

BLR-H-2015 - Concept Note

Integrated View

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A. Program details

Country / Applicant:	Belarus	Principal Recipients	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Total requested amount	
Component:	HIV/AIDS			Allocation	USD 12,572,985
Start Month/Year:	January 2016			Above	USD 191,393

Summary Budget by Module

Module	Allocated/Above	2016	2017	2018	Total
Prevention programs for people who inject drugs (PWID) and their partners	Allocation	1,844,877	1,304,126	1,242,217	4,391,220
	Above	47,156	41,749	24,208	113,113
Prevention programs for MSM and TGs	Allocation	370,612	329,330	273,139	973,081
	Above	8,250	7,120	10,120	25,490
Prevention programs for sex workers and their clients	Allocation	508,924	326,949	170,218	1,006,091
	Above	0	0	0	0
HSS-Procurement supply chain management (PSCM)	Allocation	31,781	2,978	2,978	37,737
	Above	0	0	0	0
Treatment, care and support	Allocation	1,338,091	1,658,846	1,597,858	4,594,795
	Above	0	0	0	0
HSS-Health information systems and M&E	Allocation	130,826	149,602	19,646	300,074
	Above	5,956	5,956	11,912	23,824
TB/HIV	Allocation	6,153	6,152	5,803	18,108
	Above	0	0	0	0
Community systems strengthening	Allocation	189,866	207,322	157,201	554,389
	Above	19,526	9,440	0	28,966
Program management	Allocation	240,000	230,000	227,490	697,490
	Above	0	0	0	0
Total	Allocation	4,661,130	4,215,305	3,696,550	12,572,985
	Above	80,888	64,265	46,240	191,393

Summary Budget by Principal Recipient

Principal Recipient	Allocated/Above	2016	2017	2018	Total
Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	4,661,130	4,215,305	3,696,550	12,572,985
	Above	80,888	64,265	46,240	191,393
Total	Allocation	4,661,130	4,215,305	3,696,550	12,572,985
	Above	80,888	64,265	46,240	191,393

B. Program goals and impact indicators

Goals

1	The containing the HIV epidemics and reduction of HIV-related morbidity and mortality in Belarus
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Linked to goal(s) #	Impact indicator	Country	Baseline			Targets			Comments and Assumptions
			Value	Year	Source	Year 1	Year 2	Year 3	
1	HIV I-11: Percentage of people who inject drugs who are living with HIV		13.8	2013	IBBS (Integrated Bio Behavioural Surveys)		13.8		
1	HIV I-10: Percentage of sex workers who are living with HIV		5.8	2013	IBBS (Integrated Bio Behavioural Surveys)		5.8		
1	HIV I-4: AIDS related mortality per 100,000 population		2.9	2014	National Health Account	2.0	2.0	2.0	
1	HIV I-9a: Percentage of men who have sex with men who are living with HIV		4.5	2013	IBBS (Integrated Bio Behavioural Surveys)		4.5		

C. Program objectives and outcome indicators

Objectives:	
1	To scale up the delivery of evidence-based, integrated and regionally prioritised package of HIV prevention and treatment services to key populations groups at risk of or affected by HIV
2	To build national capacities to fully uptake the programmatic and financial responsibility of HIV response in Belarus
3	To strengthen community systems to ensure relevant, human rights and public health based, sustainable and integrated HIV response measures for key affected populations

Linked to objective(s) #	Outcome Indicator	Country	Baseline			Targets			Comments and Assumptions
			Value	Year	Source	Year 1	Year 2	Year 3	
1	HIV O-6: Percentage of people who inject drugs reporting the use of sterile injecting equipment the last time they injected		90.90	2013	IBBS (Integrated Bio Behavioural Surveys)		92.40		
1	HIV O-4a: Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		62.80	2013	IBBS (Integrated Bio Behavioural Surveys)		67.00		
1	HIV O-5: Percentage of sex workers reporting the use of a condom with their most recent client		81.80	2013	IBBS (Integrated Bio Behavioural Surveys)		85.00		
2	HIV O-1: Percentage of adults and children with HIV known to be on treatment 12 months after initiation of antiretroviral therapy		79.80	2014	Patient records	79.90	80.00	80.10	A moderate increase in target level is planned, since an increasing number of KAP will be enrolled in treatment annually (anticipated 65% of new ART patients from KAP) and adherence rates may be moderate.

D. Modules

Module: Prevention programs for people who inject drugs (PWID) and their partners

Measurement framework for module

Coverage/Output indicator	Responsible PR(s)	Tied to	Baseline				Targets												
			N #	%	Year	Source	Total Targets	Year 1		Year 2		Year 3							
								N #	%	N #	%	N #	%	N #	%				
								D #		D #		D #		D #					

KP-1d: Percentage of PWID reached with HIV prevention programs - defined package of services	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health			29,783.00 75,000.00	39.71 	2014 	Reports (specify)	Allocation + Other Sources Above+Allocation+Other sources	30,000.00 75,000.00	40.00	37,000.00 75,000.00	49.33	45,000.00 75,000.00	60.00			
Comments ¹	"Indicator shows National targets established in NAP. Starting from 2017 gradual transfer of program for PWID reached with HIV prevention program to Government is planned. Targets to be supported by GF are: 40% (30000 persons) in 2016, 24,7% (18500 persons) in 2017 and 15% (11250 persons) in 2018. GF allocation will support services and commodities procurement. However, commodities will be partially procured by the government starting from 2016. The population size estimate (denominator) from last consensus report of 2012 and will be confirmed after receiving the IBBS results at the end of 2015. Package of services: provision of injecting equipment (syringes and/or needles), HIV risk reduction communication (verbal or printed), condoms. Data source: Routine monitoring data (programme reports). "																
KP-3d: Percentage of PWID that have received an HIV test during the reporting period and know their results	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health			7,862.00 75,000.00	10.48 	2014 	Reports (specify)	Allocation + Other Sources Above+Allocation+Other sources	15,000.00 75,000.00	20.00	20,000.00 75,000.00	26.67	33,000.00 75,000.00	44.00			
Comments ¹	"Indicator shows National targets established in NAP. This target will be reached by testing in NGOs bases as well as by testing in health facilities. Targets to be supported by GF allocation amount are: 16% (12000 persons) in 2016, 10% (7400 persons) in 2017 and 6% (4500 persons) in 2018. GF allocation will support HIV testing services and commodities procurement. Average 40% of PWID reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. Procurement of oral HIV rapid tests will be sourced by GF funds and national budget. Denominator: PWID population size estimates. Data source: Routine monitoring data (programme reports). "																
KP-4: Number of needles and syringes distributed per person who injects drugs per year by needle and syringe programs	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health			3,496,472	2014	Reports (specify)	Allocation + Other Sources Above+Allocation+Other sources	4,653,400		5,745,000		6,984,000					
Comments ¹	"The indicator represents the number of needles and syringes (national targets) distributed per PWID by organizations implementing outreach and basic prevention interventions among PWID during the reporting period. Numerator: Number of needles and syringes distributed by NGOs implementing prevention projects among PWID during the reporting year. Includes syringes distributed to FSW who injects drugs. Denominator: PWID population size estimate. Data source: Routine monitoring data (programme reports). "																
Number of individuals receiving Opioid Substitution Therapy	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health			1,083	2014	Reports (specify)	Allocation + Other Sources Above+Allocation+Other sources	2,800		3,850		4,900					
Comments ¹	Indicator represents number of patients on OST who will benefit from drugs procurement financed from GF allocation. Service delivery (staff costs, premises etc.) is co-financed by the government from the national budget.																
Module budget - Prevention programs for people who inject drugs (PWID) and their partners																	

