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PASCA

Programa para fortalecer la
respuesta centroamericana al VIH



Programmatic Report

Period: October 1, 2008 to March 31, 2014



Guatemala, April 30, 2014

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GLOSSARY

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| AHMNP | Asociación Hombres y Mujeres Nuevos de Panamá |
| AIDS | Acquired Immuno-Deficiency Syndrome |
| AMOCSA | Asistencia Médica de Occidente |
| ANEP | National Association of Private Enterprise of El Salvador |
| ANH | Asociación Nuevos Horizontes |
| ANICP+VIDA | Asociación Nicaragüense de Personas Positivas luchando por la vida |
| AOP | Annual Operating Plan |
| API | AIDS Policy Index |
| ART | Anti-Retroviral Therapy |
| ARVs | Antiretrovirals |
| ASAZGUA | Guatemalan Sugar Producers' Association |
| ASOHIVSIDA | Asociación Costarricense de Personas Viviendo con VIH |
| ASPIDH | Asociación Solidaria para Impulsar el Desarrollo Humano de Personas Trans en el Salvador |
| ASTRANS | Asociación Salvadoreña de Transgéneras y Transexuales |
| BD | Board of Directors |
| BE | Belize |
| BITRANS | Bisexuals, Trans-gender and Travestis, Gays |
| C&C | Textile Outsourcing Company |
| CA | Central America |
| CALMA | Centro de apoyo de Lactancia Materna |
| CCM | Country Coordinating Mechanism |
| CCSS | Costa Rican Social Security Fund |
| CDC | Center for Disease Control |
| CentraRSE | Centro de Responsabilidad Social Empresarial |
| CEPRESI | Centro para la Prevención y Educación en Sida |
| CID-GALLUP | Strategy, Consulting and Research Company |
| CIES | Health Research and Studies Center |
| CIMyE | Inter-Institutional Monitoring and Evaluation Committee |
| CIPAC | Center for Research and Promotion of Human Rights in Central America |
| CNE | National Epidemiology Center |
| CNET+ | Collaborative Network for Persons Living With HIV |
| COMCAVIS | El Salvador Trans Network |
| COMISCA | Central American Council of Ministers of Health |
| CONAMUS | National Women and Health Commission |
| CONASIDA | National AIDS Commission |
| CONAVIH | National HIV Committee |
| CoNEP | National Council of Business Enterprises |
| CONISIDA | Nicaraguan AIDS Commission |
| COSEP | Private-Enterprise Superior Council |
| CR | Costa Rica |
| CSS | Social Security Fund |
| DR | Dominican Republic |
| ECVC | Central American Survey of Sexual Behavior and HIV/STI Prevalence among Vulnerable Populations |
| ENSSR | National Sexual and Reproductive Health Survey |
| ETN MyE | National Monitoring and Evaluation Technical Team |
| FBO | Faith-Based Organization |

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| FEDEPRICAP | Federation of Private Entities of Central America, Panama and the Dominican Republic |
| FSIS | Fundación Sida y Sociedad |
| FSW | Female Sex Workers |
| GBV | Gender-Based Violence |
| GF | Global Fund |
| GFATM | Global Fund to Fight AIDS, Tuberculosis and Malaria |
| GIZ | German Society for International Cooperation |
| GLBT | Gays, Lesbians, Bi-sexuals, Trans |
| GMS | Grant Management Solutions |
| GO | Governmental Organization |
| GTA | Expanded Thematic Group |
| HIV | Human Immuno-Deficiency Virus |
| HIV | Human Immuno-Deficiency Virus |
| HIV/AIDS | Human Immuno-Deficiency Virus/ Acquired Immuno-Deficiency Syndrome |
| HIV/AIDS | Human Immuno-Deficiency Virus/ Acquired Immuno-Deficiency Syndrome |
| HIVOS | Humanist Institute for Cooperation, GP Principal Recipient in Guatemala |
| HUMANITAS | Asociación Unidos en la Esperanza, Esperanza Viva |
| IACHR | Inter-American Commission on Human Rights |
| ICAP | Central American Institute of Public Administration |
| ICPN | National Composite Policy Index |
| IDSO | Initiative for Sexual Diversity in the Western Region |
| IEC | Information, Education, and Communication |
| IGSS | Guatemalan Social Security Institute |
| ILCO | Costa Rican Lutheran Church |
| ILO | International Labor Organization |
| INAMU | National Women's Institute |
| INCAP | Institute of Nutrition of Central America and Panama |
| INCIENSA | Instituto Costarricense de Investigación y Enseñanza en Nutrición y Salud |
| INEC | National Statistics and Census Institute |
| INSS | Nicaraguan Social Security Institute |
| IntegraRSE | Central American Regional Business Association |
| ISDEMU | Instituto Salvadoreño para el Desarrollo de la Mujer |
| ISSS | Salvadorian Social Security Institute |
| KAP | Knowledge, attitudes and practices |
| LGBTI | Lesbian, Gay, Trans-Gender, Bi-Sexual Collective |
| LGBTTI | Lesbian, Gay, Bi-Sexual, Trans-Gender, Transvestite, and Inter-Sexual |
| LGTB | Lesbian, Gay, Trans-Gender, and Bi-Sexual; Diversity Groups |
| M&E | Monitoring and Evaluation |
| MANGUA | Antiretroviral Treatment Monitoring Project |
| MANU | Movement to Support a New University |
| MARPS | Most-at-Risk Populations |
| MCCS | Citizen's Social Oversight Group |
| MINSAL | Ministry of Health |
| MINSAL | Ministry of Health |
| MoT | Modes of Transmission Model |
| MS | Ministry of Health |
| MSM | Men who have sex with men |
| MSP | Multi-Sectoral Strategic Plan |
| MSPAS | Ministry of Public Health and Social Assistance |
| NA | Not applicable |
| NAC | National AIDS Commission |
| NAP | National AIDS Program |
| NASA | National AIDS Spending Assessment |

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|-------------|---|
| NASA | National AIDS Spending Assessment |
| NGO | Non-Governmental Organization |
| NMSP | National Multi-Sectoral Strategic Plan |
| NSA | National Strategy Applications |
| NSP | National Strategic Plan |
| OASIS | Organización de Apoyo a una Sexualidad Integral ante el Sida |
| ODASA | Organización de la Diversidad Amigos Siempre Amigos |
| OI | Opportunistic Infections |
| ONA | Coffee Plantation |
| OTRANS | Trans Organization in Guatemala |
| PAHO | Pan American Health Organization |
| PASMO | Pan American Social Marketing Organization |
| PBI | Basic Indicator Package |
| PCU | Project Coordination Unit |
| PDDH | Office of the Human Rights Ombudsman |
| PDH | Office of the Human Rights Ombudsman |
| PDL | People deprived of their freedom |
| PEP | Post-Exposure Prophylaxis |
| PEPFAR | The President's Emergency Plan for AIDS Relief |
| PER | Regional Strategic Plan for HIV |
| PLAN | Asociación Plan Internacional |
| PLWA | People living with AIDS |
| PLWH | People living with HIV |
| PMIT | Policy Monitoring Implementation Tool |
| PMP | Performance Monitoring Plan |
| POI | Inter-Sectoral Operative Plan (Spanish acronym) |
| PR | Principal Recipient |
| PROBIDSIDA | Non-Governmental Organization working on HIV and AIDS in Panama |
| PSI | Public Services International |
| RCC | Rolling Continuation Channel |
| RCM | Regional Coordinating Mechanism |
| REDCA | Red Centroamericana de Personas con VIH |
| REDCA+ | Red Centroamericana de Personas con VIH positivas |
| REDMMUTRANS | Red Multicultural de Mujeres Trans |
| REDNADS | Red Nacional de Diversidad Sexual en Guatemala |
| REDPA+ | Red Panameña de Personas con VIH |
| RNM | Resource Needs Model |
| ROCEDES | Nicaraguan apparel-assembly plant |
| RSDU | Caribbean Regional Stigma & Discrimination Unit |
| S&D | Stigma and Discrimination |
| SE-COMISCA | Central American Council of Ministers of Health Executive Secretariat |
| SEGEPLAN | General Planning Secretariat |
| SICA | Central American Integration System |
| SIGSA | Health Management Information System |
| SINVIH | Costa Rica's National HIV Information System |
| SISCA | Central American Social Integration System |
| SOUTH-SOUTH | Links, Relations among South and Central American Governments |
| SSS | Sentinel Surveillance Sites |
| STI | Sexually-Transmitted Infections |
| SUMEVE | Sole Monitoring, Evaluation and Epidemiological Surveillance System |
| SV | Sexual Violence |
| SVET | Secretariat against Sexual Violence in Guatemala |
| SW | Sex workers |

| | |
|-------------|---|
| SWOT | Strengths, Weaknesses, Opportunities, and Threats |
| TA | Technical assistance |
| TB | Tuberculosis |
| TB/HIV | Tuberculosis/ Human Immuno-Deficiency Virus |
| TFM | Transitional Funding Mechanism |
| TRANSVIDA | Trans Organization |
| UAI | Comprehensive Care Unit |
| UCA | Universidad Centroamericana at El Salvador |
| UN | United Nations Organization |
| UNAIDS | Joint United Nations Program on HIV/AIDS |
| UNDP | United Nations Development Program |
| UNFPA | United Nations Population Fund |
| UNGASS | United Nations General Assembly Special Session on HIV/AIDS |
| UNIBAM | Non-governmental organizations working with sexually-diverse population in Belize |
| UNICEF | United Nations Children’s Fund |
| USAID | United States Agency for International Development |
| USAID/HPI | United States Agency for International Development/Health Policy Initiative |
| USAID/PASCA | Program to Strengthen the Response to HIV/AIDS in Central America |
| USG | Government of the United States of America |
| USME | Supervision, Monitoring, and Evaluation Unit |
| UTE | Justice Sector Technical Executing Unit |
| UTN | Universidad Técnica Nacional |
| VICITS | Sexually-Transmitted Infections Sentinel Surveillance System |
| VIGEPES | El Salvador’s Epidemiological Surveillance |
| WHO | World Health Organization |
| WHO/PAHO | World Health Organization / Pan American Health Organization |
| WIN-Belize | Women’s Issues Network of Belize |
| WPB | Workplace Policy Builder |
| YES | Youth Enhancement Services |

EXECUTIVE SUMMARY

From October 1, 2008 to March 31, 2014, USAID/PASCA executed Contract No. GPO-I-00-5-00040-00 with the purpose of improving the HIV/AIDS policy environment. Based on the USAID/PASCA results framework and a budget of US\$13 million, efforts in countries centered on providing technical assistance to strengthen HIV Strategic Plan implementation and national information, monitoring and evaluation systems; on developing and renewing advocacy approaches so that these types of actions impact citizen oversight, and involving the business sector in the response to the epidemic. Activities were executed in Belize, Costa Rica, El Salvador, Guatemala, Nicaragua, and Panama. Regional activities also involved Honduras. At the end of the Contract, USAID/PASCA has accrued a considerable number of significant contributions to the response to HIV in Central America, which translate into increased access and care for people living with HIV and increased access to HIV preventive services. The most relevant achievements are as follows:

USAID/PASCA strengthened various strategic structures engaged in the response to HIV, both at the national and the regional levels. An example is the Regional HIV Coordinating Mechanism, which evolved from being an entity in charge of monitoring implementation of the Mesoamerican Mobile Population Project funded by the Global Fund to constituting a regional technical advisory structure at the highest level, ratified by the Central American and Dominican Republic Council of Ministers of Health and the Regional HIV Advisory Commission. Among other advances, the region now has a Regional HIV Strategic Plan 2010-2015, which was evaluated and is currently being implemented. In addition, the region has a Regional HIV Sustainability Strategy developed by the Regional Coordinating Mechanism, with USAID/PASCA technical assistance, which was approved by COMISCA and endorsed by the Central American President's Summit. It responds to several strategic lines contained in the Regional Plan, especially in regard to components of a regional policy on universal access and strategic information.

The region also strengthened its regional HIV policy framework by means of support provided by the Project to the execution of a Regional HIV Partnership Framework by the Government of the United States and COMISCA. This achievement was possible due to the use of strategic information aimed at audiences such as PARLACEN, COMISCA, and the RCM.

The technical assistance provided by USAID/PASCA to the RCM included updating its internal set of work regulations, which is a document that regulates the forms of structure and operations for this entity. The project facilitated the development of strategic analyses and policy recommendations, emphasizing prioritized care for the groups most vulnerable to the epidemic; it held activities to foster dialog and the development of policies to be submitted to COMISCA, and it strengthened RCM's institutional communication mechanisms to ensure effective guidance and strategic management to implement the Regional HIV Strategic Plan. USAID/PASCA also fostered RCM's addressing sexual violence, gender-based violence, and HIV by the RCM. This helped the RCM to incorporate follow-up for this issue of regional interest in its agreements.

USAID/PASCA provided technical assistance to the RCM aimed at activities that fostered implementation of the Regional HIV Strategic Plan. Specifically, it facilitated dialog and policy-development which resulted in COMISCA's approval to monitor a basic package of HIV indicators in countries and the region, among which are the following indicators: policy (NASA); prevention (% of populations most exposed to the risk that have been tested in the past 12 months and that know their results); care and treatment (% of adults and children with advanced HIV who are on anti-retroviral therapy); strategic information (prevalence in the 15-24 age group), and health system strengthening (% of health facilities reporting stock-outs in the past 12 months). These indicators report to UNGASS, National M&E Plans, and the Regional M&E Plan

Currently, all countries are reporting HIV indicators more expeditiously and using strategic information for decision-making purposes. Improvements have been achieved in data access, the use of study results, and information dissemination, which have fostered technical discussions aimed at determining: a) if intervention prioritization is the adequate one for the type of epidemic; b) if services are being provided according to MARPS needs; c) that access to HIV post-exposure prophylaxis was an uncharted area; d) that AIDS investment or spending did not reflect the strategic priorities to contain the HIV epidemic, and e) that key interventions in prevention depended mainly on external sources.

USAID/PASCA developed and disseminated regional strategic analyses that helped to show the region's gaps, progress, and challenges to achieve universal access and prioritized care for vulnerable groups, which include: a) developing regional workshops on the state of HIV, in which sessions to analyze the policy environment and the gaps in the regional response to HIV were facilitated; b) analysis sessions on the gaps of the proposal submitted for funding by the Global Fund; c) analysis sessions on AIDS spending assessments in the region. Over 200 documents were published for the region, all of which are available in USAID/PASCA's webpage.

USAID/PASCA strengthened the countries in the region to ensure that financial estimates on the epidemic were technically sound, had common definitions, and were using similar data presentation. To that end, questions for analysis, reporting tables, gathering instruments and guides to develop reports were shared with NASA national teams. The resulting country databases were incorporated into a regional database on HIV spending, which allowed performing comparative analyses on the financial situation, and highlight the emphasis being placed when allotting resources in the region. This fostered a better understanding of issues such as funding, spending, allotment, sustainability, efficiency, and equity.

USAID/PASCA helped to significantly increase the availability of human resources with the competencies to engage in HIV monitoring and evaluation. This was made possible by training provided at two Central American Diploma Course on Monitoring and Evaluation for HIV/AIDS Policy and Program Management. National and regional actors publicly expressed their satisfaction with the quality of the curricula and the excellent results obtained in indicators such as promotion, retention, and academic performance. 372 officials from various institutions were trained and contributed to generating a number of proposals to improve information systems, which show critical and perceptive probing into the systems and, in most cases, propose relevant low-cost changes. Every year, USAID/PASCA provided technical assistance to 95 governmental and non-governmental organizations and trained an average of 253 people –of whom 68 were health-sector officials– on topics pertaining to information, monitoring, and evaluation.

At present, the Central American region has a new generation of National HIV Strategic Plans, which were developed in a participative fashion and are based on epidemiological evidence, the results of evaluations of previous plans, and the analysis of gaps in implementation of policies and programs. In addition, plans included the development of monitoring and evaluation frameworks to document and assess implementation progress and achievements, comparing the initial situation with established goals. In most countries, the process included estimating the cost of implementing strategic plans and comparing the amount of resources needed with the level of current spending as reported by NASA.

Every country now has monitoring and evaluation plans for the response to HIV. These plans are based on the basic package of prioritized indicators, and contain the lines of action to improve the system; the coordination actions for the operation of a monitoring and evaluation committee, as well as the routine actions to gather, process, analyze, and report indicators. In addition to national plans, the various countries undertook operative monitoring and evaluation programs for periods of one or two years. These documents not only contain activities and specify the resources needed to operate the monitoring and evaluation system, but they are coherent with the responsibilities and attributions of national and provincial monitoring and evaluation committees.

Worth noting is the technical assistance provided by USAID/PASCA to mobilize resources by means of approved and efficient proposals funded by Global Fund for an approximate amount of US\$155 million in the region. The Project's technical assistance entailed their development, implementation, monitoring, and evaluation. These projects have become implementation mechanisms for National Strategic Plans and have been costed and evaluated in order to identify programmatic and financial gaps. This key information later became the basis for developing Global Fund projects.

Annually, USAID/PASCA has provided technical assistance to 85 organizations to develop their HIV policies. The information produced by USAID/PASCA was used as evidence to promote 142 new policy changes, among them: a) Launching a guide to provide care to MARPS in El Salvador; b) a guideline to target 50% of GF Funding on MARPS care and prevention in new projects or their financial re-programming; c) the use of HIV Modes of Transmission Models (MoT) results in processes to approve Global Fund proposals in Nicaragua, El Salvador and Guatemala, and d) incorporating the business sector into the response to HIV and its adopting HIV workplace policies. In addition: e) harmonizing national information systems; f) strengthening national committees; g) developing M&E competencies for policy and program management, h) policy studies and analyses, among other mechanisms through which USAID/PASCA provided technical assistance.

USAID/PASCA helped to improve access to post-exposure prophylaxis to rape victims by mobilizing policy support, updating care protocols and other policies for inter-institutional approach, and establishing bridges with MARPS organizations as a means to bring people nearer to preventive services within 72 hours after the rape had occurred. To date, the active engagement of authorities from the National AIDS Programs and other development programs connected to care in case of sexual violence has been secured. Five of them already have updated care protocols to make post-exposure prophylaxis available, with inclusive approaches, recognizing that these problems affect the whole population, including women, men, and children of all ages.

Countries have committed specific financial resources to purchase anti-retrovirals (or complete kits) to be used in post-exposure prophylaxis and through inter-institutional agreements, access barriers are being eliminated, care is being de-centralized, and the number of centers that provide services is being expanded. By modifying inter-institutional protocols, re-victimization has also been reduced, since now one file is used by all, so that victims are only interviewed once in order to obtain all the information required by health, judicial or police authorities. USAID/PASCA facilitated training events for health staff and judicial-branch personnel on post-exposure prophylaxis policies and protocols, so that it is treated as a medical emergency. In five countries, there is specific evidence on the involvement of MARPS organizations, acting in some cases as a bridge to inform and raise awareness on the importance of post-exposure prophylaxis in sexual-violence cases, with the aim of reducing the possibilities of HIV transmission, providing the first anti-retroviral dose to sexual-violence victims, or working with health staff to reduce stigma and discrimination toward MARPS, thus promoting increased adherence and treatment effectiveness.

In every country where USAID/PASCA is working, and at the regional level, it was possible to incorporate the leaders of the business sector into the response to HIV. The Federation of Private Entities of Central America, Panama and the Dominican Republic (FEDEPRICAP in Spanish) and its national business councils, business social-responsibility associations and trade associations of productive sectors (CONEP, UCCAEP, COSEP, ANEP, CACIF, BCCI, AED, CANATUR, APIB, ASAZGUA, VESTEX), and companies working in various sectors have been strengthened through technical assistance on strategic information, policy development, and building institutional capacities.

Currently, 146 companies throughout the region have adopted HIV workplace policies, all of which include a basic package of three components: human rights and reducing stigma and discrimination, including not firing workers on the basis of HIV; prevention programs that include education, testing promotion, counseling, occupational health, and prophylaxis; treatment of opportunistic infections, coordinating with a public health system to access treatment, and reasonable adjustments for people living with HIV as to work schedules; reassigning responsibilities, among others. Following on the steps of the USAID/PASCA intervention model with the business sector, more advanced initiatives have been able to mobilize their own resources and state, social-security, and/or international cooperation resources in order to advance implementation of HIV policies considerably, and some of them are implementing interventions that, directly or indirectly, reflect combined prevention models. Among them are banana-producing companies in Guatemala, companies from various sectors associated to COSEP in Nicaragua, companies from the beverage sector in Panama, companies from the services sector in Costa Rica, and textile firms in El Salvador. HIV workplace policies have benefited approximately 450,000 direct company employees and 1.8 indirect beneficiaries.

USAID/PASCA worked in collaboration with government agencies, including COMISCA; Ministries and Secretariats of Health, Labor, Justice, Planning, and Human Development; Social Security Institutes; National AIDS Programs and Commissions; Offices of Human Rights Ombudsmen; non-governmental organizations; national and regional MARPS (people living with HIV, MSM, Trans-gender individuals, and sex workers) networks; Faith-Based Organizations; organizations working with migrants; regional and national coordination mechanisms for projects funded by the Global Fund, as well as with its network of implementers (Principal Recipients and sub-recipients); USAID partner projects, and bilateral and multi-lateral agencies providing technical and/or financial support, such as the Global Fund, UNAIDS, WHO, ILO, GIZ (through its contractor for HIV in the region, Health Focus). The project has received the acknowledgement of COMISCA authorities and other regional and national authorities from the governmental and non-governmental sectors for the high quality of the technical assistance provided by USAID/PASCA.

The main achievements, by country, include the following:

Belize now has an HIV Strategic Plan 2012-2016 that was developed with USAID/PASCA technical assistance. This achievement required a multi-sectoral joint effort to cause impact in order to secure the approval of this national policy. The NSP was costed by individuals who were trained by the Project, and it has a National Monitoring and Evaluation Plan for the Response to HIV, which was adopted as a national guide unifying the main indicators defined by the country and harmonized with those recommended by the Global Fund.

For the first time ever, the country developed a report on HIV prioritized monitoring and evaluation indicators to be used at the national level. In addition, USAID/PASCA facilitated the development of capacities to undertake the 2010 and 2012 NASA exercises; it developed API studies on the HIV policy environment in 2009-2013; it performed studies on stigma and discrimination in 2009 and 2013; it developed the study on monitoring NSP 2010 implementation, and the study on Modes of Transmission 2014. This information was used every year to build capacities aimed at developing and implementing HIV policies in over 12 local organizations.

The country was able to obtain approval for its HIV proposal to Round 9 funding from the Global Fund for a sum of US\$2.1 million. USAID/PASCA supported the implementation of this project, by training sub-recipients on monitoring and evaluation, and by strengthening the CCM to manage the grant and to promote accountability.

Since the end of 2011, the country was immersed in a controversial policy environment, in view of MSM group's demands who sought reforms to the penal code in order to amend a law punishing sodomy, contravening international agreements on behalf of human rights. As a result of this situation, USAID/PASCA strengthened alliances among MARPS groups so that they would engage in evidence-based advocacy; provided technical assistance to several sectors so that they would adapt and focus their messages, with the aim of preventing hostile confrontations, and mediated and created impact on behalf of respect for the human rights of all individuals.

USAID/PASCA was able to position strategic information for assertive decision-making on the course of the epidemic with audiences such as the Ministry of Health, NAC, and NGOs. Specifically, topics such as the policy environment, funding for the epidemic, and access to prevention and care services were analyzed. Through this, authorities were engaged in order to lead key processes in the country, such as: The Guide for Services to Sexual-Violence Victims.

USAID/PASCA contributed to the country's strengthening of its policy and regulatory framework to provide all sexual-violence victims with access to post-exposure prophylaxis; strengthen groups working with MARPS, such as YES, so that they could plan and engage in advocacy to achieve changes in health services; strengthened the Network of People with HIV (CNET+) by developing its strategic plan and by seeking funding, and worked along UNIBAM to develop messages promoting an environment focused on the human rights of sexually-diverse populations.

USAID/PASCA helped to engage Belize's Chamber of Industry and Commerce in the response to HIV, and worked as an ally of the Ministry of Labor to train over 20 companies on how to develop their HIV policies.

Costa Rica now has a National HIV Strategic Plan 2011-2015, and for the first time, developed Multisectoral HIV Operating Plans. The NSP was costed by a group of individuals trained by the USAID/PASCA project, and it was also evaluated. USAID/PASCA was able to have CONASIDA and the Ministry of Health publish the National M&E Plan, which is coherent with the period for the National HIV Strategic Plan, and also strengthened the National M&E Committee. This strengthening resulted in the adoption of a basic package of HIV indicators and in developing 3 national reports on the state of the epidemic based on prioritized indicators. USAID/PASCA facilitated authorities' commitments; for example, it was able to secure the Ministry of Health's publication of a decree making HIV data submittal mandatory.

USAID/PASCA performed studies on HIV policies, among them: Monitoring the Implementation of a National HIV Strategic Plan as a Public Policy, 2010. It facilitated capacity building to perform the NASA 2010 and 2012 exercises; it developed API studies on the HIV Policy Environment in 2009 and 2013; it performed studies on stigma and discrimination in 2009 and 2013, and it supported the development of the Study on the Modes of Transmission in 2013.

The studies were used in HIV policy-dialog and advocacy activities implementation by over 18 MARPS organizations that advocated for policy changes. Some examples of these changes are: The Costa Rican Social Security Fund approved the administrative guideline to provide services without stigma and discrimination based on sexual orientation or gender identity; the President of the Republic approved the amendment to the decree declaring May 17 as the National Day against Homophobia, Lesbophobia, and Transphobia; the University of Costa Rica issued a decree declaring that it was a space free from stigma and discrimination based on sexual orientation and gender identify. In regard to an environment favorable to HIV, USAID/PASCA facilitated the approval of a Guideline to Prevent and Address Discrimination Based on Sexual Orientation and Gender Identity by the Ministry of Labor, and provided support so that

another university would declare that it is an institution free of stigma and discrimination and respectful of sexual diversity.

For this country, the approach focused on producing information on the epidemic, with which the country became eligible to receive GF funding. In this sense, USAID/PASCA supported the study on MSM seroprevalence, whose results were used by the Ministry of Health to publish official data. The viral-load study was also published; a diagnosis of the situation and the response to HIV was performed, and the annual HIV estimation exercises were supported. The information that was published constituted the basis to develop a conceptual note focusing on MARPS, which will be presented by the CCM for GF funding in June 2014.

Every year, USAID/PASCA was able to strengthen at least 8 MARPS organizations, which were provided technical assistance to engage in institutional and operative strategic planning. They were trained on advocacy and policy dialog, basic monitoring and evaluation, and communication for conflict management.

The country progressed significantly in regard to strengthening its regulatory framework on sexual violence and HIV, especially insofar as providing post-exposure prophylaxis in cases of sexual violence to the whole population, including MARPS. USAID/PASCA facilitated: a) reviewing the norms to implement an inter-institutional protocol by the Social Security Fund and the Judicial Branch of Government; b) securing approval for the Guide to Prevent and Care for People with HIV Deprived of their Liberty; c) creating a committee to oversee the implementation of a national protocol to access PEP, and d) facilitating a multi-sectoral agreement to expedite implementation of a pilot plan to access PEP in four regions of the country.

In order to involve the business sector, USAID/PASCA established a strategic alliance with the Business Association for Development (AED). By means of this alliance, the project reached more than 150 companies with strategic information on HIV workplace policies and developed guides to train and to develop HIV policies. As a result of this strategy, 27 companies adopted HIV policies.

El Salvador now has a National HIV Strategic Plan 2011-2015 and its National Monitoring and Evaluation Plan. The NSP was costed, it was developed based on the previous NSP evaluation, and was implemented with USAID/PASCA's technical assistance. As part of implementation, the country developed its HIV Operating Plans annually. There is marked leadership in the national health authorities, and they created the proper conditions for their implementation. These conditions are reflected in positive policy changes adopted by the country, among them: CONASIDA, NAP, and the National M&E Sub-Commission operating plans; the CCM's code of ethics and set of regulations; technical health guidelines for sexual-diverse populations, and the national guide to access post-exposure prophylaxis, among others.

As part of NSP implementation, the country was able to unify its HIV proposals funded by the Global Fund, and to secure Global Fund's approval for the new project for US\$26.9 million. National authorities gave recognition to USAID/PASCA for its technical assistance.

Another example of NSP implementation is the progress in monitoring and evaluating the HIV epidemic. Now, the country has a strengthened M&E sub-commission that has operating plans, that renders accounts periodically, and that, in the last 3 years, has published annual reports on the state of the epidemic.

With support from USAID/PASCA, national authorities published the following studies: Monitoring the Implementation of the National HIV Strategic Plan as a Public Policy 2010 and 2013; NASA Exercises 2010

and 2012; API studies on the HIV policy environment in 2009 and 2013; stigma and discrimination studies in 2009 and 2013, and studies on the Modes of Transmission in 2012.

Every year, HIV information was used to build capacities on HIV policies in at least 22 local organizations, which led advocacy campaigns to: position the CCM and the HIV issue with the current President of the Republic; expedite access to opportune information on the HIV epidemic; secure approval for the guidelines to access post-exposure prophylaxis in MARPS rape cases, among others.

USAID/PASCA contributed to renewing and strengthening MARPS' leadership; it trained organizations on planning, institutional organization, accountability, negotiation and conflict-management, networking, policy dialog, and HIV advocacy. This work was focused on MARPS. For example: ATRANS and COMCAVIS evolved; from being community groups, they became actors that played a relevant role in attaining policy changes to promote MARPS' access to health services and undertook actions to achieve, for example, the approval of health guidelines on sexually-diverse populations. USAID/PASCA provided support to three organizations in order for them to become sub-recipients of the Global Fund and now, they manage HIV projects. It also helped the Female Sex Workers, MSM, and Trans sectors so that they would represent themselves in the country's decision-making mechanisms.

The country now has HIV social-audit mechanisms that are prominent in their participation in the policy arena, such as the Mesa Ciudadana de Contraloría Social (Citizen's Social Oversight Group), the Mesa por los Derechos Sexuales de la Diversidad Sexual (Group for Sexual Diversity's Sexual Rights), and the Mesa de Género (Gender Group). These entities were created and/or strengthened by USAID/PASCA.

The mechanisms developed joint-advocacy objectives that translated into increased access to MARPS services, such as: access to HIV post-exposure prophylaxis services in cases of MARPS sexual violence. Social-audit mechanisms worked along with the Ministry of Health and were able to train over 220 health-service providers on how to manage the PEP clinical protocol.

Progress in involving the private sector in the response to HIV was also significant: USAID/PASCA was able to persuade the business sector, represented by ANEP, to participate in Multi-Sectoral Mechanisms in charge of HIV decision making at the national level. USAID/PASCA was also able to have ANEP develop its own HIV workplace policy, publicly encourage its member companies to join the response to the epidemic and lead training programs for companies. The commitment of the business sector is evidenced by 28 companies that have adopted HIV workplace policies.

Guatemala has a National HIV Strategic Plan 2011-2015 and its National Monitoring and Evaluation Plan for the same period. The National Strategic Plan was costed and evaluated, and it is now being implemented. In order to cost the NSP, USAID/PASCA trained a multi-sectoral group on how to apply the RNM, and they gave their input and developed scenarios that were used to mobilize resources. In order to evaluate the NSP, USAID/PASCA supported the creation of a multi-sectoral team that issued its critical judgment, which helped to develop a new NSP that takes into account the lessons learned in the previous strategic planning exercise.

As part of NSP implementation, the country recently received funding for US\$18 million to continue the HIV project. The development of this proposal was facilitated by USAID/PASCA, which supported the CCM in its compliance with a long list of requirements to opt for this funding. The Country Coordinating Mechanism now has an internal set of regulations for their functions, with manuals that govern its administrative processes, and it is using a manual to assess the quality of the data it is reporting to the Global Fund. Furthermore, it has expanded the base of sectors represented in it.

