the middle of July 2018.</p> <ul style="list-style-type: none"> <li>• The brief also updated Heads on the outcomes of PANCAP's advocacy engagements with Ministers of Finance. These revealed that Guyana, Jamaica, St Kitts and Nevis and Suriname are pursuing a series of options. Among them are:</li> </ul>

No	Gaps	Planned Strategy in Response to the Gaps
		<p>(a) Development of Transition and Sustainability Plans, in some cases supported by external agencies such as the Global Fund and PEPFAR; Sustainability plan developed for Jamaica and Guyana and USAID's Health Finance and Governance Project in the Caribbean is supporting sustainability of the HIV response: Barbados, Guyana, Suriname &amp; Trinidad and Tobago</p> <p>(b) Significantly increased HIV funding in some cases to match PEPFAR's contributions;</p> <p>(c) Establishing priorities, targets and timelines to achieve sustainability;</p> <p>(d) Costing a strategic plan for HIV and STIs;</p> <p>(e) Use of fiscal surpluses to invest in HIV and Health related activities;</p> <p>(f) Reallocating and optimizing use of resources, paying attention to service delivery and results based investments;</p> <p>(g) Restructuring expenditure within the Ministry of Health in keeping with Government's commitment to the integrated health targets in SDG#3 which includes fast tracking the end of AIDS by 2030;</p> <p>(h) Benefiting from lesson learned for more effective use resources and adoption of international best practices; and</p> <p>(i) Noting some of the emerging Best Practices in Caribbean with implications for cost effectiveness and fast tracking the end of AIDS.</p> <ul style="list-style-type: none"> <li>- <b>Barbados</b> adopting a policy of Treat All, that is, treating all people living with HIV, regardless of the stage of their disease;</li> <li>- <b>Trinidad and Tobago:</b> Placing the National AIDS Programme in the office of the Prime Minister and signaling that a viability of a multi-sectoral response to HIV;</li> <li>- <b>Belize:</b> Identifying the twin priorities of HIV and TB required to respond to newer Health requirements achieve the end of these diseases;</li> <li>- <b>OECS:</b> Perfecting the pooled procurement (of drugs) system through up-to date techniques for sharing health information to prevent leakages and wastage of medicines</li> <li>- <b>PANCAP:</b> recognizing the importance of reducing 'stigma and discrimination' as an essential complement to sustainable financing; the PANCAP Justice for All initiatives continues to engage multi-stakeholders - parliamentarians, faith leaders, Youth, civil society and key populations - individually and collectively in respectful dialogue on prospects for ending the SIDS epidemic.</li> </ul> <p>Heads of Government were invited to:</p> <ol style="list-style-type: none"> <li>1. <b>Note</b> PANCAP's efforts to transition from external donor funding to be less donor dependent and to sustain the achievements made thus far;</li> <li>2. <b>Support</b> PANCAP's advocacy efforts for resource mobilization in national, regional and international fora; and</li> <li>3. <b>Encourage</b> their Ministers of Finance to participate in the virtual meeting being proposed by PANCAP in July 2018.</li> </ol> <ul style="list-style-type: none"> <li>• PANCAP Director and PANCAP Special Advisor conducted four face-to-face advocacy meetings conducted with Ministers of Finance in Guyana, Jamaica, St Kitts and Nevis and Suriname.</li> </ul>



No	Gaps	Planned Strategy in Response to the Gaps
2	Advocacy efforts have been limited in its reach, effectiveness and strategic focus.	Improve the harmonization and coordination of strategic regional advocacy efforts
<p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>Advocacy meetings conducted in 7 countries: Barbados, Belize, Guyana, Jamaica, St Kitts and Nevis, Suriname and Trinidad and Tobago The Director of PANCAP and the PANCAP Special Advisor conducted a series of advocacy meetings with faith leaders, government and UN partners aimed at advancing the Justice for All programme in those countries.</li> </ul> <p>Faith leaders in Belize, Barbados, Guyana, Jamaica, St Kitts and Nevis and Suriname committed to establishing national Networks of faith leaders for advancing the Justice for All programme. Faith leaders also committed working collaboratively with their respective National AIDS Programmes and to developing messages for World AIDS Day 2018.</p> <p>Faith Leaders in Trinidad and Tobago were divided on the outcome of the Court Ruling which court declared that sections 13 and 16 of the [Sexual Offences Act] are unconstitutional, illegal, null, void, invalid and of no effect to the extent that these laws criminalise any acts constituting consensual sexual conduct between adults.” The ruling in Trinidad and Tobago acknowledges that every individual regardless of their race, colour, gender, age or sexual orientation has the right to human dignity.</p> <p>The PCU reflected on one of the recommendations of the Regional Consultation of Faith Leaders in February 2017 in Port of Spain, Trinidad and Tobago which acknowledged areas of litigation that may challenge religious values and the responses required to harmonise principles and practices around human rights, human sexuality and human dignity. The PCU reminded faith leaders that in handing down his decision, Justice Rampersad said that the ruling however is "not an assessment or denial of the religious beliefs of anyone ...However, this conclusion is a recognition that the beliefs of some, is not the belief of all". PANCAP encouraged continued dialogue between the Faith community and LGBTI community on areas of agreement and commonality and is working through its knowledge for Health Project to provide additional information on comprehensive sexuality education. The dialogue continues.</p>		
3	Advocacy efforts focused mainly on reaching political leaders	Engage faith-leaders to affirm human rights and gender equality and to advocate for policy reform
National Level Consultations were held among Faith Leaders as described above.		
4	Key population voices are absent at the highest level of regional advocacy efforts, both as a result of lack of access	Support the participation of CSO and key population advocates in high-level meetings with parliamentarians and faith leaders.

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	and because of the need to develop advocacy skills and capacity among regional and national KP leaders.	
	<p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>CSOs and key populations supported to attend Joint Regional Dialogue with parliamentarians, faith leaders, NAP managers, youth and CSOs</li> </ul> <p>CSOs and key populations were funded through the Global Fund project to attend the Joint Regional Dialogue with parliamentarians, faith leaders, NAP managers, youth and CSOs. This forum provided an opportunity for CSO and key population representatives to advocate primarily with parliamentarians and faith leaders for measures to address the reduction of stigma and discrimination and well as sexual and reproductive health and rights and for the revision of the PANCAP Justice for All Roadmap.</p> <p>Specifically, faith leaders committed to implementing the PANCAP Justice for All Roadmap while acknowledging areas for further discussions including the repeal or amendment to discriminatory laws and the implementation of comprehensive sexuality education (CSE) in schools. Faith leaders requested the PCU to develop guidelines for respectful engagement between key populations and faith leaders and more information on CSE to enable them to make an informed decision regarding it implementation.</p> <p>Parliamentarians committed to taking practical actions to advancing the adoption of the PANCAP Model Anti-Discrimination Legislation 2012. These included bringing Private Members Bill to parliament. Sharing information and collaboration, sensitising Parliamentary Committees and other stakeholders, and judicial activism (sensitising the Judiciary, and encouraging CSOs to lobby parliamentarians) as well as providing guidance to CSOs on how to advocate for and influence the law making process and bring cases challenging discriminatory/unconstitutional legislation as was done in the recent Trinidad and Tobago case that resulted in a Court ruling that the Buggery Law was unconstitutional.</p>	
5	On-going advocacy for country adoption of PANCAP Model Antidiscrimination Legislation has seen little transactions despite efforts by UNSGSE and the Director of PCU in national and regional consultations and face to face meetings.	Strengthen constructive engagement with faith-based leaders by building on on-going work initiated by PANCAP through regional dialogue and in collaboration with the UNSG Special Envoy.