Allocated request for entire module		USD 4,391,220			Above allocated request for entire module			USD 113,113	
Intervention	Responsible Principal Recipient(s)		Intervention budget (request to the Global Fund only)				Cost Assumptions ³		Other funding ⁴
	Total Targets	Year 1	Year 2	Year 3					
Behavioural change as part of programs for PWID and their partners	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	990,305	586,337	519,200	Budget ('allocation') include salary of staff (social and outreach workers) who provide direct services (counseling and health product distribution, facilitated progression to care and treatment through case management for HIV positive clients, questionnaire-based screening for tuberculosis) to PWID; - salary of administrative staff; - sites overhead costs, - support and maintenance of 8 mobile ambulances in 2017 and 6 in 2017-2018 (4 of them new one), necessary for HIV prevention and harm reduction activities implementation. Procurement and equipment of four mobile clinics in order to reach to distant areas are included into the budget. Intervention was budgeted based on the current cost of GF HIV program implementation. GF share of unit cost per one client per year is \$29,73 in 2016, \$15,85 in 2017 and \$11,54 in 2018.		GF sharer of unit cost decrease is due to government co-finance of HIV prevention services starting from 2017. Two mobile clinics will be supported from national budget starting from 2017.	
		Above	0	0	0				
Description of Intervention ²									
Target population: PWID and their partners Models of delivery: community centers (5 most affected cities Minsk, Svetlogorsk, Pinsk, Gomel, Orsha), outreach, and mobile clinics (23 towns). Service delivery based in healthcare facilities – Centers of Hygiene and Epidemiology – will be piloted in 2016 and increased if efficient. Minimal package of services: syringe distribution and exchange (150 syringes per PWID per year); condom distribution (43 per PWID per year); consultation; testing with oral rapid HIV tests provided by social and outreach workers, covering about 40% of PWID reached; case management for HIV-positive PWID will be provided by outreach worker involved in NAP and rapid testing for HIV; questionnaire screening for TB and referral to x-ray using a motivation kit. Motivational packages for new PWID will be provided to encourage client enrolment. Regional strategy: to increase proportion of outreach and mobile clinics including screening for HIV during outreach in regions of high and medium priority to maximize case finding and also program sensitivity in terms of locating new outbreaks in the most affected cities. Use of mobile clinics in lower priority regions will be focused on reaching to distant areas with high HIV prevalence and high concentration of risk groups within the region.									
Condoms as part of programs for PWID and their partners	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	41,558	12,814	0	Budget for this intervention contains only funds required for condoms procurement ('allocation'). It is planned to distribute in average 43 condoms per PWID per year (43 condoms per reached client calculated as 86% multiplied by 50). Based on IBBS data 86% of reached PWIDs reported having sexual intercourse in the past month. Procurement prices are based on the latest tender results.		It is assumed that from national budgets will be supported procurement of 75 % of condoms in 2017 and 100% .	
		Above	0	0	0				
Description of Intervention ²									
Funding requested for the procurement of condoms									

Needle and Syringe programs as part of programs for PWID and their partners	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	293,442	104,316	4,179	As part of Needle and Syringe programs it is planned to distribute: - syringes and needles (in average 150 syringes per one PWID-client per year and 150 needles for 10% of reached clients), - Alcohol pads (300 per one PWID-client per year), It is assumed that Global Fund will support procurement of 90% of syringes and needles for PWIDs and 100% of alcohol pads in 2016; 25% of all commodities in 2017. Procurement of syringes and needles as well as alcohol pads will be fully financed by Government in 2018. Procurement of disinfecting tablets is 100% supported by GF during all three years. Procurement prices are based on the latest tender results.	It is assumed that Government will support procurement of 10% of syringes and needles for PWIDs in 2016; 75% of syringes, needles and alcohol pads in 2017. Procurement of all commodities will be fully financed by Government in 2018.
Description of Intervention ²							
OST and other drug dependence treatment (PWIDs and their partners)	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	466,183	582,138	715,860	Budget in "main allocation" include funds for pharmaceuticals purchase, handling fee, insurance, transportation (2016-2018), UNDP GMS (2016-2017), three new OST sites opening. Budget in "above allocation" include funds for procurement of express-test for detection of narcotic substances in urine. Intervention was budgeted based on the current cost of GF HIV program implementation adjusted to the estimated number of patients in 2016-2018. Service delivery (staff costs, premises etc.) co-financed by the government from the national budget. Drugs procurement financed from TGF allocation	Service delivery (staff costs, premises etc.) is fully supported by the government from the national budget. OST drugs procurement is financed from GF allocation.
Description of Intervention ²							
Currently 20 sited dispense OST% drugs in Belarus serving 1,083 patients as of January 2015. OST will be funded for drug liquid methadone procurement only. It is planned that the coverage will increase to 2,800 in 2016 and up to 4,900 in 2018. Opening of 3 new OST sites is planned to make this growth possible.							
Peer-driven intervention using a chain-referral mechanism is suggested as a strategy to increase coverage. Due to lack of funds it has been suggested in the above allocation.	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	2,978	2,978	2,978	One training per year for social workers is budgeted in 'main allocation' in order to improve the quality of provided services. Additional two trainings per year are budgeted in "above allocation". PDI activities are included in "above" allocation.	Additional two trainings per year are budgeted in "above allocation". PDI activities are included in "above" allocation.
Description of Intervention ²							
Peer-driven intervention using a chain-referral mechanism is suggested as a strategy to increase coverage. Due to lack of funds it has been suggested in the above allocation.							

HIV testing and counseling as part of programs for PWID and their partners	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	50,411	15,543	0	<p>"Delivery of HIV testing and counseling at community centers, outreach, and mobile clinics is a key activity under this intervention. Intervention budget ('main allocation') includes costs for oral HIV express-test procurement. It is assumed that 40% of all reached PWIDs and all partners of HIV positive PWIDs (number of partners is based on IBBS 2013 HIV prevalence among PWIDs (13.8%)) will be tested at list once per year. It is assumed that Global Fund will support procurement of HIV tests for 30% of PWIDs and their partners in 2016 and 15% in 2017. Procurement prices are based on the latest tender results. "</p>	<p>It is assumed that Government will support procurement of HIV tests for 10% of PWIDs and their partners in 2016 and 85% in 2017 for NGO based testing (additionaly to HIV testing in health facilities) . Procurement in 2018 will be fully supported by Government.</p>
		Above	0	0	0		

Description of Intervention ²

Average 40% of PWID reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. The remaining target will be covered by ordinary testing in health facilities, using rapid blood tests and ELISA+WB The VCT training will be provided to all outreach/social workers as they will be conducting testing.