USAID/PASCA helped to strengthen the human resources who monitor and evaluate the epidemic in the country, which resulted in several studies and publications by national authorities, among them: the first report on prioritized HIV monitoring and evaluation indicators, 2013; a report by SEGEPLAN on implementing HIV public policy, 2012; a regional report on clinical follow-up for people living with HIV, MANGUA, 2012; the NASA study, 2010; API studies on HIV policy environment in 2009 and 2013; studies on stigma and discrimination in 2009 and 2013, and the study on Modes of Transmission 2012. With these studies, USAID/PASCA developed institutional capacity-building to analyze and make evidence-based decisions.

The National Monitoring and Evaluation Committee advanced in identifying areas of the HIV national information system that must be strengthened, as well as in identifying the sub-systems required for its operation. Now, this committee includes IGSS, NAP, CNE, and organizations linked to the Global Fund.

USAID/PASCA supported strengthening of MARPS youth groups, among them the Federación de la Diversidad Sexual, Somos, and RedMutrans; it strengthened 7 organizations annually on issues such as advocacy, HIV policy dialog, negotiation and conflict management, strategic planning, and basic monitoring and evaluation courses. This made it possible for leaders to start their incorporation and participation in existing multi-sectoral mechanisms.

With those MARS organizations well established in the country, USAID/PASCA supported advocacy campaigns on emerging situations that were able to: reverse the decision of the Government to purchase HIV medications from local suppliers and have the Congress of the Republic's focus on accepting GF funding.

Insofar as MARPS' access to post-exposure prophylaxis, USAID/PASCA worked in conjunction with SVET and the Alianza por la Violencia Sexual in order to ratify an inter-institutional agreement to increase access to HIV post-exposure prophylaxis.

USAID/PASCA's strategy to involve the country's business sector focused on working with well-known trade organizations. A significant achievement was APIB's (Independent Banana Producers) developing and adopting its HIV workplace policies. By means of it, HIV programs were implemented in 7 banana plantations. In addition, USAID/PASCA was able to secure approval for AZASGUA's (Guatemalan Sugar Producers' Association) HIV Policy. This association gathers together the country's main sugar mills, and associated firms. It mobilized its own resources and implemented its own nationwide media campaign to publicize its HIV policy. HIV workplace policies were also adopted by VESTEX (Clothing and Textile Industry Association) and ANACAFE (National Coffee Association), which groups together over 60,000 producers.

Nicaragua has a National HIV Strategic Plan 2011-2015 and a National M&E Plan for the same period. Both documents were published. The National Strategic Plan was costed based on an evaluation of the previous NSP and it is now being implemented.

In order to undertake the costing exercise, USAID/PASCA trained a multi-sectoral team on the Resource Needs Model. This team provided input to the costing exercise and participated in analysis sessions and in scenario development. The current NSP was developed based on the evaluation of the previous Plan, which provided a series of lessons learned that allowed the development of a more robust plan.

In Nicaragua USAID/PASCA technical assistance focused on publishing and using information for decision-making purposes. USAID/PASCA facilitated work methodologies that allowed: a) defining a basic indicator package for the HIV epidemic that the country committed to reporting; b) publishing three

yearly reports on the state of the HIV epidemic to be used in the country; c) publishing the NSP evaluation 2005-2010; d) publishing the study on monitoring and implementing NSP 2010; e) publishing the NASA study 2010 and executing the process to measure NASA 2012; f) publishing API studies on the HIV policy environment in 2009 and 2013; g) publishing studies on stigma and discrimination in 2009 and 2013, and h) publishing a study on the Modes of Transmission 2012.

USAID/PASCA disseminated these studies in the country by means of public activities, such as forums, round tables, and sessions that promoted capacity building to analyze information, policy dialog, and decision making among various audiences. The use of information generated consensus on advocacy objectives and fostered policy changes. The main such policy changes in the country include: the approval for an updated HIV law; a ministerial resolution aimed at provided health services free of stigma and discrimination; the expansion of CONISIDA in order to include more sectors; statements by municipal governments on the human rights of sexually-diverse individuals, among others.

Every year, 15 MARPS organizations were trained on HIV policy dialog and advocacy and on basic courses to monitor and evaluate the epidemic. Additionally, they participated in dissemination and information-analysis processes relating to MARPS and HIV. USAID/PASCA was able to integrate a group of MARPS organizations that undertook an advocacy campaign with the Ministry of Health to secure the approval of a Clinical Guide to Access Post-Exposure Prophylaxis in Rape Cases.

An outstanding achievement in Nicaragua was the evolution of Red Trans, which started out gathering several isolated groups and is now a solid organizations and a GF project sub-recipient. USAID/PASCA contributed to this achievement by providing support to the network in its efforts to perform a self-diagnosis, develop its strategic plan, obtain legal standing, and develop its proposal to seek funding, among others.

In order to involve the business sector, USAID/PASCA worked in alliance with the Private-Enterprise Superior Council (COSEP). This organization assumed a commitment that resulted in creating a sub-commission on HIV, which has its own work plan. Furthermore, it incorporated into CONISIDA, which is quite significant because of its significant weight as far as policies are concerned. COSEP adopted its own HIV policy and promote the response of the business sector to the epidemic among its 17 trade associations. By means of this strategic alliance, USAID/PASCA trained companies and provided individual technical assistance that resulted in 15 companies adopting their HIV policies.

Panama has a Strategic Plan 2009-2014, which was evaluated and costed and is now being implemented. The NSP evaluation was performed by a multi-sectoral team under NAP's leadership and with USAID/PASCA's technical assistance, and it allowed focusing NSP actions on care that must be provided for the MARPS-concentrated epidemic. To cost the NSP, USAID/PASCA trained a local team whose members provided information and defined gaps in funding. These processes were useful to the country when it submitted a proposal to the Global Fund, which approved Round 10 funding for US\$5.2 million. When this project was being implemented, USAID/PASCA played a coordinating role between the Principal Recipient and sub-recipient organizations. Furthermore, it provided technical assistance to the CCM to foster its institutional strengthening, and to MARPS organizations in order to review and concretize proposals that helped them to become sub-recipients.

The National AIDS Program disseminated the NSP in public forums and workshops. It used it as the basis to develop costed Annual Operating Plans. In all of these processes, USAID/PASCA facilitated the tools that supported the connection between the NSP and operating plans.

The country attained progress in monitoring and evaluating the epidemic. USAID/PASCA strengthened the role and performance of the National M&E Committee. To that end, it supported the development of annual operating plans; facilitated the methodology to prioritize a group of HIV national indicators; facilitated the development of information flows for selected indicators; facilitated the creation of Regional Committees as guarantors of the data produced in the country; supported the development of three annual reports on the state of the HIV epidemic, based on prioritized indicators, and developed training for various levels of monitoring and evaluation. USAID/PASCA worked along with the National AIDS Program to develop, validate, and publish the Supervision Guide to guarantee the quality of HIV indicator data, which was applied by all the organizations reporting data to feed indicators.

USAID/PASCA helped to produce and publish the following studies: Monitoring Implementation of the National HIV Strategic Plan as a public policy, 2009 and 2013; NASA exercises 2010 and 2012; API studies on the HIV policy environment in 2009 and 2013; studies on stigma and discrimination in 2009 and 2013, and the Modes of Transmission study in 2013. The National AIDS Program contributed to disseminating this information; in the last three years, National Forums were held to present the studies and the progress achieved in the country in evaluating the HIV epidemic.

USAID/PASCA also facilitated sessions with MARPS groups to analyze HIV policies on issues such as stigma and discrimination, human rights, sexual violence and HIV, among others. It provided technical assistance to undertake advocacy campaigns, one of them pertaining to opportune ARV supply, led by the HIV Observatory, and was able to attract the attention of the Ministry of Health, the Office of the Human Rights Ombudsman, and CONAVIH to provide a response to the situation. It also provided technical assistance to the Asociación Nuevos Horizontes in order to cause impact on a health region, with the purpose of securing access to stigma-free services for sexually-diverse populations.

Advocacy campaigns led by MARPS groups generated changes in policy, such as the Ministry of Health's approval of the protocol to access post-exposure prophylaxis in cases of sexual violence; the Ministry of Health's creation of MARPS-friendly clinics, and the norms for therapeutic management of HIV individuals, among others.

USAID/PASCA worked with CoNEP in order to contribute to the strengthening, organization, and coordination of the business sector in its response to HIV. This organization implemented a communication strategy on HIV in the business sector, which fostered companies' interest in the issue. CoNEP, with USAID/PASCA's technical assistance, held training sessions on how to develop and adopt policies that later became their HIV workplace policies. CoNEP expanded its work sphere with the Ministry of Health and an NGO in order to expand its programs to provide care for and prevent HIV.

In Panama, with technical assistance from USAID/PASCA, the Business Red Ribbon Committee was established to work on HIV. This commission groups together Panamanian businesspeople who are implementing HIV workplace policies and are strategic allies to keep the issue on the public agenda.

I. INTRODUCTION

USAID/PASCA is the USAID Program to Strengthen the Response to HIV/AIDS in Central America, which was executed under contract No. GPO-I-00-05-00040-00. It started in October 2008 and was set

to last five years; subsequently, USAID authorized the extension of the project, so that it would end in March 2014. Its aim was to improve the policy environment, in order to attain a more effective response to HIV/AIDS in the region.

This program provided technical assistance and training so that HIV policies would be implemented effectively. During its first year, from October 2008 to September 2009, it supported the achievement of the following results: 1) National and Regional HIV/AIDS Strategic Plans budgeted, implemented, monitored, and supported; 2) National and Regional Advocacy Agendas effectively implemented, and 3) Policies and Activities to mitigate HIV/TB co-infection implemented. As of its second year, which started on October 1, 2009, the following results were sought: 1) National and Regional HIV/AIDS Strategic Plans budgeted, implemented, monitored, and supported; 2) National and Regional Advocacy Agendas effectively implemented, and 3) the business sector involved in the response to HIV.

The project's first three annual work plans and this report were organized based on expected results; the rest of the annual work plans were organized around the following program strategies:

- a) Strategy to strengthen information systems and processes to monitor and evaluate the response to HIV in Central America;
- b) Strategy to strengthen the response to populations most-at-risk and vulnerable to HIV (MARPS), by means of processes to develop, implement, and monitor HIV policies in Central America;
- c) Strategy to strengthen the response to HIV by means of processes to develop, implement, and monitor policies that address gender-based and sexual violence in Central America;
- d) Strategy to involve the business sector in the response to HIV, and
- e) USAID/PASCA's core strategy to strengthen the response to HIV by means of developing, implementing, and monitoring policies that group together those activities that are not included in the previously-described strategies.

The geographical focus of the program was the Central American region, with specific activities, implemented by country, in Panama, Guatemala, El Salvador, Costa Rica, and Belize. Since its second year, USAID/PASCA also worked in Nicaragua. Honduras was also included in activities with a regional scope.

II. RELEVANT ACTIVITIES

2.1 Regional

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the five years and six months of execution of the Program to Strengthen the Response to HIV/AIDS in Central America, USAID/PASCA, regional activities were implemented according to two main technical-assistance lines: the ones aimed at strengthening the policy framework and strategic information, monitoring and evaluation pertaining to HIV at the regional level, as well as those that responded to harmonized regional methodologies to be implemented in countries, seeking comparison and addition of results, and the introduction and/or strengthening of lines of work in a standardized manner.

At the regional level, USAID/PASCA provided technical assistance and coordinated efforts with regional entities, such as the HIV Regional Coordination Mechanism for Central America (CCM), the Central American Council of Ministers of Health (COMISCA) and its Executive Secretariat (SE COMISCA), the Institute of Nutrition of Central America and Panama (INCAP), the Central American Institute of Public Administration (ICAP), Federation of Private Entities of Central America, Panama, and the Dominican Republic (FEDEPRICAP), which gathers together the leaders from the Central American business sector (CONEP, UCCAEP, COSEP, ANEP, and CACIF) and which the Belize Chamber of Commerce has joined for this effort. Regional networks such as the Central American Network of People Living with HIV (REDCA+) and the Network of Men who Have Sex with Men (CONGA). Work was also undertaken with organizations that acted as focal points in the region for other regional networks of Most-at-Risk-Populations (MARPS), such as the Latin American Trans-Gender Network (REDLACTRANS), and the Latin American Sex Workers (REDTRASEX).

Throughout the life of the project, USAID/PASCA coordinated with its strategic partner, the United Nations Joint Program on HIV/AIDS (UNAIDS), to identify the common work areas and the complementary nature of the technical assistance in the support provided to the CCM, the development of policies, and the activities harmonized at the regional level. Long-term coordination and collaboration relationships were established with the Pan American Health Organization, the International Development Bank (IDB), and its regional HIV project (2010-2012), the German Technical Cooperation, through its implementer, Health Focus, and its Regional HIV Support Project. Guatemala's Proyecto Vida was another regional partner that strengthened the regional participation of Faith-Based Organization in the response to HIV. Similarly, efforts were coordinated with other USAID projects (PASMO, CAPACITY, and SCMS) in specific regional activities, mainly related to strategic information, such as CONCASIDA 2010, the Seventh Meeting of People with HIV, and harmonization of regional indicators, as well as with other USG partners participating in the CCM, such as the CDC, with which USAID/PASCA directly coordinated regional strategic information actions.

While during the first year of the project USAID/PASCA technical assistance focused almost exclusively on providing follow-up to the Mesoamerican Project "Reducing Vulnerabilities of the Mobile Population", in subsequent years, technical assistance with a regional focus was expanded to include strengthening the CCM as a regional HIV technical/advisory entity; developing a regional HIV policy agenda; strengthening the regional HIV strategic-planning processes within the framework of the Central American Integration System (SICA), and harmonizing countries' efforts to respond to the regional agenda. In addition, since 2009, the Project has undertaken regional work aimed at involving the business sector in the response to HIV and dialog exchanges, at the regional level, among leaders of the business sectors. Subsequently, the exchange of experiences expedited countries' involvement, and encouraged each one to start developing its leadership to mobilize companies in order for them to develop their HIV workplace policies. The strategic alliance with REDCA+ continued.

USAID/PASCA's participation in the Regional Coordinating Mechanism, as well as the flexible scheme to opportunely and effectively adapt technical assistance to regional technical, programmatic, and policy needs and junctures, allowed immediately identifying the needs and opportunities that were strategically used to support regional entities, such as the CCM, to position the regional HIV agenda at the highest level.

During its third year, USAID/PASCA, in conjunction with the CCM, developed terms of reference which included technical-assistance priorities for the next two years, within the framework of implementing the Central American and Dominican Republic Regional HIV/AIDS Strategic Plan 2010-2015, as well as the project's lines of work. A Letter Agreement was executed for USAID/PASCA-CCM's regional cooperation in support of implementing the Regional Strategic Plan and the Regional HIV Monitoring and Evaluation Plan for Central America.

Since then, lines of work that facilitated the expansion of substantial processes have contributed to the accelerated expansion of the regional HIV agenda.

USAID/PASCA's activities with a regional focus responded to three project results: 1. HIV plans budgeted, monitored and evaluated; 2. HIV Advocacy Agendas effectively implemented; 3. The business sector involved in the response to HIV. As of year 3 of the project, these results were incorporated into the five-year HIV Partnership Framework between the United States and the Governments of the Central American Region (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, and Panama), and The President's Emergency Plan for AIDS Relief (PEPFAR). At the regional level, no specific technical assistance was provided within the project's results framework in the first year, which focused on developing and implementing policies to mitigate the HIV/TB co-infection.

Central American Health Plan

Similarly, technical assistance at the regional level contributed to three PEPFAR indicators, such as: 1. Number of organizations with technical assistance on strategic information; 2. Number of individuals trained in strategic information; 3. Number of local organizations with technical assistance to develop HIV policies, and 4. Number of organizations with technical assistance to strengthen institutional capacities. Following are the main advances achieved with support from activities with a regional focus.

2.2 Belize

When the project started, Belize had an HIV National Strategic Plan for the 2007-2012 period. It also had an AOP 2009-2014, which somehow had replaced the NSP, since in the process of developing the AOP, adjustments, and updates were made to its guidelines and priorities. The AOP was used by NAC as a planning tool during 2009. A National M&E Plan had been developed with the previous HPI/TOI project.

Activities aimed at achieving Result 1: HIV Plans budgeted, monitored, and evaluated

Approval for the National HIV Monitoring and Evaluation Plan. Since March 2009, USAID/PASCA has again taken up the process to develop the Monitoring and Evaluation Plan for the Response to HIV, which had begun with HPI/TOI. During its review, proposed indicators were harmonized with the ones used for the Global Fund project. This process was completed in September 2009, when the document was made official.

Technical assistance to develop M&E capabilities. During the last 2009 quarter, USAID/PASCA provided technical assistance to the person in charge of M&E at NAC, who established the bases to implement the monitoring and evaluation system defined in the National Plan, along with the M&E Committee. These bases included defining the software to be used for data-gathering purposes, as well as identifying the key entities that were feeding the database.

Official report on national epidemic indicators. USAID/PASCA provided technical assistance to develop the UNGASS 2010 report, which was submitted by country on March 31, 2009. In order to present this report in a timely way, working meetings were facilitated during the first quarter in order to harmonize criteria among the organizations working on the response, in regard to the way in which data were delivered and how they were consolidated and validated. In this report, the country provided information on 15 out of the 25 UNGASS indicators, which in turn represented 15 out of the 29 indicators included in the National M&E Plan (52%).

Study on monitoring NSP implementation. On two occasions, the concept, importance, and potential information generated by this study were presented to NAC, with the aim of securing its endorsement for its execution. Finally, in July 2010, a committee was constituted, in which NAC, civil society, FBOs, and cooperation agencies were represented, in order to accompany and endorse the execution of the study. This study was completed in February 2011.

Proposal submitted to the Global Fund, Round 9. At the start of 2009 actions were agreed on with NAC in order to provide technical assistance to develop an HIV proposal aimed at the Global Fund for Round 9 funding. At that time, USAID/PASCA reviewed and updated the costs of HIV interventions. To that end, it used the costing exercise performed at the end of 2008 with HPI/TOI, and coordinated the search for and update of data with the organizations working in the country. The costs vouched for by these organizations were subsequently used to develop the budget for the Global Fund proposal and to cost the Operating Plan 2009-2014, which was the guide to undertake planning.

In April 2009, USAID/PASCA led the process to review recent epidemiological data, and proposed to the national technical team in charge of drafting the proposal for a logical framework to review the general strategy. It was accepted, and this simplified the consensus on the changes that were necessary to achieve coherence in aspects pertaining to prevention, care, and the type of epidemic that prevailed in the country. USAID/PASCA worked closely with the person in charge of Monitoring and Evaluation at NAC,

with the aim of guiding the gathering of basic data to develop the proposal for indicators, coverage, and goals for the GF project. In May 2009, NAC sent the proposal to the GF. Belize officially received notification of the approval of the HIV proposal submitted to the Global Fund for R9, and it officially signed its first grant for US\$2.1 million.

Technical assistance to prioritize HIV indicators in the country. In 2011, USAID/PASCA provided technical assistance to the country in order to prioritize the basic package of 26 national HIV indicators. In December 2011, UNAIDS disseminated a new format to report UNGASS indicators in the country. This format included 30 indicators that had to be reported. When comparing the basic indicator package with the new UNGASS indicator format, it was possible to verify that 23 of them concurred, 7 indicators were not included, and out of these, 5 pertained to drug users, which was not a priority issue in Belize. In view of this, NAC summoned its M&E Sub-Committee to review the basic indicator package, with USAID/PASCA technical assistance, and to ensure that they were in accordance with UNAIDS guidelines. USAID/PASCA provided technical assistance to the M&E Sub-Committee to examine and develop the report on the prioritized HIV basic indicator package. Based on this, the Sub-Committee agreed to review the National M&E Plan.

Reviewing the National HIV M&E Plan. NAC expressed to USAID/PASCA its interest in updating the National M&E Plan, so that its term would be coherent with the new National HIV Strategic Plan 2012-2016, which was approved with USAID/PASCA technical assistance on July 19, 2012. USAID/PASCA started to provide technical assistance to NAC's M&E Coordinator in order to review the list of indicators prioritized in the country, and to validate the new National M&E Plan.

Strengthening NAC's M&E Sub-Committee. USAID/PASCA's investment in building capacities with this committee helped its members to better understand the importance of having an HIV basic indicator package as part of permanent monitoring and a results framework. Before this capacity was developed, understanding the concept of having an HIV indicator package as part of a National M&E Program, which would guarantee opportune data gathering, was a challenge for Committee members. Rather, Committee members' attention centered on following up UNGASS every two years. This situation changed for the better in the country.

Following up recommendations to strengthen the HIV Information System. On February 12, 2012, USAID/PASCA presented a summary of the recommendations in the Report to Strengthen the HIV Information System to NAC's M&E Sub-Committee. Some recommendations that stood out were to review bottlenecks in information flows for national HIV indicators, and to develop a research agenda for the country. These recommendations were incorporated into the M&E Sub-Committee's Action Plan 2012.

Technical assistance to prepare annual reports. USAID/PASCA provided technical assistance to NAC in order to present the UNGASS 2010 report. To that end, several working meetings with NAC M&E Sub-Committee were facilitated. At these meetings, indicators, their interpretation, and the gaps in the actions on the epidemic promoted by the country were jointly reviewed. This report was opportunely presented on March 31, 2012.

Implementing the Central American Diploma Course on Monitoring and Evaluation. In 2011, several attempts were made to secure the academic endorsement for the diploma course at the national level. Inquiries were made with the University of the West Indies and with the University of Belize. The former university could present an offer, but USAID/PASCA had the constraint of the geographical code to mobilize Caribbean professors. Subsequently, this restriction was eliminated for Caribbean countries, but the financial proposal submitted by the university was well above the costs paid in the region and even

in the country. USAID/PASCA was able to arrange the implementation of the Diploma Course on M&E in the middle of 2013, through joint efforts by NAC, the Ministry of Health, and INCAP. This institution was hired to implement the diploma course, which had to be adapted to the virtual model and two one-week classroom-setting sessions. In the end, 21 officials from local organizations graduated in March 2014.

Monitoring and evaluation training for Global Fund project sub-recipients. Along with the coordinator of UNDP, the principal recipient, USAID/PASCA held a 4-day training workshop aimed at project sub-recipients in March 2012. USAID/PASCA provided technical support so that this workshop would be based on the data required for the national HIV information system, with information routinely used and provided by this project.

From April 25 through 27, 2012, USAID/PASCA trained 18 individuals on Monitoring and Evaluation of Global Fund Projects. These 18 individuals were staff members of the Global Fund Project, sub-recipients, and/or NAC members. The course provided for a review of basic M&E concepts and furthermore, it centered on supervising performance. The Global Fund on-line software was used as a guide for the Certified Performance-Monitoring Training program. The framework to supervise the results of Belize's Global Fund Project was reviewed and analyzed. Training also let participants apply what they had learned, making specific recommendations to improve the performance of Belize's Global Fund Project. These recommendations were adopted by organizations in the training session. The recommendations pertaining to changes in the Global Fund project were submitted to the CCM for decision-making purposes.

Study about HIV and MARPS stigma and discrimination. On August 9, 2012, USAID/PASCA facilitated a work session on the findings of the stigma and discrimination study performed in Belize at the beginning of 2012. A total of 22 participants attended the working session. Participants commented that responses were more polarized than in the 2009 study (respondents strongly disagreed or strongly agreed). In general, participants viewed the polarization of the results in the national context, in which FBOs had a very active participation, either positive or negative, in some cases related with stigma and discrimination. Participants acknowledged that, stemming from public presentation on these issues, Belizeans were better informed about the issues of HIV stigma and discrimination.

Study on the progress of the policy response to HIV. USAID/PASCA hired a consultant to apply the methodology aimed at developing this index in the country. This consultant facilitated the process to achieve consensus for the responses by civil-society organizations, cooperation agencies, and government. The meeting took place on March 28, 2012. This report showed the low levels of political commitment to implement HIV policies and programs in Belize. One of the main areas in which performance was low was in creating a policy and a legal environment for HIV programs. Even though NAC performed an exhaustive exercise to determine what laws were needed to modify or repeal the new laws that could be developed, no measures were taken to apply those recommendations. Rather, there was a constant high level of stigma related to HIV and there was discrimination against vulnerable populations. The report also showed that civil society did not consider its participation significant. The report was included in the UNGASS 2012 report.

National HIV estimates exercise. As part of the group of Caribbean countries, two Belize epidemiologists participated in a workshop on HIV estimates in June 2011. USAID/PASCA providing support by providing the information used as the basis for this exercise. In addition, it secured the commitment of the Ministry of Health to hold a workshop where these data would be socialized in July 2011.

National AIDS Spending Assessment –NASA– 2008-2009. From January through June 2010, USAID/PASCA held two national workshops on the NASA methodology, filling out matrices, and partially validating generated data. Individual follow-up was also provided to 28 organizations that furnished their data to deliver/ receive information. In July 2010, this exercise was completed, results were presented and discussed along with NAC, and this mechanism approved the publication of the document, which was funded by USAID/PASCA. On August 31, USAID/PASCA facilitated a workshop to launch the MEGAS 08-09 report and the dissemination of UNGASS 2010 indicators, in an official ceremony in which Belizean Government officials, NAC members, Civil-Society Organizations, and Cooperation Agencies (21 attendants) participated.

Developing the MEGAS 2010 Report. On November 17 and 18, 2011, USAID/PASCA facilitated the first workshop to build capacities aimed at applying the MEGAS 2010 methodology in Belize. 17 individuals participated. This activity was implemented in close cooperation with NAC. USAID/PASCA gathered information, cleaned the database, developed preliminary results, and facilitated the session to discuss these results with various actors participating in the national response to HIV. The data from this exercise were included in the UNGASS report 2012. An executive summary with data from this exercise was made official in the country in September 2012, within the framework of the Phase II proposal, to provide continuity to the project funded by the Global Fund.

Developing the National HIV Strategic Plan 2011-2013. As per NAC's request, USAID/PASCA, hired the services of a local consultant to develop the National HIV Strategic Plan 2011-2013. Concurrently, NAC requested that the Operating Plan for the same period also be developed. A term of three years was defined, as the country expected to implement short-term strategies to ensure effective changes in the course of the epidemic.

The consultant hired by USAID/PASCA defined and implemented a participative process to develop the new plans. Validation meetings were held with a technical group especially constituted for that purpose. On March 29, 2011, after incorporating multiple inputs from the working group, the document for the National HIV Strategic Plan and Operating Plan 2011-2013 was approved. This document, which incorporates the two plans, was presented to NAC's plenary and to the office of Belize's Prime Minister.

Technical assistance to develop M&E capacities. In coordination with UNDP, as principal recipient of the Global Fund project, USAID/PASCA held a national workshop to analyze the gaps existing in the HIV monitoring and evaluation information system, on January 2011. For this workshop, USAID/PASCA hired a consultant to facilitate consensus, and systematized existing gaps in a matrix, according to Global Fund's latest requirements. These inputs enabled the country to continue fulfilling the requirements to implement the HIV proposal approved for Round 9. In April 2011, USAID/PASCA developed a Workshop Report on the analysis of gaps in the HIV M&E information system and its corresponding action plan. This document was validated in a workshop in which all the organizations working in the national response participated.

Prioritizing a set of indicators to report on monitoring the epidemic. As follow-up to implementation of the Action Plan to Strengthen the HIV M&E Information System, USAID/PASCA proposed and hired a consultant to identify and prioritize national epidemic indicators. In July 2011, a multi-sectoral workshop was held to prioritize a basic package of indicators for the country. With that purpose, the methodology proposed by USAID/PASCA was used. Sectoral meetings were necessary to discuss some indicators that were agreed on in the end. As part of his responsibilities, the consultant also performed a diagnosis of the information flows on prioritized indicators.

Workshop to build capacities on the use of the Resource Needs Model. USAID/PASCA held a workshop to train participants on the use and application of the Resource Needs Model –RNM–. The workshop was held on March 14 through 21, 2011, and representatives from the Ministry of Health's

Planning Unit, the National AIDS Commission, Social Security, and the United Nations participated. The group that was trained subsequently costed the National HIV Strategic Plan and the Operating Plan 2011-2013. With this workshop, USAID/PASCA contributed to building local capacities to manage the tools that expedite economic analysis on the impact of the HIV epidemic.

Study on NSP implementation monitoring. USAID/PASCA performed this study in the last 2010 quarter. The consultant who was hired performed 32 interviews with designers and implementers of this national policy. Data from these interviews were tabulated and the first presentation was generated. This was validated with the inter-institutional committee in February 2011. The results of this study constituted the input for the NSP 2006-2011. The report was completed and published in September 2011.

Technical assistance for the Global Fund HIV project. Coordination began with the UNDP, Principal Recipient, to execute the first R9 HIV sub-grant. These coordination efforts materialized in the first workshop to establish the gaps in M&E systems. The Global Fund led an evaluation on the implementation of the project funded by Round 9 in Belize. One of the most outstanding results was the progress achieved by the country in strengthening its Information System, since it developed a specific action plan used to work on priorities. USAID/PASCA supported the procedures to expedite the appointment of Dr. Peter Allen as the contact person in the Ministry of Health, the Global Fund sub-recipient. These procedures supported implementation, as a clear communication channel was established in order to execute activities.

Updating the National M&E Plan. USAID/PASCA provided strategic information to promote measures aimed at updating the National M&E Plan, which was reviewed and updated based on the exercise to prioritize indicators performed in the country. The final document on the HIV M&E Plan was submitted to the Global Fund in order to comply with one of the requirements previous to signing the contract for Phase 2 of the Project in Belize.

Progress report on the response to HIV 2013. At the January 25, 2013 meeting, NAC's M&E Sub-Committee announced that it must develop an annual report for UNAIDS. The format for this report was not available until the end of January 2013. The new format was shared with all M&E Sub-Committee members at the February 6, 2013 meeting. There, the M&E Sub-Committee discussed the way in which to address the development of the UNAIDS Annual Report would be addressed, and how this would impact on Belize's annual report on the HIV basic indicator package.

In February 2013, the M&E Sub-Committee reached an agreement on how the National HIV M&E Plan would be used to develop the Annual Report 2013. The process to prepare this Annual HIV M&E Report was merged with the process to produce the Report on the Global Response to AIDS 2013, which was delivered on March 31, 2013.

Mid-term evaluation of the National HIV Strategic Report 2006-2011. In the last 2010 quarter, USAID/PASCA lobbied with NAC representatives in order to underscore the need to perform a mid-term evaluation of the National HIV Strategic Plan. As a result of these efforts, NAC performed the NSP Mid-Term Evaluation. Assistance was offered for this purpose; however, NAC accepted the services of a University of Florida volunteer (Jackie Ellison) to perform the NSP evaluation and to develop a proposal to adapt and update the NSP for the 2011-2013 period.

The deliverable submitted by the volunteer contained an analysis of NSP gaps and indicators, which constitute the input for the NSP evaluation. They were developed by the volunteer along with the NAC Director. In January 2011, this process was taken up again as part of the multi-sectoral NSP 2011-2013 evaluation and update, by means of a consultancy hired by USAID/PASCA (Martha Carrillo). The first workshop on information and consensus for the evaluation procedure was held on January 21 and 22,

2011. USAID/PASCA facilitated the whole process, contributed input on preliminary data of the HIV policy implementation (tool), and about the policy environment, measured by the AIDS Policy Index – API–, NASA 2008-2009. Several meetings to seek consensus on performing the evaluation were also funded, and the summons to various sectors was supported to guarantee ample participation. In the end, existing gaps were established for each one of the three strategic objectives of the Plan: harmonization, prevention, and mitigation. This became the evaluation of the National Strategic Plan 2006-2011.

National HIV Strategic Plan 2012-2016. In August 2011, NAC established a Working Group that updated and reviewed the National HIV Strategic Plan 2012-2016. UNAIDS and USAID/PASCA coordinated the follow-up required to make official and publish this new document. During the review, USAID/PASCA ensured that the gaps identified and measured in the latest AIDS Policy Index –API– measurement were included, as well as the issues of sexual and gender-based violence among groups vulnerable to HIV. The Strategic Plan was to be published by NAC in January 2012.