No	Gaps	Planned Strategy in Response to the Gaps
	<p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>PCU conducted a series of face-to-face direct sensitization engagements with high level government and non-governmental officials and in advocacy at regional and international conferences and fora.</li> </ul> <p>In addition to the scheduled assignments, the PANCAP Special Advisor, in consultation with the Director of PANCAP, undertook complementary engagements aimed at advocacy with special interest groups to support relevant PANCAP programmes, and generally engage in HIV-related diplomacy on special issues. These engagements were designed to enhance commitments to PANCAP's Justice for All (JFA) Roadmap, the Caribbean Regional Strategic Framework 2014-2018 and PANCAP's resources mobilization strategy. Combining the additional activities with main the missions was both expedient and cost effective</p>	
6	<p>PANCAP has had limited access in engaging young people in the regional response</p>	<p>Develop and support an innovative approach to mobilize regional youth leaders to actively engage in high-level advocacy and policy dialogues by linking the CYA program with youth leaders of key populations.</p>
	<p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>The PCU convened the two-day annual meeting of youth leaders in April 2018 which was planned by youth for youth with 36 participating youth leaders.</li> </ul> <p>The deliberations resulted in the following outcomes: Increased understanding of the challenges and opportunities of youth leaders in order to develop advocacy supporting tools and materials; Increased understanding of best-practice regional and international mechanisms that address the reduction of young people's vulnerabilities to HIV and AIDS in particular, the inclusion of CSE within HFLE Curricula and Age of Consent for access to SRH services; a draft document of key statements for decision-makers on the importance of the implementation of key priority areas identified in the CRYAF; and adaptation of a practical data collecting and reporting tool to be used by youth leaders. Youth leaders also developed national advocacy plans by cluster countries and will be supported and monitored in the roll out of these plans.</p> <ul style="list-style-type: none"> <li>Two advocacy briefs were prepared on SRH and rights and youths were supported to advocate in the Joint Regional Dialogue and the UNFPA High Level Dialogue on integration of Comprehensive Sexuality Education into HFLE</li> </ul> <p>The PANCAP Regional Youth Steering Committee for overseeing the implementation of the Regional Youth Advocacy Framework for SRH and Rights collaborated with UNAIDS Sub-regional team to prepare two advocacy briefs on SRH and rights, these briefs were utilised by selected youths to advocate in the Joint Regional Dialogue and the UNFPA High Level Dialogue on integration of Comprehensive Sexuality Education into HFLE.</p>	

No	Gaps	Planned Strategy in Response to the Gaps
7	<p>Limited capacity of PANCAP to collaborate with other sectors to challenge harmful laws, policies and norms and behaviors</p>	<p>Strengthen the relationship between PANCAP and the broader health frameworks and entities to ensure that there is greater synergy in an effort to improve the integration of HIV issues in the broader health and development dialogues and policies.</p>
<p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>• <b>Grenada</b></li> </ul> <p>Consultant contracted to develop Website for JFA in Conducted surveys on stigma and discrimination among 4 groups on attitudes and behaviours towards LGBT persons</p> <ul style="list-style-type: none"> <li>• <b>St. Lucia</b></li> </ul> <p>Conducted training of data collectors for PLHIV Stigma Index Survey Funded selected Champions to participate and advocate at the Joint Regional Dialogue and the Migrants Forum for SRH and Rights</p> <p>National JFA Coordinators prepared quarterly reports on the implementation of JFA workplans that included achievements and challenges</p> <ul style="list-style-type: none"> <li>• <b>St. Kitts</b></li> </ul> <p>Recruitment of the consultant for the implementation of the JFA plan in St. Kitts has started.</p>		
<p><b>Module: Health Systems Strengthening</b></p>		
8	<p>Gaps in leadership resulting from a lack of understanding among key policy and decision-makers, of the linkages between human rights and health outcomes.</p>	<p>Build capacity of National authorities (NAP Managers, Chief Medical Officers and Permanent Secretaries) to operationalize effective programs to meet with new Global targets.</p>
<p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>• National Action towards the Elimination of STIs and Viral Hepatitis in the Caribbean: A sub-regional meeting convened in Port-of-Spain.</li> </ul> <p>PAHO convened a National Action towards the Elimination of STIs and Viral Hepatitis in the Caribbean: A sub-regional meeting in Trinidad and Tobago on 21-23 May, 2018.</p> <p>Countries worldwide have committed to elimination of sexually transmitted infections (STI) and viral hepatitis as public health problems by 2030. In consideration of the</p>		

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		<p>significant progress achieved in the EMTCT of HIV and syphilis, Caribbean countries are well positioned to take bold steps towards elimination of other STI and viral hepatitis. In this regard, countries gathered in May 2017 in Port of Spain to discuss and stimulate National Action and response to STI (including STI response within the HIV combination prevention approach) and viral hepatitis B and C.</p> <p>The response to viral hepatitis B and C in the Caribbean has been focused on Hepatitis B immunization and the screening of blood donations for both conditions. The meeting provided an opportunity to promote national planning and scale up of actions to prevent, diagnose and treat persons with chronic viral hepatitis.</p> <p>Participating countries: Antigua and Barbuda, Bahamas, Belize, Dominica, Dominican Republic, Grenada, Guyana, Haiti, Jamaica, Monserrat, St Kitts and Nevis, Saint Lucia, St Vincent and the Grenadines, Suriname and Trinidad and Tobago. The meeting is an activity was facilitated by PAHO in partnership with, CARPHA, UNAIDS and the U.S. Centers for Disease Control and Prevention.</p> <ul style="list-style-type: none"> <li>Workshop on enhancing and innovating comprehensive HIV/STI services for adult and adolescents of key populations in the Caribbean based on the HIV combination prevention approach and integrated comprehensive care convened in Port -of-Spain.</li> </ul> <p>PAHO convene a regional workshop on enhancing and innovating comprehensive HIV/STI services for adult and adolescents of key populations in the Caribbean based on the HIV combination prevention approach and integrated comprehensive care convened in Trinidad and Tobago on 24th -25<sup>th</sup> May, 2018. This workshop was revised based on the current needs of the regions as opposed to the needs that existed at the time of the preparation of the grant proposal.</p> <p>The outcomes achieved were: Increased knowledge around new WHO recommendations related to prevention, care and treatment services for HIV and priority STI for adult and adolescents of key populations; increased understanding of innovative interventions and models of HIV/STI service delivery for key populations and their applicability within the local settings of Caribbean countries; and opportunity to share experience about strengthening HIV/STI services, offering quality comprehensive care tailored for adults and adolescents of key populations and using innovative models of service delivery based on the combination prevention approach.</p> <p>Representatives were drawn from 16 Countries: Antigua and Barbuda, Barbados, Bahamas, Belize, Dominican Republic, Dominica, Grenada, Guyana, Haiti, Jamaica, Montserrat, Saint Lucia, St. Vincent and Grenadines, St. Kitts and Nevis, Suriname, Trinidad and Tobago)</p>
9	Key population data for the continuum of care are not available for the region and there is inadequate documentation of key	Strengthen information systems, reporting, data analysis and information sharing to ensure the effective evidence-based interventions reach key populations

No	Gaps	Planned Strategy in Response to the Gaps
	<p>population coverage particularly in smaller countries.</p>	
	<p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>• Completed e-CRSF reporting form</li> </ul> <p>During the period under review, the e-CRSF reporting form was completed. The e-CRSF reporting via the Regional Data Repository for Health is the standardized regional reporting form for reporting on the indicators to monitor progress towards achievement of the CRSF 2014-2018. The e-CRSF reporting form will be reintroduced to PANCAP member countries at the data analysis, dissemination and use workshop scheduled in September. PANCAP member countries will also be asked to bring available data to upload in the repository during the workshop. The CARPHA continues to work with PANCAP member countries to promote the use of the e-CRSF reporting form and to actively support PANCAP member states to update the e-CRSF reporting form with the relevant CRSF indicator and KP data.</p> <ul style="list-style-type: none"> <li>• Develop guideline to accompany e-reporting form</li> </ul> <p>Guideline was developed to accompany the e-CRSF reporting form in the Regional Data Repository for Health. The guidelines provide essential information for PANCAP member countries to fully utilize the functions and capabilities of the system. The guidelines also provide recommendations based on best practices for reporting accurately on the CRSF indicators based on the dimensions of data quality. A standard operating procedures manual was also developed to provide step-by-step instructions to assist PANCAP member countries to navigate the system and execute routine tasks while maintaining consistency and high quality in the capture, analysis and reporting on the CRSF indicators. Both the manual and SOP is available on the M&amp;E Forum and will be introduced to PANCAP member countries at the upcoming data analysis, dissemination and use workshop in September. CARPHA is also working with PANCAP member countries to develop country-specific guidelines to assist with the capture, analysis and reporting on HIV-related indicators including, national indicators based on the national strategic plan, GAM and CRSF. Country-specific guidelines and standard operating procedures are currently being developed for Guyana and Belize. CARPHA has engaged the OECS HIV AIDS Programme Unit (HAPU) to discuss collaboration and synergies in the implementation of both regional and OECS Global Fund grants to better maximize of efforts to support the OECS/PANCAP member countries.</p> <ul style="list-style-type: none"> <li>• Engaged countries to develop Strategic Information Action Plans for Haiti, Suriname, Barbados, Jamaica, Dominican Republic</li> </ul> <p>CARPHA continues to work with PANCAP member countries to develop tailored strategic information action plans based on the identified gaps. All Strategic Information Actions Plans will be completed by the end of the programmatic reporting period. Countries targeted for Q3 are: Haiti, Suriname, Barbados, Jamaica, Dominican Republic and the</p>	