Programmatic Gap

Coverage Indicator : KP-1d: Percentage of PWID reached with HIV prevention programs - defined package of services

Current National Coverage 29783/75000		Year	Source	Latest Results	
		2014	Reports (specify) Progress report to GF	39.7	
		01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	CCM Comments
Current Estimated Country Need					
A. Total estimated population in need/at risk (from National Strategic Plan)	75,000	75,000	75,000	75,000	Based on the desk review and consensus conducted in 2012. Finalised size estimates will be available upon completion of IBBS at the end of 2015
B. Country targets (from National Strategic Plan)	30,000 40.00 %	37,000 49.33 %	45,000 60.00 %		
Country Need Already Covered					
C. Country need planned to be covered by domestic & other sources	0 0.00 %	18,500 24.67 %	33,750 45.00 %		To be covered from the national and local budgets
Programmatic Gap					
D. Expected annual gap in meeting the need A-C	75,000 100.00 %	56,500 75.33 %	41,250 55.00 %		
Country need planned to be covered by domestic & other sources					
E. Targets to be financed by allocation amount	30,000 40.00 %	18,500 24.67 %	11,250 15.00 %		Commodities will be partially procured by the government from the national budget
F. Coverage from Allocation amount and other resources C+E	30,000 40.00 %	37,000 49.34 %	45,000 60.00 %		
G. Targets to be potentially financed by above allocation amount	0 0.00 %	0 0.00 %	0 0.00 %		
H. Total coverage (allocation amount, above allocation amount and other resources) F+G	30,000 40.00 %	37,000 49.34 %	45,000 60.00 %		

Coverage Indicator : KP-3d: Percentage of PWID that have received an HIV test during the reporting period and know their results

Current National Coverage 7862/75000		Year	Source	Latest Results	
		2014	Reports (specify) Progress report to GF	10.5	
		01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	CCM Comments
Current Estimated Country Need					

A. Total estimated population in need/at risk (from National Strategic Plan)				
A. Total estimated population in need/at risk (from National Strategic Plan)	75,000	75,000	75,000	Based on the desk review and consensus conducted in 2012. Finalised size estimates will be available upon completion of IBBS at the end of 2015
Country Need Already Covered				
B. Country targets (from National Strategic Plan)	15,000 20.00 %	20,000 26.67 %	33,000 44.00 %	Average 40% of PWID reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. The remaining target will be covered by ordinary testing in health facilities, using rapid blood tests and ELISA+WB
Programmatic Gap				
B. Country targets (from National Strategic Plan)	%	%	%	
Country need planned to be covered by domestic & other sources				
C. Country need planned to be covered by domestic & other sources	%	%	%	
C. Country need planned to be covered by domestic & other sources	3,000 4.00 %	12,600 16.80 %	28,500 38.00 %	
D. Expected annual gap in meeting the need A-C	72,000 96.00 %	62,400 83.20 %	46,500 62.00 %	
D. Expected annual gap in meeting the need A-C	72,000 96.00 %	62,400 83.20 %	46,500 62.00 %	
E. Targets to be financed by allocation amount	%	%	%	
E. Targets to be financed by allocation amount	12,000 16.00 %	7,400 9.87 %	4,500 6.00 %	Procurement of oral HIV rapid tests will be sourced by TGF funds and national budget
F. Coverage from Allocation amount and other resources C+E	15,000 20.00 %	20,000 26.67 %	33,000 44.00 %	
F. Coverage from Allocation amount and other resources C+E	15,000 20.00 %	20,000 26.67 %	33,000 44.00 %	
G. Targets to be potentially financed by above allocation amount	%	%	%	
G. Targets to be potentially financed by above allocation amount	0 0.00 %	0 0.00 %	0 0.00 %	
H. Total coverage (allocation amount, above allocation amount and other resources) F+G	15,000 20.00 %	20,000 26.67 %	33,000 44.00 %	
H. Total coverage (allocation amount, above allocation amount and other resources) F+G	15,000 20.00 %	20,000 26.67 %	33,000 44.00 %	

Module: Prevention programs for MSM and TGs

Measurement framework for module

Coverage/Output indicator	Responsible PR(s)	Tied to	Baseline				Targets									
			N #	%	Year	Source	Total Targets	Year 1		Year 2		Year 3		N #	%	
								D #	N #	%	N #	%	N #			%
KP-1a: Percentage of MSM reached with HIV prevention programs - defined package of services	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health															
			4,795.00		7.99	2014	Reports (specify)	Allocation + Other Sources	6,600.00	11.00	8,700.00	14.50	12,500.00	20.83		
			60,000.00					Above+Allocation+Other sources								
Comments ¹	Indicator shows National targets established in NAP. Starting from 2017 gradual transfer of program for MSM reached with HIV prevention program to Government is planned. Targets to be supported by GF amount are: 11% (6600 persons) in 2016, 10,9% (6525 persons) in 2017 and 10% (6250 persons) in 2018. GF allocation will support services and commodities procurement. However, commodities will be partially procured by the government starting from 2016. The population size estimate (denominator) from last study report from 2014 and will be confirmed after the receiving of the IBBS results at the end of 2015. Package of services: HIV risk reduction communication (verbal or printed) and condoms. Data source: Routine monitoring data (programme reports).															
KP-3a: Percentage of MSM that have received an HIV test during the reporting period and know their results	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health															
			1,830.00		3.05	2014	Reports (specify)	Allocation + Other Sources	8,100.00	13.50	8,400.00	14.00	9,375.00	15.62		
			60,000.00					Above+Allocation+Other sources								
Comments ¹	Indicator shows National targets established in NAP. This target will be reached by testing in NGOs as well as in health facilities. Targets to be supported by GF amount are: 4,4% (2640 persons) in 2016, 4,4% (2610 persons) in 2017 and 4,2% (2500 persons) in 2018. GF allocation will support HIV testing services and commodities procurement. Average 40% of MSM reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. Procurement of oral HIV rapid tests will be sourced by GF funds and national budget. D#: MSM population size estimates. Data source: Routine monitoring data (programme reports).															