The NSP was completed in January 2012. Its review by Belize’s Council of Ministers (Government Cabinet) had been foreseen for the end of that same month. However, due to the political situation in the country as a result of the confrontations regarding MARPS and HIV, and the electoral campaign to elect their highest authority (Prime Minister), reviewing this plan was postponed until the first days of April. Faced with this situation, USAID/PASCA worked along with NAC’s Executive Director in order to review and modify the language of the National Strategic Plan. One of the inclusions fostered by USAID/PASCA was a language that increasingly favored human rights and HIV, without any specific reference to the human rights of MSM or specific references to school plans. USAID/PASCA worked along with its FBO allies and provided information to NAC’s President so that she could promote the favorable approval of this plan in the Council of Ministers. Finally, in May 2012, the plan was approved and it was printed with funding from USAID/PASCA. This was a momentous achievement for the country.

HIV Operating Plan 2012-2014. UNAIDS completed its review of this document, which was developed with USAID/PASCA technical assistance. The document, aligned with the new NSP 2012-2016, was published in May 2012.

District Plans aligned with the National HIV Strategic Plan 2012-2016. On September 7, 2012, the USAID/PASCA Country Representative, in a joint effort with the National Aids Commission, disseminated the National HIV Strategic Plan 2012-2014 in the San Ignacio District. In this session, the Regional Committee reviewed its by-laws and adjusted its annual operating plan to make it coherent with the strategic lines in the national plan. Similar processes were undertaken in the other 6 districts in the country.

Implementing the HIV project funded by the Global Fund. At the end of January 2012, the second quarter of the Global Fund HIV Project came to an end. The data showed that the project achieved planned objectives in most of the technical areas. Three issues that had not been completed/achieved were also highlighted: 1) A campaign to promote HIV testing, aimed at young people, MSM and FSW; 2) the goal related to viral-load testing for people living with HIV, and 3) the health information system, which did not progress.

In view of these delays, USAID/PASCA planned, along with UNDP, Principal Recipient, a training event on M&E for sub-recipients, which was held from April 25 to 27. As a requirement for this training, an on-line course provided by the Global Fund was held, with USAID/PASCA support. 15 individuals participated in this virtual course.

As follow-up to an M&E training workshop, USAID/PASCA organized the link between the GP Project Coordinator and the Ministry of Human Development, so that they would meet with the physicians in

charge of the clinic specializing in HIV positive people. The Ministry of Human Development was in the process of preparing an official document that provides psycho-social services to people living with HIV, for whom access to other clinical services and nutrition services was also being sought. This new PASCA agreement helped the Ministry in its compliance with the working objectives relating to the project funded by the Global Fund, which sought to close the gaps in health services that were being provided to people living with HIV.

On May 21 and 25, 2012, three members of the Principal Recipient attended the workshop for Global Fund main beneficiaries. There, they were given guidance on the need to develop a Phase II proposal to continue the project being funded by the Global Fund for years 3 to 5. USAID/PASCA worked with this group and NAC in order to define the main components of this proposal; administrative procedures were undertaken at USAID/PASCA, and a consultant was hired to systematize and consolidate this proposal, which was submitted by the country on September 14, 2012. The regional coordinator of USAID/PASCA's M&E regional strategy completed the financial gap analysis that was attached to the proposal.

On October 1, 2012, the Local Fund Agent (ALF) visited Belize in order to review Phase 2 of the Request to Renew the Global Fund grant. He met with members of the Technical Working Team who developed the proposal, including USAID/PASCA, which is a member of this Technical Working Group. The ALF team identified two main issues that had to be addressed: a) Ensuring that the grant budget did not exceed 90% of the total sum to be requested, and b) that the proposal reflected that at least 50% of the grant was invested in MARPS activities. In order to achieve this, the ALF recommended that the CCM reduce the two main line items in the budget: a) Operational costs of the Principal Recipient's (UNDP) Project Management Unit, and b) the cost of information deposit in Belize's Health Information System. The Principal Recipient reduced its costs and increased the activities aimed at MARPS. The Ministry of Education also agreed to provide HIV instruction to secondary-school students. These changes were presented on November 2012. USAID/PASCA worked very closely with the Executive Director, Dr. Martin Cuellar, in order to negotiate these changes and to develop the clarifications sent to the Global Fund.

Proposal for Global Fund's Phase II HIV Project. On January 4, 2013, the CCM Supervision Committee asked USAID/PASCA to support the process by developing a theoretical study on the situation of MARPS in Belize. At that Committee meeting, UN agencies were not present. During the joint mission of the Global Fund and USAID, it became evident that UN agencies were not convinced that USAID/PASCA should be the one to perform the MARPS evaluation. While USAID advocated for care to be aimed at MSM, female sex workers, and people living with HIV, UN agencies were advocating only on behalf of the general youth population.

In April 2013, the USAID/PASCA document on a MARPS review was distributed to members of the CCM. The document highlighted the key challenges and gaps pertaining to reducing stigma and discrimination, bio-medical interventions, and psycho-social support services for people living with HIV (including children), men who have sex with men, and female sex workers.

UNAIDS consistently reiterated that it would not validate the MARPS Situation Analysis nor the Action Plan, unless they had a leadership role in its development. To that end, they hired the services of Mar. Joe Hendrikx to complete the MARPS Situation Analysis with the data from the USAID/PASCA review document. Mr. Hendrikx also developed a MARPS Action Plan that was submitted to the Global Fund on June 30, 2013

On August 15, 2013, the proposal for \$211,973.00 funding was approved by the Global Fund; the remaining \$215,040.00 would have to be re-programmed or a justification would have to be submitted, since they were funds for conditional transfers related to mitigating the epidemic. The country submitted

a counter-proposal to the Global Fund, posing the argument that there were data available in the country to substantiate continued support for mitigation processes. At the end of September, the Global Fund approved this budget realignment.

Activities aimed at achieving Result 2: HIV Advocacy Agendas effectively implemented

When USAID/PASCA started to implement its activities aimed at achieving this result, it approached the Cornerstone Foundation and the BEST Organization, with the purpose of identifying the dynamics of civil-society organizations inasmuch as advocacy was concerned. As a result of the meetings held with these organizations, it was ascertained that the social auditing processes in the country were very incipient.

Later, USAID/PASCA implemented technical assistance and training activities aimed at strengthening the HIV advocacy agenda. To this end, it held several meetings with civil-society organizations, among them, Alliance against AIDS; Women's Issues Network of Belize; Belize's Family Life Association; the Red Cross, UNIBAM, and the Youth Advocacy Movement. Subsequently, the above organizations were summoned by USAID/PASCA to a workshop whose topics included advocacy, analyzing priorities, and defining the policy agenda. Based on this workshop, which was held in May 2009, the National HIV/AIDS Advocacy Committee was created, with the purpose of causing impact on policy implementation and financial-resource allotment. From June to September 2009, this committee held analysis meetings that enabled it to identify the gaps in the national response to HIV. This was the main input to plan advocacy actions.

Strengthening advocacy and policy-dialog capabilities. Technical assistance continued to be provided to the National HIV Advocacy Committee, which was established in mid-2009 with support from USAID/PASCA, composed by seven institutions/ organizations working on HIV/AIDS programs and projects. The technical assistance provided during the last 2009 quarter entailed holding meetings and workshops that allowed discussing advocacy basic concepts, the role of civil society, the steps to develop policy impact campaigns, coordination lines, and the roles of participants in the activities that would be undertaken, among other topics. In conjunction with these organizations, areas for advocacy actions that the group could undertake were determined; a power map was defined; concrete goals and objectives that the group could work on were established, and the first Action Plan 2010 was developed. The objectives in this plan centered on eliminating operational barriers hampering communities' access to HIV services, mainly those relating to the stigma and discrimination existing in health services, and the accessibility to testing and counseling services.

Advocacy campaign to ensure equitable services. Technical assistance was provided to the National HIV Advocacy Committee, in order to design and hold an advocacy campaign. With that aim, sessions to analyze the policy environment were facilitated using the 2009 API results, which showed the need to increase the authorities' policy commitments and the lack of information on monitoring and evaluating the epidemic, among other aspects. In addition, an analysis on the conditions of funding for the epidemic was discussed with the group, using data from NASA 2008-09 and information on the findings of the study on Quality of the Services at the Volunteer Counseling Centers, which was performed by the Committee. Based on these sessions, the first advocacy objective was defined: To achieve a change in the counseling services to perform voluntary testing. The committee defined the Minister of Health as the key audience, and drafted a document in which they posed their demands and their proposals to review and change the protocol to provide services. On September 23, this document was officially delivered by the Committee to the Ministry of Health and the NAC Director, with whom they discussed the demands that were submitted. It was possible to have the Ministry of Health give a written response to these demands, and to express its commitment to review the protocols to deliver services, which would be performed jointly.

In order to fund these activities, USAID/PASCA awarded a small grant to the National Advocacy Committee represented legally by WIN-Belize.

Diagnosis to strengthen MARPS organizations. Based on the regional protocol approved by USAID for this diagnosis, a local consultant was hired and trained, and she performed a series of interviews that allowed gathering information on MARPS groups and organizations. On June 22, 2011, the first results were delivered and the diagnosis was validated. Participating groups and networks contributed to this validation, providing inputs that were incorporated into the document. Main opportunities for strengthening include the lack of consensus in strategic and operating planning; involvement and representativeness in network efforts, and the training needs to strengthen field personnel in prevention protocol implementation.

Involvement of Faith-Based Organizations. On June 13 and 14, 2011, USAID/PASCA held a workshop on the involvement of Faith-Based Organizations. To that end, it used the guide “El VIH y las iglesias: Respuesta desde las Comunidades de Fe”, which was translated into English: “HIV and Churches: Response from within Faith Communities”. Most Christian organizations present in the country attended the workshop. As part of the joint work actions in the national response, USAID/PASCA facilitated prevention and reference campaigns executed by the HUMANA organization and the Ministry of Health in 24 villages in the Orange Walk municipality. Based on this process, channels to engage in joint work in additional municipalities were established.

Advocacy campaign to repeal the Sodomy Law (Article 53 of the Penal Code). USAID/PASCA provided technical assistance to UNIBAM, the organization that is leading the advocacy campaign to repeal the current Sodomy Law. On June 16 and 17, USAID/PASCA facilitated a workshop in which UNIBAM, Belize’s Human Rights Commission, and NAC participated, with the aim of performing a balance of the achievements, challenges, and lessons learned during the first stage of the advocacy campaign. This reflection allowed focusing on a new advocacy stage, which will be evidence-based and will center on respect for human rights. The campaign was re-focused in order to lower the profile of the media confrontation and avoid direct confrontation with authorities. During the working session, the group considered that the Government Cabinet’s approval of the NSP was favorable, since human-rights and HIV components were incorporated in it. The new plan provides an official framework for the work undertaken by UNIBAM and to mobilize new allies, such as a group of FBOs trained by USAID/PASCA.

Advocacy campaign to approve the HIV NSP. USAID/PASCA provided technical assistance to NAC, the Policy and Legislation Sub-Committee, UNIBAM, Network of People Living with HIV, and Belize+RESTORE (A program for Belize City established by the Prime Minister) to advocate for the Cabinet’s approval of the NSP 2012-2016. This advocacy campaign started by establishing the goal “Official approval of the National Strategic Plan 2012-2016 without any reservations”. It also included appointing allies, opponents, and neutral parties and developing a key message to be shared by the most strategic allies identified by the policy-mapping exercise. The message of the campaign was: HIV/AIDS cases are mainly concentrated in Belize City, and they mostly involve creole men and women in poor and violent communities, where the most numerous block of voters for the current Government live. Approving the NSP 2012-2016 allowed the government to applaud this policy action as a great achievement of its first 100 days in government (March to June 2012).

Advocacy campaign for rapid HIV tests. USAID/PASCA worked with the Network of People Living with HIV, CNET+, to develop an advocacy campaign seeking access to viral-load testing services in Belize. Viral-load tests were not being performed on positive HIV individuals in the country, although Global Fund funding was available to perform them. Thus, it was necessary to mobilize political will. USAID/PASCA informed all NAC members and attendants to a USAID agencies’ project meeting about

the proposal that it was developing to help CNET + with this campaign. All international agencies, as well as NAC's Executive Director, agreed that this was a priority for the national response to HIV. UN agencies subsequently mobilized an expert to visit Belize and to perform an evaluation on Belize's capabilities to provide viral-load testing. The result was the evidence that supported the advocacy campaign. During this process, the Ministry of Health sent a communiqué stating that viral-load tests would start to be performed in Belize and that, meanwhile, blood samples would be sent to Panama in order to perform these viral-load tests. Both USAID/PASCA and CNET+ were surprised at the rapid response from the Ministry of Health at this time, since more than 3 years had gone by since CNET+ members were demanding access to viral-load tests in Belize.

Strengthening the WIN-BELIZE organization. USAID/PASCA provided technical assistance to the WINBelize organization in order to develop a proposal for the advocacy work that would be undertaken. This proposal was aimed at building WINBelize members' capacities, especially those members working in the National HIV Advocacy Committee, in order to raise awareness on issues such as human rights, national planning, and the interventions that are necessary. The proposal focused on providing human-rights instruction to HIV-policy leaders and managers (topics included: International Human Rights Framework, National Legislative Framework, Gaps in Existing Legislation, Existing Protocols and Practices, and an exchange of experience among MARPS regarding human-rights issues). USAID/PASCA provided technical assistance to develop WIN Belize's Strategic Plan. A workshop was held on June 22 and 23, 2012 in order to define the focus of this organization to work on advocacy and policy dialog along two lines: 1) Human Rights, HIV Stigma and Discrimination –shaping new leaders–; 2) Linkages among gender, sexual violence and HIV. Insofar as administrative aspects are concerned, USAID/PASCA provided technical assistance to this organization so that it complied with the requirements to become a sub-recipient of the project funded by the Global Fund.

Strengthening the Trans group to work on HIV issues. On March 24 and 25, 2012, USAID/PASCA Summoned to a meeting where 8 trans-gender individuals participated as representatives from the country's districts. Participants at that meeting stated that this was the first time they had met in order to learn about and analyze their situation in regard to the epidemic. Due to the high degree of stigma and discrimination in the country, these types of meetings were not common. The objectives of the meeting were: To share the results of the study on stigma and discrimination toward HIV that USAID/PASCA had performed in Belize in 2009 and 2011; to share the results of the study on the trans-gender population that had been completed in Belize in 2011. This group of persons, who were almost invisible in the country, recognized the importance of having a work plan on HIV issues, and USAID/PASCA provided technical assistance to draft it. Through USAID/PASCA technical assistance, the leader of this group was invited to participate in the CCM as a representative of the Belizean trans-gender population. This was part of the process to make this population increasingly visible in view of the HIV epidemic.

Training workshop on HIV advocacy and policy dialog. USAID/PASCA held a training workshop on advocacy, policy dialog, and proposal management for advocacy campaigns, aimed at MARPS, from February 29 to March 2012, 2012. Thirty-two participants representing the following organizations attended the workshop: Alliance against AIDS; People Living with HIV Network of Collaborators; Tikkun Olam Sex Workers' Association; UNIBAM, a MSM association, and Youth Health Services, an organization working with women who are victims of sexual violence. The training focused on the technical aspects that must be included in advocacy campaigns, policy analyses, definition of objectives, and the dissemination of clear messages, among other issues.

National Forum on HIV Research. On August 28 and 29, 2012, USAID/PASCA and the National AIDS Commission organized a National Forum on Stigma and Discrimination against HIV and MARPS. A total of 80 participants attended, most of them representing civil-society organizations and international

agencies. All the studies showed a high overall level of stigma and discrimination in Belize, especially among policemen, immigration officials, the Faith-Based community, and health workers. After Forum, UNIBAM, CNET+, and Tikkun Olam issued a Civil-Society Declaration on stigma and discrimination. They presented this declaration to NAC government representatives at their meeting held on September 6, 2012. This action was the first ever instance of civil society being led by the human rights movement in Belize. For the first time, MARPS came together to become a single voice in the matters pertaining to human rights that affect them.

Advocacy campaigns to gain access to viral-load testing and ARVs for children. Within this context, MARPS organizations presented two critical issues to the Meeting of the Care and Treatment Sub-Committee: 1) Access to HIV viral-load testing in Belize, and 2) access to Kaletra (a second-line treatment) for children with HIV. The members of the Sub-Committee supported the demands posed by MARPS organizations and drafted concrete recommendations to be proposed. USAID/PASCA was invited to become a member of the Care and Treatment Sub-Committee in view of its continued support to advance the advocacy initiatives by MARPS organizations in Belize.

Advocacy on behalf of HIV universal access. HIV advocacy initiatives in Belize were successful. The Ministry of Health began the process to provide access to HIV viral load tests in Belize, and started to purchase ARVs in suspension formula for children with HIV in Belize. The National Conference held by USAID/PASCA on stigma and discrimination was the catalyst for the advocacy campaign. The process included the following: a) Sharing HIV stigma and discrimination reports with MARPS and other HIV actors; b) CNET+, UNIBAM and Olam Tikkun developing a social-society declaration requesting access to viral-load tests and to ARVs (suspension formula) for children with HIV, etc.; c) establishing a small working group (CNET+, UNIBAM, Hand in Hand Ministries, USAID/PASCA, and the Executive Director of the National AIDS Commission) to advance civil society's request; d) presenting the group working on the viral-load tests and the children with HIV problems to the National AIDS Commission's Policy and Legislation Sub-Committee and Care and Treatment Sub-Committee; e) the Executive Director of the National AIDS Commission, placing these issues on the agenda of the Regional PANCAP meeting; f) CNET+ placing these issues on the REDCA+ agenda; g) the National AIDS Commission, CNET+, Hand in Hand Ministries, and USAID presenting these issues to the Ministry of Health's General Director; h) CNET+ presenting these issues to the National Assembly of HIV Partners, and i) UNDP (as principal Recipient of the Global Fund project in Belize) presenting these issues to the Ministry of Health's General Director, and j) CNET+ presenting these issues to the media. The media actively monitored this situation.

Advocacy: UNIBAM's constitutional challenge. USAID/PASCA supported UNIBAM in its planning a strategy to involve other civil-society organizations in the dialog on LGBT human rights in Belize. For over two years, USAID/PASCA provided technical assistance to this organization. Specifically, it helped to develop its communication strategies so that its messages would contain a clear human-rights perspective; it supported its search for strategic allies, and it shared strategic information. UNIBAM was able to mobilize financial resources to support its advocacy campaign. To date, the Supreme Court has not yet expressed its decision on this matter, and civil-society organizations are still waiting to be called to the hearing to resolve this case.

Advocacy: Immigration Law; immigrant prohibition based on sexual diversity. This law prohibits MSM and female sex workers from entering into the country. USAID/PASCA contacted the NAC President and Audrey Wallace, the General Director of the Prime Minister's office, to inform them of the attention being paid by the Diplomatic Corps to Belize's Immigration Law, due to the multiple restrictions placed on entering Belize. Mrs. Esquivel, who is also a member of Belize's Mental Health Association, stated that her association considers the law to be dated and discriminatory. As follow up,

USAID/PASCA, by means of its allies, promoted a meeting with the Honorable Hulse Godwin, Belize's Minister of Immigration to discuss and promote amendments to the Law.

Strengthening the Network of People Living with HIV. USAID/PASCA provided technical assistance to CNET+ to hold its National General Assembly, which took place on February 9, 2013. During the meeting, CNET+ members discussed the results of the ECVC and their contribution to the report on the Analysis of the Situation of MARPS. The new CNET+ representatives were elected. After this Assembly, USAID/PASCA provided support to CNET+ with a consultancy on strategic planning for that network, which started on March 08, 2013. In August 2013, the Network completed its strategic plan and started to use it, presenting three proposals for funding.

HIV studies analysis aimed at MARPS. On January 23, 2013, USAID/PASCA organized a meeting to share ECVC results with 12 MSM who are members of UNIBAM Board of Directors. Most of these MSM had participated in the Study. At this meeting, participants confirmed that, even though the study had been performed with a small sample (136 MSM), many of the problems faced by MSM in Belize were captured. On Thursday, January 31, 2013, UNIBAM replicated the session with MSM leaders in Orange Walk Town, using the format developed by USAID/PASCA. USAID/PASCA supported the MSM community in its dialog on how to use existing HIV data to advocate for MARPS-friendly policies, and HIV-prevention laws and programs in Belize.

The debate on national gender policy on sexual orientation. On May 16, 2013, the National Women's Commission officially launched the Revised National Gender Policy. The draft policy was retained by the Government for 3 years before it was approved by the Council of Ministers in April 2013. This National Gender Policy attracted the attention of media and generated a public debate. The heated debate on the progressive language of this policy led the Prime Minister and the leader of the Opposition (PUP) to publicly declare that it covered all individuals, including those with various sexual orientations. That was the first time that political leaders made these statements to the media.

Activities aimed at strengthening the response to HIV by way of processes to develop, implement, and monitor policies that address gender-based and sexual violence.

Changes in the policy to provide access to HIV PEP. USAID/PASCA provided technical assistance to the Youth Enhancement Services (YES) to develop a proposal that focused on reviewing the existing protocols to care for sexual-violence cases, in order to ensure that these protocols would include providing HIV post-exposure prophylaxis for MARPS populations. The YES organization submitted its proposal for a small grant to USAID/PASCA, and such grant was awarded.

In February 2013, YES held working meetings with civil-society organization. The small grant achieved its objective when the Ministry of Human Development published the guide for sexual-violence legislation, policies, and services, and the protocol for a multi-sectoral response to sexual violence. USAID/PASCA worked with YES in order to monitor the implementation of protocols for gender-based violence, especially in the health sector. In June 2013, the YES organization completed a series of 10 meetings to exchange information on National Protocols for the response to gender-based violence in Belize. A total of 144 most-at-risk populations were reached in these sessions. YES held meetings with young people who are victims of commercial-sex exploitation, male and female sex workers, other women, and people living with HIV. The meetings were held in cooperation with the Women's Department, Tikkun Olam, CNET+, BFLA, and PASMO.

Activities aimed at achieving Result 3: The business sector involved in the response to HIV.

Positioning the HIV issue within the business sector. USAID/PASCA invited the Director of the Chamber of Commerce and Industry to participate in a regional forum on HIV workplace policies, held in Guatemala in October 2009. There, she presented the document developed by the Chamber on implementing the National HIV Policy in the workplace with affiliated companies.

In close cooperation with the Chamber of Commerce and Industry, a USAID/PASCA consultant developed a diagnosis on the HIV situation in Belize's business sector. The document reflects the policy and legal framework for HIV in the workplace, the level of involvement of the various sectors, and the priorities of the work on this issue, as identified by members of this Chamber. On August 4, 2010, USAID/PASCA presented the results of this diagnosis at a workshop for 12 of the country's companies. The Belize Business Coalition, an organization that has supported the adoption of workplace policies, also participated in this activity. During this workshop, three firms implementing workplace policies gave their testimonies. Conclusions centered on consolidating efforts by the Belize Chamber of Commerce and Industry, the Business Coalition, the Ministry of Labor, and USAID/PASCA in order to provide the tools to develop and implement policies, as well as the opportunities to engage other companies that are interested in the issue. This effort was the first step to involve the business sector and to coordinate efforts with other mechanisms.

Political support to address HIV in the workplace. On September 27, 2012, the USAID/PASCA Country Representative invited 4 of the country's organizations to participate in the III Regional Forum on engaging the business sector in the response to HIV. The Forum was a catalyst to re-vitalize the actions on HIV workplace policies that had been initiated more than 10 years before in the country. USAID/PASCA was able to:

- Have participants provide strategic information on HIV to the Belize Chamber of Commerce and the Ministry of Labor, in order to advocate for a strong public-private alliance aimed at integrating HIV policies and programs into the labor sphere.
- Promote dialog and exchange of information on good practices to integrate HIV into the labor sphere.
- Coordinate a training event on HIV for 10 point persons of business-sector companies.
- Accompany 10 companies to develop their HIV workplace policies.

Training on HIV workplace policies. On October 24, 2012, USAID/PASCA officially delivered a copy of the Workplace Policy Builder tool to Clare Lamb, HIV Point Person at the Department of Labor. This delivery took place at a two-day workshop attended by the International Labor Organization (ILO), Caribbean Office, and the Belize Ministry of Labor. The objective of this workshop was to strengthen Belize's current HIV Education Program in the Workplace. USAID/PASCA provided training on how to develop and to adopt HIV workplace policies.

On December 6, 2012, USAID/PASCA facilitated a second training event on the tool to develop workplace policies. This workshop was aimed at 10 HIV Business Sector point persons and Labor officials. In this session, USAID/PASCA reviewed the results of the Survey on HIV Knowledge, Attitudes, and Practices 2011 (performed by the National AIDS Commission and the Ministry of Labor), shared the tool to develop the labor policy, used the tool, and identified the next steps to provide individualized technical assistance to each firm.

HIV workplace policies. In January 2013, USAID/PASCA followed up on the work it had initiated with HIV point persons at the Central Bank of Belize; Sugar Industry of Belize, Rodla Construction Company, Belize Maintenance, and Associated Physicians of Belize in order to develop their HIV policies. USAID/PASCA edited the drafts of the first 5 policies of the companies that had committed to developing them. Completing this process was a considerable challenge, since most of these firms did not have a point persons specifically assigned to that job. At the end of July 2013, 4 companies completed and adopted their HIV policies: the Hand in Hand Ministries, the Associated Physicians of Belize, the Rodla Construction Company, and Belize Telemedia Ltd.

2.3 Costa Rica

At the onset of the Project, Costa Rica had a National Strategic Plan 2006-2010 that was not costed, and that was impossible to cost, due to the lack of national data and deficiencies in the Plan itself. In addition, it had a Monitoring and Evaluation Plan for the same period.

Activities aimed at achieving Result 1: HIV Plans budgeted, monitored, and evaluated

In November 2008, the USAID/PASCA project presented to CONASIDA and to the various sectors working on the HIV epidemic the technical assistance that USAID/PASCA was offering in order to develop a National Strategic Plan in accordance to the type of epidemic that the country was facing, to establish the real costs of proposed interventions, and the coordination that should prevail in the work performed by the various sectors. After this presentation, USAID/PASCA supported the beginning of an exercise to review the Strategic Plan, promoting the creation of a committee that identified the gaps in the NSP, such as addressing the issues of commercial sexual exploitation, the lack of strategies to mitigate HIV/TB co-infection, and the lack of goals, among others.

In January 2009, USAID/PASCA took on the role of Technical Secretary for the committee to update the National Strategic Plan for the 2009-2013 period, with the purpose of its gathering and integrating the basic data on coverage, clear goals, costs for proposed interventions, and indicators to reflect its implementation. The aim of that updating was that the country be eligible to present HIV proposals to the Global Fund.

In order to identify the progress and challenges of the NSP 2006-2010 implementation process, in April 2009, USAID/PASCA applied a tool to monitor policy implementation (Policy Monitoring Implementation Tool-PMIT). By applying the PMIT, in July 2009, information was obtained and gaps were identified for the development process, which would later result in implementation. This information was discussed and analyzed in a session of the multi-sectoral Committee, and was considered when re-developing the NSP. The report on applying this tool was completed in the last 2009 quarter.

Producing country information to impact Global Fund eligibility. During the first 2009 quarter, USAID/PASCA supported the development of an HIV seroprevalence study in men who have sex with men –MSM– in the Great Metropolitan Area. This support consisted of facilitating logistical issues for two consultants. While gathering samples, a misinformation campaign reached the target population. In order to counteract this problem, in March 2009, USAID/PASCA implemented an informative activity aimed at MSM, in which the study was promoted. As a result, the number of participants in the study increased in the last two weeks of the month. In August 2009, the Ministry of Public Health officially reported to UNAIDS that there was 11% seroprevalence among the country's MSM. With this datum, USAID/PASCA helped to diminish the gap in the country's eligibility to opt for Global Fund funding.

USAID/PASCA summoned and facilitated the meetings of the National Monitoring and Evaluation Committee–CNMyE in Spanish. In July 2009, the Ministry of Health appointed two Directors within that institution to participate in the Committee. The Committee's meetings focused on the division of roles and responsibilities aimed at advancing the organizational ordering, so that, subsequently, the CNMyE, and thus its meetings, would be spaces to analyze, monitor, and evaluate the situation and the response to HIV. In September 2009, members of this committee and other officers from civil-society organizations were trained on strategic planning and the 12 steps to implement the monitoring and evaluation system.

As a result of this workshop, participants provided input to incorporate strategies and actions into the new NSP and to optimize the MyE system for the epidemic.

USAID/PASCA also supported the development of a diagnosis of the response to HIV in Costa Rica, gap analysis, actor mapping, and gathering the HIV legal framework.

In August 2009, the preparatory stages for API implementation in the country began, for the first-time ever. To that end, the methodology was presented and analyzed with CONASIDA, which also participated in developing the list of individuals to be interviewed. The interviews began in September 2009. Discussion of the results and the country report were completed during the last 2009 quarter.

Updating the National HIV Strategic Plan 2011-2015. USAID/PASCA acted as the Technical Secretary for the Inter-Institutional Committee that updated the National Strategic Plan. During the first 2009 quarter, the process to gather available information from the Social Security Fund, main producer of data on HIV services in the country, and other entities connected to the issue, was completed. After numerous consultations, in February 2010, the Committee presented the first draft. USAID/PASCA's participation focused on continuing to gather data in health-care centers and to develop indicators with the information that was available, comparing the objectives of the previous and the new plan with the type of existing epidemic, suggesting the appropriate indicators based on analyzed data, and facilitating the processes to attain consensus with the various sectors. The NSP document was reviewed and endorsed by health authorities. Historically, the development of the HIV Strategic Plan has been the only instance in which there has been multi-sectoral participation.

Costing the new National Strategic Plan 2011-2015. In June 2010, a series of consultations began in the country with the purpose of completing the data that were to be used in NSP costing. The main organizations implementing interventions on the epidemic participated in these consultations, among them: The Costa Rican Social Security Fund, the Ministry of Public Health, and civil-society organizations working on prevention. The meetings allowed validating the data generated by the AIM model (DemProject and Spectrum), and in addition, progress was made in the prevention section of the Resource Needs Model. In July 2010, progress was also made in reviewing the sections on care and policies. This exercise did not conclude until July 2011, when the endorsement of civil society and the Ministry of Health on the costs and available data was obtained.

Strengthening CONASIDA. As part of strengthening the national authority on HIV/AIDS, during the last 2009 quarter, USAID/PASCA promoted a process to analyze CONASIDA's structure to analyze the achievements and merits of having an organizational structure like the present one and to prioritize the review of national multi-sectoral entities in order to streamline them and to infuse them with increased representativeness so that they can respond to various processes such as NASA, UNGASS, the team constituting the CCM, the national M&E team, among others.

Strengthening the information, monitoring, and evaluation systems. As part of the *bridge* activities supported by USAID/PASCA to create a national HIV information system, a consultancy was performed to support data updating in the National HIV Surveillance System. In June 2010, the consultant finished updating the physical and digital records of all the new HIV cases in 2007 and 2008 in the six HIV clinics in the country, and trained eleven individuals in the CCSS HIV Clinics and five individuals in the Ministry of Health on how to enter data into the system. By means of this consultancy, it was also possible to deliver a Users' Manual for SINVIH data entry, which was the main training tool. An outcome of the USAID/PASCA coordination with the Social Security Fund, was to have professionals at the HIV clinics continue entering the data from the clinical records for the 2009-2010 period.

Later, USAID/PASCA, jointly with the Ministry of Public Health and the UNAIDS Country Representative, held a workshop to Strengthen the National Information System, HIV/AIDS M&E, from July 7 to 9, 2010, using a methodology proposed by USAID/PASCA for the whole region. There were 30 participants in this workshop, representing the Ministry of Health/ Epidemiological Surveillance / Analysis Directorate / Evaluation Unit / the Costa Rican Social Security Fund Clinics and Hospitals / National Statistics and Census Institute, and 5 NGOs. The workshop focused on discussing the main gaps in the national HIV information system, and developing a proposal for an Action Plan.