No	Gaps	Planned Strategy in Response to the Gaps
	<p>updated OECS Strategic Information Action Plan to be completed through joint collaboration between the OECS countries, OECS HAPU and CARPHA.</p> <ul style="list-style-type: none"> <li>• Drafted Guyana Routine Data Management Guidelines and SOPs; Drafted Belize monitoring dashboard; Prepared Guyana Mission Report; Prepared Belize Mission Report</li> </ul> <p>CARPHA commenced activities to assist PANCAP countries to implement country specific strategic information action plans. These activities included the development of a data management guidelines for Guyana and an indicator monitoring dashboard for Belize. This activity is on-going and scheduled to be conducted throughout 2018 and 2019.</p> <ul style="list-style-type: none"> <li>• Reviewed and expanded the functionality of the CARPHA Repository</li> </ul> <p>The functionalities of the CARPHA Regional Data Repository for Health has successfully been reviewed and expanded to include reporting on the CRSF indicators to inform the regional S&amp;D and health policy agenda. Reporting by PANCAP member countries have been initiated however like any new reporting system, on-going promotion of the regional reporting systems is needed and on-going support to countries is needed to assist with the navigation of the system and upload of data. CARPHA continues to promote the use of the repository and provide assistance to countries during in-country missions to become familiar with the systems and to upload their country data. CARPHA also requested and received support from PANCAP to further expand the regional data repository to facilitate and support regional reporting and monitoring on the progress made towards the achievement of the multi-sectoral action and Regional Public Goods of the CCH IV. The additional expansion of the functionalities of the regional data repository to include CCH IV indicators is scheduled for completion by September 2018.</p>	
10	<p>The integration of HIV into health care has been a neglected area in the regional response.</p> <p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>• Prepared first draft SIDney documentation report</li> </ul> <p>The CARPHA M&amp;E team travelled to Guyana to conduct interview with key representatives and beneficiaries of Comforting Hearts, Guyana Trans United (GTU) and Society Against Sexual Orientation Discrimination (SASOD) to document the Caribbean Civil Society Shared Incident Database (SID) as an evidence-based high impact and innovative KP intervention. The CARPHA M&amp;E Team conducted a total of twenty-one (21) interviews which will be reflected in the documentation. During the period under review, CARPHA worked with PETAL (Belize) to conduct interviewers with the implementers and beneficiaries of SIDney in Belize. A draft documentation of the use of the Caribbean Civil Society Shared Incident Database (SID) as an evidence-based high</p>	<p>Strengthen regional approaches for effective evidence-based interventions that address common barriers to HIV and health services for key populations.</p>

No	Gaps	Planned Strategy in Response to the Gaps
		<p>impact and innovative KP intervention has been developed however, the first draft is to be reviewed and updated in collaboration with CVC. The final document will be dissemination widely through the regional data repository for health, KP networks, PANCAP governance mechanisms and other fora.</p>
11	<p>There is insufficient attention to critical non-financial sustainability elements including evidence-informed planning and priority setting for sustainability.</p>	<p>Promote sustainability by building capacity for resource mobilization to address gaps including, through better leveraging of regional and national resources</p>
<p><b>Actual Achievements April – June 2018</b></p> <ul style="list-style-type: none"> <li>• PANCAP Director and PANCAP Special Advisor conducted four face-to-face advocacy meetings conducted with Ministers of Finance in Guyana, Jamaica, St. Kitts and Nevis and Suriname</li> </ul> <p>Brief was prepared. PANCAP Director and PANCAP Special Advisor conducted four face-to-face advocacy meetings conducted with Ministers of Finance in Guyana, Jamaica, St Kitts and Nevis and Suriname.</p> <p>PANCAP’s advocacy engagements with Ministers of Finance has revealed that Guyana, Jamaica, St Kitts and Nevis and Suriname are pursuing a series of options. Among them are:</p> <ul style="list-style-type: none"> <li>(a) Development of Transition and Sustainability Plans, in some cases supported by external agencies such as the Global Fund and PEPFAR; Sustainability plan developed for Jamaica and Guyana and USAID’s Health Finance and Governance Project in the Caribbean is supporting sustainability of the HIV response: Barbados, Guyana, Suriname &amp; Trinidad and Tobago</li> <li>(b) Significantly increased HIV funding in some cases to match PEPFAR’s contributions;</li> <li>(c) Establishing priorities, targets and timelines to achieve sustainability;</li> <li>(d) Costing a strategic plan for HIV and STIs;</li> <li>(e) Use of fiscal surpluses to invest in HIV and Health related activities;</li> <li>(f) Reallocating and optimizing use if resources, paying attention to service delivery and results based investments;</li> <li>(g) Restructuring expenditure within the Ministry of Health in keeping with Government’s commitments to the integrated health targets in SDG#3 which includes fast tracking the end of AIDS by 2030;</li> <li>(h) Benefiting from lesson learned for more effective use resources and adoption of international best practices; and</li> <li>(i) Noting some of the emerging Best Practices in Caribbean with implications for cost effectiveness and fast tracking the end of AIDS. <ul style="list-style-type: none"> <li>- <b>Barbados</b> adopting a policy of Treat All i.e treating all people living with HIV, regardless of the stage of their disease;</li> <li>- <b>Trinidad and Tobago:</b> Placing the National AIDS Programme in the office of the Prime Minister and signaling that a viability of a multi-sectoral response to HIV;</li> </ul> </li> </ul>		



No	Gaps	Planned Strategy in Response to the Gaps
	<p>- <b>Belize</b>: Identifying the twin priorities of HIV and TB required to respond to newer Health requirements achieve the end of these diseases;</p> <p>- <b>OECS</b>: Perfecting the pooled procurement (of drugs) system through up-to date techniques for sharing health information to prevent leakages and wastage of medicines</p> <p>- <b>PANCAP</b>: recognizing the importance of reducing ‘stigma and discrimination’ as an essential complement to sustainable financing; the PANCAP Justice for All initiatives continues to engage multi-stakeholders - parliamentarians, faith leaders, Youth, civil society and key populations - individually and collectively in respectful dialogue on prospects for ending the SIDS epidemic.</p> <p>A brief was prepared for the meeting of the Council of Finance and Planning. The brief on sustainable financing for HIV and health in the Caribbean.</p> <p>COFAP was asked to:</p> <p>(a) <b>Collaborate</b> with the coordinators of the National AIDS Programmes to promote their strategies for sustainable financing in an effort to avert a reversal of the gains made in the HIV response;</p> <p>(b) <b>Provide</b> the budgetary support required to fill the financing gaps for HIV;</p> <p>(c) <b>Keep</b> the developments and implementation of the sustainable financing strategies under constant review by respective Ministries of Finance and by COFAP</p> <p>(d) <b>Receive</b> briefs on the status of implementation of strategies for filling the Financing gap and for progress toward achieving the goals of PANCAP’s Resource Mobilization Strategy 2018-2020;</p> <p>(e) <b>Use</b> the COFAP system to foster functional cooperation and thereby a consolidated regional position on Caribbean Health and development in the international negotiating theatres.</p> <p>The COFAP endorsed the request and suggested that this should be expanded to include NCDs and ensure more efficient use of funds</p>	