Module budget - Prevention programs for MSM and TGs

Allocated request for entire module	USD 973,081				Above allocated request for entire module				USD 25,490			
Intervention	Intervention budget (request to the Global Fund only)					Cost Assumptions ³				Other funding ⁴		
	Responsible Principal Recipient(s)		Total Targets	Year 1	Year 2	Year 3						

Behavioral change as part of programs for MSM and TGs	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	248,454	249,564	216,514	Budget ('allocation') include salary of staff (social and outreach workers) who provide direct services (counseling and health product distribution, facilitated progression to care and treatment through case management for HIV positive clients, questionnaire-based screening for tuberculosis) to MSMs as well as salary of administrative staff and overhead costs, mobile ambulance support and maintenance, necessary for HIV prevention activities implementation. Additional communication materials for MSMs are budgeted in "above" allocation. Intervention are budgeted based on the current cost of GF HIV program implementation adjusted to the proposed decrease in coverage reached by using GF funds in Y2-Y3. GF share of unit cost per one client per year is \$38,89 in 2016, \$29,50 in 2017 and \$18,13 in 2018.	GF sharer of unit cost decrease is due to government co-finance of HIV prevention services starting from 2017.
Description of Intervention ²							
Target population: MSM and TG's. Geographic scope: all oblasts of Belarus, with focus on high burden towns and towns with high numbers of MSM (Brest, Minsk, Mogilev, Vitebsk, Gomel, Grodno). Models of reaching to the MSM: 1) outreach, 2) stationary points in 6 cities. Direct contracting is envisaged through contracting a coordinator, outreach worker, doctor and psychologist in each site. Minimal package of services: condoms and lubricants distribution (52 condoms and 26 lubricants per MSM per year); questionnaire-based screening for TB; STI testing and treatment (10% of MSM reached); rapid testing for HIV (40% of MSM reached); case management for HIV-positive MSM; psychological counseling.							
Condoms as part of programs for MSM and TGs	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	46,070	15,182	0	Budget for this intervention contains only funds required for condoms procurement. It is planned to distribute on average 52 condoms per client and 26 lubricants (4ml sachet) and 100ml lubricants for 30% of clients. Procurement prices are based on the latest tender results.	It is assumed that from national budgets will support procurement of 75 % of condoms and lubricants in 2017 and 100% in 2018.
Description of Intervention ²							
Funding requested for the procurement of condoms							
Diagnosis and treatment of STIs as part of programs for MSM and TGs	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	39,600	39,150	37,500	Budget include costs for STI consultation and testing in health facilities based on current prices per one person	
Description of Intervention ²							
About 10% of reached MSMs will be referred to Health facilities for STI diagnostic and consultation.							
HIV testing and counseling as part of programs for MSM and TGs	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	24,576	19,478	13,169	Delivery of HIV testing and counseling at community centers and outreach is a key activity under this intervention. Intervention budget ('main allocation') includes costs for oral HIV express-test procurement It is assumed that Global Fund will support procurement of HIV tests for 30% of MSMs in 2016 and 15% in 2017. Budget for 2016-2018 includes motivation package for HIV testing, based on the assumptions that 20% of reached clients will receive this package . Procurement prices are based on the latest tender results.	It is assumed that Government will support procurement of HIV tests for 10% of MSM in 2016 and 85% in 2017 for NGO-based testing (additionally to HIV testing in health facilities) . Procurement in 2018 will be fully supported by Government.
Description of Intervention ²							
Average 40% of MSM reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. The remaining target will be covered by ordinary testing in health facilities, using rapid blood tests and ELISA+WB. The VCT training will be provided to all outreach/social workers as they will be conducting testing.							

Trainings for social workers, volunteers to guarantee maintaining quality of the service provision	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	11,912	5,956	5,956	4 trainings/ meetings in 2016 and 2 per year in 2017-2018 were budgeted based on the current costs of such activities and included in the "allocation" budget.
		Above	0	0	0	

Description of Intervention ²

Trainings, working meetings for social workers, volunteers will be conducted in order to guarantee maintaining quality of the service provision, and/or increase qualification of the staff, as well as training of the new staff in case it is hired under the program.

Programmatic Gap

Coverage Indicator : KP-1a: Percentage of MSM reached with HIV prevention programs - defined package of services

Current National Coverage 60000	Year	Source	Latest Results	CCM Comments
	2014	Reports (specify) Progress report to GF	8.0	
01/2016 - 12/2016		01/2017 - 12/2017	01/2018 - 12/2018	
Current Estimated Country Need				
A. Total estimated population in need/at risk (from National Strategic Plan)	60,000	60,000	60,000	
B. Country targets (from National Strategic Plan)	6,600 11.00 %	8,700 14.50 %	12,500 20.83 %	
Country Need Already Covered				
C. Country need planned to be covered by domestic & other sources	0 0.00 %	2,175 3.62 %	6,250 10.42 %	Commodities will be partially procured by the government from the national budget
Programmatic Gap				
D. Expected annual gap in meeting the need A-C	60,000 100.00 %	57,825 96.38 %	53,750 89.58 %	
Country need planned to be covered by domestic & other sources				
E. Targets to be financed by allocation amount	6,600 11.00 %	6,525 10.88 %	6,250 10.42 %	
F. Coverage from Allocation amount and other resources C+E	6,600 11.00 %	8,700 14.50 %	12,500 20.84 %	
G. Targets to be potentially financed by above allocation amount	0 0.00 %	0 0.00 %	0 0.00 %	
H. Total coverage (allocation amount, above allocation amount and other resources) F+G	6,600 11.00 %	8,700 14.50 %	12,500 20.84 %	

Coverage Indicator : KP-3a: Percentage of MSM that have received an HIV test during the reporting period and know their results

Current National Coverage 2820/55000	Year	Source	Latest Results		
	2014	Reports (specify) Progress report to GF	4.7		
		01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	CCM Comments
Current Estimated Country Need					
A. Total estimated population in need/at risk (from National Strategic Plan)	60,000	60,000	60,000		
B. Country targets (from National Strategic Plan)	8,100 13.50 %	8,400 14.00 %	9,375 15.63 %	Average 40% of MSM reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. The remaining target will be covered by ordinary testing in health facilities, using rapid blood tests and ELISA+WB	
Country Need Already Covered					
C. Country need planned to be covered by domestic & other sources	5,460 9.10 %	5,790 9.65 %	6,875 11.46 %		
Programmatic Gap					
D. Expected annual gap in meeting the need A-C	54,540 90.90 %	54,210 90.35 %	53,125 88.54 %		
Country need planned to be covered by domestic & other sources					
E. Targets to be financed by allocation amount	2,640 4.40 %	2,610 4.35 %	2,500 4.17 %	Procurement of oral HIV rapid tests will be sourced by TGF funds and national budget	
F. Coverage from Allocation amount and other resources C+E	8,100 13.50 %	8,400 14.00 %	9,375 15.63 %		
G. Targets to be potentially financed by above allocation amount	0 0.00 %	0 0.00 %	0 0.00 %		
H. Total coverage (allocation amount, above allocation amount and other resources) F+G	8,100 13.50 %	8,400 14.00 %	9,375 15.63 %		

Module: Prevention programs for sex workers and their clients																
Measurement framework for module																
Coverage/Output indicator	Responsible PR(s)	Tied to	Baseline				Targets									
			N #	%	Year	Source	Total Targets	Year 1		Year 2		Year 3		N #	%	
								D #	N #	%	N #	%	N #			%
									D #	D #	%	D #	%			D #