New National HIV/AIDS Strategic Plan 2011-2015. On December 2010, the new National Strategic Plan was launched by the Vice-Minister of Health. This was the outcome of a long process of reviews and validation facilitated by USAID/PASCA. The technical assistance provided by USAID/PASCA focused on: promoting the creation of a small committee within the CONASIDA to update the Plan. The USAID/PASCA Country Representative coordinated said committee, along with the Ministry of Health, throughout the whole process to develop and write the Plan; to identify the needs for and gather information; to analyze and organize information aimed at establishing goals and baselines; to cost, review, and incorporate final changes aimed at addressing the main strategies that would respond to the type of epidemic in the country; to perform the final editing of the document, and to validate, design and publish it.

Inter-Sectoral Operating Plan 2011-2012, based on the National Strategic Plan 2011-2015. The Ministry of Health, with technical assistance from the USAID/PASCA project developed the first Inter-Sectoral Annual Operating Plan based on the National Strategic Plan 2011-2015. For the first time, this process was undertaken with the awareness that this is the first way to implement a nationwide Strategic Plan. On numerous opportunities, the USAID/PASCA project lobbied on behalf of the recently-approved National HIV Strategic Plan so that it would become a policy with implementation mechanisms, among them, an Operating Plan. In order to develop this plan, the USAID/PASCA Country Representative led a series of sessions that allowed the multi-sectoral working group to make the NSP strategic objectives operative, thus establishing commitments and quantifiable goals that could be costed. Lastly, the consultant wrote the final document, and CONASIDA approved it in March 2011.

Workshop to develop capacities to use the Resource Needs Model. From February 1 to 4, 2011, USAID/PASCA facilitated a workshop on using and applying the Resource Needs Model –RNM–. At this event, 14 representatives of the Ministry of Health, the Costa Rican Social Security Fund, civil society, the National Statistics and Census Institute, and UNAIDS were trained. The aim of this workshop was to develop local capacities to apply and use the model. Participants requested that this workshop be complemented with training on the Estimates package, so UNAIDS assumed this commitment and held a workshop so that the country could work with its data using these programs and the RNM.

Prioritizing HIV Monitoring and Evaluation indicators. Developing the new HIV Strategic Plan required reviewing the National Monitoring and Evaluation Plan. USAID/PASCA worked jointly with a multi-sectoral committee to define indicators for NSP monitoring, considering that they would later become the new National Monitoring and Evaluation Plan. Due to the considerable number of indicators that existed, USAID/PASCA facilitated a methodology that enabled the committee to prioritize and select the NSP indicators that would be monitored. During the prioritization process, a challenge arose. Some entities in charge of the report expressed their misgivings about undertaking the commitment to report 18 indicators requested by the working group. However, USAID/PASCA responses focused on leading and facilitating the workshops to select indicators, promote analysis and commitment among the various parties, and show both the need for and the feasibility of the report on the 18 indicators, which was approved after a group analysis by the National M&E Technical Team.

Developing the National M&E Plan 2011-2015. With support from USAID/PASCA, the ETN MyE (National Monitoring and Evaluation Technical Team) appointed two working groups to develop the new M&E Plan for the national response to HIV. The groups progressed in their developing the datasheets for each one of the indicators and, even though reporting tools were identified and some flowcharts were developed, the ETN MyE decided not to incorporate any of these aspects into the Plan, since it was necessary to undertake further work in the country, in order to have the agreed-on tools and effective flowcharts. In July 2011, the ETN MyE held a one-day workshop, in which the first draft of the Plan was reviewed, with the aim of making the corrections and adjustments that were necessary for its subsequent validation. In August 2011 a validation workshop was held and the Plan was approved.

Developing the National Report on the HIV Situation. Based on the report on the basic indicator package prioritized by country, USAID/PASCA supported the development of the National Report on the HIV Epidemic Situation, which is based on the indicators that the country committed to report in 2011. This document was the result of the technical assistance provided by USAID/PASCA, which shared the vision with a multi-sectoral team to prioritize indicators; achieve commitments to deliver and generate data, and systematically report official information to be used by the country. It was developed, discussed, and analyzed with the National M&E Technical Team, which endorsed its publication.

Proposal for Global Fund funding. Costa Rica's Country Coordinating Mechanism, MCC, analyzed strategic information aimed at strengthening the Mechanism in its processes to manage funds for the national response to HIV. With technical support from USAID/PASCA, the group received guidance on Global Fund guidelines that dictate the establishment of the CCM, its structuring, members, by-laws, roles, and functions. Based on them, an analysis was undertaken on the steps required to reactivate the Mechanism. As a result of this meeting, it was decided that the Mechanism would be operationally reactivated as soon as possible. Two working commissions were constituted; one to update the set of regulations, whose new version was approved at the CCM session on July 20, 2011, and the other one to develop a critical path to draft a proposal that would be submitted to Round 11.

On June 15, 2011, Costa Rica was again incorporated into the Global Fund's list of countries that were eligible to access resources for their response to HIV. This achievement is in addition to the technical assistance from USAID/PASCA, which promoted an advocacy campaign in various decision-making spheres so that the country could be incorporated.

Approving the National M&E Plan 2011-2015. The National M&E Plan 2011-2015 was completed and validated in 2011. However, its publication remained pending due to the changeover of the authorities who had to approve it. In April 2012, the Vice-Minister of Health gave instructions that the note to present the document be signed by CONASIDA and not by her office, since the document had been developed by the previous authorities, but did endorse continuing with its publication.

Strengthening the National Monitoring and Evaluation Technical Team –ETN MyE. In October 2011, USAID/PASCA provided technical assistance to the ETN MyE to review the progress achieved in implementing its action plan 2011. Technical assistance entailed facilitating specific working sessions to review the ETN MyE Work Plan. In January 2012, USAID/PASCA provided technical assistance to develop an ETN MyE Action Plan 2012, which included an approach centering on production, analysis, and use of the information at the national level. At that time, technical assistance consisted of making a proposal to re-write the Plan, based on the actions that had not been executed in 2011, and based on the 12 M&E components. The Plan was approved in May 2012.

Technical assistance to prioritize HIV indicators in the country. With USAID/PASCA's technical assistance, the National M&E Technical Team updated the Basic Indicator Package –PBI in Spanish–, based on the indicator guidelines from the *Global AIDS Progress Report*. The technical assistance consisted of:

developing the analysis document-matrix; comparative review of UNGASS indicators, and the Global Report indicators. The 2011 PBI had 28 indicators; the new PBI had 30. The ETN MyE decided to update the M&E Plan 2011-2015, based on this PBI modification.

Strengthening the National HIV Information System –SINVIH–. USAID/PASCA took up the issue of SINVIH once more with the Ministry of Health and the CCSS. It was possible to promote formalizing this system within the Costa Rican Social Security Fund and to expedite its operation. In October 2011, technical assistance was provided to develop a critical path for this process, which included updating information in the surveillance module and developing two new modules: one to provide clinical follow-up to cases, and another one for laboratories. This was supported with CDC funds and was implemented by UNAIDS. In order to follow up this process, a team was established, within the framework of the ETN MyE, to coordinate SINVIH support and strengthening. The following entities participated in it: CCSS, Ministry of Health, USAID/PASCA, and UNAIDS. At the end of 2013, the SINVIH was operating with three modules and started producing reports.

Mapping information systems, technological platforms, and databases. In December 2011, USAID/PASCA facilitated an analysis meeting on M&E processes that included access to information, timely reporting, and data quality at the Costa Rican Social Security Fund, including the Institution's highest authorities. As a result of this meeting, a commitment was made to achieve the strengthening of the CCSS M&E system in January 2012. Within the CCSS, it was possible to: 1-Standardize the institutional approach based on policies and norms, and 2-Define and standardize data flow. The Health Statistics area, with support from USAID/PASCA, developed a strategy to adjust and improve the information system and the tools to achieve effective and periodic reporting.

Central American Diploma Course on Monitoring and Evaluation for HIV/AIDS Policy and Program Management. Progressive coordination were established with the Instituto Centroamericano de Administración Pública (Central American Institute of Public Administration–ICAP in Spanish), the Ministry of Health, and CCSS to implement the Central American Diploma Course on Monitoring and Evaluation for HIV/AIDS Policy and Program Management, 2011-2012". These were concretized on December 12, 2011, with the execution of the sub-agreement by USAID/PASCA and ICAP, and the Diploma Course launching at the national level. The closing ceremony took place on June 29, 2012, and 31 people graduated from the Diploma Course. Subsequently, there was a second cohort of this Diploma Course, who was trained between June and September 2013. There was total of 28 graduates from both courses.

Basic HIV M&E courses. In June and July 2012, USAID/PASCA facilitated three basic M&E workshops, in which 60 civil-society, including REDCA, individuals participated. The workshops allowed strengthening actors' competencies, so that their participation in monitoring and evaluation processes is critical. Three modules were taught: The first one was aimed at fundamental HIV monitoring and evaluation concepts; the second one at seeking relationships among the various data and their categories, and the third module on interpreting basic HIV indicators. The methodology was adapted to the country's context and the academic level of the target population by the USAID/PASCA Representative. According to the results, 82% of participants improved their knowledge and practices.

National AIDS Spending Assessment NASA 2010. USAID/PASCA provided technical assistance to develop this report. Specifically in regard to gathering information, organizations were supported so that they could identify their data and fill out matrices, and answer any questions; the Ministry of Health team received support to manage databases, among others. USAID/PASCA's Regional M&E Advisor provided technical assistance to the Ministry of Health team so that it classified and ordered the data on spending and operated the results. It provided technical support to install a clean database and to develop reports

with output to Excel, and developed an electronic spreadsheet to expedite the development of dynamic tables with categories translated into Spanish based on NASA outputs. It also supported the development of the report that was published in September 2012.

National AIDS Spending Assessment 2012. USAID/PASCA provided technical assistance to the Ministry of Health's team of professionals who led the NASA 2012 process. Specifically, this technical assistance consisted of holding workshops to present issues, such as: methodology; information-gathering; data tabulation, output, and analysis, and report development. At the end of March 2014, even though NASA 2012 had not yet been completed, the country already had a clean and updated database.

Developing Progress Reports on the Response to HIV. The country presented this report opportunistically, and USAID/PASCA provided technical assistance during the whole process. This assistance entailed sharing and analyzing new report methodology (Progress Report on the Response to HIV) with various entities (CONASIDA, ETN MyE, participants in the Diploma Course, and CCSS); developing a guiding tool for UNGASS indicators and their correspondence with indicators in the Progress Report; analyzing and developing report data; developing a narrative document, and validating data at a workshop with multi-sectoral participation, presenting the data and the process. In addition, support was given to lead the workshop.

Study on HIV Stigma and Discrimination and MARPS. In April 2012, USAID/PASCA held a workshop to analyze strategic information on stigma and discrimination, with input from the results of the S&D survey developed in Costa Rica in January 2012, as well as results from API 2009, the Study on HIV Policy Implementation 2009, and other studies. Multi-sectoral participation included 23 people. Similarly, this Study was presented to CONASIDA; it was used in information-analysis sessions with MARPS groups, and presented to the National HIV-Study Forum.

Study on Monitoring the Progress of the Policy Response to HIV. In November 2011, the Study on the Progress of Policy Response to HIV in Costa Rica was begun. In December 2011, field work was delayed, as the authorities that had recently taken office at the Costa Rican Social Security Fund instructed all CCSS workers not to participate in any study unless they were previously authorized to do so by the Medical Management. This was resolved in January 2012 and field work was completed. In July 2012, a meeting was held with a CCSS multi-sectoral group, the Ministry of Health, the Ombudsman's Office, and civil society, in order to gather qualitative contributions on the results of this study. The findings were discussed at this meeting, and the gaps existing in the country, inasmuch as HIV policy issues are concerned, were evidenced.

HIV Fascicle in the National Sexual and Reproductive Survey. USAID/PASCA led CONASIDA's three-member working group to develop a document with an analysis of STI and HIV issues, based on results to the questions included in the ENSSR-10. This analysis included the following topics: a) Sexual Practices; b) STI/HIV/AIDS Accurate Information and Myths; c) Factors Linked to Condom Use; d) HIV Testing; e) Sexual Violence; f) Risk Perception; g) Stigma and Discrimination. On March 30, 2012, USAID/PASCA documented and wrote the above-mentioned document, which was published in June 2012.

Study on HIV Modes of Transmission. In June 2013, within the framework of the II Central American Diploma Course on M&E developed by USAID/PASCA, the EPIReview Exercise was developed, which gave way to performing the MoT. USAID/PASCA coordinated this study with UNAIDS, lobbied with national authorities for its development, and provided data from various HIV studies performed in the country. The document was completed in September 2013, after several sessions to discuss and analyze the various scenarios produced by the model.

Technical assistance to define the National HIV Research Agenda. The ETN MyE agreed not to develop a specific HIV/AIDS agenda, but rather, to incorporate the topic into the National Technological Research and Development Plan 2012-2015. This plan provides guidance to the national research actions, and is led by the Ministry of Health. With technical assistance from USAID/PASCA, work on this document continued from January to July, and on August 22, the National Research Plan, which includes the National HIV Research Agenda, was made official. This topic was disseminated during the Study Forum held in September 2012.

National HIV Study Forums. This activity was held on September 16 and 17, in which six panel discussions were held, 21 papers were presented, and 145 people participated. These discussions had high-level moderators and panelists, among them a former Minister of Health, a former Vice-Minister of Health, the Coordinator of the HIV clinic at the Hospital México under the Costa Rican Social Security Fund, CCSS, several directors of the Ministry of Health directorates, HIV Coordinators from the Ministry of Health and the CCSS, as well as representatives of cooperation agencies (PASMO-PSI, IMO, UNFPA, UNAIDS, UNODC), and business sector (Asociación Empresarial para el Desarrollo), researchers from the University of Costa Rica, and the NGO sector, among others.

Approval of the National Monitoring and Evaluation Plan 2011-2015. At its December 06, 2012 meeting, CONASIDA approved the new version of the *Monitoring and Evaluation Plan for the National Response to HIV/AIDS 2011-2015*, to be sent for its diagramming and publication. The update of said Plan was performed throughout 2012, based on the new UNAIDS guidelines and the indicators in the Global Progress Report, with USAID/PASCA technical assistance. In January 2013, USAID/PASCA provided technical assistance to review the document for the M&E Plan for the National Response to HIV/AIDS 2011-2015.

Regulations on the HIV Information, Monitoring and Evaluation System. The Ministry of Health published in La Gaceta No. 160 dated October 22, 2012, an official decree that contributes to the feasibility of entering data into the SINVIH, since it compels the various entities involved in producing data (such as HIV clinics and laboratories) to opportunely notify the Ministry of Health about the data requested by said institution and further indicates that, in addition to the individual VE01 notification slip (which has been the one always used for that purpose), “in case the facility has electronic records, the system must have the proper mechanisms to recognize diagnoses with obligatory notification, and to send the contents of the slips to the Ministry of Health by electronic means”. In order to be able to comply with this publication, USAID/PASCA developed a lobbying process with authorities on the need to generate conditions to effectively use and feed the SINVIH periodically, in view of the difficulties that had been identified when the System was initially implemented, and in order to take advantage of the new funds that were infused for its strengthening (CDC).

Developing the Report on National HIV Prioritized Indicators. In July 2013, USAID/PASCA provided support to complete the document Report on the indicators in the Basic Package. At that time, the document was reviewed along with ETN MyE members and at the end of September 2013, CONASIDA’s endorsement for its publication was secured. This was an achievement for the country, since it integrated information from several official sources, such as the Social Security Fund, the Ministry of Health, and the Ministry of Education, among others.

HIV estimation exercise. USAID/PASCA provided technical assistance to review the estimation exercise for the country. This document was reviewed and validated by the National Monitoring and Evaluation Technical Team –ETN MyE– in its August 2013 session. However, the country decided that where there is a pertinent system to capture data, it will use this information and not the estimation, thus working with real data. Such is the case of newborns, in which coverage reached almost 100%. Similarly,

there are other data resulting from the estimation exercise which were not accepted by all committee members. USAID/PASCA supported the technical discussion of these results and the recommendations to improve data quality.

Strengthening the National M&E Technical Team. On December 7, 2012, USAID/PASCA facilitated a training workshop on leadership, in order to maximize the operation of a multi-disciplinary and inter-institutional team, on issues such as governance, roles, and functions of organizing work, aimed at the ETN MyE and representatives in CONASIDA. The workshop was attended by 12 persons.

Reforms to HIV Operating Policies. CONASIDA created the conditions that are necessary to implement the new HIV diagnosis algorithm, which starts with a rapid test. Until 2011, the country did not use rapid tests. Through the efforts of USAID/PASCA, it was possible to establish coordination with PASMO/PSI, so they would donate 2,000 rapid tests that, along with another 10,000 tests, constituted the sample to develop a trial that included 12,000 tests in five of the country's clinics, and which was performed in June 2012. CCSS assumed the responsibility of making an analysis of the costs and stocks of Elisa tests in stockrooms to define how rapid test should be implemented.

Evaluating compliance with CONASIDA's Work Plan 2011. USAID/PASCA provided technical assistance to develop a session to analyze and review compliance with the Work Plan 2011. This assistance included facilitating and conducting a working meeting for said review. The results of this exercise were used as input for the new CONASIDA Work Plan 2012.

Implementing the HIV Operating Plan 2012. USAID/PASCA provided technical assistance to CONASIDA for its development of the Report on Implementing the Inter-Sectoral Operating Plan 2012. In the December 2012 meeting, CONASIDA approved said report, which includes the degree of execution of planned actions. During that year, for the first time, CONASIDA provided periodic and documented follow-up to implementation, which resulted in the Implementation Plan approved by the Council. Said report is the product of several sessions developed throughout the year to verify and follow up on the execution of the actions that were programmed.

Strengthening CONASIDA's multi-sectoral participation. USAID/PASCA provided technical assistance to CONASIDA in order to advocate for the incorporation of the business sector into the Council. In March 2013, the business sector was incorporated into the Council. The Unión Costarricense de Cámaras y Asociaciones de la Empresa Privada (Costa Rican Coalition of Business Chambers and Associations–UCCAEP) appointed a representative who joined the March 2013 meetings. USAID/PASCA provided its support to the UCCAEP in order to highlight its role and the experiences that it can contribute to this coordination mechanism.

Proposal for Reforms to the HIV Law. In February 2012, CONASIDA agreed to establish a working sub-commission to review and update the proposal for Reforms to the HIV Law, in which USAID/PASCA participated. This process sought to respond to the need to adjust the HIV Law to the present context of the epidemic and the way it is addressed in Costa Rica. USAID/PASCA provided technical assistance to the four organizations of people living with HIV to review the Law, contributing their recommendations to the specific articles that involve them. Their input was delivered to the sub-commission, which considered each one of the recommendations.

Technical assistance for the Global Fund proposal. USAID/PASCA provided technical assistance to the Ministry of Health and to the Country Coordinating Mechanism –CCM– in order to establish the critical path to develop the country's Concept Note to submit to the GFATM. Support was provided to establish the gap existing between costing the response to HIV and the funding existing in the country.

To that end, information from the exercises on costing and goals that USAID/PASCA has facilitated in the country was used. Between May and July 2013, USAID/PASCA facilitated working sessions in which progress was made in defining the purpose, strategies and expected results of the country proposal. In addition, the size of the MSM population in Costa Rica was estimated based on available information. Similarly, two informative notes were developed to be submitted to the Global Fund. They contained a profile of the country and the epidemiological characterization. In August 2013, the final version of the Concept Note was reviewed and it was submitted by the CONASIDA Coordinator to the Global Fund for its review. The country is now facing the challenge of submitting its final proposal in August 2014.

Activities aimed at achieving Result 2: HIV Advocacy Agendas effectively implemented

The issue of HIV advocacy and policy dialog by non-governmental organizations was a synonym of controversy in Costa Rica. The initial scenario was a fragmented civil society that was uninformed about basic issues such as HIV policies, implementation mechanisms and the importance of multi-sectoral participation.

Between June and August 2009, USAID/PASCA led analysis meetings aimed at better understanding the role of the National Strategic Plan as a public policy and as part of the Three Ones scheme. Issues such as the role played by civil society in the response to HIV, policy implementation and monitoring were addressed. In September 2009, civil-society organizations decided to constitute a Policy Impact Committee that sought to lead actions pertaining to social oversight and impact on public-policy decision makers. Said decision was made after participating in a two-day workshop facilitated by USAID/PASCA, and in view of the need to join the efforts of organizations participating in the various HIV/AIDS spheres. The news was widely disseminated.

Studies, information dissemination, and analysis. *HIV policy environment.* In November 2009, the API study was completed. These data were used by USAID/PASCA in May 2010, when it facilitated a meeting to analyze its results. Representatives from CCSS, MoH and civil society participated in this session. In December 2013, a second API study was concluded and its results were presented at the II National Study Forum.

Diagnosing the HIV situation and response in Costa Rica. In November 2009, this diagnosis was completed. It contains the compilation of the existing legal framework and a map of the projects and organizations in Costa Rica. It was delivered by USAID in order to incorporate it to a series of diagnoses that have been performed in the Central American region with the same methodology. Using this document allowed updating contacts with all the organizations working in country, with the purpose of coming together, joined by common advocacy interests. Funding was provided to print and reproduce these documents.

Advocacy campaign of the Policy Impact Committee. USAID/PASCA continued to provide technical assistance to the HIV Policy Impact Committee in Costa Rica. In December 2009, the Committee held lobbying meetings with the presidential candidates supported by such political parties as Partido Acción Ciudadana, Liberación Nacional, and Unidad Social Cristiana. The candidates who attended signed a commitment that, among other things, demanded concrete solutions to issues such as HIV education, prevention, human rights, care, and allotment of resources. During CONCASIDA, the political support of the President elect of the Republic was attained and concretized.

Strengthening the Policy Impact Committee. A strengthened Policy Impact Committee was also evident in the ample participation of civil-society organizations in World AIDS Day, December 1, 2009.

At that time, not only the organizations constituting the NGO Network participated, but owing to the cohesion efforts that have been promoted at Committee meetings, many other organizations were also present, such as the Movimiento Costarricense de Lucha contra el VIH. In March 2010, the country hosted CONCASIDA. In this context, the HIV Policy Impact Committee, composed of civil-society organizations that had been trained by USAID/PASCA, spoke out on behalf of the issue in the media, which helped to raise the profile of the Congress nationwide.

Alliances with FBOs. USAID/PASCA met with representatives of various religious entities (the Lutheran church, the Presbyterian Church, the Methodist Church, and the Episcopal Church) to foster their participation in the response to HIV. On May 9 and 10, 2010, the workshop *HIV and Churches: Response from within Faith Communities* was held. With support from USAID/PASCA, 34 individuals representing 12 faith denominations gathered together to analyze and validate the Guide, which provides tools to contribute to an effective response to HIV by these organizations from the pastoral, theological, and community perspective. The guide was considered to be very useful to guide the work and to lead the inclusion processes, from raising awareness to transformation. As a result of the workshop, the various denominations developed the first draft of an intervention plan that, from the particular viewpoint of their organizational structures, identifies their contributions to the response to HIV. Among the results of these actions to date is the use of the guide by these organizations and their citing it in the official publications.

Analyzing and using HIV information. The NGO network working on HIV participated in a series of meetings organized by USAID/PASCA with the purpose of strengthening their capacities to use information, which allowed impacting on priority decisions that have a bearing on the course of the epidemic in the country. To that end, USAID/PASCA gathered data on studies such as API and the tool to monitor HIV policies, and data generated by the SINVIH national information system, among others. It shared this information to show existing gaps, which helped to define advocacy actions, mostly focused on access to HIV information and the urgent need to engage public opinion so as to make demands pertaining to these issues. As an outcome of this process, the Network developed an implementation plan for an advocacy campaign focused on guaranteeing the availability of official information that describes the situation of the epidemic, which was implemented and fulfilled its objective in August 2011, when national reports on HIV indicators were published.

Diagnosing MARPS groups and organizations. In April 2011, USAID/PASCA facilitated meetings with various civil-society organizations, among them, Transvida, Mulabi, CIPAC, CONODIS, La Sala, Conga, and Asovihsida, in order to identify needs and to share work agendas. After these meetings, field work started to be executed between May and June 2011. In June 2011, the diagnosis and mapping of the groups being established and the national networks undertaking prevention and/or care activities aimed at MARPS were validated. This work enabled participants to learn about the situation, training needs, and areas to be strengthened. The results were useful to focus actions within institutions, such as identifying gaps, support, and cooperation among Networks, and strengthening organizational structure and project management, among others.

Strengthening Trans groups. Members of the Costa Rican Trans community organized with the aim of reviewing the means to legally establish their organization, Transvida, which still had not been legally registered. With technical support from USAID/PASCA, they analyzed the various legal structures and decided to establish a non-profit association. In addition, at that meeting, they reviewed the objectives, mission, and vision of their organizations and defined the next steps they should take: undertaking the procedures to register their association, holding a workshop to strengthen their capacities, planning their activities based on prioritizing objectives and interventions. In August 2012, this organization was granted legal standing, and it developed its strategic plan focusing on HIV advocacy.

Strengthening civil-society organizations working on HIV. The Red de Organizaciones No Gubernamentales que trabajan en VIH en Costa Rica (Network of Non-Governmental Organizations Working on HIV in Costa Rica), which gathers together 14 out of the 17 organizations registered with CONASIDA, developed a strategic-planning workshop on March 9 and 10, 2011, with USAID/PASCA's technical support. The 21 participants defined the mission and vision of the Network, as well as its strategic lines and objectives, which became their Strategic Plan 2011-2013. Specifically, the technical assistance provided by USAID/PASCA was to lead the workshop (SWOT analysis, presentations, materials, and dynamics), propose a format for the new Strategic Plan, and write the final Plan document, incorporating the revisions and suggestions from Network members.

Technical assistance to implement the REDCA project funded by GF. USAID/PASCA supported the Red Centroamericana de Personas Positivas (Central American Network of Positive People) in its dissemination and analysis of the progress attained in implementing the project funded by the Global Fund. This technical assistance involved providing methodological support, developing an agenda and the contents for the workshops to disseminate and analyze results, and giving support to organize the information meetings that were held in February 2012.

Developing the advocacy campaign on access to HIV information. The Network of Non-Governmental Organizations held an advocacy and impact workshop on March 16 and 17, 2012. With technical assistance from USAID/PASCA, it developed an Advocacy Plan whose objective was to have an impact on national authorities in regard to gaining access to HIV information. Specifically, the USAID/PASCA project supported the leadership of the workshop, the proposal for an Advocacy Plan format, and writing the final document of the Plan, incorporating the revisions and suggestions by Network members. The main result of this advocacy campaign was the authorization granted by the Ministry of Health and the Costa Rican Social Security Fund to publish the National Report on Prioritized HIV Indicators 2012.

Strengthening capacities of MARPS organizations or organizations working with MARPS. In 2012, USAID/PASCA worked individually with the following organizations: ASOVHSIDA; ICW-CR – International Community of Women Living with HIV/AIDS, Costa Rica Chapter–, and La Sala–Association for the improvement and quality of life of sex workers and former sex workers– and the Asociación de Mujeres Esperanza Viva. As part of USAID/PASCA's technical assistance to the above-mentioned organizations, a work agenda to develop proposals for advocacy campaigns or policy impact on behalf of their populations. These organizations developed proposals that will constitute the basis to search for funding.

USAID/PASCA provided technical assistance to the Asociación Movimiento de Apoyo a una Nueva Universalidad, MANU, an organization working with the sexually-diverse population, in order for it to develop its Annual Operating Plan 2012-2013, guaranteeing the inclusion of gender-based violence and sexual violence related to HIV. In addition, in August 2012, USAID/PASCA facilitated a working meeting to identify strengths, weaknesses, opportunities and threats –SWOT– in the implementation of their Operating Plan.

Training workshop on HIV advocacy and policy dialog. From December 06 to 08, 2011, USAID/PASCA held a workshop to strengthen the advocacy and policy dialog undertaken by MARPS organizations and groups in the country. The 13 organizations that attended were provided assistance in order to analyze the HIV policy context and to strengthen their capacities to submit proposals aimed at requesting funds for HIV advocacy activities.

Training workshop on communication processes and conflict resolution. On August 22, 2012, USAID/PASCA facilitated a training workshop on Conflict Resolution aimed at members of the Network of NGOs Working on HIV. It lasted two days, and its purpose was to strengthen knowledge on how to handle and resolve conflicts in organizations and to provide the tools they need to optimize the personal capabilities of participants working with populations most vulnerable to HIV. Among the topics that were discussed were: socio-cultural factors that are involved in conflicts; factors that determine conflicts; cognitive, affective, behavioral, and communicative processes that are involved in conflicts; styles with which conflicts are handled, their categories, and techniques to handle and resolve conflicts. 23 individuals from 12 organizations participated.

Decree against homophobia, lesbophobia, and transphobia. The President of the Republic of Costa Rica, Laura Chinchilla Miranda, signed Executive Decree No. 37071-S, which modifies the declaration of May 17 as the National Day against Homophobia, so that in the future, it is commemorated as the National Day against Homophobia, Lesbophobia, and Transphobia. The decree, published in the official newspaper, La Gaceta No. 53, on April 26, 2012, was promoted with the support of the National HIV/AIDS Comprehensive Care Council –CONASIDA–, which receives permanent technical assistance from USAID/PASCA.

Administrative Guideline on Health Services Free from Discrimination Based on Sexual Orientation or Gender Identity. In March 2012, the Health-Service Development Directorate under the Costa Rican Social Security Fund sent the new “Administrative Guideline on Health Services Free from Discrimination Based on Sexual Orientation or Gender Identity”. This guideline seeks to “promote non-discrimination based on sexual orientation or gender identity in the care processes at health centers and additionally, to expedite, promote, and support actions aimed at eradicating homophobia in said health centers”, as stated by Dr. José Miguel Rojas, the then Director of Health-Service Development at that institution. The CCSS has received permanent USAID/PASCA’s technical assistance on HIV and most-at-risk populations, as well as on monitoring and evaluation and national/ institutional planning for the response to the epidemic. This effort was part of implementing the National Strategic Plan –NSP– in its strategic line pertaining to Comprehensive Care.

The Universidad Técnica Nacional, UTN, declares it is free from discrimination based on sexual orientation and gender identity. In June 2012, the UTN University Council signed an agreement to declare the university “a space free from discrimination based on sexual orientation and gender identity”. In that document, it also stated that it joined the global community to celebrate the World Day against Homophobia”. That process was promoted by civil-society organizations, such as CIPAC-DH, which have been strengthened by USAID/PASCA in its impact and advocacy processes.

Advocacy campaign on behalf of sex education. USAID/PASCA provided technical assistance to develop an advocacy campaign to impact implementing the Ministry of Education’s sex education plan “Integral Affection and Sex Program”. From January to December 2012, coordinated actions by civil society, cooperation agencies, and the Government, by means of an advocacy campaign, positioned the need to provide sex education in state and private schools. The advocacy campaign held by Red Deser and the Network of NGOs ended on February 6, 2013, when the secondary-school students were taught according to the new Sex and Affection program, as mandated by the Ministry of Education.

Analysis on MARPS’ situation. On October 2012, USAID/PASCA provided technical assistance to sexually-diverse individuals working in civil-society organizations and organizations working with MARPS, in order to constitute a national consultative group, which participated in the Regional Round Table to analyze the present situation of sexual diversity in regard to HIV: lessons learned, progress, and challenges, with Regional USAID/PASCA’s technical assistance. During the Round Table, barriers to achieve universal access to health services free of stigma and discrimination were identified, and the

relevant regulatory policy framework, protocols, and norms were reviewed. Among the topics that were addressed are the following: present situation of the various sexually-diverse contexts and groups within the framework of the response to HIV; barriers to accessing health services for the sexually-diverse population; current situation of the regulatory policy framework, protocols, and norms allowing universal access, free of stigma and discrimination, for sexually-diverse populations.

Building capacities of MARPS organizations. In November 2012, USAID/PASCA facilitated a training workshop on institutional leadership, work with networks, and fulfilling functions and roles to engage in policy impact, aimed at the Red de Organizaciones No Gubernamentales. The aim of this workshop was to strengthen knowledge management in order to exercise institutional leadership that expedites working in networks and define group roles to engage in policy impact, optimizing the personal capabilities of participants who work with populations most vulnerable to HIV. There were 14 participants from 8 organizations.