### Section 3 – Status of Project Milestones

#### Planned Milestones for the period - 1 January 2018 to 31 December 2018

At the end of December 2018, the Caribbean Community Secretariat will be required to report on the milestones outlined in Table 2 to the Global Fund to fight Tuberculosis Malaria and AIDS. The approved Global Fund Methodology for rating the completion of these milestones is described in **Table 2 below**:

**Table 2: Methodology for rating the completion of each milestone**

<p><b>Milestone Not Started: 0%</b></p> <p><b>Milestone Started: 33%</b></p> <p><b>Milestone Advanced: 67%</b></p> <p><b>Milestone completed: 100%</b></p>
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There are thirteen (13) planned Work Plan Tracking Milestones, which are due for reporting at the end of December 2018. The status of these Milestones based on the programmatic achievements recorded for the period April – June 2018 are detailed in **Table 3 below.**

**Table 3: Status of the Work Plan Tracking Milestones**

Milestones	Methodology for rating completion of milestones
<p>75% of PANCAP countries reporting accurately on CRSF Indicators on Stigma and Discrimination and Key Population Indicators</p>	<p><b>Not Started</b> – No progress is shown against planned milestone</p> <p style="background-color: #c6e0b4;"><b>Started</b> – Existing Regional reporting forms are adapted to standardize the data reporting to ensure the capture of essential data for key populations</p> <p><b>Advanced</b> – Guidelines are developed to build capacity for countries to strengthen strategic information systems to capture, analyze and report on key population data and CRSF, stigma and discrimination and 65% of PANCAP countries reporting accurately on CRSF Indicators on Stigma and Discrimination and KP Indicators.</p> <p><b>Completed</b> – 75% of PANCAP countries reporting accurately on CRSF Indicators on stigma and discrimination and Key population indicators</p>
<p><b>Actual Achievement:</b></p> <ol style="list-style-type: none"> <li>1. A standardized Electronic Reporting Form was developed in Year 1 to facilitate routine reporting on the CRSF Indicators;</li> <li>2. Reporting Guidelines and Guidelines for the Web-based Platform were developed to facilitate country reporting;</li> <li>3. A Regional Workshop was conducted in year 1 to introduce personnel from the National AIDS Programmes to the Web-based Platform for reporting;</li> <li>4. The Data Quality Tool which was developed by USAID was adopted by CARPHA and will be used for the Data Quality Audits.</li> <li>5. The PANCAP Coordinating Unit has officially requested the support from the Ministries of Health in the project countries to report on the CRSF Indicators. The Monitoring and Evaluation Framework was shared with the Ministries.</li> </ol>	

Milestones	Methodology for rating completion of milestones
<b>Rating: 33% Completion rate</b>	
<b>Recommendations:</b> <ul style="list-style-type: none"> <li>▪ Request that participants for the Data Analysis, Dissemination and Use workshop bring country data to complete the electronic reporting forms – <b>September 15th, 2018</b>;</li> <li>▪ Actively follow-up with Countries that have not initiated reporting;</li> <li>▪ As part of the supporting documents, CARPHA is required to submit a summary of reported country data by Indicator; and</li> <li>▪ Conduct data audits/validation based on the reports submitted by countries; and</li> <li>▪ Prepare an Annual Report on the progress made in implementing the strategies of the Caribbean Regional Framework for HIV and highlight country specific data to demonstrate the value of reporting on the CRSF Indicators.</li> </ul>	
Comprehensive data repository housed by CARPHA available to all stakeholders via web access	<b>Not started</b> – No progress is shown against planned milestone <b>Started</b> – Data Repository developed and information collated to update repository <b>Advanced</b> – Data repository available to stakeholders <b>Completed</b> – Data Repository accessed by stakeholders via the web
<b>Actual Achievement:</b> <ol style="list-style-type: none"> <li>1. The existing CARPHA Data Repository was expanded to facilitate the collection, analysis and reporting on the CRSF Indicators. The system also includes a feature to allow sharing of M&amp;E related information and resources through the "Forum" platform in the repository;</li> <li>2. Web link was shared with Officers responsible for reporting on the CRSF Indicators; and</li> <li>3. The K4Health Project has submitted resources which were uploaded to the repository</li> </ol>	
<b>Rating: 67% Completion rate</b>	
<b>Recommendations:</b> <ul style="list-style-type: none"> <li>▪ Seek clearance from countries to upload M&amp;E Products and reports that were developed by CARPHA – M&amp;E Plans, Strategic Plans, Evaluation Reports;</li> <li>▪ Continue to work with PANCAP to transfer key regional documents to the Repository;</li> <li>▪ Continue to work with the Coordinator of the K4Health Project to identify documents which could be added to the repository;</li> <li>▪ Work with UNAIDS and other Regional Institutions to use the CARPHA Repository as a hub to disseminate and share M&amp;E Resources (reporting guidelines for the GAM, GAM Reports);</li> <li>▪ Share web links to new resource material on web pages of regional institutions;</li> <li>▪ Conduct an assessment among CARPHA stakeholders to identify resource needs;</li> <li>▪ Develop a plan for promoting the use of the Repository; and</li> <li>▪ As part of the supporting documents, CARPHA needs to provide a report on the hits on the page as well as the download of materials.</li> </ul>	
7 annual face to face meetings held between faith leaders and UNSGSE	<b>Not started</b> – No progress is shown against planned milestone <b>Started</b> – 60% of annual face to face meetings taking place <b>Advanced</b> – 80% of annual face to face meetings taking place <b>Completed</b> – 100% of annual face-face meetings taking place
<b>Actual Achievement:</b> <ol style="list-style-type: none"> <li>1. The Director of PANCAP and the United Nations Secretary General Special Envoy for HIV conducted a series of advocacy meetings in <b>Barbados, Belize, Guyana, Jamaica, St Kitts</b></li> </ol>	

Milestones	Methodology for rating completion of milestones
<p>and Nevis, Suriname and Trinidad and Tobago with faith leaders, government and UN partners aimed at advancing the Justice for All programme in those countries</p>	
<p><b>Rating: 100% Completion rate</b></p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ Face to face meetings were also convened with <b>The Bahamas, Barbados, Belize, Grenada, Guyana, Haiti, Jamaica, St. Kitts and Nevis and Trinidad and Tobago</b> in year 1. So far, Barbados, Belize, Jamaica and Trinidad and Tobago have been targeted twice over the past two years of the project. There is a need for the PCU to target new countries in year 3 (<b>Montserrat, St. Lucia, Dominica, Antigua and Barbuda, Dominican Republic, St. Vincent and the Grenadines</b>).</li> </ul>	
<p>2 sensitization sessions undertaken every year with departments of CCS on the linkages between HIV and human rights and social development programs and identify opportunities for collaboration</p>	<p><b>Not started</b> – No progress is shown against planned milestone  <b>Started</b> – Sensitization meetings organized  <b>Advanced</b> – sensitization meetings taking place with 60% of aimed participants attending  <b>Completed</b> – Sensitization sessions completed with 100% of aimed participants attending.</p>
<p><b>Actual Achievement:</b></p> <ol style="list-style-type: none"> <li>1. Two (2) Sensitization Sessions will be convened in September 2018 with the Legal Department and the Directorate for Human and Social Development. These sessions will be conducted during the Work plan development period to promote the integration of HIV related work in the programmes of the targeted Departments.</li> </ol>	
<p><b>Rating: 33%</b></p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ The Sensitization Session for the Departments of the Caribbean Community Secretariat should be tailored to align the project interventions with the mandate of the selected Department. For example, the Sensitization Session with the CSME Department should focus on Migrants Framework, the Sessions with HSD should focus on thematic areas like Gender-based Violence and the National Action Plan which were developed by the young leaders from the CARICOM Youth Ambassador Programme and the Youth Leaders from Key Populations;</li> <li>▪ All staff from the selected Department should attend the sensitization sessions to ensure that the milestone is deemed complete. The Total number of staff per department will be considered as the denominator for this milestone;</li> <li>▪ During the Work Programme Development Phase, the PCU should identify the activities that were integrated into the work programme as a result of the sensitization sessions with each department; and</li> <li>▪ The Sensitization sessions should promote discussions to enable the identification of opportunities for collaboration.</li> </ul>	
<p>2 Strategies and approaches promoting the effective and sustainable response to HIV adopted by the Conference of Heads, Community Council,</p>	<p><b>Not started</b> – No progress is shown against planned milestone  <b>Started-</b> 1 annual meeting of the Conference of Heads of Government, Council, COHSOD, Ministers of Health, Caucus of CMOs that discuss HIV Issues related to key populations</p>