KP-1c: Percentage of sex workers reached with HIV prevention programs - defined package of services	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	26.00	2014	Reports (specify)	Allocation + Other Sources	5,900.00	26.82	7,500.00	34.09	9,000.00	40.91		
						22,000.00		22,000.00		22,000.00			
					Above+Allocation+Other sources								
Comments ¹	"Indicator shows National targets established in NAP. Starting from 2017 gradual transfer of program for FSWs reached with HIV prevention program to Government is planned. Targets to be supported by GF amount are: 26,8% (5900 persons) in 2016, 17% (3750 persons) in 2017 and 10,2% (2250 persons) in 2018. GF allocation will support services and commodities procurement. However, commodities will be partially procured by the government starting from 2016. Population size is based on the 2015 desk review and will be confirmed after receiving the IBBS results at the end of 2015. Package of services: provision of HIV risk reduction communication (verbal or printed) and condoms. Data source: Routine monitoring data (programme reports) "												
KP-3c: Percentage of sex workers that have received an HIV test during the reporting period and know their results	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	7.30	2014	Reports (specify)	Allocation + Other Sources	2,950.00	13.41	4,125.00	18.75	5,400.00	24.55		
						22,000.00		22,000.00		22,000.00			
					Above+Allocation+Other sources								
Comments ¹	Indicator shows National targets established in NAP. This target will be reached by testing in NGOs bases as well as by testing in health facilities. Targets to be financed by GF are: 11% (2360 persons) in 2016, 7% (1500 persons) in 2017 and 4% (900 persons) in 2018. GF allocation will support HIV testing services and commodities procurement. Average 40% of FSWs reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. Procurement of oral HIV rapid tests will be sourced by GF funds and national budget. D#: FSWs population size estimates. Data source: Routine monitoring data (programme reports).												
Module budget - Prevention programs for sex workers and their clients													
Allocated request for entire module	USD 1,006,091				Above allocated request for entire module				USD 0				
Intervention	Intervention budget (request to the Global Fund only)				Cost Assumptions ³				Other funding ⁴				
	Responsible Principal Recipient(s)	Total Targets	Year 1	Year 2	Year 3								

Behavioral change as part of programs for sex workers and their clients	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	364,978	263,027	153,259	<p>"Budget ('allocation') include salary of staff (social and outreach workers) who provide direct services (counseling and health product distribution, facilitated progression to care and treatment through case management for HIV positive clients, questionnaire-based screening for tuberculosis) to FSW as well as salary of administrative staff and overhead costs, two mobile ambulance support and maintenance (one new), necessary for HIV prevention activities implementation. Procurement and equipment of one mobile clinic in order to reach to distant areas are included into the budget. Harm reduction activities (distribution of syringes and alcohol pads) for FWS who inject drugs will be conducted. Budget includes procurement and distribution of 26 syringes (170 syringes per one FSW who inject drugs multiplied by 15% of such FSWs) and 52 alcohol pads per person per year. Intervention was budgeted based on the current cost of GF HIV program implementation adjusted to the proposed decrease in coverage reached by using GF funds in Y2-Y3. GF share of unit cost per one client per year is \$59,51 in 2016, \$34,65 in 2017 and \$16,99 in 2018. GF sharer of unit cost decrease is due to government co-finance of HIV prevention services starting from 2017. "</p>	GF sharer of unit cost decrease is due to government co-finance of HIV prevention services starting from 2017.
Description of Intervention ²							
<p>Target population: FSW and their clients; FSW that inject drugs. Geographic scope: all oblasts of Belarus, with focus on high burden towns (Brest, Vitebsk, Gomel, Grodno, Mogilev, Svetlogorsk, Pinsk, Soligorsk). Progression strategy: to increase proportion of outreach and mobile clinics outreach including screening for HIV during mobile outreach to maximize case finding. There are 3 models of reaching to the CSW clients which are proposed: 1) outreach, 2) 2 mobile clinics (1 used in Minsk and surrounding areas, another – around the country), 3) stationary points in 6 cities. Sub-contracting to NGOs and direct contracting envisaged. Minimal package of services: condom and lubricant distribution; counseling; screening for TB with questionnaire; STI testing; testing for HIV; and case management for HIV-positive CSW. For FSW that inject drugs syringes are provided. New coverage will be assured through 1 new mobile clinic to be procured under allocation.</p>							
Condoms as part of programs for sex workers and their clients	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	107,273	34,091	0	<p>"Budget for this intervention contains only funds required for condoms procurement ('allocation'). It is planned to distribute in average 218 condoms, 22 lubricants (4ml sachet) and 2 lubricants in tubes (100ml) per client per year. Procurement prices are based on the latest tender results. "</p>	It is assumed that Government will support procurement of 75 % of condoms and lubricants in 2017 and 100% of procurement in 2018 .
Description of Intervention ²							
Funding requested for the procurement of condoms							
Diagnosis and treatment of STIs (sex workers and their clients)	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	22,005	18,338	11,003	<p>Budget include costs for STI consultation and testing in health facilities based on current prices per one person.</p>	
Description of Intervention ²							
10% of reached FSWs will be referred to Health facilities for STI diagnostic and consultation.							

HIV testing and counseling as part of programs for sex workers and their clients	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	8,712	5,537	0	"Delivery of HIV testing and counseling at community centers, outreach, and mobile clinics is a key activity under this intervention. Budget contains only funds required for HIV tests procurement. It is assumed that Global Fund will support procurement of HIV tests for 30% of reached FSWs in 2016 and 15% in 2017. Procurement in 2018 will fully supported by Government. Procurement prices are based on the latest tender results. "	It is assumed that Government will support procurement of HIV tests for 10% of FSWs in 2016 and 85% in 2017 for NGO-based testing (additionaly to HIV testing in health facilities) . Procurement in 2018 will be fully supported by Government.
		Above	0	0	0		
Description of Intervention ²							
Average 40% of FSW reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. The remaining target will be covered by ordinary testing in health facilities, using rapid blood tests and ELISA+WB. The VCT training will be provided to all outreach/social workers as they will be conducting testing.							
Trainings, working meetings for social workers, volunteers	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	5,956	5,956	5,956	2 trainings/ meetings per each year in 2016-2018 were budgeted based on the current costs of such activities and included in the "allocation" budget.	
		Above		0	0		
Description of Intervention ²							
Trainings, working meetings for social workers, volunteers will be conducted in order to guarantee maintaining quality of the service provision, and/or increase qualification of the staff, as well as training of the new staff in case it is hired under the program.							