In March 2013, USAID/PASCA facilitated a session to strengthen the internal capacities of MARPS' and sexually-diverse populations' organizations. The issue of strategic planning was addressed. The aim was: to generate capacities on how to develop strategic-planning processes within MARPS organizations and to impact on policy changes that constitute a strategic response aimed at sexually-diverse populations, in coordination with MULABI and Transvida.

In May 2013, USAID/PASCA facilitated a meeting to strengthen the internal capacities of organizations constituted by MARPS, sexually-diverse people, and people living with HIV: Sharing and discussing ENSSR results with NGOs to strengthen the use of information. The results of the Encuesta Nacional de Salud Sexual y Salud Reproductiva, (National Sexual and Reproductive Health Survey–ENSSR in Spanish) 2010 were analyzed (methodological approach of the survey; sexual and reproductive health of adolescents; viewing men's sexual and reproductive health, and the knowledge, opinions and risk behaviors regarding HIV/AIDS and sexually transmitted infections). Participants numbered 25.

Moreover, USAID/PASCA facilitated a meeting to strengthen capacities to analyze and engage in surveillance of the HIV policy environment, in order to engage in advocacy with NGOs, MARPS, sexually-diverse individuals and people living with HIV to strengthen the use of information: Analysis and discussion of the results from key studies, which allow surveillance of the HIV policy environment in order to engage in advocacy. Results from three studies of interest to the population: Quality of Comprehensive Care Services for People with HIV—a REDCA study—; HIV Stigma and Discrimination in Costa Rica, the Public Opinion Survey 2009-2011, and the CAP Study with health providers on barriers for the care provided to the LGBT population in the Costa Rican Metropolitan Area –CIPAC. There were 21 participants.

Advocacy campaign to review and analyze the Guidelines for Health Care to Most-at-Risk Populations –MARPS. USAID/PASCA facilitated an advocacy campaign with civil-society, through which it secured the commitment of the Social Security Fund to work jointly with MARPS on the following specific issues: a) offering friendly services; b) supporting and strengthening personnel; c) searching and implementing support mechanisms to provide care for non-insured people (homeless people, male and female sex workers); d) migrant population, and e) disseminating and promoting clinics and testing.

Analyzing HIV policies. USAID/PASCA facilitated a meeting to analyze HIV/AIDS policy changes in the country during the last five years, in May 2013. Based on a multi-sectoral group exercise (with representatives from the Ministry of Health, civil society, the Ombudsman's Office, the Ministry of Justice and Peace, and cooperation agencies), 44 policy changes were implemented in the period being studied.

Additionally, participants identified the changes that are still required, as well as the challenges they pose and the possible strategies to achieve and implement them.

Activities aimed at strengthening the response to HIV by way of processes to develop, implement, and monitor policies that address gender-based and sexual violence.

Technical assistance to review and analyze the SV, GBV, and HIV legal framework. USAID/PASCA provided technical assistance to review the political, legal and regulatory framework pertaining to access to HIV post-exposure prophylaxis, and access barriers. Within the framework of this consultancy, people from the Ombudsman's Office; the Costa Rican Social Security Fund; the Judicial Branch of Government, and the Ministry of Health were interviewed in May. In June 2012, a session to review the legal framework relating to access to post-exposure prophylaxis –PEP– to rape victims, was summoned and led by USAID/PASCA with the aim of promoting a participative review and to gather input from the institutions involved in the issue.

Advocacy campaign to jointly address HIV PEP, seeking to guarantee its access. USAID/PASCA fostered the approach between the Costa Rican Social Security Fund and the Judicial Branch of Government (Legal Medicine, Prosecutors' Offices –Public Ministry–, Forensic Science, Sexual-Crime Section under the Criminal Investigation Department, and the Gender Office). Generally, these organizations work separately on health and justice issues, but placing the SV, GBV and access to HIV post-exposure prophylaxis issues up for discussion has fostered an approach between the Presiding Officers of both organizations, which reviewed the inter-institutional technical protocol.

National Round Table to address GBV/SV and HIV. With technical support from USAID/PASCA, the first National Round Table on Sexual Violence and HIV was held on March 15, 2012. Its purpose was to summon various social actors to a dialog on HIV prevention pertaining to sexual violence issues, with the aim of providing input to develop an agenda aimed at improving policies and preventive and health-care programs that help to reduce these problems and foster an effective response to all affected individuals. Even though Costa Rica has an *Inter-Institutional Protocol for Comprehensive Care to Rape Victims within 72 Hours of the Event*, implementing this protocol is among the priorities that have been identified. It was also deemed important to develop mapping/an inventory of the national legislation on GBV/SV and HIV, as well as to identify the flow of the process used by sexually-diverse populations to report these crimes, since the national legislation on gender violence focuses on women and girls. Moreover, a gap was found in the way sexual violence against people deprived of their liberty is addressed, since prisons did not have a specific protocol for this population. Establishing said protocol was identified as an urgent need.

Analyzing the SV and HIV legal and regulatory frameworks. On October 18, 2012, USAID/PASCA facilitated a meeting to analyze the legal and regulatory framework pertaining to HIV Post-Exposure Prophylaxis for sexual-abuse and rape victims among the Trans population. A participative methodology was used in this session to analyze and discuss situations, thus favoring inter-learning. Among the issues addressed were the international and national legal frameworks that identify: the right to health as a human right; abuse and its types; rape and sexual violence based on gender; the national legal and regulatory framework and the national protocol for HIV PEP. A total of 12 individuals participated in the meeting, representing TRANSVIDA and MULABI, two Trans organizations that work on personal strengthening, self-help strategies to promote health, and human rights.

Policy changes to expedite access to PEP. USAID/PASCA provided technical assistance to the Ministry of Justice and Peace in order to develop and validate the "Guides for HIV/AIDS Prevention and Care for People Deprived of Their Liberty", which include a chapter on the procedures to provide comprehensive

care to sexual-violence victims deprived of their liberty. In January 2013, the document was completed, and it was approved by the Medical Director of the Prison System under the Ministry of Justice and Peace. USAID/PASCA provided technical assistance to the Judicial Branch of Government to de-centralize the health-care services delivered to rape victims and to promote opportune access to PEP. A significant achievement in January 2013 was that the Judicial Investigation Agency authorized and started to implement the process to de-centralize forensic medical services in the country, in order to enable all country units to provide services 24 per day, seven days a week. This was a very important step in the process, since rape victims no longer have to travel to the capital city in order to receive medical and judicial attention. Based on that, the places where the joint pilot project by the Costa Rican Social Security Fund –CCSS– and the Judicial Branch started to be implemented were redefined in order to implement the *Inter-Institutional Protocol for Comprehensive Care to Rape Victims within 72 Hours of the Event*.

Mechanisms to watch over implementation of the PEP Protocol. At a meeting with the Judicial Branch, with technical assistance from USAID/PASCA, it was determined that a permanent inter-institutional mechanism that includes all the institutions that must apply the *Inter-Institutional Protocol for Comprehensive Care to Rape Victims* did not exist and that such mechanism was essential to monitor implementation. Thus, it was agreed that work would be undertaken to establish an Inter-Institutional Committee.

Between March and June 2013, progress was made in the process to implement the *Inter-Institutional Protocol for Comprehensive Care to Rape Victims*: USAID/PASCA, the Judicial Branch and the Costa Rican Social Security Fund –CCSS– held meetings in Puntarenas, Guanacaste, and Cartago to analyze its feasibility and needs with key actors from each entity in charge of the various stages of care to rape victims in those zones. During April, sessions were held to develop a proposal for a work plan.

In March 2013, work sessions were held with MARPS groups, which were informed about the existence of a national protocol to provide care to rape victims. This was done with the aim of disseminating information about the policies and the way in which these populations could use them at health services.

On June 12, 2013, the Technical Committee to apply and follow up the *Inter-Institutional Protocol for Comprehensive Care to Rape Victims within 72 Hours of the Event* was officially constituted. USAID/PASCA is a member of this multi-sectoral committee and helped to establish it.

Between July and October 2013, the Judicial Branch, as follow up to the agreements of the Technical Committee to apply and follow up the *Inter-Institutional Protocol for Comprehensive Care to Rape Victims within 72 Hours of the Event*, made headway in developing institutional basic indicators to monitor implementation of the Protocol.

Strengthening capacities to implement the PEP Protocol. With technical assistance from USAID/PASCA, six training events on disseminating the existence of the *Inter-Institutional Protocol for Comprehensive Care to Rape Victims* were held for civil society, the Judicial Branch, security forces, and Costa Rican Social Security Fund representatives in July, October, and December 2013 and January 2014. Over 120 individuals were trained. An informative brochure on the PEP Protocol was also reproduced.

Activities aimed at involving the business sector in the response to HIV.

Policy support to the private sector. In June 2010, USAID/PASCA was able to secure the political support of Costa Rica's business sector, represented by the Costa Rican Coalition of Business Chambers and Associations–UCCAEP. This support was evidenced by the support that this organization provided in order to conduct a mapping exercise of the sector and to establish the degree in which HIV workplace

policies exist. Through the intervention of a consultant hired by USAID/PASCA, this organization identified the legal and regulatory framework to implement HIV workplace policies, mapped the participation of the business sector in HIV issues, and showed the main interest of the sector in working on the issues.

Training and technical assistance to develop HIV workplace policies. USAID/PASCA established a strategic alliance with Costa Rica's tourist and hotel sector, in order to provide technical assistance to develop HIV workplace policies. The International Labor Organization, the Consejo de Salud Ocupacional (Occupational Health Council), and CIPAC, an NGO acting as the technical partner, joined this initiative. A first awareness-raising workshop was held with a group of 14 hotel companies in two of the country's regions (Quepos and Marco Antonio) in order for them to learn about the HIV issues, their impacts at the socio-economic level, and the response of the business sector. With this workshop, it was possible to raise the interest of companies in developing their individual HIV workplace policies. USAID/PASCA provided technical assistance to each one of the firms, which adapted the fundamental principles of these policies to their work environments. On September 14, 2010, at a public forum, 10 companies committed to adopting the policies that had been developed.

Strategic alliance with the business sector. USAID/PASCA established an alliance with the Asociación Empresarial para el Desarrollo –AED–, a well-known organization in the field as a referent on the issue of promoting good labor practices and corporate social responsibility of the largest companies working in the country. In June 2011, seven firms met at a raising-awareness event to involve the business sector in the response to HIV, facilitated by AED in coordination with USAID/PASCA.

In August 2011, a training workshop was held with these firms on developing, adopting, and implementing HIV workplace policies. The HIV Workplace Policy Builder software was used for that purpose. Based on that workshop, USAID/PASCA provided individual technical assistance to each company so that they could design their own HIV policy. At that time, Scotiabank, Kimberly Clark, Los Melones del Sol, S. A., and Grupo Humberto Vargas S.A. developed and adopted their HIV policies.

In 2011, USAID/PASCA intensified its alliance with AED. On March 16, 2012, both entities signed a cooperation agreement with the purpose of supporting one of the first stages to institutionalize addressing the HIV/AIDS issue in the workplace, by constituting the Business Working Group “Policies to Prevent HIV in Work Centers”, as part of the package of projects and strategic services that AED offers to its affiliated companies. By means of this working group, sponsored by USAID/PASCA and AED in cooperation with the Ministry of Health, companies were trained and they exchanged experiences.

Between April and September 2012, eight training workshops for the Working Group were held. In them, topics pertaining to HIV and the response to it from the workplace were discussed, as was the way in which to apply the tools to develop HIV policies. In this context, the II Business Forum was held, in order to give recognition to the companies that have made their HIV policies official. Within the AED institutional framework, the actions in the agreement were performed according to a strategic social-investment focus and they were aimed at internal audiences or company employees.

Technical assistance to develop HIV workplace policies. In December 2012, AED, supported by a consultant hired by USAID/PASCA provided their support to five more companies that developed and adopted their HIV workplace policies: Grupo Irex de Costa Rica, Instituto Costarricense de Electricidad –ICE–, Liga Agrícola Industrial de la Caña de Azúcar –LAICA–, the AED network itself, and Costa Rican Red Cross. By means of this USAID/PASCA and AED alliance, over 15 companies developed and adopted their HIV policies, as of March 2014.

In March 2014, through a Minigrant with the Asociación Empresarial para el Desarrollo, AED, five HIV policies were developed. In addition, that organization published: 1. A Guide for Companies to Develop an Internal HIV Policy; 2. A Basic Training Module on HIV and the Labor Sphere; 3. A Guide to Train Trainers on HIV; 4. Mapping the Institutional Offer for HIV Prevention and Care; 5. Four Cases of Good Practices in Companies that Have Developed their HIV Policies; 6. Report on Developing Good Practice Cases.

Public activities to show progress on involving the private sector in the response to HIV. In October 2012, the first dissemination and recognition forum took place for five private companies that developed and adopted an HIV workplace policy during 2011. In August 2012, the II National Business Sector and HIV Forum, in which public recognition was afforded to other five companies that adopted their HIV policy in 2012.

In May 2013, USAID/PASCA promoted and facilitated the II National Dissemination Forum *Socially Responsible Companies with an HIV Initiative*. The objective was to share companies' experiences in developing their HIV policies. In coordination with the Asociación Empresarial para el Desarrollo –AED–; CONASIDA; the Consejo de Salud Ocupacional (Occupational Health Council) and the International Labor Organization, ILO, recognition was given to companies and workplaces that incorporated into the national response to HIV with the development of its policies.

Project closing activities. In March 2014, USAID/PASCA held 2 project-closing activities in the country. The first one was a study forum in which 13 HIV studies performed in the country were presented. This activity helped to disseminate the evidence of epidemic behavior. The second activity was a project-closing meeting in which the progress achieved in the country pertaining to the HIV-policy environment was presented. The project received considerable recognition from counterpart organizations.

2.4 El Salvador

When the project started, El Salvador had an NSP 2005-2010, which was used as a public policy to guide the national response to HIV. It had not been costed. In addition, it had a National M&E Plan that had been approved in 2005.

Activities aimed at achieving Result 1: HIV Plans budgeted, monitored, and evaluated

In October 2008, the Project appeared before the National AIDS Program and the Country Coordinating Mechanism to inform them about its disposition to provide technical assistance and training with the aim of securing a solid national response to HIV. In this context, meetings were held to coordinate collaborative activities with UNAIDS, specifically in regard to NSP updating and costing. As an achievement stemming from this process, USAID/PASCA became part of a committee led by NAP, which harmonized the requirements and offers of HIV technical assistance to El Salvador. USAID/PASCA supported the National AIDS Program to develop the HIV Operative Plan 2009. To that end, in January 2009, it promoted and facilitated the integration of various sectors (the National AIDS Program, the National TB Program, civil society, and the business sector). USAID/PASCA provided technical assistance that consisted of developing an annual-goal proposal, verifying viable actions during the year, and assigning responsibilities for them.

Evaluation of the National Strategic Plan 2005-2010. The country put forward a proposal to develop a new plan for 2011-2015, which also concurred with a new Government period. As part of this process USAID/PASCA promoted the evaluation of the NSP. This exercise allowed measuring the degree of its compliance and established a critical value judgment on the successes and challenges in the execution of this public policy. The evaluation methodology was implemented in the first 2010 quarter and ended in June 2010. The inter-institutional committee that promoted this evaluation officially submitted the document to the Coordinator of the Ministry of Health's National HIV/AIDS Program, which accepted the evaluation as the first part of the process to develop the new NSP.

USAID/PASCA supported the National AIDS Program in developing the HIV Operating Plan 2009.

To that end, it promoted and facilitated the integration of various sectors (the National AIDS Program, the National TB Program, civil society, and the business sector). USAID/PASCA provided technical assistance that entailed developing an annual-goal proposal, verifying feasible actions for the year, and assigning responsibilities for them. Per USAID/PASCA advice, the M&E Sub-Commission under CONASIDA included in its work program sessions to analyze the information generated by the Monitoring, Evaluation and Epidemiological Surveillance System (SUMEVE in Spanish). The aim was to analyze existing national information and to publish the first half-year report for the year 2009. However, the new Government did not endorse the quality and veracity of the data gathered by NAP during the previous administration. The CONASIDA Monitoring and Evaluation Committee re-scheduled its meetings and focused them on the data generated by the Global Fund projects. Similarly, the Committee re-positioned the accuracy of the data for the new Government.

Developing the new NSP 2011-2015. The committee validated the evaluation process, in which representatives from the Ministry of Health; the Foro de ONG de la Lucha contra el Sida (Forum of NGOs Working on the Fight against AIDS; PLWH; members of the Mesa Ciudadana de Contraloría Social (Citizens' Social Oversight Group); CCM, UNAIDS, and PAHO participated in developing the new NSP.

USAID/PASCA started a series of meetings with this group to refresh and keep in mind the technical, policy and legal frameworks of the epidemic. In mid-September 2009, this national planning process was officially launched by CONASIDA. The President of the Commission and Minister of Health expressed the interest of the Commission in making this planning process multi-sectoral and inclusive.

Developing NAP's Operating Plan. Even though that was a year of transition, in terms of the National Strategic Plan, NAP developed its Operating Plan 2010. USAID/PASCA promoted this exercise with the program so that it would be undertaken with various sectors, in order for each one to identify its contribution in the national response to the epidemic. It was concluded in March 2010, and it was not developed before because MINSAL waited until it had defined its framework for operating plans, since Ministry authorities had just started their activities in June 2009.

Developing the HIV/TB Co-Infection Strategic Plan: With the aim of accelerating an effective joint response by the TB and HIV-AIDS Programs to the tuberculosis epidemic associated with HIV in El Salvador, USAID/PASCA provided assistance to develop an HIV/TB co-infection strategy. To that end, it held consultation meetings with key populations, resulting in a final document: "National Strategy to Strengthen Integration and Implementation of TB/HIV Collaborative Activities".

Strengthening CONASIDA. USAID/PASCA provided technical assistance to CONASIDA so that it developed its Operating Plan 2010, in order to create a follow-up and evaluation system for its operating plan and a hiring and acquisitions manual for that commission. Specifically, the Project provided information on the role of the country's national authorities; proposed the terms of reference required, and became part of a committee that promoted these processes. During the planning and organization stages, the civil-society organizations that participated informed about the direct contributions that they had made to make this commission a mechanism open to multi-sectoral participation.

Strengthening CONASIDA's M&E Sub-Commission. During the last 2009 quarter, USAID/PASCA promoted the appointment of new members to the HIV/AIDS Sub-Commission among various organizations. This was due to the changeover in several Government officials. Coordinating this Commission was the basis to comply with an agenda that allowed, in part, analyzing data generated by SUMEVE, and disseminating them for decision-making purposes. The NAP was persuaded to hold a series of meetings with the civil-society sector in order to disseminate SUMEVE indicators referring to the prevention component. This was a way of giving back the information received and starting a systematic process to report indicators contained in the National M&E Plan.

Strengthening the National Information, Monitoring and Evaluation System. USAID/PASCA facilitated workshops with representatives from the National AIDS Program, the Salvadorian Social Security Institute, the Country Coordinating Mechanism, the Global Fund Principal Recipients, civil-society, UNAIDS, and UNFPA. This workshop was held using the methodology proposed by USAID/PASCA for all the countries in the region, and it allowed identifying the gaps or barriers faced by the National Information System and by the implementation of the M&E Plan. In addition, an action plan was developed to allow the group of participants to follow up the activities that were identified, and this establish the path for CONASIDA's Monitoring and Evaluation Sub-Commission to establish its annual work plan. Subsequently, USAID/PASCA provided technical assistance to the Monitoring and Evaluation Sub-Commission to implement its Action Plan 2012. As part of this process, a delegation to the M&E Sub-Commission was created in order to develop CONASIDA's Operating Plan and Internal Set of Regulations, which were approved in May 2012.

Developing the National M&E Plan 2011-2015. The committee that had validated the evaluation process for the National Strategic Plan 2005-2010 –in which representatives of the Ministry of Health, the Foro de ONG de la Lucha contra el Sida; PLWH; Mesa Ciudadana de Contraloría Social (Citizens' Social Oversight Group), CCM, UNAIDS, and PAHO participated– began a process to develop the National

M&E Plan that would be coordinated with the National HIV Strategy, based on the results of the evaluation.

Official information on country indicators. The country presented the UNGASS 2010 report. In order to do so, USAID/PASCA provided support to the working sessions that allowed harmonizing the criteria of the organizations working on the response, as to delivering, consolidating, and validating data. In this report, the country provided data for 20 out of the 25 UNGASS indicators, which also represent 9 out of the 74 indicators contained in the National M&E Plan (12%).

Strengthening the CCM and Principal Recipients. USAID/PASCA provided assistance to develop the National Coordinating Mechanism's By-Laws and Set of Regulations. The technical assistance provided consisted of a legal review and feedback on each one of the articles in the documents. These technical guidelines governed the activities of this mechanism to fulfill its role of supervising the grant implementation process. They were approved on November 26, 2009. At the end of that same year, the Global Fund Board of Directors approved the new architecture for the operation of country projects. This entails several aspects, but the most important one is consolidating grants for the same disease and the same Principal Recipient. In that sense, USAID/PASCA provided technical assistance to identify weaknesses and strengthens consolidation. During the second 2010 quarter, USAID/PASCA provided technical assistance to the CCM in order to undertake impact actions aimed at completing the SUMEVE prevention modules. With USAID/PASCA technical assistance, the General Monitoring and Evaluation Plan for Global Fund Grants corresponding to Round 7 and RCC in El Salvador was also completed. This was a follow-on document to the harmonization of national and Global Fund indicators. The technical assistance provided by USAID/PASCA consisted in facilitating indicator identification in both proposals for Round 7 and RCC, and streamlining the definition of activities that would be supervised by CCM for both Principal Recipients: UNDP and MINSAL. Meetings were also facilitated to design the information-gathering instruments. USAID/PASCA provided technical assistance to the CCM in order to establish a tool that expedited the strategic follow-up of Global Fund grants. To that end, PASCA contributed to developing an Action Plan for an Information, Monitoring, and Evaluation System. With this process, the members of the CCM and the National Monitoring and Evaluation Sub-Commission became aware of their roles and responsibilities pertaining to following up the programs.

Implementing GF-funded projects. In October 2009, USAID/PASCA coordinated and led a multi-sectoral meeting. It also provided logistic support to disseminate the implementation guidelines for projects that were recently funded by the Global Fund. Approximately 150 persons from all sectors participated in this meeting, and learned about the mechanisms that must be implemented to opt for funding and about the impacts expected from projects responding to the epidemic. UNAIDS, the President of the El Salvador's Coordinating Committee (CCE in Spanish), and the USAID Mission Director in El Salvador attended this presentation. USAID/PASCA also provided technical assistance to the Office of the Human Rights Ombudsman and the Principal Recipient (UNDP) on this same topic, in order to sign an agreement that would allow them to implement the GF project, by creating the HIV Unit within the Ombudsman's Office.

USAID/PASCA's technical assistance was also expanded to organizations implementing Global Fund projects. In June 2010, a process was coordinated for civil-society organizations to elect their representatives to the CCM. This election fostered an atmosphere of trust around the process and its transparency. On the other hand, USAID/PASCA supported civil-society organizations in their analysis of the methodologies to develop the proposals they will submit to the Principal Recipient, UNDP.

Developing the new NSP 2011-2015. NAP developed the new NSP with USAID/PASCA technical assistance, building on the analysis meetings which always sought consensus based on participant's contributions and on existing strategic information. Progress was periodically presented to CONASIDA, which recognized the important role played by the Commission, as the entity leading the process to

develop the NSP. The whole national-planning process was documented in several volumes: I) National Strategic Plan, II) Results Framework, III) Monitoring and Evaluation Plan, IV) Database and References, V) Systematizing Analysis and Development Sessions. Before it was approved, the NSP was reviewed in order to ascertain its compliance with GF's requirements for a robust plan. In February, the National HIV Plan 2011-2015 and its corresponding National Monitoring and Evaluation Plan were presented to CONASIDA's full assembly. Relevant adjustments were made to them, and they were approved at a public event on April 1, 2011.

Institutionalizing the NSP 2011-2015. CONASIDA'S highest authorities participated in the official launching of the National Multi-Sectoral Strategic Plan for the Response to HIV-AIDS and STI 2011-2015, which took place in April 2011. The event to make it official was attended by over 100 key actors who had participated in developing both documents and who represented the Government, civil society, and most-at-risk populations.

NSP implementation continued to progress: El Salvador's National AIDS Program and CONASIDA held multi-sectoral workshops at the national level to disseminate the National Strategic Plan 2011-2015 (MNSP) and to promote its ownership among all the actors involved in the response. The methodology promoted NSP ownership in all the participating institutions and organizations, which was a fundamental step in the public-policy cycle. These workshops were held from July to August 2011 with technical assistance from USAID/PASCA.

Costing the National HIV M&E Plan. In order to cost the NSP Monitoring and Evaluation Plan, actions were undertaken to establish the criteria and parameters to cost the Plan and to review the draft costing document and provide feedback to it. The costing report includes cost calculations, the parameters and the sources used to prepare it. It also contains the previous year's budget, so that it can be used as the basis and the parameters for subsequent operative plans. The cost obtained through this exercise was \$7.7 million for 5 years.

Developing reports for National M&E Plan indicators. In September 2011, the first indicator report for the Monitoring and Evaluation Plan was validated. This process was facilitated by USAID/PASCA, in support of the Citizens' Group for HIV Social Oversight (MCCS in Spanish), the Health Surveillance Directorate, and the NAP. The document was publicly presented by CONASIDA at an activity held in December 2011, within the framework of celebrations of the World AIDS Day, and was reproduced by the National STI and HIV/AIDS Program.

USAID/PASCA, along with the M&E Sub-Commission, suggested developing a II Report on Prioritized HIV indicators. The National HIV Program coordinated the generation of data from information systems (SUMEVE and SIMMOW) with the Health Surveillance Directorate. In September 2012, the National M&E Sub-Commission completed the document, which reported the 30 indicators contained in the prioritized basic package. The report was presented to CONASIDA's full assembly, and was made public by the President of the Commission, who presented it to the media and the general public in October 2012.

In January 2013, the M&E Sub-Commission established a work plan for 2013 to develop the indicator report for 2012. The indicator report, which included information on 30 indicators, was submitted to CONASIDA on August 30, 2013. In September 2013, CONASIDA disseminated the report. At that time, it became evident that a culture of annually reporting prioritized HIV indicators for decision-making purposes was well established in the country.

Annual Operating Plan 2011-2012. USAID/PASCA took steps to develop the first Annual Plan for the NSP 2011-2015. In order to do so, a team composed of governmental organizations, national non-governmental organizations, cooperation agencies, faith-based organizations, universities, international

cooperation agencies, and people living with HIV was created. In response to requests from this work team, USAID/PASCA hired a local consultant to facilitate the annual planning process and to ensure that quantifiable goals based on the National Strategic Plan were included. The National STI/HIV/AIDS Program, through the technical assistance provided by USAID/PASCA, undertook this process, which responds to MNSP results, strategic objectives, and goals. It describes units of measure, financial requirements, and specific responsibilities. The Plan was approved in March 2011.

Given the need to strengthen the competencies of key actors working in the response to use and analyze economic scenarios on the HIV epidemic, USAID/PASCA held a workshop on the use of the Resource Needs Model in January 2011, aimed at representatives from the Country Coordinating Mechanism, the M&E Sub-Commission, the National AIDS Program, the National TB Program, and civil society. As a result of this workshop, participants committed to reviewing and fine-tuning the costing data included in the National Strategic Plan 2011-2015. The capabilities that were generated in the group that participated in the RNM workshops were implemented when costing the Annual Operating Plan 2011, in which data on the HIV interventions being undertaken by the country were used.

Strengthening the National AIDS Commission –CONASIDA–. USAID/PASCA provided support to the democratic election of sectoral representatives to CONASIDA in December 2010. Specifically, elections were facilitated for two posts: one full member and one alternate member from non-governmental organizations. Sixteen non-profit organizations were invited to participate, and as a result CONTRASIDA was elected as the full member and CONAMUS was elected as the alternate. During this process, the Country Representative developed the presentation that was used by the Delegate from the Governor's Office. It included the main aspects of the law regarding the election and appointment of delegates to this national entity. USAID/PASCA encouraged CONASIDA to hold this assembly, promoted coordination between the Ministry of Health and the Ministry of the Interior, and provided technical assistance to develop the summons, in order to promote transparency and the inclusion of civil society. USAID/PASCA provided technical assistance to the National M&E Sub-Commission in order to agree on a timeline which allowed following up the various NASA processes in the country, the application of the MoT model, and estimations. At the end of October 2011, the Modes of Transmission Model was presented to the National STI/HIV/AIDS Program the Country Coordinating Mechanism for Global Fund Projects, and a group of academicians from the Universidad Centroamericana José Simeón Cañas (UCA in Spanish). MoT results were disseminated officially in an expanded session and the report was reproduced in March 2012. As a result of the technical assistance provided by USAID/PASCA, CONASIDA's set of regulations was developed and approved. This set of regulations was used in December 2012 to elect civil society and media representatives to the Commission. It is now being used to guide CONASIDA's and the Monitoring and Evaluation Sub-Commission's actions.

Developing the National M&E Plan. In November 2010, the M&E Sub-Commission established as its objective to develop the new document that would become the National M&E Plan 2011-2015. To this end, the USAID/PASCA representative presented the proposed methodology to prioritize indicators, and a national working team reviewed the indicators corresponding to the NSP, UNGASS, Global Fund, Universal Access, and Millennium Goals. This constituted the basis to develop the National M&E Plan 2011-2015, a document that was made official concurrently with the National Strategic Plan 2011-2015, in April 2011.

Prioritizing indicators to monitor and evaluate the response to HIV. In several sessions of the increasingly robust National Monitoring and Evaluation Sub-Commission, the methodology proposed by USAID/PASCA was applied to prioritize national indicators to monitor and evaluate the epidemic. As an achievement stemming from this process, 31 indicators, mainly pertaining to UNGASS, Universal Access, Global Fund, and Early Warning, among others were defined.

Developing information flows for M&E indicators. In mid-March 2011, the National M&E Sub-Commission, constituted by cooperation agencies, civil society and government met to develop a design for the information flows of prioritized indicators. In order to undertake this exercise, USAID/PASCA, in coordination with PAHO, provided support to identify information sources, roles, responsibilities and information processing that would allow evidence-based decision making.

Strengthening Monitoring and Evaluation capabilities. USAID/PASCA undertook processes to strengthen M&E capacities, by holding workshops with representatives from organizations that provide services to MARPS groups, organizations that work with the sexually-diverse population, and REDCA. Participants strengthened their knowledge of monitoring, evaluation, epidemiological surveillance, research, supervision, and data audit concepts. Basic HIV Monitoring and Evaluation Courses. The workshops were aimed at strengthening the knowledge of MARPS groups' key actors participating in the response to HIV, so that they may participate in Monitoring and Evaluation processes in a critical and constructive way, improving and identifying a critical path to follow up Monitoring and Evaluation actions. On the other hand, USAID/PASCA also implemented two Central American Diploma Courses on Monitoring and Evaluation for HIV/AIDS Policy and Program Management. From December 2011 to June 2012, the Central American Diploma Course on Monitoring and Evaluation for HIV/AIDS Policy and Program Management was held in El Salvador. Sixteen final papers were presented as graduation seminars. The topics of these papers ranged from designing monitoring and evaluation instruments, evaluating specific strategies, performing qualitative analysis of legal frameworks, measuring intervention in institutions, to developing flow charts to gather information, among others. In this first Diploma Course 38 students received their Diplomas, and 2 received recognition for their participation. A second cohort of the Diploma course was held from April to September 2013. Thirty students graduated from this course, thus constituting a critical mass of professionals with credentials to work actively and effectively in the national response to HIV.

Consolidating projects funded by the Global Fund. Principal receptors of both grants being executed in the country, the Ministry of Health, and the United Nations Development Program submitted a request to unify their work proposals and comply with Global Fund requirements. In this nationally-relevant process, USAID/PASCA provided technical assistance, specifically to lead the process, establish consensus among members of the Country Coordinating Mechanism and Principal Recipients, as well as to fill out all the documents requested by the Global Fund. Consolidating projects allowed the country to establish harmonized objectives, goals and indicators that reflect the effect and impact of implementing projects. Project consolidation was approved during the first days of October 2011.