Milestones	Methodology for rating completion of milestones
COHSOD, Ministers of Health, Caucus of CMOs. JFA integrated into national responses in 3 countries	<p><b>Advanced:</b> 1 annual meeting of the Conference of Heads of Government, Council, COHSOD, Ministers of Health, Caucus of CMOs that discuss HIV Issues related to key populations</p> <p><b>Completed</b> - 1 annual meeting of the Conference of Heads of Government, Council, COHSOD, Ministers of Health, Caucus of CMOs that discuss HIV Issues related to key populations and that take commitment</p>
<p><b>Actual Achievement:</b></p> <ol style="list-style-type: none"> <li>1. The PCU prepared a brief on the sustainability of the response to be tabled at Twenty-ninth Intersessional of the Conference of Heads of Government. Unfortunately, the sustainability of the HIV response was not tabled at the meeting for discussion;</li> <li>2. PANCAP Resource Mobilization Strategy was presented to the Twenty-sixth Meeting of the Chief Medical Officers. The Resource Mobilization Strategy was tabled at the meeting for discussion and was subsequently endorsed by the Chief Medical Officers;</li> <li>3. A Brief was prepared for the Lead Head for the Thirty-Ninth Regular Meeting of the Conference of Heads of Government. The brief presented a synopsis on the efforts made by PANCAP to sustain the regional response within an environment of declining donor resources. The issue of the sustainability of the HIV Response was not tabled at the meeting for discussion; and</li> <li>4. Brief on Sustainable financing of HIV and Health in the Caribbean was presented to the Council for Finance and Planning (COFAP). The Brief advocated for increased domestic financing for the HIV Response. The COFAP which is responsible for economic policy coordination, financial and monetary integration of Member States encouraged closer collaboration between Ministers of Finance and the Coordinators of the National AIDS Programmes to promote strategies for sustainable financing in an effort to avert a reversal of the gains made in the HIV response.</li> </ol>	
<p><b>Rating: 33%</b></p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ Make early requests to table strategies/approaches on the agenda of the remaining Meetings of the Organs and Bodies. It is proposed that briefs will be prepared for COHSOD Ministers of Education Meeting, COHSOD Ministers of Health Meeting and Caucus of CMOs.</li> <li>▪ Target the Special Meeting of the Conference of Heads of Government carded for November 2018 to present strategies related to CSME and Migrants. Work with the CSME Unit to obtain buy-in and support.</li> </ul>	
Justice For All implementation integrated into national responses in St. Kitts and Nevis, St. Lucia and Grenada	<p><b>Not started</b> = No progress is shown against planned milestone</p> <p><b>Started</b>= JFA implementation integrated into national responses in 1 country</p> <p><b>Advanced</b>= JFA implementation integrated into national responses in 2 countries</p> <p><b>Completed</b> = JFA implementation integrated into national responses in 3 countries</p> <p>This will be measured by the approved national Justice for All Plans developed in collaboration with countries and their national annual work plans and budgets. The three countries targeted are St. Kitts and Nevis, Grenada and St. Lucia.</p>
<p><b>Actual Achievement:</b></p> <ol style="list-style-type: none"> <li>1. Justice for All Plans were developed for St. Kitts and Nevis, St. Lucia and Grenada;</li> <li>2. Coordinators were recruited in St. Lucia and Grenada to implement the Plans; and</li> <li>3. Recruitment of a Coordinator for St. Kitts is underway</li> </ol>	
<p><b>Rating: 67% achievement rate</b></p>	

Milestones	Methodology for rating completion of milestones
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ The PCU should continue to work with St. Kitts and Nevis to advance the recruitment of the National Coordinator;</li> <li>▪ The Quarterly Reports from the Coordinators should be accompanied by supporting documents to validate work completed; and</li> <li>▪ The Quarterly Reports from the National Coordinators should detail the involvement of the National AIDS Programs in the implementation of the National Plans.</li> </ul>	
<p><b>Rating:</b></p>	
<p>32 participants that receive capacity-building (data analysis dissemination and use) to support regional evidence-based policies.</p>	<p><b>Not started:</b> No progress is shown against planned milestone.  <b>Started:</b> 60% of participants have completed the capacity building activities  <b>Advanced:</b> 80% of participants have completed the capacity building activities  <b>Completed=</b> 100% of participants have completed the capacity building activities Each training will reach a maximum of 32 participants. There will be capacity building sessions over the grant period. The means of verification will be the Workshop and Capacity building reports. Workshops and customized capacity development sessions will be delivered on the following subject areas (1 workshop each): Data Analysis; Data Dissemination and Use</p>
<p><b>Actual achievement:</b></p> <p>1. This activity is planned for September 2018.</p>	
<p><b>Rating: 0% completion rate</b></p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ Incorporate aspects of CRSF indicators in the training agenda for the Data Analysis, Dissemination and Use workshop;</li> <li>▪ Encourage country participants to bring country data to complete CRSF Reporting at the training; and</li> <li>▪ Invite more participants from the host country to ensure that the milestone is achieved.</li> </ul>	
<p>7 face-to-face meetings 1 each with the Minister of Finance in each of 10 countries, where best practice geared toward sustainability and economic evaluations will be discussed</p>	<p><b>Not started:</b> No progress is shown against planned milestone  <b>Started:</b> All economic evaluations are conducted  <b>Advanced:</b> All economic evaluations are conducted and 60% of meetings with Ministers of Finance are held  <b>Completed=</b> all economic evaluations are conducted and 100% of meetings with Ministers of Finance are held The means of verification will be the Meeting Reports including the agenda, the list of participants and signed registers.</p>
<p><b>Actual achievement:</b></p> <ol style="list-style-type: none"> <li>1. PANCAP Director and PANCAP Special Advisor conducted five (5) face-to-face advocacy meetings with Ministers of Finance in Guyana, Jamaica, St Kitts and Nevis and Suriname and Barbados</li> <li>2. Additional Ministers of Finance were also targeted at the Meeting of the Council for Finance and Planning</li> </ol>	
<p><b>Rate: 67%</b></p>	
<p><b>Recommendations:</b></p> <ol style="list-style-type: none"> <li>1. The PCU is required to submit the Economic Evaluations which were conducted by ABT Associates to ensure that the face to face engagements with Ministers of Finance were</li> </ol>	

Milestones	Methodology for rating completion of milestones
evidence-informed and country-specific data was used for engagements with the Ministers of Finance.	
<p>Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination. Workshop to discuss and agree on new service delivery models for HIV, with the active participation of civil society organizations, people living with HIV and the wider community</p>	<p><b>Not started:</b> No progress is shown against planned milestone  <b>Started:</b> 60% of aimed participants have completed the trainings  <b>Advanced:</b> 80% of aimed participants have completed the trainings  <b>Completed:</b> 100% of aimed participants have completed the trainings Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination with 16 participants from each country</p>
<p><b>Actual Achievement:</b></p> <ol style="list-style-type: none"> <li>1. Regional Workshop on enhancing and innovating comprehensive HIV/STI Services for adult and adolescent of key populations in the Caribbean based on HIV combination prevention approach and integrated Comprehensive Care. A total of 38 participants attended. The target was 34 participants.</li> </ol>	
<p><b>Rating: 100% Completion rate</b></p>	
<p><b>Recommendations:</b> N/A</p>	
<p>Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination. Workshop to discuss and agree on new service delivery models for HIV, with the active participation of civil society organizations, people living with HIV and the wider community</p>	<p><b>Not started:</b> progress is shown against planned milestone  <b>Started:</b> Frameworks for mapping treatment cascade produced in one or more countries, without NAP endorsement  <b>Advanced:</b> At least 50% of target for the development and NAP endorsement of frameworks for mapping treatment cascades reached during period.  <b>Completed:</b> 100% of target for the development and NAP endorsement of frameworks for mapping treatment cascades reached during period. This activity benefits 6 countries (Jamaica, Trinidad &amp; Tobago, Guyana, Suriname, Haiti, and Belize).</p>
<p><b>Actual Achievement:</b> Activity not started</p>	
<p><b>Rating: 0% completion rate</b></p>	