Programmatic Gap

Coverage Indicator : KP-1c: Percentage of sex workers reached with HIV prevention programs - defined package of services

Current National Coverage 5719/50000	Year	Source	Latest Results	CCM Comments
	2014	Reports (specify) Progress report to GF	11.4	
01/2016 - 12/2016		01/2017 - 12/2017	01/2018 - 12/2018	
Current Estimated Country Need				
A. Total estimated population in need/at risk (from National Strategic Plan)	22,000	22,000	22,000	Based on the latest 2015 size estimation
B. Country targets (from National Strategic Plan)	5,900 26.82 %	7,500 34.09 %	9,000 40.91 %	
Country Need Already Covered				
C. Country need planned to be covered by domestic & other sources	0 0.00 %	3,750 17.05 %	6,750 30.68 %	Commodities will be partially procured by the government from the national budget
Programmatic Gap				
D. Expected annual gap in meeting the need A-C	22,000 100.00 %	18,250 82.95 %	15,250 69.32 %	
Country need planned to be covered by domestic & other sources				
E. Targets to be financed by allocation amount	5,900 26.82 %	3,750 17.05 %	2,250 10.23 %	Commodities will be partially procured by the government from the national budget
F. Coverage from Allocation amount and other resources C+E	5,900 26.82 %	7,500 34.10 %	9,000 40.91 %	
G. Targets to be potentially financed by above allocation amount	0 0.00 %	0 0.00 %	0 0.00 %	
H. Total coverage (allocation amount, above allocation amount and other resources) F+G	5,900 26.82 %	7,500 34.10 %	9,000 40.91 %	

Coverage Indicator : KP-3c: Percentage of sex workers that have received an HIV test during the reporting period and know their results

Current National Coverage 1607/50000		Year	Source	Latest Results	
		2014	Reports (specify) Progress report to GF	3.2	
		01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	CCM Comments
Current Estimated Country Need					
A. Total estimated population in need/at risk (from National Strategic Plan)	22,000	22,000	22,000	22,000	Based on the latest 2015 size estimation
B. Country targets (from National Strategic Plan)	2,950 13.41 %	4,125 18.75 %	5,400 24.55 %		Average 40% of FSW reached with prevention services will be tested annually using oral rapid HIV tests by NGOs. The remaining target will be covered by ordinary testing in health facilities, using rapid blood tests and ELISA+WB
Country Need Already Covered					
C. Country need planned to be covered by domestic & other sources	590 2.68 %	2,625 11.93 %	4,500 20.45 %		
Programmatic Gap					
D. Expected annual gap in meeting the need A-C	21,410 97.32 %	19,375 88.07 %	17,500 79.55 %		
Country need planned to be covered by domestic & other sources					
E. Targets to be financed by allocation amount	2,360 10.73 %	1,500 6.82 %	900 4.09 %		
F. Coverage from Allocation amount and other resources C+E	2,950 13.41 %	4,125 18.75 %	5,400 24.54 %		
G. Targets to be potentially financed by above allocation amount	0 0.00 %	0 0.00 %	0 0.00 %		
H. Total coverage (allocation amount, above allocation amount and other resources) F+G	2,950 13.41 %	4,125 18.75 %	5,400 24.54 %		

Module: HSS-Procurement supply chain management (PSCM)									
Module budget - HSS-Procurement supply chain management (PSCM)									
Allocated request for entire module		USD 37,737			Above allocated request for entire module			USD 0	
Intervention	Responsible Principal Recipient(s)	Intervention budget (request to the Global Fund only)				Cost Assumptions ³			Other funding ⁴
		Total Targets	Year 1	Year 2	Year 3				
PSM infrastructure and development of tools	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	31,781	2,978	2,978	Budget includes funds necessary for trainings conduction and technical support provision.			
		Above	0	0	0				
Description of Intervention²									
PSM capacities will be developed with the new Principal Recipient through training, on-site support, procedure development and exchange visits. This will allow creating the necessary procurement capacities with the new Principal Recipient and enabling rapid, quality and well-priced procurement of commodities and drugs for the program, starting from 2016.									

Module: Treatment, care and support

Measurement framework for module

Coverage/Output indicator	Responsible PR(s)	Tied to	Baseline				Total Targets	Targets							
			N #	%	Year	Source		Year 1		Year 2		Year 3		N #	%
								D #	D #	%	D #	%	D #		
TCS-1: Percentage of adults and children currently receiving antiretroviral therapy among all adults and children living with HIV	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health		6,062.00	24.25	2014	Patient records	Allocation + Other Sources	7,500.00	30.00	8,500.00	34.00	10,260.00	41.04		
			25,000.00				Above+Allocation+Other sources	25,000.00		25,000.00		25,000.00			

Comments ¹ "Indicator shows National targets established in NAP. Targets to be supported from GF are: 10,5% (2620 persons) in 2016, 14,8% in (3700 persons) in 2017 and 16,4% (4100 persons) in 2018. Funding requested for new patients enrolled into ART. Gradual transition to below 500 cd4 envisaged. Service delivery (staff costs, premises etc.) co-financed by the government from the national budget. Drugs procurement financed from GF allocation. D#: Number of people living with HIV are based on the UNAIDS data (<http://www.unaids.org/en/regionscountries/countries/belarus/>)

Module budget - Treatment, care and support

Allocated request for entire module	USD 4,594,795	Above allocated request for entire module	USD 0
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Intervention	Responsible Principal Recipient(s)	Intervention budget (request to the Global Fund only)				Cost Assumptions ³	Other funding ⁴
		Total Targets	Year 1	Year 2	Year 3		
Antiretroviral Therapy (ART)	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	1,093,781	1,479,861	1,542,564	"Budget in 'main allocation' includes funds for pharmaceuticals (ART drugs), handling fee, insurance, transportation (2016-2018), UNDP GMS (2016-2017). "	Service delivery (staff costs, premises etc.) is fully financed by the government.
		Above	0	0	0		

 Description of Intervention ²

"Target population: PLWH with special focus on HIV/TB, PWID, MSM and FSW. Expansion of treatment will prioritize access of key populations and at least 65% of the newly enrolled into ART will be from the representatives of the key populations. Geographical scope: all regions of Belarus with focus on the most affected towns of Minsk, Pinsk, Gomel, Zhlobin, Svetlogorsk, Soligorsk. Implementation approach: The procurement of ART under the GF project is planned to cover maximum number of PLWH representing key affected populations. The treatment program will be funded jointly from GF and state budgets. Procurement of ARVs is planned for new patients initiating treatment. Procurement of ARVs with focus on first-line regimens and ARV logistics is envisaged. "

Counseling and psycho-social support	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	124,483	119,071	55,294	"Service delivery (staff costs, premises etc.) costs are budgeted based on the current costs. "	It is assumed that in 2018 intervention will be co-financed by government for 50%.
		Above	0	0	0		

 Description of Intervention ²

"Target population: PLWH who are getting ready for ART initiation, newly diagnosed PLWH, PLWH at risk of ART drop-out, PLWH who dropped out of regular follow-up at health facilities - with special focus at HIV/TB, PWID, MSM and FSW. Adherence support will be provided based in 10 cabinets (8 cities with oblast level) on infectious diseases by outreach workers. "

Out-patient care	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	119,827	59,914	0	"Service delivery (staff costs, premises etc.) costs are budgeted based on the current costs. "	Assume that in 2017 intervention will be co-financed by government for 50% and fully covered from national funds in 2018.
		Above	0	0	0		