Strengthening national HIV capacities for GF Principal Recipients. USAID/PASCA participated in the Committee to Strengthen National Capacities, within the framework of UNDP's no longer acting as the Principal Recipient for Global Fund projects. Technical assistance was provided to develop the terms of reference to hire a consultant that would undertake the pre-selection process and would support the definition of the criteria applicable to organizations and institutions participating in the strengthening process. UNDP's withdrawal from acting as the Principal Recipient was gradual, until it concluded in December 2013. USAID/PASCA, supporting the CCM, helped the two NGOs, Plan Internacional, and Calma to strengthen their capabilities in order to undertake this task.

Global Fund National Strategy Application –NSA–. The country decided to participate in the Second Cycle of the Global Fund's National Strategy Applications (NSA). Countries' Declaration of Interest included the condition to have a current national strategy covering the period up to 2015, in this case, the National HIV Strategic Plan. In view of this opportunity, the country, with USAID/PASCA technical assistance, filled out all the forms and verified its compliance with all the requirements to submit its application. On March 31, 2011, the country was notified about its eligibility, and thus, entered the evaluation phase to opt for increased funding.

NASA. USAID/PASCA provided technical assistance to obtain the National Spending Assessment studies for years 2010 and 2012; there was information for 2013 that was used for the GARP Report submitted on March 31, 2014. USAID/PASCA confirmed the consistency of data that had been entered, both by beneficiary and by production factors. Technical assistance focused on guaranteeing increasing improvement of data quality.

Study on the progress of the policy response to HIV. In December 2011, the Study on Progress of the Policy Response to HIV was begun. USAID/PASCA interviewed 30 persons representing civil society, cooperation agencies, and the Government. Subsequently, activities were implemented to disseminate the Study to key personnel working on the response to HIV, and concurrently, qualitative information was gathered to explain the reason for the results that were obtained, and to identify and describe the main evidence, obtain additional information on identified gaps and their possible causes.

Forums to disseminate HIV studies. In June 2012, USAID/PASCA organized, in coordination with CONASIDA's National Monitoring and Evaluations Sub-Commission, the First Forum to Disseminate HIV Studies, which was held in August 2012 and in which 29 studies were presented. The activity was attended by 160 individuals from various sectors, among which the academic sector is worth noting. Both Professors and students of a Master's Degree in Health from various universities participated. A second forum on HIV studies was held in March 2014; 150 persons participated in it and 12 studies were disseminated.

Technical assistance to define the Research Agenda. The National Monitoring and Evaluation Sub-Commission, with technical assistance from the CDC-CAR and USAID/PASCA developed the National Research Agenda for the year 2012. A standardized tool (3D-CAM), with combined-approach matrices to prioritize issues contained in the research agenda, was used. This tool was developed by WHO and considers aspects such as governance and equity stratified data. The five components that were taken into account to define prioritization were: The magnitude of the health problem; the determinants (causes) of the health problem, the evidence/ knowledge of the interventions that is available, the cost-effectiveness of interventions, and the level of investment/ resource flow. The methodology to develop the Agenda includes the participation of the various sectors working on the national response to HIV. With this step, El Salvador became the only country in the world to use this tool to define an HIV research agenda.

Strengthening the Country Coordinating Mechanism. The CCM's Code of Ethics, developed with USAID/PASCA's technical assistance, was approved by the Mechanism in May 2012. The Code of Ethics is applicable to any one of the entities, institutions or organizations and/or individuals which, representing their sectors, are part of the Assembly and the Executive Committee, whether they are full members or alternates, as well as to those individuals appointed by committees and the Principal Recipients, sub-recipients, and the Executive Director's Office. Even though the ethical norms established in the Code apply to individuals representing institutions and organizations, their application is institutional and not personal. Thus, the institutions and organizations from each sector are compelled to promote compliance with the Code and to see to it that their representatives respect it. Similarly, technical assistance was provided to the CCM Executive Committee for the final review of the Set of Regulations, which was attended by the GMS. A hotspot in the discussion was sectoral representation, since there were differing stances on whether to reform the status and incorporate new sectors. The set of regulations was approved at the end of July 2012 and considers the participation of a greater number of sectors.

Developing the new HIV proposal for funding by the Global Fund. In April 2013, El Salvador submitted an application for the GF Funding Model for the HIV component for the 2014-16 period, which was aimed at most-at-risk populations. The Concept Note of the Proposal "Innovating Services, Reducing Risks, Renewing Lives en El Salvador". The proposal submitted by the CCM was based on the National

Multi-sectoral Strategic Plan 2011-2015, official epidemiological data and other evidence existing in the country. USAID/PASCA provided technical assistance and was part of the team to develop the proposal, which was accepted by the Global Fund for a sum of \$26.9 million. The grant will start to be executed in April 2014, and will end in 2016. The Ministry of Health and Plan Internacional will manage the funds aimed at reducing HIV/AIDS prevalence and tuberculosis co-infection in most-at-risk populations. Actions will be aimed at promoting behavioral changes by installing Community Comprehensive Prevention Centers that, in coordination with the Ministry of Health's Comprehensive Care Clinics, will seek to expand and strengthen the social protection system with a human rights approach, inclusion, and community participation.

Aligning the National M&E Plan with the proposal approved by the GF. USAID/PASCA promoted the harmonization of the National HIV Monitoring and Evaluation Plan, with indicators for the new Global Fund Grant. Out of the 31 basic indicators, around 10 belong to the new grant. On the other hand, the goals established in the Global Fund proposal were harmonized with the ones established by the national plan for 2015, in order for the country to establish a unified strategy to respond to HIV.

Activities aimed at achieving Result 2: HIV Advocacy Agendas effectively implemented

Advocacy plans with the Government 2009-2014. El Salvador elected a new Government at the beginning of 2009. In this context, the Country Coordinating Mechanism developed, with technical assistance from USAID/PASCA, an advocacy and impact plan with the aim of providing continuity to the policy commitments undertaken by the country to execute the projects funded by the Global Fund, as part of implementing its HIV/AIDS Strategic Plan. In order to execute this plan, USAID/PASCA facilitated two workshops to analyze the policy context. In them, topics were prioritized for the impact actions with candidates from all the political parties that would participate in the presidential elections, and actions were defined to fulfill commitments and make the changes in policy that were required. This technical assistance included disseminating State commitments, and identifying the progress, lacks, and gaps in the national response to the epidemic. Civil-society organizations, organizations of people living with HIV/AIDS, cooperation agencies, and the media joined these activities. This joint effort by several sectors, encouraged by USAID/PASCA, facilitated a written policy commitment by El Salvador's President Elect, Mauricio Funes, who offered increased support to HIV, TB and TB/HIV co-infection programs. In 2013, USAID/PASCA provided support to the CCM in order to develop a plan for advocacy with the President and the Vice-President who would be elected in the March 2014 elections.

Social Oversight Group Mechanism. As part of the governmental changeover context, USAID/PASCA mapped organizations and professionals who could become partners in the efforts to strengthen the HIV social oversight. In June 2009, USAID/PASCA led an advocacy and social oversight workshop which resulted in the creation of a National Social Oversight Group Mechanism constituted by eight organizations that demanded access to official information during a period of one year. In May 2009, USAID/PASCA completed a report comparing AIDS spending from 2005 to 2007. In order to develop this analysis, USAID/PASCA worked along with the members of the Citizen's Social Oversight Group (MCCS). The results were used by this mechanism to define its policy impact objectives, so that the information provided by the Ministry of Health is greater and includes MARPS populations, and that the information on prevention related to compliance with the indicators contained in MDG 6 are included in the SUMEVE. In October 2009, MCCS publicly launched the objectives sought by this group in regard to impacting on behalf of HIV operating policies, and the structure that had been created to make them operative. USAID/PASCA provided support to this citizen's group in order to develop, validate, and

adopt its internal Set of Regulations, establishing the bases for coordination, communications, and the various roles of the members. The MCCA, in its agenda, analyzed topics such as the report on following up ART in MoH patients, and the results of the API report. USAID/PASCA was able to plan and implement an advocacy agenda with this mechanism in order to strengthen its knowledge of the various stages, so that it can create an HIV information system. It also provided training to them on how to engage in analysis from a perspective of implementing policies, and monitoring and evaluating the epidemic in the country. In June 2010, the MCCA sent a note to the CCM encouraging it to impact on the Ministry of Health so that all HIV information in the SUMEVE is disseminated, and so that the human resources working in this area with resources from the Global Fund undertake the responsibilities established in their contracts with regard to generating prevention information. At the end of that same month, the Health Surveillance Unit issued a bulletin with greater information on the epidemic, while the Vice-Minister of Health stated his willingness to undertake actions in order to comply with this petition.

Bill on HIV/AIDS. In January 2010, the USAID/PASCA representative presented an optimum HIV legal model, and the organizations participating showed their support to promoting the initiative for reforms to the legal framework. As a result, a team to promote this Bill in order for it to become the HIV Law. From 2011 to 2013, various discussions were held to seek consensus for law reforms, under CONASIDA leadership. Proposed reform focuses mainly on harmonizing the HIV Law with the national and international legislation, so that it considers actions and establishes competencies, beyond the health sphere, and incorporates the gender and sexual-diversity perspectives. The most significant changes include CONASIDA's more inclusive composition, greater harmonization between the Law and the rest of the national and international legislation in force, a perspective that is less health-oriented and focuses more on rights, and the incorporation of sexual violence as a health emergency issue.

Strengthening competencies on policy environment and advocacy, within the CONCASIDA framework. With the aim of taking advantage of all the opportunities provided by CONCASIDA, USAID/PASCA developed an information workshop aimed at region leaders, which was coordinated by the USAID/PASCA representative in El Salvador. The region's policy context was analyzed in this workshop; results of HIV/AIDS policy studies were analyzed (policy environment; stigma and discrimination); critical areas were identified and advocacy agendas were prioritized; objectives for advocacy campaigns that respond to these priorities were defined, and policy maps associated to the achievement of defined objectives were developed.

HIV estimations. In order to respond to the HIV/AIDS epidemic, and in accordance with the National Strategic Plan 2011-2015, projections on the disease throughout time must be made, in order to determine aspects such as: the number of people living with HIV; the number of new infections; the number of pregnant women infected with HIV; mortality as a result of AIDS, and the need for treatment. In order to accomplish this in El Salvador, and with technical assistance from USAID/PASCA, workshops on National HIV/AIDS Estimations were held. Participants in these workshops included technicians from MINSAL's Health Surveillance Directorate, the Monitoring and Evaluation Unit under the National STI/HIV/AIDS Program, and groups of most-at-risk populations. These workshops allowed national epidemic data to be shared and the Program to be presented. Based on that, estimations were made on potential pharmaceutical and health care center needs, which helped to refine planning for the response to HIV based on expected impact.

Applying the Modes of Transmission Model. As a result of a joint effort by the Ministry of Health's National AIDS program, USAID/PASCA, and UNAIDS, El Salvador was the first Central American country to finish developing its Modes of Transmission Model. The results of the study indicate that 2,945 new HIV infections will occur in the country by 2012. The distribution of these new infections among risk groups is as follows: MSM (36.36%), SW clientes (15.29%), casual heterosexual sex (9.49%), low-risk heterosexual sex (10.57%), SW (7.82%), SW partners (6.80%), among others. The results of this

study are key to the process to plan prevention actions. Study recommendations include the need to intensify actions aimed at prevention among most-at-risk groups, such as MSM.

Analyzing HIV information. As part of the joint evaluation of the national HIV strategy, in 2010, USAID/PASCA facilitated several working meetings to analyze the policy environment, aimed at government and civil-society decision-makers. The sessions to analyze the policy environment helped to identify scenarios on the national HIV response, and to identify the institutional and governance gaps on which strategies will be established to improve the policy environment in regard to HIV.

Strengthening MARPS organizations. USAID/PASCA provided technical assistance to the following Trans organizations in order for them to acquire legal standing: COMCAVIS, Colectivo Alejandría, ASPIDH/ ARCOIRIS, and ASTRANS. They were provided legal counsel to develop their By-Laws and their Articles of Incorporation, and to present them to the Ministry of the Interior with all the required documentation. They were approved by the Registry of Non-Profit Associations and Foundations, and they were legally established, thus becoming Global Fund recipients. The legal registration of these NGOs has streamlined their resource management, in order to continue to promote the human rights of the Trans community and thus participate actively in the national response to HIV.

Technical assistance to strengthen the Human Rights Approach. The USAID/PASCA Country Representative developed an analysis on human rights and HIV, which she shared with the CCM in October 2010. The aim was to keep commitments pertaining to this issue at the forefront, in order to strengthen citizen oversight. In addition, in October 2011, during a Central American Human Rights Conference, the HIV Unit under the Office of the Human Rights Ombudsman was officially opened. Public recognition was given to USAID/PASCA for its technical assistance in developing the proposal for the RCC grant from the Global Fund, which supported the creation of the HIV Unit in this national entity. Additional recognition was given to the technical cooperation provided to execute an Agreement by the Ministry of Finance, UNDP, and the Office of the Human Rights Ombudsman, which is part of implementing the Global Fund proposal.

Promoting strategic alliances between FBOs and other community-based groups to increase their participation in the national response. In November 2010, a national workshop was held with the FBO sector, in order to validate the Guide to Involve Faith Based Organizations in the Response to HIV. As follow-up to this workshop, a training workshop “HIV and Churches: Response from within Faith Communities” was held in May 2011, in which analytical skills were strengthened in order to understand the social factors that affect the response to HIV. At the end of the workshop, participants stated the challenges faced by churches when responding to HIV, and their actions to respond effectively to stigma and discrimination. This sector is now represented within the CCM and contributes to actions aimed at the national response.

Advocacy campaign to create the Sexual-Diversity Human Rights Group. Sexual-diversity groups, with technical assistance from USAID/PASCA developed an Advocacy Plan to create the Permanent Sexual-Diversity Group under the Office of the Human Rights Ombudsman, as a permanent space for dialog. The establishment of the Permanent Group at the Office of the Human Rights Ombudsman for the LGBTI population was made official on May 17, 2012, when sexual-diversity organizations, individual activists and the Human Rights Ombudsman signed the document creating it. The Permanent Group is a democratic space facilitated by the PDDH, with the aim of undertaking coordination, analysis and policy-impact actions on behalf of the LGBTI population, so that they can exercise their human rights and society becomes increasingly respectful and inclusive of them. The priority of the Group is to strengthen the legal normative and policy framework relating to Gender Violence, Sexual Violence, and HIV, for its corresponding compliance; contributing to eliminate stigma and discrimination barriers for the LGBTI population among health service providers and the justice system, and to help to eliminate these barriers affecting the LGBTI population insofar as its right to identity. USAID/PASCA provided technical

assistance to develop an Action Plan for 2012 and to implement advocacy actions on behalf of care with equity by health services. In September 2012, USAID/PASCA presented, discussed, and validated the technical guidelines for a sexual-diversity health approach with the Permanent Sexual-Diversity Group. They were later approved by the Ministry of Health.

Strengthening MARPS capabilities: USAID/PASCA has strengthened HIV advocacy and policy-dialog capabilities regarding the regulatory, policy, and legal framework on HIV and MARPS; international and national HIV laws and agreements; the use of computer tools that expedite accountability in MARPS organizations; communication and conflict resolution processes, and orality techniques to achieve policy impact. USAID/PASCA also provided technical assistance to the Foro de ONG de la Lucha Contra el Sida to develop its Advocacy Plan in September 2012. During several analysis sessions, participants used the API 2010 study and the study on the Progress of the Policy Response to HIV 2011 as the basis to develop its Advocacy Plan. Civil-society institutional capacities were strengthened with this process in order to more effectively contribute to the national HIV response within the framework of the National Strategic Plan 2011-2015.

MARPS small grants program. In June 2012, a small grant was awarded to COMCAVIS, a Trans NGO. This proposal achieved the following objectives:

- a) Ensuring representativeness for the Trans population in the Country Coordinating Mechanism (CCM-El Salvador), with the aim of performing citizen HIV oversight, as a means of monitoring compliance with the State programs and commitments related to funding from the Global Fund.
- b) Strengthening communication mechanisms between the Trans population and the individual representing it in the CCM, by developing a communication tool that shows the mechanisms that must be implemented so that the Trans population makes decisions in a representative way.
- c) Creating impact for the Ministry of Health's approval and application of the "Guide for Care to Sexual Diversity", aimed at operative personnel, containing MINSAL's guidelines to provide care free of stigma and discrimination to the sexually-diverse population. This achievement is the result of considerable efforts coordinated by this community-based NGO that acted in the policy arena and that was able to have an effect on health authorities so as to approve this guideline.

Analyzing information for HIV policy impact. In October 2012, USAID/PASCA held three meetings aimed at the Trans community. In them, training was provided to analyze studies such as NASA, the Stigma and Discrimination Survey, and the Study on the Progress of the Response, with the aim of using the analysis that was generated to define its advocacy agenda. Participants established that, notwithstanding that the epidemic is concentrated on the population represented by them, the investment in this sector is minimal. They were also able to establish that the context within the general population was adverse to their intent of obtaining support for a Law on Trans Community Identity. USAID/PASCA's role was to support the Trans community in their decision-making based on an analysis of scenarios and the information that was available.

In this same context, in March 2013, actions were undertaken to analyze HIV policies with key individuals working in the national response. The following results were sought: a) identifying the contribution of the policy changes occurring in the response to HIV during the 2008-2013 period; b) identifying the main challenges faced by policy changes within the framework of the HIV public-policy cycle; c) prioritizing policy changes that are fundamental, in the short and medium terms, to advance in the response to HIV. Through these activities, organizations learned about and developed some basic concepts, such as policy cycles, policy actors, policy changes, and others, which enabled participants to identify and recognize the progress achieved in diminishing stigma and discrimination toward sexual diversity, especially within the health sphere.

MARPS' participation in the Country Coordinating Mechanism–CCM-ES. In February 2013, with technical assistance from USAID/PASCA, a historical landmark was achieved. For the first time ever, the MSM and the Trans communities held a General Assembly to elect their representatives to El Salvador's Country Coordinating Mechanism (CCM-ES), with the purpose of engaging in citizen oversight to ensure compliance of State programs and commitments in regard to Global Fund funding and the participation of the Trans population. From May to June 2013, USAID/PASCA facilitated discussions and decision-making by the organized sex-workers sector represented by organizations such as Asociación Flor de Piedra, Orquídeas del Mar, Organización de Trabajadoras Sexuales (OTS), and Liquidambar, so that they would be represented in the Country Coordinating Mechanism. This was unprecedented, since this population was not part of the coordinating mechanism, and its incorporation was achieved through the participation of groups most vulnerable to HIV.

Advocacy campaign on behalf of the Law on Sex Education. USAID/PASCA provided technical assistance to the Salvadorian Coalition for Integral Sex Education, which is part of the Mesoamerican Coalition for Integral Sex Education and whose aim is to follow up on the Ministerial Declaration "Preventing through Education", approved by representatives from Latin American and Caribbean Health and Education Ministries within the framework of the International AIDS Conference held in Mexico City in August 2008. This network worked on an advocacy plan to secure approval for the Law on Comprehensive Sex Education, which will foster adolescents' and young people' acquiring knowledge and capabilities to make responsible decisions, reduce risk behaviors and opportunistically access accurate information. To that end, on October 9, 2012, a workshop to develop an advocacy plan was held. This workshop included a scenario analysis, actor mapping, and a work plan that includes a critical path that establishes the submittal of a Bill to the Legislative Assembly. Throughout 2013, Coalition members implemented policy-lobbying and alliance-generation activities to ensure a favorable environment to approve the above-mentioned Law.

Activities aimed at strengthening the response to HIV by way of processes to develop, implement, and monitor policies that address gender-based and sexual violence

Consolidating a regional mechanism to address GBV, SV, and HIV. With the aim of establishing alliances aimed at linking sexual violence and HIV, USAID/PASCA held meetings with the Supreme Justice Court and with the Gender Group, a multi-sectoral space constituted by governmental and non-governmental institutions providing care to sexual-violence victims, among them: the National Civil Police, the General Attorney's Office of the Republic, the Legal Medicine Institute, the Salvadorian Women's Development Institute, under the coordination of the Justice Sector Technical Executing Unit (UTE in Spanish). In this coordination space, USAID/PASCA provided technical assistance to harmonize health and justice care protocols, to establish care for sexual-violence victims as a medical emergency, and to raise awareness on providing care to those populations most at risk for HIV.

Updating the Guide to Provide HIV Post-Exposure Prophylaxis and actions to achieve its implementation. USAID/PASCA provided technical assistance to updating the HIV Post-Exposure Prophylaxis. The Ministry of Health's National STI and HIV/AIDS Program, Regulation Directorate, Violence Unit, and Health Surveillance Directorate were the entities in charge on working on such update. In June 2013, workshops were held to develop this update and to consult with HIV experts from the various hospitals in the country. The Guide includes the legal basis, objectives, sphere of application, technical stipulations (occupational exposure to HIV, exposure to HIV through sexual violence, and epidemiological monitoring, evaluation, and surveillance), as well as general stipulations. It was validated with personnel from the General Prosecutor's Office of the Republic, Legal Medicine, National Civil

Police, and the Women's Development Institute (ISDEMU), among others. On December 7, 2012, the Guide to Provide HIV Post-Exposure Prophylaxis was approved by the Minister of Health. This Guide declares sexual violence as a medical emergency, which will change the National Care Pathway to provide care to people who are victims of sexual violence, since they have always been provided legal attention, but not health care. In order to start implementing the Guide, USAID/PASCA undertook procedures with MINSAL in order to coordinate the training that will be provided to key personnel. From March to October 2013, USAID/PASCA strengthened the capabilities of technical teams from the Ministry of Health's service network, starting with regional epidemiologists, SIBASI representatives, those in charge of emergency and gynecology departments at the various hospitals, and personnel in directive positions within the Community Family Health Units (UCSF in Spanish). Dissemination workshops were held with health staff working in the various health facilities in all of the country's regions.

National Critical Care Pathway for victims of sexual violence, established through the Gender Group. USAID/PASCA led the process to develop the National Critical Care Pathway for those individuals who are victims of sexual violence, with the aim of establishing health care to prevent HIV and other STIs as a priority. This included immediate access to Post-Exposure Prophylaxis. The Pathway established immediate steps that must be taken from the moment that the victim arrives at the following institutions: National Civil Police; Health Unit or Hospital under the Social Security Institute or the Ministry of Health; General Prosecutor's Office; private health facility; Salvadorian Women's Development Institute (ISDEMU), or when the victim calls the Ministry of Justice and Public Security's call center. In addition, when validating this Care Pathway, the procedure that must be followed was determined, depending on whether the offense occurred before or after 72 hours of reporting it, whether by notification or report. In the former case, health care takes precedence, in order to make a clinical diagnosis and administer post-exposure prophylaxis.

Technical assistance to the Gender Group. USAID/PASCA provided technical assistance to the Gender Group, coordinated by the justice sector's Administrating Unit, in order for it to develop a Strategic Plan for the 2012-2017 period. The following issues were included in it: a) Harmonizing justice and health protocols for violence victims; b) establishing a critical pathway for victims of violence and giving preference to health care over legal attention, and c) improving the capacity of the staff from various entities caring for violence victims, in order to prioritize health care, emphasizing HIV Post-Exposure Prophylaxis and care free of stigma and discrimination for sexually-diverse individuals (LGBTI). Within the framework of these efforts, USAID/PASCA provided technical assistance to the National STI and HIV/AIDS Program in order to develop the budget required to guarantee specific funds to provide access to PEP. This was achieved with the approval of the 2013 budget by the Legislative Assembly. This effort is an event of great national importance, since it enabled effective application of legal norms to eradicate all forms of violence by assigning resources for its implementation.

Training on GBV/SV and HIV. Within the framework of strengthening institutional GBV/SV and HIV capacities, USAID/PASCA provided training to the Salvadorian Women's Development Institute on "HIV Prevention as a Risk Factor Associated with Gender and Sexual Violence". This workshop further analyzed the link between sexual violence and HIV by identifying three risk factors: transmitting STI/HIV; hiding HIV seropositive status to prevent instances of violence, which generates unsafe sexual practices, and covering up sexual-violence instances, thus limiting the victim's possibilities of accessing HIV prophylactic care opportunely.

Activities aimed at achieving Result 3: the business sector involved in the response to HIV.

Generating the conditions to adopt HIV workplace policies. Given that fostering the engagement of the business sector in the response to HIV merits efforts by government, cooperation agencies, and of all

the country's driving forces that participate in the national response, USAID/PASCA opened up a coordination space with the Ministry of Labor. In 2009, it was able to mobilize them so that they promote such engagement, from each one's area of influence, and so that they position the topic of HIV workplace policies in the business sector. Some of the outcomes of the technical assistance provided by USAID/PASCA to the Ministry of Labor are as follows: 1) The Legislative Assembly's approval of the Law to Prevent Risk in Workplaces, which contains an explicit directive to establish HIV workplace programs; 2) the Ministry of Labor's Strategic Plan, which incorporates the HIV component in the workplace; 3) a training workshop aimed at labor inspectors, in which the main topic was supervising compliance of HIV workplace programs, as follow up to the Law that had been recently approved. During that workshop, USAID/PASCA strengthened the competencies of these inspectors who work directly with the country's business sector.

Involving the business sector in El Salvador's Coordinating Mechanism. USAID/PASCA facilitated a series of meetings between the CCM and the business sector, in order to raise awareness on the importance of having this sector work in the national response to the epidemic, and the importance of its incorporating into a national mechanism. USAID/PASCA had previously supported the CCM to reformulate its By-Laws, seeking increased openness to sectors that were not represented. It also facilitated the business sector's appointment of its representative and sought consensus between the sector and the mechanism to seek common work objectives.

Involving the business sector in CONASIDA. The full-fledged representative of ANEP in CONASIDA incorporated in October 2011. As of that date, he participated in various processes that were of interest to the sector, such as reviewing the HIV Law, developing proposals for the Global Fund and establishing the feasibility of actions executed to face the epidemic as a sector.

Tools and training to develop HIV workplace policies. In January 2010, USAID/PASCA developed three training workshops aimed at human-resource managers from 5 businesses. Workshops focused on strengthening capacities, so that there is a better understanding of such topics as: the epidemic; the importance of having HIV business policies; lobbying to secure the business sector's policy support; the ways in which an HIV business policy can be developed, and the country's legal framework on that issue. The Salvadorian Social Security Institute was invited to co-facilitate some of the topics of the workshops. Then, in 2011, USAID/PASCA held another series of workshops to develop HIV workplace policies; this time, 8 companies participated. The topics that were addressed included stigma and discrimination, gender and sexual violence, impact of HIV in the labor sphere, and HIV workplace policies, among others. USAID/PASCA facilitated a third round of workshops in September 2012; 20 of ANEP's member companies participated. The last round of workshops was executed directly by ANEP, by means of a mini-grant awarded to it in November 2013. Ten companies participated in this workshop.

Adopting HIV workplace policies. During the life of the project, 24 companies developed and adopted their HIV labor policies with technical assistance from USAID/PASCA. The policies were a result of a series of individual meetings with each company with which USAID/PASCA personalized its technical assistance in order to adjust each policy to the interests of the business sector it was working with. With these policies, companies committed to incorporating prevention and education programs aimed at transferring knowledge, changing attitudes and behaviors, making opportune diagnoses, exhibiting zero tolerance to stigma and discrimination and protecting the rights of workers.

Strategic alliance with ANEP. In September 2013, USAID/PASCA awarded a mini-grant to ANEP, the institution representing the country's business sector. With this, three objectives were achieved:

1. Motivating trade leaders, business organizations, and individual companies affiliated to business organizations about the importance of generating a response from the productive sector, to ultimately develop ANEP's HIV policy.

2. Strengthening the National Association of Private Enterprise of El Salvador so that it becomes the coordinating center of the business response to HIV in the labor sphere, generating alliances with companies and/or trade organizations promoting Businesses' social responsibility.

3. Encouraging business organizations and individual businesses affiliated to business organizations to adopt HIV workplace policies.

In March 2014, USAID/PASCA held 2 activities to close the project. The first one was the II Forum to Disseminate HIV studies, where 10 studies on HIV in the country were presented. This activity helped to disseminate the evidence on the behavior or the epidemic. The second activity was a project- closing session, in which the progress achieved in the country in regard to the HIV policy environment was presented. The project received much recognition from counterpart organizations.

2.5 Guatemala

When the Project started, Guatemala had a National HIV Strategic Plan 2006-2010, which had been costed by the USAID/HPI regional project in 2008 and a National Monitoring and Evaluation Plan for the same period.

From June to November 2009, USAID/PASCA started providing permanent support to the CCM by means of technical assistance to develop a proposal that was submitted to the Global Fund in order to fund Phase III of the HIV project (validated by the Ministry of Health and civil-society organizations) and to design and coordinate a country strategy that ensured continuity for prevention and care aimed at high-risk groups. USAID/PASCA co-facilitated a workshop on lessons learned and recommendations for future proposals.

USAID/PASCA started a process to strengthen the capacities of civil-society organizations in September 2009, by facilitating a workshop on monitoring and evaluation of the HIV response, aimed at these organizations in order to streamline their implementing HIV/AIDS information systems and to inform them about the 12-step methodology proposed by UNAIDS. In this workshop, participants defined the gaps in the appropriate implementation process.

Evaluating the Strategic Plan 2006-2010. This evaluation was performed with USAID/PASCA's participation, permanent support, and assistance, and had ample representativeness of the governmental sector, civil society, cooperation agencies, and the academic sector, among others, which contributed to and influenced the development of a document that provides a critical overview of NSP compliance.

Developing a new HIV Strategic Plan 2011-2015. In this context and based on the results of the evaluation, the country decided to develop a new Strategic Plan for the 2011-2015 period. To that end, USAID/PASCA, along with other cooperation agencies, proposed and facilitated a series of orientation workshops to position the priority issues that would contribute to an assertive planning process. USAID/PASCA led and facilitated the conditions to foster discussion and analysis by way of working groups that developed the strategy, providing the necessary strategic information to guide the response to HIV in most-at-risk populations, considering the concentrated epidemic occurring in Guatemala. The outcome was evident at the end of 2010, when, to the project's great satisfaction and according to the planning process, ASAP methodology was used to gather evidence aimed at developing a results framework, which the Ministry of Health successfully made official.

Updating the SIGSA-SIDA database on HIV cases. As of October 2009, USAID/PASCA provided assistance to NAP in order to underscore the importance of the information system –the SIGSA-SIDA HIV/AIDS database– for the National Response to HIV. This system was based on the country's indicator report used to develop opportune Global Fund reports, which is a policy and country commitment. This process was implemented by means of an informative and participative workshop, held with the purpose of harmonizing criteria to update the information gathered in the SIGSA-SIDA system in the country's prioritized health areas. The outcome of the workshop was: A document listing the main bottlenecks to feeding the system and participants' commitment to assume responsibility for keeping the databases updated.

Updating MANGUA, the database on PLWHA clinical management. In August 2010, USAID/PASCA responded to NAP's request for support that consisted in hiring data-entry clerks to update the MANGUA database (which captures clinical follow-up of HIV patients in Comprehensive Care Units). The result was that, during the first 2011 quarter, the database was updated, and 4 indicators of interest to the National M&E Plan, the UNGASS report, the Universal Access report, and Global Fund report generation were obtained.

Critical path to make the HIV national indicators operative. In coordination with the National Monitoring and Evaluation Committee and UNAIDS, USAID/PASCA held a workshop on July 14 to 16, 2010. In it, participants defined the way in which to make implement the proposals to eliminate barriers in data generation for prioritized National M&E Plan, UNGASS, Universal Access, and Global Fund indicators.

Coordinating with partners to establish a technological platform aimed at generating reports. With the purpose of helping to strengthen the role of the Ministry of Health as PR, USAID/PASCA facilitated a discussion and analysis process aimed at reviewing the SIGSA technological platform and the gradual incorporation of Global Fund indicators, achieving important agreements with CDC, UNAIDS, USAID's Dialog Project, HIVOS, and MSPAS.