Milestones	Methodology for rating completion of milestones
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>Focus on completing this activity with the targeted project countries (Jamaica, Trinidad &amp; Tobago, Guyana, Suriname, Haiti, and Belize)</li> </ul>	
<p>Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination. Workshop to discuss and agree on new service delivery models for HIV, with the active participation of civil society organizations, people living with HIV and the wider community</p>	<p><b>Not started:</b> No progress is shown against planned milestone  <b>Started:</b> 50% of aimed CSO/NAP activities that address gaps within the continuum of care for specific KP populations occur  <b>Advanced:</b> 80% of aimed CSO/NAP activities that address gaps within the continuum of care for specific KP populations occur  <b>Completed:</b> 100% of aimed CSO/NAP activities that address gaps within the continuum of care for specific KP populations occur The means to verify the completion will be through Activity reports including agenda, registers, sign in sheets</p>
<p><b>Actual Achievement:</b></p> <ol style="list-style-type: none"> <li>National Action Consultation towards the elimination of STI and Viral Hepatitis suppression was held in Trinidad and Tobago 21- 23 2018 and targeted both CSO and NAP Representatives</li> </ol>	
<p><b>Rating:</b> 0% Completion rate</p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>Use the PANCAP Webinars to promote Joint CSO/NAP Activities that are focused on the continuum of care</li> <li>PANCAP should develop a schedule of planned CSO/NAP activities that will be undertaken between September and December 2018;</li> <li>Keep a register of all participants to facilitate the validation of CSO and NAP Participants; and</li> <li>The Joint CSO/NAP activities should focus on the gaps in the continuum of care for key populations</li> </ul>	
<p>1 faith leaders' network and 6 key population networks engaged in regional dialogues to address AIDS, HIV stigma and discrimination and structural barriers to the epidemic</p>	<p><b>Not started:</b> No progress is shown against planned milestone.  <b>Started:</b> Two-day faith leaders and key population networks face-to-face meeting organized  <b>Advanced:</b> Two-day faith leaders and key population networks face-to-face meeting taking place with 60% of aimed participants attending  <b>Completed:</b> Two-day faith leaders and key population networks face-to-face meeting taking place with 100% of aimed participants attending</p>
<p><b>Actual Achievement:</b></p>	



Milestones	Methodology for rating completion of milestones
<p>1. Three-day dialogue was convened with faith leaders and other leaders (from the Caribbean Conference of Churches) and six (6) key population networks including Caribbean Vulnerable Coalition; Caribbean Sex Workers Coalition; Caribbean Regional Network of Persons living with HIV; the Caribbean Forum for the Liberation and Acceptance of Gender and Sexualities, Aspire Youth Network Guyana and the PANCAP Youth Advocacy Network).</p>	
<p><b>Rating: 100% Completion rate</b></p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ PCU and the PR should track the outcomes of the three-day dialogue</li> </ul>	
<p>Thirty-two (32) senior government officials and policy makers sensitized on policy approaches that are required to reduce health inequalities</p>	<p><b>Not started:</b> No progress is shown against planned milestone  <b>Started:</b> Meeting organized  <b>Advanced:</b> Sensitization meeting taking place with 60% of aimed participants attending  <b>Completed:</b> Sensitization meeting taking place with 100% of aimed participants attending Thirty-two (32) persons will be trained and sensitized from sixteen (16) countries.</p>
<p><b>Actual Achievement:</b>  This activity is planned for November 2018</p>	
<p><b>Rating: 33% completion rate</b></p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ Invite more participants from host country to ensure that the target of thirty-two is achieved.</li> </ul>	
<p>Framework for migrants rights to be integrated in national responses developed</p>	<p><b>Not started:</b> No progress is shown against planned milestone.  <b>Started:</b> Compilation of legal barriers for migrant's rights undertaken  <b>Advanced:</b> Compilation of legal barriers for migrant's rights undertaken and regional forum taken place  <b>Completed:</b> Compilation of legal barriers for migrants' rights undertaken, regional forum taken place and framework of migrants agreed upon by authorities This will be verified using the actual framework developed in collaboration with countries</p>
<p><b>Actual Achievement:</b></p> <ol style="list-style-type: none"> <li>1. Desk Review for the development of the Regional Rights-based Framework to increase the access of migrants to health care services was submitted in June 2018.</li> <li>2. The Draft Regional Framework for Migrants Health and Rights was submitted to PCU in July 2018.</li> <li>3. Two-day Regional Forum on migrants and mobile health was convened in June 2018.</li> </ol>	
<p><b>Rating: 67% Completion rate</b></p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ Provide supporting documents to demonstrate the agreement by the relevant authorities (supporting documents submitted – Agenda, and Desk Review Report and Draft Regional Framework)</li> </ul>	
<p>3 high level fora utilized by trained regional youth leaders for advocacy</p>	<p><b>Not Started:</b> No progress is shown against planned milestone.  <b>Started:</b> At least 1 high level fora utilized by trained regional youth leaders for advocacy  <b>Advanced:</b> At least 2 high level fora utilized by trained regional youth leaders for advocacy  <b>Completed:</b> three (3) high-level fora utilized by trained regional youth leaders for advocacy The means of verification will be the</p>

Milestones	Methodology for rating completion of milestones
	Meeting report-documenting summary of conclusions and recommendations produced by the Caribbean Community Secretariat (Conference Services) following each meeting.
<p><b>Actual Achievement:</b>  The trained youth leaders undertook three (2) of the three (3) engagements.</p> <ol style="list-style-type: none"> <li>1. The 3-day dialogue between Regional faith leaders and regional KP leaders provided an opportunity for youth to advocate for improved services for sexual and reproductive health</li> <li>2. UNFPA High level Dialogue on integration of Comprehensive Sexuality Education into HFLE</li> </ol>	
<p><b>Rating: 67% Completion rate</b></p>	
<p><b>Recommendations:</b></p> <ul style="list-style-type: none"> <li>▪ PANCAP should collaborate with the HSD to prepare youth leaders to participate at the COHSOD Meeting</li> <li>▪ Submit request for Youth participation at the COHSOD Meeting in advance.</li> <li>▪ The supporting documents for this milestone should include Meeting Agendas, Meeting Reports and participants' lists</li> <li>▪ PANCAP and the PR should monitor the outcomes of the high level engagement between youth and other leaders</li> </ul>	

## **Summary of Milestones**

The Principal Recipient projects to meet eleven (11) of the thirteen (13) milestones which are due to be reported at the end of December 2018. The projected completion rate of 92.3% is contingent on the implementation of all recommendations to ensure that the milestones are completed according to the criterion in the approved performance framework.

There are two milestones at risk of not achieving 100% completion rate. The milestones are as follows:

- I. Milestone: Two (2) Strategies and approaches promoting the effective and sustainable response to HIV adopted by the Conference of Heads, Community Council, COHSOD, Ministers of Health, Caucus of CMOs** - This milestone may only achieve a 33% achievement rate since the strategies and approaches needed to be tabled and discussed at all the meetings for commitment to be taken.
- II. Milestone: 75% of PANCAP countries reporting accurately on CRSF Indicators on Stigma and Discrimination and Key Population Indicators** – To date, there is limited commitment from countries to suggest that thirteen (13) of the sixteen (16) project countries will be able to report on the CRSF Indicators by the end of December 2018.