 Description of Intervention ²

"Target population: PLWH in severe health condition in need of regular home and hospital based care with focus on HIV/TB, PWID, MSM and FSW. Geographical scope: 7 cities with the highest number of the HIV/AIDS patients who have been infected for over 7-9 years ago (Svetlogorsk, Gomel, Rechitsa, Zhlobin, Minsk, Soligorsk, and Pinsk). Integrated services will include psychological support, medical and social services, as well as training for relatives and volunteers to render basic home-based medical and social assistance and support to people living with HIV (PLHIV). Home-based palliative care to the HIV/AIDS patients in Belarus is currently provided only by NGOs. "

Programmatic Gap

Coverage Indicator : TCS-1: Percentage of adults and children currently receiving antiretroviral therapy among all adults and children living with HIV

Current National Coverage 44.7	Year	Source	Latest Results	CCM Comments
	2013	Reports (specify) GARPR	44.7	
01/2016 - 12/2016		01/2017 - 12/2017	01/2018 - 12/2018	
Current Estimated Country Need				
A. Total estimated population in need/at risk (from National Strategic Plan)	25,000	25,000	25,000	Number of people living with HIV are based on the UNAIDS data http://www.unaids.org/en/regionscountries/countries/belarus/
B. Country targets (from National Strategic Plan)	7,500 30.00 %	8,500 34.00 %	10,260 41.04 %	
Country Need Already Covered				
C. Country need planned to be covered by domestic & other sources	4,880 19.52 %	4,800 19.20 %	6,160 24.64 %	
Programmatic Gap				
D. Expected annual gap in meeting the need A-C	20,120 80.48 %	20,200 80.80 %	18,840 75.36 %	
Country need planned to be covered by domestic & other sources				
E. Targets to be financed by allocation amount	2,620 10.48 %	3,700 14.80 %	4,100 16.40 %	Funding requested for new patients enrolled into ART. Gradual transition to below 500 cd4 envisaged. Service delivery (staff costs, premises etc.) co-financed by the government from the national budget. Drugs procurement financed from TGF allocation
F. Coverage from Allocation amount and other resources C+E	7,500 30.00 %	8,500 34.00 %	10,260 41.04 %	
G. Targets to be potentially financed by above allocation amount	0 0.00 %	0 0.00 %	0 0.00 %	
H. Total coverage (allocation amount, above allocation amount and other resources) F+G	7,500 30.00 %	8,500 34.00 %	10,260 41.04 %	

Module: HSS-Health information systems and M&E

Module budget - HSS-Health information systems and M&E

Allocated request for entire module	USD 300,074	Above allocated request for entire module				USD 23,824	
Intervention	Intervention budget (request to the Global Fund only)					Cost Assumptions ³	Other funding ⁴
	Responsible Principal Recipient(s)	Total Targets	Year 1	Year 2	Year 3		

International M&E events	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	7,500	7,500	7,500	Budget include funds for International travel (in average 3 trips per year)	
		Above	0	0	0		
Description of Intervention ²							
Routine reporting	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	103,326	42,102	12,146	"Budget in "main allocation" includes funds for: Database development and support; Database security (accreditation and assessment); Monitoring visits (in average 18 per year); Trainings for documentations/ social workers (3 in 2016, 3 in 2017 and 1 in 2018). ""Above"" allocation budget include costs for working meetings with SR and other stakeholders"	"Above" allocation budget include costs for working meetings with SR and other stakeholders
		Above	5,956	5,956	11,912		
Description of Intervention ²							
"Routine reporting will be conducted through quarterly report submission by sub-recipients verified during monitoring visits (at least 2 per year). National register of HIV positive persons and treatment finalized in 2016 allowing to improve operational data and forecasting capacity. Changes in national recording of HTC and ART will allow for tracking key populations will occur by 2016. "							
Surveys	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	20,000	100,000	0	"Budget includes funds for: IBSS among PWID in 2017 Regional size estimation PWID in 2016 IBSS among MSM in 2017 IBSS among CSW in 2017 "	
		Above	0	0	0		
Description of Intervention ²							
Target population: central executive bodies, NGO. Geographic approach: national and regional level. Integrated bio-behavioral studies to assess the risk practices among key populations will be conducted in 2017. Regional estimation of the sizes of key populations groups will be conducted in 2016.							

Module: TB/HIV								
Module budget - TB/HIV								
Allocated request for entire module	USD 18,108			Above allocated request for entire module			USD 0	
Intervention	Responsible Principal Recipient(s)		Intervention budget (request to the Global Fund only)				Other funding ⁴	
			Total Targets	Year 1	Year 2	Year 3	Cost Assumptions ³	
TB/HIV collaborative interventions	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	6,153	6,152	5,803	Budget in "main allocation" include funds for HIV tests purchase. Procurement prices are based on the latest tender results.		
		Above	0	0	0			
Description of Intervention ²								
Rapid tests for TB patients								

Module: Community systems strengthening								
Module budget - Community systems strengthening								
Allocated request for entire module	USD 554,389			Above allocated request for entire module			USD 28,966	
Intervention	Responsible Principal Recipient(s)		Intervention budget (request to the Global Fund only)				Other funding ⁴	
			Total Targets	Year 1	Year 2	Year 3	Cost Assumptions ³	

Advocacy for social accountability	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	109,861	129,663	79,542	<p>"The following activities are planned in ""allocation"":</p> <ul style="list-style-type: none"> • analysis of legislation and preparation of changes in the law on charity to allow contracting of governmental funds to NGOs and transferring procured commodities for the government to NGOs; • finalizing and adapting in legal acts the package of services for key populations that would be used for calculating the national investment in HIV prevention among most-at-risk populations; • sensitizing local governments and communities about the need to invest into HIV response among key populations; • development of mechanisms to allow accumulation of additional funds for NGO-based prevention work, e.g. establishment of local foundations to resource HIV prevention interventions from local budgets and private donors. Information leaflets about the NGOs activities budgeted in ""above allocation"". Intervention is budgeted based on the current cost of GF HIV program implementation. "
		Above	0	8,000	0	

Description of Intervention ²

Preparation of Social contracting for HIV by Act NGO is a critical intervention to ensure transitioning from GF to the national finding.

Institutional capacity building, planning and leadership development	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	73,812	71,466	71,466	<p>""Allocation"" budget includes the following activities: inter-referral system development for the 6 cities with highest HIV burdens: Minsk, Pinsk, Gomel, Zhlobin, Svetlogorsk, Soligorsk; round tables with local authorities on municipality programmatic needs on HIV response and resources needed; information support through IEC development and web-site of Belarus Network Anti-AIDS ""Above allocation"" budget includes following key activities;</p> <ul style="list-style-type: none"> -Round Table on the development of the system of clients redirects from NGOs to government organizations (11 cities); -Bus study tour ""Inside Networks"" (5 days, 5 cities, 36 participants); -Development of guidelines about fundraising for NGOs working in the field of HIV. Intervention is budgeted based on the current cost of GF HIV program implementation."
		Above	19,526	1,440	0	

Description of Intervention ²

Campaign to remove legal barriers to access to services among key populations will be conducted throughout the project life. Includes bus tour, press-conferences, round tables.