Official information on country indicators. USAID/PASCA contributed to several work meetings that allowed harmonizing criteria among organizations working on the response to HIV, as to the ways in which data are delivered, consolidated and validated. The country presented the UNGASS report in March 2010. It reported on 15 out of the 25 UNGASS indicators, which also represent 9 out of the 25 indicators contained in the National M&E Plan (36%).

Monitoring implementation of HIV policies. During the last quarter of 2009, USAID/PASCA provided its advisory services to SEGEPLAN at two planning meetings, in which participants agreed to address policy issues related to HIV, which were monitored by that entity as part of its institutional mandate. To that end, it developed a matrix for the policies and their sub-topics as the basis to monitor the indicators defined in the various national plans. In May 2010, the development of the indicator matrix to monitor HIV public policies was completed. As a significant output, SEGEPLAN then had a tool that was created to monitor and report basic epidemic indicators in its annual reports. USAID/PASCA followed up on the application of this tool, and supported the development of a progress report for 2010.

Disseminating and using HIV strategic information. USAID/PASCA organized the forum to present studies in the month of November 2010. Its aim was to disseminate the information existing in the country, and to promote analyzing and discussing the results of HIV studies. A result of this important event, which strengthened analysis of strategic information, was the participation of representatives from civil-society, government-sector, business-sector institutions, and the international cooperation agencies. It is worth noting that the Forum lasted two days and that its presentations included: Study on HIV Estimations and Projections; AIDS Action Plan; API Study; NSP Evaluation; Cost of HIV for IGSS; Research on HIV Tests; Campaigns on Access to Voluntary Testing; Reports Generated by MANGUA, and Reports on Sentinel Surveillance.

Strengthening the CCM. As a contribution to the process to implement projects funded by the Global Fund, USAID/PASCA provided technical assistance to strengthen CCM capacities. During the first 2010 quarter, technical assistance and accompaniment was provided for the discussions aimed at developing its internal set of regulations. The proposal for an internal set of regulations facilitated by USAID/PASCA establishes the norms for members' selection and votes, as well as for eliminating conflicts of interest.

Implementing projects funded by the GF. Accompaniment and technical assistance to implement projects funded by the Global Fund was provided by USAID/PASCA on topics such and monitoring and evaluation: institutional strengthening for PRs and civil-society organizations; supporting the transition process for the Principal Recipient; legal counsel, and accompaniment for the impact and advocacy processes at the Congress of the Republic, in order to approve the agreement between the Ministry of Health and the Global Fund on approving Phase II of the TB project funded by the Global Fund. The Project also contributed to preparing an informative poster on the issue, which was used as an information tool in the lobbying meetings with Congress. As a result of these actions, the Congress of

the Republic approved, as a matter of national urgency, the agreement on the grant for the above-mentioned project, which was recorded and published in the Official Newspaper as Legislative Decree 12-2010.

Technical assistance to approve Phase III of the HIV Project funded by GF. USAID/PASCA provided support to develop the proposal for Phase III of the HIV project that was being executed in Guatemala with funding from the Global Fund. It was submitted opportunely on December 30, 2009, complying with the requirements of the Global Fund's Independent Technical Review Panel. As a result of the technical assistance being provided, a budget was coordinated and developed in order to respond to the changes required in project strategy; proposal integration; monitoring plan integration, and policy mediation between the Ministry of Health and CCM to effectively achieve grant funding.

Approving the new NSP 2011-2015. At the request of the Ministry of Health, USAID/PASCA actively participated in re-activating the process to develop and complete the NSP 2011-2015 report, by means of a consultant who supported the creation of a multi-sectoral working team. Their valuable contributions resulted in the successful completion of a final report that was approved and made official by the Ministry of Health in July 2011.

Workshop to develop capacities in the use of the Resource Needs Model. In November 2010, USAID/PASCA helped to develop capacities to undertake analyses and to use information on costing the response to the epidemic by means of a workshop in which discussions were held by a group of experts from SEGEPLAN, the Strategic Planning Unit, the National Epidemiology Center, the National AIDS Program –which is responsible for M&E and for developing the NASA report–, the Guatemalan Social Security Institute and HIVOS –the Principal Recipient of GF Projects–.

Defining a basic indicator package for HIV Monitoring and Evaluation. As part of the regional and country commitments to perform an exercise aimed at prioritizing a group of indicators for periodic reporting by the country, in March 2011, USAID/PASCA facilitated a workshop in which a participation methodology was developed and analyses were undertaken with working groups. These groups were composed of representatives from the different Ministry of Health departments working on gathering and reporting information; representatives of HIVOS, as the other Recipient of the project funded by the Global Fund; members of the M&E Committee, and civil-society representatives, including MARPS groups. The outcome was a basic package of 35 prioritized indicators, from which 12 of them were deemed to be reportable in the short term (2011). Procedures were undertaken to have the National AIDS program make these prioritized country indicators official, so that they can be included in the new National M&E Plan.

National M&E Information System established and operating. In October 2010, USAID/PASCA participated in the process to harmonize the information systems that provide information to monitor and evaluate the response, providing advisory services to the new Global Fund Principal Recipients, HIVOS, and the Ministry Health, in order to harmonize their performance frameworks. This effort included reviewing the indicators that would be reported. In compliance with a Global Fund condition that both PR had to use the same system in order to make the second disbursement, a costed action plan was developed to strengthen the information system. By means of working meetings, both Principal Recipients were able to identify the group of prioritized indicators and establish their needs in order to have an efficient M&E information system.

Eliminating bottlenecks for financial and program implementation of GF projects. USAID/PASCA provided advisory services to the Ministry of Health so that it could undertake its role as Principal Recipient. This implied technical assistance to organize its administrative structure and to comply with the requirements of the Global Fund. Assigning the Ministry of Health as the recipient to provide

continuity to Global Fund projects underscored a considerable number of operational barriers that had to be addressed if it were to implement the projects. Within this context, USAID/PASCA approved hiring two individuals for strategic positions in the implementation process: one was an official in charge of Logistics, and the other one was an official in charge of the Monitoring and Evaluation area. This contributed significantly to eliminating bottlenecks and to the immediate startup of these areas. Concurrently, USAID/PASCA provided advice to the Ministry of Health so that it would assume its role as Principal Recipient, and provided technical assistance to organize its administrative structure, and to comply with Global Fund requirements.

Strengthening the Country Coordinating Mechanism. USAID/PASCA contributed to the compliance with Global Fund requirements on multi-sectoral expansion of the Country Coordinating Mechanism by providing technical assistance to develop the new By-Laws for this Mechanism, which replaced the previous internal set of regulations. The final document was approved by the General Assembly on November 26, 2010. However, it is important to mention that, during a five-month period, USAID/PASCA facilitated the CCM's tasks and actions required by the GF, so that it completed all the administrative requirements established by the Global Fund to achieve the viability needed to implement the Rolling Continuation Channel for the HIV project funded through R3 in October 2010.

In March 2011, USAID/PASCA, at CCM's request, developed three administrative-procedure manuals that help to define with clarity and transparency the various roles of those constituting this mechanisms and to define a plan to start implementing its By-Laws. An Ethics and Governance Committee was established to ensure a transparent election of its Board of Directors.

Technical assistance to the HIV Monitoring and Evaluation Team. In compliance with the commitment established by the Global Fund to re-activate the Monitoring and Evaluation Committee and as per the request of the Ministry of Health, USAID/PASCA provided technical assistance to expedite technical and legal processes to develop a legal framework that would establish Committee activities. On March 8, 2012, by means of Ministerial Agreement 18-2012, the National Health Monitoring and Evaluation Committee for STI/HIV/AIDS was created. It was published in the Official Newspaper on March 27, 2012.

In July 2012, USAID/PASCA undertook the commitment to provide the technical assistance required to develop the National Monitoring and Evaluation Plan, based on the development of PBI monitoring and evaluation indicators, NSP indicators, and the National HIV Policy indicators. The final document was validated in August 2012, thus establishing the National M&E Plan indicators; defining and classifying algorithms; reviewing data flowcharts, and reviewing the tasks pending for twelve components of the monitoring plan. In this way, the commitment to the Global Fund undertaken by the Government of Guatemala was fulfilled, with USAID/PASCA accompaniment and technical assistance.

HIV information sub-system. USAID/PASCA undertook procedures with Ministerial authorities so that the MANGUA application was considered as a sub-system of the Sistema Información Gerencial de Salud (Health Information Management System–SIGSA in Spanish). This was important because MANGUA captures information about HIV patients (PLWH) in all the UAIs, which meant securing information on their treatment, representing 72% of HIV public spending.

Diploma Courses on Monitoring and Evaluation for HIV/AIDS Policy and Program Management.

Guatemala launched the first M&E Diploma Course in December 2011, with the participation of the Minister of Public Health. Thirty-six students participated, representing the governmental, private, civil society, and academic sectors. It concluded successfully, as evidenced by the research projects prepared for the study seminars, which included new data and knowledge about the HIV epidemic in Guatemala.

As follow on to the process of M&E training, in June 2013, USAID/PASCA launched a second Diploma Course endorsed by the Ministry of Health. This second phase was aimed at strengthening the area of health economics. Twenty-eight students successfully completed the course, presenting research seminar projects aimed at strengthening the national response, whose subject matters included: improvements to the monitoring and evaluation system at the national level; HIV workplace policies for the coffee-growing sector; improvements to referral and response systems for HIV patients, and strengthening the monitoring and evaluation systems of Global Fund sub-recipients.

Reports on AIDS Spending Assessment. USAID/PASCA provided technical assistance to perform the NASA 2010 and 2012 studies. This assistance consisted of holding workshops in which the methodology was disseminated and preliminary results were analyzed and shared. However, the country was late in submitting the final reports, although it always reported the data in its annual reports to the United Nations and at COMISCA meetings.

Study on the Progress of the Policy Response to HIV. Since USAID/PASCA started, efforts were made every two or three years to perform studies that allowed measuring the policy environment in the country. To that end, the project used methodology that required interviewing key actors and representatives of organizations and institutions that had played an important role in the response to HIV in the country. It is important to underscore that meetings were held to analyze and discuss the results with various actors. One such meeting took place in September 2012, when civil-society organizations, government-sector and private-sector actors were summoned to perform an analysis of the quantitative indicator results from the survey performed on 30 key actors, which showed a national average of 0.51 (over 1.00) versus an average of 0.54 at the Central American regional level. The 8 policy areas included in the quantitative surveys were qualitatively assessed, and the scores were: Multi-sectoral Response (0.57), Public Financing (0.46), Access to Drugs (0.59), Stigma and Discrimination (0.57), Human Rights (0.57), MARPS (0.59), GBV/SV (0.49), and Business Sector (0.31). An important result of this exercise was that, by promoting discussion among the various actors, proposals were generated to improve several areas of influence.

Applying the Modes of Transmission Model. In 2011, USAID/PASCA led the study “HIV Modes of Transmission Models” (MoT), through a joint effort by the Ministry of Health, civil-society organizations, and international-cooperation agencies. The outcome of this effort was a final document that has been used as input in processes to analyze results with civil-society organizations, among them: Rednads, Grupo Unidos, Fundación Marco Antonio, Redmutrans, NAP staff and the National M&E Committee. The participation of representatives from organizations of vulnerable groups helped to identify the needs of the Trans population. One of the conclusions stemming from these discussions was that the MoT tool was identified as a simple tool that provides information for decision-making purposes.

Report on the Progress of HIV Public Policy (638-2005). From October to December 2011, three workshops were held in order to develop the First Report on the Progress Achieved in Implementing Public Policy 638-2005. The national report on this policy responded to the requirement contained in it that said report must be jointly developed by the National STI/HIV/AIDS Program and SEGEPLAN. The consultant hired by USAID/PASCA to work in conjunction with SEGEPLAN and the Ministry of Health

shared the findings of the analysis performed on the progress achieved by this policy, and highlighted the gaps identified in implementing this public policy.

Technical assistance to include HIV priorities in the national policy agenda. One of the main characteristics of USAID/PASCA throughout the life of the project was to establish a real presence in the Ministry of Public Health with the various authorities who took office during the different administrations. This was done with the aim of placing the issue of comprehensively addressing HIV in the country in their policy agendas, with a focus on using strategic information for decision-making purposes. In this context, it is important to highlight that during the five years of the project, it was able to position technical assistance at the policy level with two different government teams, which meant changeovers in Ministers and Vice-Ministers and, at the programmatic level, four different National HIV Program coordinators. Notwithstanding the changeovers, important cooperation linkages were established. During these and other information meetings, the main topics to address the HIV epidemic were discussed, such as implementing the National Strategic Plan; the Global Fund's HIV tuberculosis and malaria projects; the national information system, and the role that stigma and discrimination play in the behavior of the epidemic.

Forum to disseminate HIV studies. During this period, two Study Forums were held. The first one was held in August 2012, and in it, 20 studies were presented. These studies included various topics related to HIV, such as strategic information systems; stigma and discrimination, human rights, and others. They were presented by representatives of the MSPAS; the UAI; civil society; international cooperation, and other governmental entities. USAID/PASCA presented a study on Stigma and Discrimination (Cid-Gallup), the Study on Modes of Transmission; a Regional NAS analysis, and the Study on the Progress of the Policy Response. There were 85 participants who represented key authors from the various institutions. The second Forum was held in March 2014, with the purpose of sharing the technical and scientific studies that were available as of that date. It was designed to include six modules: Epidemiology, Human Rights, Prevention, Care, Policy Environment and Funding, which were presented by officials from: the National STI/HIV/AIDS Program; national and regional civil-society organizations, CDC/UVG, IGGG, the National Epidemiological Center, PASMO, and USAID/PASCA officers. Worth noting is the presentation of the API report and the Stigma and Discrimination Studies performed by USAID/PASCA, the update of the epidemiological overview, prevalence and trends, as well as special studies generated by civil society. Over one hundred persons actively participated in the debates of the modules, which generated an ideal opportunity to discuss and analyze the issues. It is important to underscore that the publications presented at this Forum had not been shared previously. It was evident by the receptivity shown by the various actors participating in the response to HIV in the country to this type of Forums that there is a need to promote more discussion opportunities.

Disseminating the National Strategic Plan 2011-2015. USAID/PASCA contributed to printing 500 copies of the new NSP, which were officially delivered to the National HIV Program with the purpose of using them to facilitate analyses and discussions among the MSPAS and the different actors participating in the response. USAID/PASCA, along with other cooperation partners, promoted the dissemination of the NSP as a public-policy tool. In March 2012, three regional workshops were held with active participation of the officials from the Health Area Directorates and civil-society organizations. The copies were officially delivered by the National HIV Program to the various health services and non-governmental organizations participating in the country's response.

Technical assistance to strengthen the CCM. USAID/PASCA provided permanent technical assistance to the CCM on issues pertaining to Governance and good management practices. A workshop aimed at the Board of Directors and all the other members of the Assembly was held, with 30 participants. As a result of systematizing this activity, it became evident that there is a need to continue strengthening the

organizational structure of the CCM, with an emphasis on developing a long-term Strategic Plan; revising the By-Laws; improving the operation of the M&E, Ethics, and Governance Commissions, as well as creating two new commissions, one in the technical area and another one for communications, and starting an internal-strengthening process to improve corporate management.

Strengthening the Monitoring and Evaluation Committee. Since the National Monitoring and Evaluation Committee was created, USAID/PASCA has been present, generating permanent technical assistance. In this context, it facilitated the development of the Manual on Data Quality Management, with the purpose of monitoring the 31 indicators prioritized by the HIV Monitoring and Evaluation Plan. This manual was applied to guarantee the quality of the data reported by the country to the Global Fund, and the quality of the information produced for decision-making purposes. In many instances, USAID/PASCA facilitated analysis sessions for the M&E Committee, in order to study the various indicators generated by the country. This was done with the aim of establishing a culture of evidence-based monitoring and evaluation. In conjunction with this committee, USAID/PASCA developed a National M&E Plan, thus contributing to the process to review and prioritize indicators. In August 2013, the M&E Committee, in conjunction with the National AIDS Program adopted a National M&E Plan for the 2010-2015 period.

Report on HIV prioritized basic indicators. Starting with the regional initiative to reduce the number of indicators by means of a prioritization process, USAID/PASCA started to accompany and provide technical assistance to the NAP, with the aim of facilitating its search for information sources to document the situation of the indicators, and based on them, to develop the prioritized basic indicators. In this context, an important link was established with the National Epidemiology Center and the National AIDS Program, holding meetings with national experts to analyze indicators and notifications in the HIV Epidemiological Surveillance database. After working for one year, in August 2013, the National AIDS Program officially published the first report on the basic indicator package and a report to be used by the various actors participating in the country's response was thus generated.

Multi-Sectoral Coordination of the Response to HIV. USAID/PASCA has actively participated in the Expanded Thematic Group (GTA in Spanish), whose aim is to support and establish the activities that are necessary to achieve impact against AIDS in the country, and constitutes a forum in which to exchange information to improve coordination among the various actors participating in the national response. This group is composed of international cooperation agencies, organizations of people living with HIV, and the Ministry of Health, and its actions have maximized cooperation, learning, and support to join efforts with, for example, the Global Fund, embassies of friendly countries such as The Netherlands, and others in order to seek resource mobilization.

Analyzing HIV Policies. It is important to highlight one of the main strengths of the project: Analyzing HIV Policies. Its presence and position in this field are evident. Throughout project implementation, it contributed by generating technical assistance to review, analyze and discuss the policy changes that have occurred in the country ever since the epidemic first appeared. Technical working meetings were held, and in them it was concluded that the efforts made by the country, and in which USAID/PASCA participated, are reflected in the report on HIV Policy Evaluation, 2011; the reports on National AIDS Spending Assessment, NASA; the alignment of the institutional planning process within the framework of NSP 2011-2015 priorities, and the periodic generation of information on the prioritized indicators for the epidemic, all of which have been used in workshop of policy analysis and strategic information.

HIV proposal for funding by the Global Fund. After the approval of the first HIV proposals at the end of 2007, USAID/PASCA accompanied the various proposals submitted to the Global Fund, monitoring

implementation and providing the technical assistance required by the various actors. The technical assistance provided by the project focused on these main areas:

1. CCM's Technical Secretariat: Permanent technical assistance was provided to the sub-commissions and the technical committee for the programmatic, financial and revision aspects of proposal development. USAID/PASCA played a key role in coordinating, accompanying, and ensuring the participation of the various actors, and in facilitating integration of the progress achieved within the framework of the guidelines for GF requests.
2. Workshops: To support the commitments to the GF undertaken by the country in regard to proposal submittal, the project focused its efforts on:
 - a. A workshop to officially launch the development of a proposal for GF's second phase. In it, the commitment to join efforts in order to present a winning proposal was ratified, and several issues were discussed, including the challenges posed by the performance score awarded for the previous phase, results achieved, gaps, lessons learned, the financial crisis, response sustainability, and the best use of resources, based on the investment framework, as well as heeding the GF's recommendations for Phase II.
 - b. Technical assistance was provided for the methodology to be used in the workshop to prioritize the interventions included in the proposals, which included making the amendments based on GF recommendations.
3. Technical assistance to the sub-commissions established to develop the various proposals, focusing on prevention technologies and evaluation of effectiveness, bearing in mind the financial crisis, response sustainability, and the best use of resources.
4. Support provided to following-up GF recommendations: Technical assistance to establish the methodology to document and systematize the PR's response to GF recommendations, in order to ensure that they are duly integrated and documented within the framework of the proposals.
5. Analyzing the lack in funding and counterparts.

One of the most important USAID/PASCA achievements was that it accompanied the CCM in integrating, collating, and sending the proposals to the Global Fund, which it always did within the allotted times. In regard to GF's follow up to the requests, which is sent after proposals have been submitted, the project accompanied the CCM in order for it to comply with requests for changes and for pre-requisites such as: reviewing the prevention component, strengthening the role of civil society, improving the organization and improving the operations of the Ministry of Health as Principal Recipient. USAID/PASCA provided technical assistance for all these issues, and the Ministry of Health fulfilled all the requirements. As a result of this assistance, the proposals were approved successfully.

Evaluating the National Strategic Plan (NSP) 2011-2015. Within the framework of presenting proposals to the Second Phase of the Global Fund and per its recommendations, USAID/PASCA provided technical assistance to develop the NSP mid-term evaluation. In order to perform this evaluation, a small group was created to coordinate the consultations with various sectors of the country. This exercise allowed participants to express their opinions on implementation and the challenges faced when implementing this public policy. The evaluation report was endorsed by the Ministry of Public Health and was officially published.

Activities aimed at achieving Result 2: HIV Advocacy Agendas effectively implemented

Advocacy campaign to guarantee ARV supplies. Within this context, from the time the project began, USAID/PASCA provided advice to the Alianza de Personas Viviendo con VIH y sida (Alliance of People Living with HIV and AIDS) and other civil-society organizations to develop and begin implementing an advocacy campaign aimed at the Ministry of Health, with the purpose of its continuing to purchase

medications through the PAHO revolving fund and not through local providers. At that time, several media channels published the Ministry of Health's intentions to change that. The advocacy and impact actions that were undertaken included a press conference, publication of a press release by participating organizations, and a declaration by affected individuals published in the media. These impact actions were expanded to the departmental level. Local (departmental) impact plans were also facilitated to advocate on behalf of purchasing HIV medications from the PAHO revolving fund and not from local providers, as proposed by the Government. These local plans were implemented by civil-society organizations in coordination with the Red Legal de Derechos Humanos (Legal Human Rights Network) and the RH and HIV watchdog, and in May 2009 the Government withdrew from its intentions to change the system.

Subsequently, USAID/PASCA coordinated and held a workshop with civil-society organizations to analyze the HIV/AIDS situation and the response to it, and to develop a national advocacy agenda. At this workshop a group of HIV/AIDS policy analysts was created with the purpose of studying and analyzing Government actions and presenting strategies and proposals to improve their efficiency and effectiveness, and of analyzing and discussing HIV strategic information. In addition, it was possible to have the group agree to incorporate other professionals with various fields of expertise into the group for other proposals that had been discussed and agreed on.

HIV policy analysis. USAID/PASCA held workshops aimed at ten individuals from civil-society organization and cooperation agencies, in order to analyze gaps and delays affecting the response to HIV and to define actions to improve this situation. This analysis was performed using the results of the AIDS Policy Index (API); monitoring of the HIV/AIDS policy, the National Policy Composite Index, and the Evaluation of Progress Achieved in the Presidential Agreements of San Salvador. Four main topics were selected for this purpose: a) Prevention; b) Surveillance, monitoring and evaluation; c) Human Rights, and d) policy support. Lines of work were defined, seeking the consolidation of alliances to address policies and to implement advocacy actions destined to eliminating identified gaps.

Advocacy campaign on behalf of HIV comprehensive care. USAID/PASCA provided technical assistance to the Guatemala's Red Legal de Derechos Humanos en VIH y sida in order to develop a public impact plan, and monitoring and social-audit actions on behalf of purchasing ARVs from international sources and the care provided at the Comprehensive Care Units, with accompaniment from the Office of the Human Rights Ombudsman (PDH in Spanish). Based on this process, the Ombudsman issued a declaration of human rights violations by the MSPAS, in regard to the care being provided to people living with HIV/AIDS. Specific recommendations to improve them were issued and these recommendations were expanded to include the Ministry of Labor and the Ministry of Education, with the aim of guaranteeing respect for the human rights of workers in accessing employment without any discrimination and of children in their quest for education. As a result of this campaign, the PDH was granted a provisional *amparo* (an action to reinforce rights) by the justice courts, aimed at having improvements made to the care provided to PLWHA by the health system.

Additionally, USAID/PASCA provided technical assistance to the Red Legal de Derechos Humanos to issue effective complaints to counteract HIV stigma and discrimination in the country. This guide was also used by the Network to train its organizations on this topic. An agreement was reached with this Network to start a centralized planning process in order to implement the National Strategic Plan insofar as improving the environment of people living with HIV/AIDS.

Strengthening MARPS and PLWHA groups. USAID/PASCA provided technical assistant to several regional (Rednas, Conga, Redtrans) and national (LAMBDA, SOMOS, OTRANS, ODASA, REDMUTRANS, Gente positiva, Asoc Gente Nueva, and Federación LGTBI Guatemala, among others) organizations, with the aim of strengthening them. These actions included generating organizations with legal standing, a strategic plan, monitoring and evaluation plans, and costing. In addition, it supported

strengthening civil-society organizations, such as the Alianza de PVVS, to amend their by-laws and to establish a commission to provide follow up to monitoring and evaluating the response to HIV.

On June 29, 2010, the Ministry of Defense granted the Monja Blanca medal in the second degree to the USAID/PASCA Representative, as recognition for the technical assistance provided to it on several occasions as part of strengthening MARPS organizations.

Training workshops on HIV policy impact. USAID/PASCA planned and facilitated workshops for the Red Legal de Derechos Humanos and the Alianza Nacional in order to strengthen their capacities for policy impact and networking, by developing advocacy campaigns. As a result, the Networks developed advocacy objectives aimed at having official information for the indicators pertaining to HIV prevention, in the issue of human rights and HIV, and to promote the development of the first official report on these issues.

Organizing the local CONCASIDA Committee. USAID/PASCA provided its support to Guatemala in order to hold a workshop with the National CONCASIDA Committee to develop the summaries that were sent to the CONCASIDA 2010 organizing committee in Costa Rica. This workshop was summoned by the National CONCASIDA and it rested on three pillars: a) an NAP representative; b) organizations working in HIV/AIDS, represented by the Asociación Coordinadora de Sectores de la Lucha contra el Sida (Association Coordinating Sectors Involved in the Fight against AIDS), and c) representatives of People Living with HIV/AIDS by means of the Alianza Nacional de Personas viviendo con VIH (Alliance of People Living with HIV). The aim was to create competencies to present the work that is being undertaken in the country. The outcomes of this workshop were 29 summaries that were included in a database. The CONCASIDA organizing committee sent 63 documents that it had received, so that the country, through the National CONCASIDA Committee, would evaluate them. USAID/PASCA supported and led this process, in which 13 evaluators were engaged in order to perform this task to review and ponder the documents that would be sent to Congress.

Estimations on the HIV epidemic. Just before the regional workshop on epidemic estimations was to take place, Guatemala's technical team prepared the information that was available, which was channeled through country representatives during the regional workshop in August 2011. In order to prepare for this event, USAID/PASCA participated in discussion groups that analyzed the information that would be presented.

Report on Universal Access. USAID/PASCA participated in validating the Universal Access reports at the request of the National AIDS Program. Various inputs were provided in regard to the coverage of Female Sex Workers, based on the Global Fund 2010 endline report.

Producing and disseminating information aimed at specific groups of interest. USAID/PASCA supported the process to print the first report on PLWHA and MARPS human rights, with participation from PAHO, Red Legal, Alianza Nacional, and IPDH. In July 2011, actions resumed with the Red Legal watchdog, PAHO, HIVOS and IPDH, in order to define commitments aimed at publishing a second national report. It is important to underscore that the first report was the outcome of an impact campaign promoted by USAID/PASCA in 2010, and that it was developed in a multi-sectoral manner by means of strategic alliance that gathered together all the actors mentioned above.

Advocacy campaigns led by counterpart organizations. USAID/PASCA supported some impact actions by counterpart organizations aimed at exerting influence on the Congress of the Republic so that it would approve a legislative decree allowing the Ministry of Health to receive the project funded by the Global Fund. USAID/PASCA, provided support to the following actions:

- Demonstrations in Retalhuleu, Izabal, and Petén, in order to request local Congress members to support this issue in Congress.

- Press conferences in which Global Fund representatives, the Ministry of Health, the Human Rights Ombudsman, and civil-society representatives participated.
- Mobilizing the Payasos project, whose members staged a dramatization in Congress on the consequences of delaying the corresponding approval.

This advocacy campaign achieved its objective, and the approval for proposal was signed by Congress. Some lessons learned in this process were: Solid investment in time in the process to implement the impact activities undertaken, and opportune dedication to provide technical advice and to perform a technical review of the contents or arguments proposed by the speakers of counterpart organizations in press releases or other forms of communication.

Advocacy campaigns during general elections. USAID/PASCA undertook impact actions aimed at political parties, in order to provide them with strategic information relating to HIV, the NSP, and the Global Fund, in coordination with the CCM-G and Alianza Nacional. The strategy prioritized health advisors approaching political parties in order to learn about their proposals in regard to health issues.

Promoting strategic alliances among FBOs in order to promote and increase their participation in the national response. USAID/PASCA supported the development of the guide “HIV and Churches: Response from within Faith Communities” by means of a mini-grant awarded to Proyecto Vida. This guide was presented at a workshop attended by 17 individuals representing 11 FBOs. As a subsequent outcome, the Christian Ecumenical Council of Guatemala launched the guide “HIV and Churches: Response from within Faith Communities” at an event in which 7 churches participated. That same day, they developed a work plan to implement the guide, which sought to involve other religious leaders, especially the younger ones, and to promote meetings in the interior of the country to monitor and assess successful experiences and main challenges. Owing to previous coordination, the National AIDS Program offered to include the FBO issue in its activities for that year.

Diagnosing MARPS Organizations. USAID/PASCA developed a diagnosis and mapping of MARPS organizations. They were shared with various key actors working on the response to HIV in the country. Among the main findings of these efforts were that organizations did not have the elements of institutional culture, such as a vision, a mission, strategic plans, by-laws, and organizational charts. Weaknesses in leadership, communication, and compliance with administrative processes were detected. Entities and networks with which they have established coordination were identified, among the most important of them, the Red Legal de Derechos Humanos y VIH and the National STI/HIV/AIDS Program. In this context, the Project accompanied three organizations: SOMOS, LAMBDA, and ODASA in order for them to solve the gaps that had been identified.

Strengthening MARPS groups. USAID/PASCA provided technical assistance to REDNADS, with the aim of ensuring transparent processes and consensus on its sustainability, operation, and governance. This network is composed of 5 organizations that have been formally registered and 10 organizations and community-based groups that work with the gay, bi-sexual, Trans, lesbian and MSM populations in Guatemala. Through this process, REDNAS managed resources and projects within the framework of the Global Fund project in Guatemala. Work topics were defined for this network: 1) Strengthening sexual-diversity community-based groups so that they can engage in HIV prevention in the departments of Izabal, Guatemala, Quetzaltenango, Sololá, Suchitepéquez, and Zacapa; 2) Undertaking social and policy impact actions with key actors and decision makers in order to diminish stigma and discrimination toward sexually-diverse groups, and 3) undertaking an anti-stigma and anti-discrimination campaign. USAID/PASCA also supported this network so that it could review its by-laws.

Strengthening the OTRANS organization. USAID/PASCA provided technical assistance to the organization Trans Reynas de la Noche in order to review its proposal to strengthen relationships with other local networks, thus guaranteeing better care in health-care services and respect for human rights, and to strengthen the work performed by this organization.

Support to Alianza Nacional de PVVS and REDCA+. In the context of strengthening organizations of people living with HIV, USAID/PASCA fostered the constitution of the Board of Directors of the Alianza Nacional de PVVS and REDCA, by means of legal technical assistance. This helped them to reorder their organizations, which resulted in better coordination of the response from people living with HIV at the national level. Accompaniment was also provided at training workshops, where the new NSP and the Report on Human Rights and HIV prepared by Red Legal, Alianza and the Office of the Human Rights Ombudsman were disclosed. As a result of this, people living with HIV at the national level achieved proper representation with decision makers, since they appointed their representatives to the Expanded Thematic Group and the Country Coordinating Mechanism.

Developing advocacy capacities and MARPS' proposal management. During the whole time of Project implementation, MARPS groups such as REDNAS, LAMBDA, REDMUTRANS, OASIS, OTRANS, ASI, IDSO, and Gente Nueva were accompanied with the aim of developing their capacities to develop advocacy campaign. Thus, it was possible to establish the bases and improve their competencies to develop advocacy campaigns responding to the needs of those populations most at risk for HIV. This is evidenced by the fact that some of these organizations are presenting initiatives and proposals to various donors.