**Table 4: Summary of Actual and Projected results**

No	Milestones	Completion rate as at June 2018
1	75% of PANCAP countries reporting accurately on CRSF Indicators on Stigma and Discrimination and Key Population Indicators	33%
2	Comprehensive data repository housed by CARPHA available to all stakeholders via web access	67%
3	7 annual face to face meetings held between faith leaders and UNSGSE	100%
4	2 sensitization sessions undertaken every year with departments of CCS on the linkages between HIV and human rights and social development programs and identify opportunities for collaboration	33%
5	2 Strategies and approaches promoting the effective and sustainable response to HIV adopted by the Conference of Heads, Community Council, COHSOD, Ministers of Health, Caucus of CMOs.	33%
6	JFA implementation integrated into national responses in 3 countries	67%
7	32 participants that receive capacity-building (data analysis dissemination and use) to support regional evidence-based policies	0%
8	7 face-to-face meetings 1 each with the Minister of Finance in each of 10 countries, where best practice geared toward sustainability and economic evaluations will be discussed	67%
9	1 faith leaders' network and 6 key population networks engaged in regional dialogues to address AIDS, HIV stigma and discrimination and structural barriers to the epidemic	100%
10	Thirty-two (32) senior government officials and policy makers sensitized on policy approaches that are required to reduce health inequalities	33%
11	Framework for migrants rights to be integrated in national responses developed	67%
12	3 high level fora utilized by trained regional youth leaders for advocacy	67%
13	Regional workshop on comprehensive care and treatment for key populations based on the new 2015 WHO guidelines for the provision of services for key populations to improve access to essential services for key populations in an environment of stigma and discrimination. Workshop to discuss and agree on new service delivery models for HIV, with the active participation of civil society organizations, people living with HIV and the wider community	100%
<b>Achievement rate to date</b>		<b>59%</b>
<b>Estimated Achievement rate</b>		<b>92.3%</b>
<b>Key</b>		
<b>Projected to achieve 33%</b>		
<b>Projected to achieve 67% completion rate</b>		
<b>Projected to achieve 100% completion rate</b>		

### 3. FINANCE

The overall budget for the grant was **US\$ 5,223,227**. For the period October 1, 2016 - June 30, 2018 the original budget was **USD\$3,239,080**. The disbursement received was **USD\$2,670,480** and total expenditure was **USD\$2,342,904**.

The resultant burn rate for the period was **72%**.

Details of the budget, expenditure and variances for the period are presented in the tables below:

#### Summary Financial Update

For the period Oct 01, 2016 to June 30, 2018

Expressed in United States

Dollars

Table 5

Recipient	Total Project Budget	Budget for the period Oct 2016 – Jun 2018	Funds received to June 2018	Actual expenditure to June 2018	Variance	Exp. as a % of Budget (Burn Rate)
CARPHA	717,050	433,595	391,215	284,610	148,985	66%
PAHO	321,156	254,262	126,364	149,584	104,678	59%
CRN+	190,740	128,510	115,050	92,267	36,243	72%
PCU	2,581,841	1,862,139	1,525,727	1,306,711	555,428	70%
<b>Subtotal</b>	<b>3,810,787</b>	<b>2,678,506</b>	<b>2,158,356</b>	<b>1,833,173</b>	<b>845,333</b>	<b>68%</b>
PR	1,264,447	560,574	512,124	509,731	50,843	91%
<b>Total</b>	<b>5,075,234</b>	<b>3,239,080</b>	<b>2,670,480</b>	<b>2,342,904</b>	<b>896,176</b>	<b>72%</b>

#### Note(s):

The variances are a result of some activities being completed **below** budget and **some activities that have not yet been undertaken** or for which **payments have not yet being fully processed**.

These activities are listed below as per implementing agency:

**PCU:**

- 1121:** Strategic engagement of regional PLHIV and KPs with highest-level political leadership
- 1144:** Participation of youth leaders in high-level fora
- 1162:** Engage with parliamentarians and Select National Parliamentary Committees in six (6) countries

**CARPHA:**

- 2212:** Provide technical assistance to capacitate countries to report on KP data and CRSF S&D indicators

**PAHO:**

- 2123:** Mission travel by PAHO staff to support implementation of activities and
- 2112:** Implement a cost analysis (including cost benefit analysis) of the provision of expanding programs to provide treatment at CD4 of 500 or to implement a test and treat approach, in order to support countries to make informed decisions regarding care and treatment programs.

For the period April - June 30, 2018 the original budget was **USD\$568,458** and the total expenditure was **USD\$495,783.31**. The resultant burn rate for this period was **87%**.

## **4. GRANT MANAGEMENT**

### **Implementation Rate**

The budget for the period 1<sup>st</sup> April to 30<sup>th</sup> June 2018 was **USD\$568,458**. The expenditure for that period was **USD\$495,783.31**. The burn-rate for the period as an expression of the budget against the actual expenditure is eighty-seven percent (87%). This rate reflects a steady rate of implementation for the period under review.

### **Achievement of Planned Milestones**

During the period under review, there was a fifty-nine percent (59%) achievement rate of the key activities that are aligned to the performance framework. This signifies that we must begin to focus on the recommendations and actions necessary to accomplish completion of planned milestones for the final two quarters of 2018.

### **Coverage of Beneficiary Countries in Project Interventions**

Thirteen (13) of the Nineteen (19) interventions undertaken to date under the project targeted all sixteen (16) Beneficiary Countries; ten (10) of the (19) of 53% of the interventions completed to date were undertaken in year 2 of the Project (January 1 to December 31 2018); seven (7) of the nineteen (19) or 37% of the interventions were undertaken between April 1st and June 30th 2018 (period under review).

Five (5) of the (7) Interventions undertaken between April 1st to June 30th 2018 targeted all beneficiary countries. The participation rate of countries at these regional meetings ranged between 69% to 94%.

Guyana and Trinidad and Tobago were the only two countries that were represented in all nineteen interventions which were undertaken under the project to date; the Participation rate of the meetings (13 meetings) which targeted the sixteen beneficiary countries range from 69% to 94%.

Special emphasis should be placed on targeting representatives from Dominica, Montserrat and Haiti at the upcoming regional meetings. As a best practice, the PCU and other implementing partners should also share resources, reports and presentations with countries that were not represented at these regional meetings. See Appendix 1, which depicts the level of participation of the PANCAP Beneficiary countries in the regional meetings.

## Grant Management Activities

The Principal Recipient completed all the grant management activities for the period under review.

- a) **Mid Term Assessment:** The Mid Term Assessment to assess the two (2) Regional Projects is currently underway. An Evaluation Team led by Dr. Ansari Ameen was retained by the Caribbean Vulnerable Coalition (CVC) and the Centro de Orientacion e Investigacion Nacional (COIN) to conduct the assessment between July to September 2018. To date, the Evaluation Team has developed an Evaluation Protocol which was approved by the M&E Technical Working Group for the joint evaluation. The Team has also initiated face to face interviews with stakeholders in Guyana, Suriname, Barbados and Jamaica. The PR has supported the Evaluation Team in scheduling their engagements with Regional Stakeholders. Bi-weekly updates are provided by the M&E Technical Working Group for the joint evaluation. The mid-term Evaluation Report is due to Global Fund by September 30<sup>th</sup>, 2018.
  
- b) **Concept Note Development:** Development of the Detailed Budget, Logic Model and the Performance Framework for the New Concept Note was developed and submitted to the Global Fund Access to Funding as part of the Concept in August 2018. The concept note will be reviewed to be submitted to the Technical Review Panel for approval.
  
- c) **Monitoring Visits:** Financial and Programmatic monitoring visits were conducted to validate the data submitted by the Caribbean Public Health Agency (CARPHA) and the PANCAP Coordinating Unit (PCU) at the end of June 2018. In response to the challenges in achieving the milestones and completing activities on schedule, an action plan was developed in collaboration with the staff of the CARPHA. Once implemented, the M&E Team will be able to advance the activities and milestones required for completion at the end of December 2018.
  
- d) **Reprogramming:** Approval was received from Global Fund for the reprogramming of funds for the new Programme Manager - Resource Mobilization for the PCU.  
  