Social mobilization, building community linkages, collaboration and coordination	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health	Allocation	6,193	6,193	6,193	<p>"Key activity - Issuing and distribution of the quarterly bulletin ""Together"". Intervention is budgeted based on the current cost of GF HIV program implementation."</p>
		Above	0	0	0	

Description of Intervention ²

Module: Program management

Module budget - Program management

Allocated request for entire module		USD 697,490			Above allocated request for entire module			USD 0	
Intervention	Responsible Principal Recipient(s)		Intervention budget (request to the Global Fund only)			Cost Assumptions ³		Other funding ⁴	
	Total Targets	Year 1	Year 2	Year 3					
Grant management	Republican Scientific and Practical Center for Medical Technologies, Informatization, Administration and Management of Health		Allocation	240,000	230,000	227,490	Budget is based on the estimated optimization of costs for Grant management (provided by the new PR). Detail budget will be developed during the grant negotiation. Program management and administrative costs in current HIV grant is about \$600k per year.		
			Above	0	0	0			
Description of Intervention ²									
PR management costs									

E. Financial Gap Analysis and Counterpart Financing

Country: Belarus					Currency: USD					
Component: HIV/AIDS					Cycle: January - December					
Year of CN Submission: 2015										
Current and previous				Estimated						
Part One: National Strategic Plan Funding Needs and Resources										
Total Funding Needs									Data Sources/Comments	
	01/2013 - 12/2013	01/2014 - 12/2014	01/2015 - 12/2015	01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	01/2019 - 12/2019	01/2020 - 12/2020		
Total Funding needs for the National Strategic Plan (provide annual amounts)			17,841,317	20,227,676	21,071,070	23,295,300				
LINE A: Total Funding needs for the National Strategic Plan	17,841,317			64,594,046						

Domestic Resources									Data Sources/Comments
	01/2013 - 12/2013	01/2014 - 12/2014	01/2015 - 12/2015	01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	01/2019 - 12/2019	01/2020 - 12/2020	
Total Resources									
Domestic source B1: Loans									
Domestic source B2: Debt relief									
Domestic source B3: Government revenues	15,677,052	16,854,226	12,707,625	15,485,659	16,791,498	19,552,512			2013 - spendings reported in GARPR; 2014-2018 - Estimations, which are based on actual Government spending for HIV in 2013 adjusted to the changes in total spending for Health Sector and gradual transfer of HIV program from GF financial support to Government.
Domestic source B4: Social health insurance									
Domestic source B5: Private sector contributions national									
LINE B: Domestic Resources	15,677,052	16,854,226	12,707,625	15,485,659	16,791,498	19,552,512	0	0	
External Resources									Data Sources/Comments
	01/2013 - 12/2013	01/2014 - 12/2014	01/2015 - 12/2015	01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	01/2019 - 12/2019	01/2020 - 12/2020	
Other	428,255								
LINE C: External Resources	428,255	0	0	0	0	0	0	0	
Global Fund Resources									Data Sources/Comments
	01/2013 - 12/2013	01/2014 - 12/2014	01/2015 - 12/2015	01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	01/2019 - 12/2019	01/2020 - 12/2020	
BLR-H-UNDP	5,155,290	5,732,355	5,133,692	0	0	0			
LINE D: Global Fund Resources	5,155,290	5,732,355	5,133,692	0	0	0	0	0	

Total Request										
	01/2013 - 12/2013	01/2014 - 12/2014	01/2015 - 12/2015	01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	01/2019 - 12/2019	01/2020 - 12/2020		
Total anticipated resources (annual amounts)	21,260,597	22,586,581	17,841,317	15,485,659	16,791,498	19,552,512	0	0		
LINE E : Total anticipated resources (Line B+C+D)	61,688,495			51,829,669						
Annual Anticipated Funding Gap (Total funding need - Total anticipated funding gap)	0	0	0	4,742,017	4,279,572	3,742,788	0	0		
LINE F: Total anticipated funding gap (Line A - E)	-43,847,178			12,764,377						
LINE G: Total Funding Request to the Global Fund	0			4,742,017	4,279,571	3,742,789	0	0		
LINE H: Funding request within the Allocated Amount	0			4,661,130	4,215,306	3,696,549	0	0		
LINE I: Funding request above the Allocated Amount	0			80,887	64,265	46,240	0	0		

Part Two: Overall Health Sector - Government Health Spending

Government Health Spending									Data Sources/Comments
	01/2013 - 12/2013	01/2014 - 12/2014	01/2015 - 12/2015	01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	01/2019 - 12/2019	01/2020 - 12/2020	
Domestic source J1: Loans									
Domestic source J2: Debt Relief									

Domestic source J3: Government funding resources	2,923,669,202	3,143,204,513	2,369,890,242	2,349,040,718	2,396,021,533	2,443,941,963			<p>2013 - National accounts for 2013 recalculated in accordance with average exchange rate for 2013 8875,83 USD. 2014 - planned expenditures of the health sector, recalculated in accordance with average exchange rate for 2014 - 10215,53 USD. 2015 - planned expenditures of the health sector, recalculated in accordance with average exchange rate for Jan-Mar 2015 - 14786,17 USD. 2016-2018 - projections calculated based on the estimated GDP 2015r., recalculated in accordance with average exchange rate for Jan-Mar 2015 (14786,17) and the share of health expenditure in GDP (4%). These expenses were extrapolated to the year 2016-2018 with annual growth of 2% (estimated growth of GDP according to World Bank data). Deviation of costs denominated in USD is due to significant fluctuations in the USD.</p>
Total government health	2,923,669,202	3,143,204,513	2,369,890,242	2,349,040,718	2,396,021,533	2,443,941,963	0	0	

Part Three: Counterpart Financing									
Low income = 5% low income, lower lower-middle income = 20%, upper lower-middle income (high level) = 40%, upper-middle income = 60%									
Counterpart Financing									
	01/2013 - 12/2013	01/2014 - 12/2014	01/2015 - 12/2015	01/2016 - 12/2016	01/2017 - 12/2017	01/2018 - 12/2018	01/2019 - 12/2019	01/2020 - 12/2020	
Total government resources	15,677,052	16,854,226	12,707,625						
Average of government resources	15,079,634								
Average of request within allocated				4,190,995					
Counterpart financing based on existing commitments							78.25%		
Average of total request				4,254,792					
Counterpart financing based on total funding request							77.99%		

Footnotes

1 - Target Assumptions :

Please describe:

- 1) overall assumptions used in calculating targets,
- 2) anticipated rate of scale-up,
- 3) population size estimates,
- 4) description of indicator/package of services,
- 5) data source,
- 6) other relevant information

2 - Description of Intervention :

Please describe:

- 1) rationale for Global Fund support,
- 2) linkages to national strategic plan,
- 3) target population and geographic scope,
- 4) implementation approach, and
- 5) other relevant information.

Please differentiate between scope of allocated and above allocated request

3 - Cost Assumptions for the request of the Global Fund

Please describe:

- 1) cost assumptions and data sources,
- 2) key activities,
- 3) other relevant information.

Please differentiate between allocated and above allocated

4 - Other funding received for this intervention (including scope of activities funded)