US\$72,000 was reprogrammed from activities completed by partners (E.g.: Abt Associates, USAID completed evaluation reports for the countries. As a result, the



PCU were not required to conduct the economic evaluations as planned in the approved budget) The savings were taken from the following lines:

- 1) 2.3.2.1. Develop evaluation protocols and undertake data collection and reviews. (Consultant fees) - \$60,000
- 2) 2.3.2.2. Develop and disseminate evaluation reports, and recommendations for addressing gaps and challenges, to strengthen programming for KPs. (Consultant fees) - \$12,000

## 5. PLANNED ACTIVITIES FOR THE PERIOD – AUGUST TO DECEMBER, 2018

**Table 6:** The planned Project activities for the period August - December, 2018 are presented below:

<b>PLANNED ACTIVITIES</b>	<b>2018 DATES</b>
PCU: Submission of the New PANCAP-CVC-COIN Concept Note to the Global Fund	<b>5<sup>th</sup> August</b>
GF requested clarification and additional information approximately 10 days following submission	<b>17<sup>th</sup> August</b>
2 sensitization sessions with departments of CCS (HSD, Legal and CSME) on the linkages between HIV and human rights and social development programs and identify opportunities for collaboration	<b>12<sup>th</sup> September - Legal</b> <b>14<sup>th</sup> September - HSD</b> <b>October - CSME</b>
CARPHA: Data Analysis, Dissemination and Use Workshop, Trinidad and Tobago	<b>12<sup>th</sup> – 14<sup>th</sup> September</b>
PCU: COHSOD Ministers of Health, WDC	<b>21<sup>st</sup> – 22<sup>nd</sup> September</b>
PCU: Haiti - National Level Consultation with Faith Leaders	<b>27<sup>th</sup> – 28<sup>th</sup> September</b>
PCU: Haiti -Face-to-Face Meeting with the Minister of Finance	<b>1<sup>st</sup> – 2<sup>nd</sup> October</b>
PAHO: Access to Health and Social Services to Reduce Inequalities, Jamaica	<b>1<sup>st</sup> – 2<sup>nd</sup> November</b>
PCU: Belize – Face-to-Face Meeting with Minister of Finance	<b>20<sup>th</sup> – 21<sup>st</sup> November</b>
PCU: Special Conference of Heads of Government – focus on CSME (exploring opportunities to have a Brief prepared on the Migrants Framework)	<b>November</b>

## APPENDIX 1: BENEFICIARY MATRIX

**Beneficiary Database for the PANCAP-PCU-Global Fund Grant - QRA-H-CARICOM 1122: Removing Barriers to Accessing HIV and Sexual Reproductive Health Services for Key Populations in the Caribbean  
For the period of January 2017 to March 2018**

Work Plan Tracking Measure	Module	Responsible Agency	Collaborative Partners	Target Countries	Antigua & Barbuda	Barbados	Bahamas	Belize	Dominica	Dominican Republic	Grenada	Guyana	Haiti	Jamaica	Montserrat	St. Kitts & Nevis	St. Lucia	St. Vincent & the Grenadines	Suriname	Trinidad & Tobago	Number of targeted countries		
Faith Leader's Consultation held on the 1st to 2nd February, 2017 in Port-of-Spain, Trinidad and Tobago	Removing Legal Barriers	PANCAP-PCU		All sixteen (16) beneficiary countries	X	X	X	X			X	X	X	X		X	X	X	X	X	13		
Fifth Meeting of the National AIDS Programme Managers and Key Partners held on the 6th to 10th March, 2017 in Trinidad and Tobago				All sixteen (16) beneficiary countries	X	X	X	X	X			X	X		X	X	X	X	X	X	X	14	
PANCAP Coordinating Unit (PCU) and UN Secretary-General Special Envoy for HIV in the Caribbean (UNGSE) : Faith Based Consultations Schedule for February to June 2017				Belize, Guyana, Haiti, Jamaica, St. Kitts and Nevis, Saint Lucia and Trinidad and Tobago		X			X			X	X	X			X					X	7
Meeting of the Youth Leaders which was held on the 21st to 22nd April, 2017 in Trinidad and Tobago				All sixteen (16) beneficiary countries	X	X			X	X	X	X	X			X	X	X	X	X	X	X	14
Fourth Meeting of the Policy and Strategy Working Group on Stigma and Discrimination (PSWG) of the PAN Caribbean Partnership Against HIV and AIDS (PANCAP) which was held on 19-20 May, 2017				Members of the Policy and Strategy Working Group on Stigma and Discrimination (PSWG)		X			X			X	X			X			X	X	X	X	9
Meeting of the Regional Parliamentarians Forum which was held on 30th to 31st May, 2017 in Kingston, Jamaica				All sixteen (16) beneficiary countries	X	X			X			X	X	X	X	X	X	X	X	X	X	X	12
PANCAP Champion for Change IV: Relaunch which was held on 12-13 September, 2017 in Georgetown, Guyana				A cross section of partners within the Region health care, youth, parliament, law, human rights, media, faith based organisations, education, sports, and civil society			X		X			X		X		X			X		X	X	8
Consultation to Finalise the Regional Advocacy Strategy and Five Year Plan which was held on 25th to 26th October, 2017 in Port-of-Spain, Trinidad and Tobago.				All sixteen (16) beneficiary countries	X	X	X	X	X		X	X	X	X	X	X			X	X	X	X	13
Training to Strengthen Advocacy Skills of Youth Leaders which was held on 19th to 20th January, 2018 in Port-of-Spain, Trinidad and Tobago				All sixteen (16) beneficiary countries	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	14
Dialogue Between Faith Leaders and Key Population Leaders which was held on 7th to 9th February, 2018 in Paramaribo, Suriname				CVC-COIN			X	X	X	X	X	X	X	X	X	X			X	X	X	X	11
Sixth Meeting of the National AIDS Programme Managers and Key Partners held on the 12th to 14th March, 2018 in Trinidad and Tobago				All sixteen (16) beneficiary countries	X	X	X	X	X	X	X	X	X	X	X	X			X	X	X	X	14
Joint Regional Dialogue with Parliamentarians, Faith Leaders, Civil Society Leaders, National AIDS Programme Managers (NAPs) and Youth Leaders was held on 24th to 25th April, 2018 in Trinidad and Tobago,				All sixteen (16) beneficiary countries			X	X	X	X	X	X	X	X	X	X			X	X	X	X	13
PANCAP Coordinating Unit (PCU) and UN Secretary-General Special Envoy for HIV in the Caribbean (UNGSE) : Faith Based Consultations Schedule for April to June 2018				Barbados, Belize, Guyana, Jamaica, St. Kitts and Nevis, Suriname and Trinidad and Tobago			X		X					X		X		X				X	7
Second Regional Meeting of Youth Leaders: Sexual and Reproductive Health and HIV and AIDS was held on 18th to 19th May, 2018 in Port-Of-Spain, Trinidad and Tobago.				All sixteen (16) beneficiary countries			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	15
Sixth Meeting of the Policy and Strategy Working Group on Stigma and Discrimination (PSWG) of the PAN Caribbean Partnership Against HIV and AIDS (PANCAP) which was held on 28th to 29th June, 2018 in Trinidad and Tobago				Members of the Policy and Strategy Working Group on Stigma and Discrimination (PSWG)	X									X		X				X	X	X	6
Regional Forum on Migrants and Mobile Populations Rights and Health which was held on 26th to 27th June, 2018 in Port of Spain, Trinidad & Tobago		All sixteen (16) beneficiary countries	X	X	X	X	X	X	X	X	X	X	X	X			X	X	X	X	11		
Workshop on Enhancing and Innovating Comprehensive HIV/STI Services for Adult and Adolescents of Key Populations in the Caribbean, Based on HIV Combination Prevention Approach and Integrated Comprehensive Care which was held on 24th to 25th May, 2018		PAHO-WHO	PANCAP-PCU	All sixteen (16) beneficiary countries	X		X	X	X	X	X	X	X	X			X	X	X	X	14		
A sub-regional meeting on National Actions towards the elimination of STIs and Viral Hepatitis in the Caribbean was held on 21st-23rd May, 2018 in Port-of-Spain, Trinidad and Tobago		PAHO-WHO	PANCAP-PCU	All sixteen (16) beneficiary countries	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	15		