Activities to analyze information for HIV policies. USAID/PASCA shared the Study on Stigma and Discrimination performed by CID-GALLUP in analysis and discussions workshops attended by governmental and non-governmental institutions, the Office of the Human Rights Ombudsman, the Presidential Commission against Discrimination and Racism (CODISRA in Spanish) and international cooperation agencies participated. The result was that participants performed a cross-tab analysis of variables such as age, sex, and schooling from the survey. This showed the perception and attitudes of the Guatemalan population in regard to these issues.

Training workshop on communication processes and conflict resolution. With the purpose of providing the tools required to improve handling of labor, and personal and institutional conflicts, USAID/PASCA held inter-active workshops aimed at representatives from civil-society organizations working with MARPS groups. The result was that 23 individuals from 14 organizations improved their capabilities and skills in “Emotional Intelligence, Conflict Management, and Effective Communication”.

Round table on GBV, SV, and HIV. USAID/PASCA promoted the round table on gender-based violence, sexual violence, and HIV, aiming to analyze the context of MARPS groups as how they are affected by these problems.

The following are some of the most relevant issues discussed at this round table:

- The need to implement the Post-Exposure Protocol (PEP) focused on MARPS at all health services. This is an initiative that began in 2010 based on a 2009 protocol, although at that time, it did not achieve the foreseen coverage.
- The need to foster a culture of denunciation among MARPS, since attempts had been made for years to meet with the Office of the Human Rights Ombudsman (PDH), to no avail. The need to address this issue and to strengthen the PDH computing system in the whole country so that there is a response capability to process these accusations.

- It is important that the MSPAS Gender Unity expand the concept man/woman to also consider sexual diversity.
- Combatting stigma and discrimination and providing information and hold campaigns in this regard, facilitating information on the issue at local levels.

Analysis of policies on sexual violence and gender-based violence in MARPS. USAID/PASCA provided technical assistance by means of a consultancy to perform a legal analysis of the existing norms on sexual violence, exploitation, and human trafficking, in order to guarantee respect for the human rights of MARPS groups. As a result of this analysis, the Secretariat against Violence and Human Trafficking (SVET in Spanish) operating plan was developed, aimed at comprehensively addressing GBV, with a gender focus. In addition, the technical MARPS group was established and USAID/PASCA became an active member, along with PASMO, USAID, UNAIDS, UN-Women, and SVET.

Strengthening the Federación de Organizaciones de Diversidad Sexual. USAID/PASCA provided technical assistance to organizations whose initiative entails incorporating into the Federation of Civil Society Organizations, which are constituted mainly by young people, and whose common interest is to demand their human rights and policy impact to exercise actions as citizens and to improve access to health services. As a result of this process the Federation undertook a process to name the organization, establish its organizational structure, and develop its work plan in order to gather together small organizations into a strong one that is capable of responding to the demands of the populations affected by the epidemic.

Advocacy training to strengthen MARPS. USAID/PASCA held training workshops aimed at sexual-diversity organizations' institutional development and policy impact, among them SOMOS, ODASA, REDMUTRANS, LAMDA, OTRANS and Federación. The main objectives of the training events were: a) To analyze the trends in the situation of sexual-diversity organizations in regard to HIV problems and MARPS groups; b) to strengthen organizational capabilities in order to engage in policy impact that would contribute to improving access to health services; c) to develop an initial proposal for an advocacy campaign led by the consultative sexual-diversity group. As a result of these efforts, SOMOS was able to obtain legal standing, and ODASA, SOMOS, LAMDA and OTRANS developed their strategic plans. These actions enabled these organizations to participate in the process to submit their applications as GF sub-recipients to HIVOS, a Principal Recipient.

Strengthening Monitoring and Evaluation capacities. In view of the importance of including Monitoring and Evaluation in the HIV National Response, USAID/PASCA held a workshop on Basic Concepts of Monitoring and Evaluation for HIV/AIDS Programs and Projects, aimed at organizations working with MARPS populations. Representatives from OTRANS, ODASA, Gente Feliz, OASIS, and APROFAM attended this workshop. This activity promoted new knowledge on the issues and allowed a diagnosis on existing gaps in organizations, in order to progressively strengthen their capabilities.

Activities aimed at strengthening the response to HIV by way of processes to develop, implement, and monitor policies that address gender-based and sexual violence

Alianza contra la Violencia Sexual (Alliance against Sexual Violence). USAID/PASCA provided technical assistance in order to strengthen the organizational and operational structure of the Alianza, a multi-sectoral space to address the issue of sexual violence and HIV. This assistance allowed the Alianza to generate impact actions, such as: a) Improving the status of access to comprehensive HIV prevention, care, and prophylactic-treatment services; b) improving compliance with the Protocol to Provide Care to Victims/Survivors of Sexual Violence, in the short term, and c) monitoring compliance with the Ministry of

Public Health and Social Assistance's Inter-Institutional Agreement for Action, through national hospitals, the Public Ministry, the National Forensic Science Institute of Guatemala (INACIF), and the Office of the Human Rights Ombudsman for Care to Sexual Violence and/or Sexual Abuse Victims. It is important to note that this assistance provided Alianza with a standard model to undertake impact actions, which included developing capabilities for lobbying, dialog or developing a policy impact plan.

In February 2011, the work between Alianza contra la Violencia Sexual and USAID/PASCA was consolidated, with the purpose of addressing the issue of sexual and HIV in public policies. USAID/PASCA provided technical assistance for Alianza's institutional strengthening, and this expedited undertaking impact actions that improved access to comprehensive HIV prevention, care, and prophylactic-treatment services.

Positive changes in policies to access Post Exposure Prophylaxis. USAID/PASCA provided technical assistance to this Secretariat in order to develop a work plan for 2013, which included, as one of its action lines, improving access to HIV post-exposure prophylaxis. Thus, there is now a working group – the “Mesa Técnica PEMAR (Technical MARPS Group)– that seeks to generate positive policy changes pertaining to the vision to address sexual violence including the MARPS population. It is important to underscore that there is an inter-institutional agreement to increase access to post-exposure prophylaxis (PEP) against sexually-transmitted diseases in sexual violence victims. The Agreement establishes the commitments and coordination of the Ministry of Public Health and Social Assistance (MSPAS), the Public Ministry, and the Secretariat against Violence and Human Trafficking (SVET), and it focuses on guaranteeing the supply of medications that are included in the PEP Kit.

In accordance with this legal institutional mandate, USAID/PASCA coordinated the technical revision of the Protocol to Provide Care to Victims/Survivors of Sexual Violence, facilitating strategic information as well as dialog spaces that allowed establishing the role of HIV PEP in the care for sexual violence victims, which includes a MARPS approach.

Activities aimed at achieving Result 3: the business sector involved in the response to HIV

The strategy to engage the Guatemalan business sector focused on working with trade associations and organized groups of businesspeople. USAID/PASCA was able to secure the involvement of the Asociación de Productores Independientes de Banano (Association of Independent Banana Producers–APIB in Spanish), the Gremial de Azucareros de Guatemala (Guatemalan Sugar Producers' Association–AZASGUA in Spanish), the gremial de Vestuarios y Textiles de Guatemala (Guatemala's Clothing and Textile Industry Association–VESTEX in Spanish), the Asociación Nacional de Café (National Coffee Association–ANACAFÉ in Spanish), and lastly, the Ministry of Labor, as an employer. These organizations became champions of HIV policies. In total, the Project reached over 250,000 direct employees with HIV workplace policies and programs.

Engaging APIB. USAID/PASCA resumed the work that the HPI/TOI project had started with APIB. The leaders of this organization stated that they were strongly committed to this issue. When this work was again undertaken, a series of training workshops were held with APIB, aimed at underscoring the benefits of having HIV workplace policies and the impact that they have on their organizational life. These workshops were held in the country's southern and northeastern regions of the country, and focused on plantation managers, production managers, and human-resource managers. USAID/PASCA worked with 8 banana-growing firms and provided direct advisory services to the APIB Board of Directors in order to develop its HIV trade policy. This association publicly stated its willingness to implement this labor policy among the more than 25,000 employees of its members companies.

APIB's adoption of an HIV policy. At an event held on December 1, 2010, APIB officially launched its HIV workplace policy. The ceremony was attended by the Minister of Labor, the Minister of Health, and a USAID representative. Over 50 persons participated. The media covered the event. USAID/PASCA advised APIB on all the aspects of this launching, with the aim of keeping the issue on the private-sector's public agenda.

Implementing APIB's HIV policy. USAID/PASCA provided technical assistance to the Asociación de Productores Independientes de Banano (APIB), in order to execute a joint project with Alianzas/USAID and Wings, pertaining to the process of implementing its policy. This assistance involved information, education, training, and printing educational materials. In December 2012, the consultancy facilitated by USAID/PASCA to support this policy implementation process ended, and its final report was submitted during the first half of January 2012. The activities that had been implemented were documented and systematized and concrete implementation proposals were developed for those that were still pending. In 2012, USAID/PASCA kept up its technical assistance to implement the HIV policy in APIB. This assistance consisted of joint efforts with the Social-Responsibility Director, in order to provide strategic HIV information to all the companies that were implementing the policy; management and support to policy-implementation committees within member firms, and coordination with partners, such as the Ministry of Health, in order to make referrals and to provide services.

Engaging AZASGUA. USAID/PASCA started lobbying with AZASGUA since January 2010. It worked along with the Fundazucar organization, in charge of social responsibility, which had access to the Board of Directors of this organization. By means of several meetings, efforts were defined to provide training and develop an HIV policy. This implied meetings for USAID/PASCA to raise awareness and to convince the members of the Board of Directors.

Training AZASGUA to develop its HIV policy. From October to November 2010, USAID/PASCA trained representatives from companies that constitute AZASGUA on developing HIV policies. This was a process that required several awareness-raising courses. By October 2011, the AZASGUA Board of Directors examined the proposal for an HIV policy and approved its completion. The draft policy was validated during the first week of December, with the participation of 21 representatives from organizations related to AZASGUA.

Adopting HIV workplace policies. On March 21, 2012, ASAZGUA officially launched its HIV workplace policy to be implemented in 11 sugar mills and 4 companies involved with this strong sector of the national agro-industry. Implementing this policy meant reaching 68,000 direct employments and 360,000 indirect employments. It was a firm step toward incorporating the private sector in the national response to the HIV epidemic.

Implementing AZASGUA's HIV policy. The technical assistance provided by USAID/PASCA continued with the development of the Manual for Norms and Procedures, which governs implementation of its policy. This manual was adopted by AZASGUA and it is a guide for the various companies to implement their HIV policies. It contains information on how to address the topic; the time in which to do so; with whom they must coordinate when they need to further analyze a topic; it details who can provide services and proves useful to companies to guarantee that they comply with their efforts as a private business.

Technical assistance to the Gremial de Vestuarios y Textiles VESTEX. In April 2012, USAID/PASCA intensified its efforts to support VESTEX's involvement in the HIV issue. After several presentations to the Board of Directors and to the association's executive director, the sector understood and accepted the development of their HIV policy. The sector includes 129 clothing firms, 39 textile and spinning

companies, 260 service and accessory firms, which generate a total of 90,000 direct and indirect jobs, out of which 46% are held by women. As an economic activity, the manufacturing industry represents 4% of the national production (GDP) and 21% of the industrial production (industrial GDP).

Adopting VESTEX HIV policy. On July 29, 2013, VESTEX held a public event to launch its HIV Policy. At the event, 10 of the sector's firms committed to starting the implementation process within the association. From August 2013 to February 2014, USAID/PASCA provided support to the creation of a committee that would lead policy implementation within the association.

Engaging ANACAFE in the response to HIV. USAID/PASCA provided follow-up to the work that had started in March 2011 with the Asociación Nacional del Caficultores (ANACAFE). In August 2011, USAID/PASCA met with ANACAFE's Board of Directors to make them aware of the importance of this issue and their incorporation into the national response to HIV. The Project kept up this approach, but at that time, the policy was not developed. As follow up to this approach, USAID/PASCA facilitated the participation of one of its employees in the II Central American Diploma Course on Monitoring and Evaluation for HIV/AIDS Policy and Program Management. The graduation paper presented by ANACAFE at this course focused on developing this association's HIV policy.

Adopting ANACAFE's HIV policy. On September 2013, ANACAFE announced the adoption of its HIV workplace policy at a public event. During the last quarter of 2013, USAID/PASCA provided technical assistance to this association in order to start implementing this policy through an implementing committee.

Developing the Ministry of Labor's HIV policy. In January 2013, USAID/PASCA provided technical assistance to the Ministry of Labor in order to develop its HIV workplace policy. In order to perform this task, USAID/PASCA made it possible for the Ministry of Labor to sign a Letter of Understanding with the Ministry of Health. From June to September 2013, USAID/PASCA provided advice to both entities in order to accomplish this. These advisory services consisted in facilitating training workshops to develop the policy, defining a route for its adoption, negotiating with Ministry of Labor employees to disseminate the policy, and support for its adoption. In March 2014, the Ministry of Labor completed its HIV policy and publicly adopted it.

Project closing activities. In March 2014, USAID/PASCA held 2 activities to close the project. The first one was a study forum where 6 HIV studies performed in the country were presented. This activity helped to disseminate the evidence on the behavior or the epidemic. The second activity was a project-closing session, in which the progress achieved in the country in regard to the HIV policy environment was presented. The project received much recognition from counterpart organizations.

2.6 Nicaragua

The USAID/PASCA Project started working in Nicaragua in the last 2009 quarter. At the onset of the project, Nicaragua had a National Strategic Plan 2006-2010 that had not been costed. Additionally, it had a National Monitoring and Evaluation Plan for the same period that had not been disseminated.

Activities aimed at achieving Result 1: HIV Plans budgeted, monitored, and evaluated

Proposal to evaluate the National Strategic Plan 2006-2010. Nicaragua was in the process of performing an intermediate evaluation furthered by CONISIDA, the results of which were disseminated only through statements, but a document to substantiate this processes was never published. In view of this, USAID/PASCA lobbied with various actors in the national scene to propose an exhaustive assessment of how this national policy was being implemented. The proposal was accepted, especially by civil-society organizations. However, the political decision to accept an evaluation of the plan lay with the Ministry of Health, which finally accepted said assessment, after USAID/PASCA lobbied for it.

Developing the Strategic Plan 2011-2015. In January 2010, USAID/PASCA started to coordinate with the ASAP project, which would be in charge of the national planning process. USAID/PASCA's role during this period focused on positioning strategic information aimed at achieving a policy in which there was multi-sectoral participation, and which was coordinated and viable as to time and the contents of the document. During the process it became evident that there was a need for a plan with appropriate objectives, goals, and indicators that would allow its monitoring.

Study to monitor implementation of the NSP 2006-2010. In the first 2010 quarter, USAID/PASCA performed a study to monitor implementation of the National HIV/AIDS Strategic Plan 2006-2010. The results were the input used to update the NSP and reflected the challenges faced when implementing this public policy.

Strengthening the information system, M&E. USAID/PASCA influenced the creation of a committee to review the country's achievements and challenges when implementing the components of an information system. This exercise was based on the 12 components established in the document *Organizing Framework for a Functional National HIV Monitoring and Evaluation System*, developed by the UNAIDS Reference Group on Monitoring and Evaluation. This review showed the gaps existing in the country and the priority actions that must be taken to develop a practical instrument to generate and make official the data on the epidemic in the country.

In June 2010, USAID/PASCA presented this analysis and opened a coordination space with a workshop that further addressed the issue. The M&E Committee held this workshop at the end of June 2010. This group analyzed the gaps in the information system, from the viewpoint of implementing public policies, and developed an action plan to implement actions that would improve monitoring and evaluating the response to the epidemic. This plan gave way to a stage of technical assistance provided to the National M&E Committee in order to adopt and develop a work agenda.

Report on official HIV indicators. The country presented the UNGASS report in March 2010. In order to present this report, USAID/PASCA facilitated working meetings that allowed standardizing criteria among the organizations working on the response in regard to the way data was delivered, consolidated, and validated. In this report, the country reported on 16 out of 25 UNGASS indicators,

which also represent 16 out of the 29 indicators in the National M&E Plan (55%). Most information was provided by the Ministry of Health's STI, HIV, and AIDS Component.

Evaluating the NSP 2006-2010. USAID/PASCA promoted a multi-sectoral evaluation of the NSP with representatives from various CONISIDA sectors and the various discussion spaces. With this aim in mind, an alliance with the Nicaraguan Social Security Institute, Global Fund's Principal Recipient, was established in order to offer joint support to NSP evaluation and subsequent re-writing. For that evaluation USAID/PASCA facilitated four multi-sectoral workshops in which participants issued critical judgments on implementing the Strategic Plan 2006-2010. USAID/PASCA invested resources in guaranteeing that there was multi-sectoral participation in each one of these workshops, so as to add enough weight to the results, which were accepted by national authorities.

Developing the new National Strategic Plan 2011-2015. During the evaluation workshops, gaps were identified and, simultaneously, the strategic work lines were established. These would later become part of the National Strategic Plan 2011-2015. As part of re-writing the NSP, CONISIDA requested consultants to develop a baseline on national indicators of the epidemic, which was performed with USAID/PASCA technical assistance. By September 2011, the NSP 2011-2015 had been completed, but the Government offered that it would make it official until after the general elections.

National workshop on the use of the Resource Needs Model, RNM. USAID/PASCA organized and facilitated a training workshop on the use of the Resource Needs Model, which is used to estimate a country's cost of the HIV epidemic. The workshop was held in February 2011, and it provided training to representatives of key organizations that could impact on providing strategic info to the country's decision makers. As an immediate result of the workshop, the Head of the National AIDS Program requested technical assistance to complete the Spectrum information bases, so that the country could have updated projections to undertake costing.

Defining a package of prioritized HIV indicators. USAID/PASCA provided the methodology used by the work team to prioritize 36 indicators, for which information flow was defined and of which 16 were reported in 2011. This proposal for basic indicators was presented to a multi-sectoral assembly that endorsed the proposal.

National HIV Monitoring and Evaluation Plan 2011-2015 USAID/PASCA provided technical assistance to develop the M&E Plan for the re-written NSP 2011-2015, which included reviewing and refining indicators, and including new indicators, in coherence with the re-written NSP for the 2011-2015 period. This process included reducing national indicators from 188 to 84, and the alignment of a single M&E Plan that includes indicators for international commitments, including those for the UNGASS Report and the Global Fund Project. A datasheet was developed for each indicator; they include the information flow and the flowchart to gather data. This process streamlined national authorities' reporting.

Strengthening the M&E Commission. USAID/PASCA worked along with the various actors in the national response to HIV, in order to officially constitute the National M&E Commission, which had met before, but its participation in the national sphere had not been systematic and it did not have clearly defined objectives. Demanding and working on the analysis of indicator reports generated by the national HIV information system was proposed as a priority objective for this Commission.

Developing a national report on the HIV situation. Based on the report on the country's basic package of priority indicators, USAID/PASCA supported the development of the National Report on the Situation of the HIV Epidemic, which is based on the indicators that the country committed to reporting. This document was the outcome of the technical assistance provided by USAID/PASCA, which shared the vision to prioritize indicators and secure commitments to deliver and generate data with a multi-sectoral

team. This document systematically reported official information to be used by the country, and was developed, discussed, and analyzed with a multi-sectoral team that endorsed its publication.

Strengthening capacities in GF sub-recipient units. In November 2010, USAID/PASCA worked along with the Nicaraguan Social Security Institute (INSS), which is the Principal Recipient for the Global Fund HIV project, and with the Country Coordinating Mechanism to identify areas in which sub-recipient units should be strengthened to undertake execution. Thus, technical assistance was provided by a consultant to hold workshops and to follow up on individual strengthening of prioritized organizations. The areas that were strengthened included: financial management, logistics management, planning, and reporting, among others. In order to select the sub-recipients that would be strengthened, those that do not receive assistance from any other USAID project were mapped, in order not to duplicate efforts. During August and September 2011, the process to strengthen 14 organizations and the PR technical team began. They were trained by USAID/PASCA in three workshops on planning, logistics management, reports to monitor implementation, and organizational financial management.

Technical assistance to CONISIDA for its Regional HIV indicator report. USAID/PASCA provided technical assistance to CONISIDA aimed at reporting the regional HIV indicators that were used during the regional COMISCA meeting in December 2011. This technical assistance entailed verifying information sources, analyzing uniformity, and standardizing the report presentation format and development.

Technical assistance to harmonize information systems. In July 2012, USAID/PASCA, by means of a consultancy, supported efforts to map information systems, technological platforms and databases, and to design an integrated information system for the National Response to HIV/AIDS. Mapping information systems allowed establishing their status and functionality, and to develop a proposal to homogenize the quality information obtained and to report it opportunistically. Elements, such as resources and functionality were analyzed, and 16 information systems were reviewed. As a result, it was determined that there were diverse actors working on containing the epidemic and that report information of various kinds, using several information systems that had been developed in different technological platforms to respond to their registering and data processing needs, but that this information was not being sent to CONISIDA. Based on these results, a Requirement Analysis was developed to describe the processes that had been automatized by means of the selected information infrastructure. A modeling-data diagram based on the design of the National Information System database to Monitor the National Response to HIV, which defined data tables, the relationship among them, the primary and external keys, as well as the types of data for the fields in each one of the tables. Similarly, the document contains the Data Dictionary, detailing all the information contained in the database and constitutes part of the technical documentation of the system. This document was submitted to CONISIDA in September 2012. This analysis detected a fragmented information system and determined the urgency to integrate it.

Technical assistance to develop annual reports. In January 2012, USAID/PASCA undertook the procedures with the Secretary General of the Ministry of Health, and the President of CONISIDA in order to publish the report on prioritized indicators that had been completed in September 2011, since it had already been discussed and endorsed by various organizations. A significant achievement was to secure approval to disseminate it. This achievement was important for the project, since there was very little public information on HIV in the country, and this report contained 2010 data on the 16 prioritized indicators.

Reviewing Basic-Package indicators. USAID/PASCA provided technical assistance to the CONISIDA Secretariat to review the indicators and their information flows on the National Strategic Plan to align

them to the new indicators in the *Global AIDS Progress Report 2012*, and the Global Fund Project, Phase II in June 2012.

Central American Diploma Course on Monitoring and Evaluation for HIV/AIDS Policy and Program Management. In January 2012, classes began for the first Central American Diploma Course on Monitoring and Evaluation for HIV/AIDS Policy and Program Management, coordinated by USAID/PASCA by means of an agreement with the Instituto de Nutrición de Centroamérica y Panamá (Institute of Nutrition of Central America and Panama—INCAP) and the Centro de Investigaciones y Estudios para la Salud (Health Research and Studies Center—CIES). A total of 35 persons completed the four modules of the course and presented their graduation papers. The graduation ceremony took place in July 2012. USAID/PASCA also facilitated a second M&E Diploma Course, with an emphasis on economics. A total of 29 persons graduated from this course in October 2013, after 260 hours of study. These Diploma Courses developed superior M&E capabilities in a group of professionals. This improved the quality of their participation in multi-sectoral M&E groups, and their graduation papers were based on practical cases within their organizations, where many of them were applied.

Basic HIV M&E Courses. USAID/PASCA sought coordination with USAID/Prevensida, and USAID/Prevención Combinada in order to select the MARPS organizations that participated in these training workshops held by USAID/PASCA during July and August 2012. They were held in July and August 2012, aimed at strengthening basic HIV monitoring and evaluation capabilities. A total of 50 persons from 15 MARPS organizations were trained.

National AIDS Spending Assessment reports. USAID/PASCA was able to obtain political support from CONISIDA President in order to develop and publish NASA reports. Specifically, USAID/PASCA's technical assistance from November 2011 to March 2012 consisted of training information providers on the NASA methodology, gathering data for the study from 27 information providers, facilitating analysis sessions, and writing the report. This report was presented to CONISIDA national delegates, who approved it for its publication. Study data show an increase of USD 9 million in spending from 2009 to 2010. From USD 15.9 million in 2009 it went up to USD 24.9 million in 2010. This increase was due to the growth in public expenditures, which went from 31% to 39% of total expenditures, and of international sources, mainly the Global Fund. The expenditure per inhabitant was USD 4.18 in 2010, and health expenditure per inhabitant for 2010 was USD 42.2, AIDS expenditure representing 9.9% of all health spending.

In August 2013, USAID/PASCA provided technical assistance to develop the NASA 2012 exercise. At that time, 18 organizations were updated on NASA methodology. CONISIDA led data gathering and the USAID/PASCA project facilitated the management of database reports and information-analysis sessions. In March 2014, the country presented the NASA data in the United Nations report and only the publication of the final report was outstanding.

Report on the Progress of the National Response to HIV (UNGASS 2012). USAID/PASCA provided assistance to CONISIDA to develop this report. Specifically, this technical assistance entailed gathering data, developing the indicator report, recording indicators in the UNAIDS tool, and writing the country report. The country reported 25 indicators from the 30 indicators included in the National Information system (continuous records, surveys, censuses, and specific studies). Before being presented, the report was discussed by national CONISIDA delegates, which allowed for developing capabilities to analyze and use available information on HIV.

Study on HIV Modes of Transmission. From January to March 2012, USAID/PASCA helped to create a technical coordination team to apply the MoT in the country (4 people), and a team to validate the study, constituted by national experts (17 persons). The tasks centered on gathering information to feed the

model and to validate the data entered in it. In order to apply the Modes of Transmission Report, the *EPI Review* was used for the first time. This tool addressed the quality of the information being recorded. There were 4 meetings held with the team of national experts, which were used to discuss and analyze the preliminary results of the study and 10 working sessions with the technical team. In this process, the country became aware of scenarios related to the impact of the epidemic, and it constituted an important input to design Phase II of the Global Fund Project that was then being executed. In 2012, the validated report was submitted to CONISIDA's President, who authorized it, and it was published in USAID/PASCA's webpage.

Advocacy to approve the National HIV Strategic Plan 2011-2015. USAID/PASCA provided technical assistance to CONISIDA for this planning process. The document was completed in September 2011. In January and February 2012, CONISIDA presented the National Strategic Plan 2011-2015 to national delegates, social organizations, and cooperation agencies. These presentations were made with the aim of achieving multi-sectoral consensus to officially launch the NSP.

Regional HIV Strategic Plans for the Autonomous Nicaraguan Caribbean Regions. USAID/PASCA provided technical assistance to the South Atlantic Regional Commission –CORESIDA in Spanish– to design the South Atlantic Regional Strategic Plan –PERAS in Spanish–. In August 2012, a 2-day design workshop was held with 20 participants. The vision, mission, key populations, strategic activities, and indicators aligned with the NSP 2011-2015 were defined. The plan had not been made official, but it was delivered to the Regional Commissions for them to develop their strategic plans. A computer tool was developed for this working session, which streamlined group work and simplified input incorporation. Subsequently, support was provided in order to draft the Plan, validate it, and publish it in December 2012.

USAID/PASCA provided technical assistance to the President of the North Atlantic Regional Commission –CORLUSIDA in Spanish– to develop the North Atlantic Regional Strategic Plan –PER in Spanish–. The planning tool provided by USAID/PASCA was also used for this technical assistance. The plan was completed and published in March 2013. This technical assistance was strategic, due to the high prevalence of HIV in the Autonomous Regions, and because these regions have their own autonomous health model.

Technical assistance to cost the NSP. USAID/PASCA also sought coordination with CONISIDA's Technical Secretary to cost the NSP 2011-2016. In September 2012, working meetings were held with a selected group of key actors who had been trained in February 2011, among them the Attorney General for Sexual Diversity, the Centro de Prevención del sida (AIDS Prevention Center–CEPERESI in Spanish), Ministry of the Interior, Ministry of Health (STI, HIV and AIDS Component and Health Surveillance Directorate) and CONISIDA's Technical Secretariat. The One Health tool was used for this exercise, in which the RNM is integrated. To perform this costing, the 2011 Estimations exercise was updated. The country learned about the cost of implementing its strategic plan, the funding that was available and its then current use, as well as the financial gaps for its implementation.

Technical assistance to prepare PHASE II of the HIV project funded by the Global Fund. In February 2012, USAID/PASCA provided technical assistance to the Principal Recipient and CONISIDA in order to prepare the proposal for Phase II of the Global Fund Project. Subsequently, it also supported the PR to prepare the clarification process for Phase II of the Global Fund HIV Project. The Project's technical assistance consisted of reporting MoT progress, participating in the sessions to analyze the discussions on the size of MARPS populations, and in helping to develop a proposal based on evidence provided by the data available in the country. In April 2012, a grant agreement was signed for Phase II.

Strengthening the CCM. In July and August 2012, USAID/PASCA provided technical assistance to the CCM to develop the Strategic Monitoring Manual, in order to follow up Global Fund grants for the 3 diseases. The manual was presented and approved by the CCM Board of Directors. In addition, USAID/PASCA provided technical assistance to constitute the CCM's Strategic Monitoring Commission, which was established in July 2012. This Commission provided strategic guidance to the principal recipients of the grants received from the Global Fund for the 3 diseases: HIV, Tuberculosis, and Malaria, with the aim of ensuring that the activities would be undertaken according to what has been established by the Global Fund.

Analyzing HIV prioritized indicators. In October 2012, USAID/PASCA provided technical assistance to CONISIDA's Technical Secretariat in order to analyze the compliance with national and international commitments for the national response to the epidemic. In a series of sessions, the National STI, HIV, and AIDS Component presented the epidemiological report for the first 2012 quarter. CONISIDA's Technical Secretary presented the STI, HIV, and AIDS situation in Nicaragua and the report on monitoring and evaluation the progress to contain the epidemic in 2011, developed with USAID/PASCA's technical assistance. The main outcomes of these sessions were the advances in M&E to evaluate the progress of the National Response, and participating organizations' demands to disseminate and use, and continuously improve the registry and the input into the National Information System. The key inputs for the analysis undertaken in these sessions were the report on the Modes of Transmission Model and the 8 information sheets on the studies developed in 2011, among them, *Measuring the HIV Policy Environment in Nicaragua 2009/2010*, performed by USAID/PASCA.

In this context, USAID/PASCA facilitated the process to update the Monitoring and Evaluation Plan for the NSP 2011-2015. To that end, an indicator matrix was developed in order to provide follow up to the National Response, with a total 83 indicators, which have a design for information records and flows. Working meetings were also held with key actors of the National Response in order to discuss indicators and to gather the data that are fed into them; to review the information that is available on studies and research and databases of the National STI, HIV, and AIDS Component. The main contribution of this report was that it constituted an important advance with respect to the report for the previous year, which contained data for only 16 indicators, while that year, it had 43 indicators. The country prioritized a total of 33 indicators, which represent 39% (39/83). The information that was used to develop the indicator report for the previous year included only the Ministry of Health. The report developed for 2012 incorporated the information of the Global Fund sub-recipient.

Report on the National Response to HIV 2012. From January to March 2013, working meetings were held with CONISIDA's Technical Team, and with the Monitoring and Evaluation Commission, with the aim of starting the report on Progress of the National Response 2012. This was the third report of this type produced by the country with the purpose of showing its data on the epidemic. USAID/PASCA facilitated the working sessions of the technical team gathering and processing the data that will be recorded in the UNAIDS tool. Information was reported on 19 out of 29 indicators, 66%.

Report on the National Monitoring and Evaluation Plan. From April to June 2013, USAID/PASCA provided technical assistance by facilitating working meetings, participating in the technical team constituted by CONISIDA to develop the report on the Progress of the National Response 2012. It was possible to gather 63 out of 84 (75%) NSP indicators and to report 100% of basic indicators. This report was published in September 2013, including ENDESA data and updated estimations.

Technical assistance to review national HIV policies. From January to March 2013, sessions with CONISIDA's Technical Secretariat team allowed updating CONISIDA's management manual, according to the mandate published in Law 820 –Law to Promote, Protect, and Defend Human Rights for HIV Prevention and Care–. The technical assistance provided by USAID/PASCA entailed reviewing the law

and the then current manual to incorporate the Technical Secretariat's new role in harmonizing the national and institutional HIV policy and ensuring that national and international agreements were complied with, and implementation of the Strategic STI, HIV, and AIDS Plan was implemented. According to the new law, the Technical Secretariat is CONISIDA's technical body.

In addition, USAID/PASCA provided technical assistance to CONISIDA's Technical Secretariat in order to review and update the National HIV Policy, participating as part of the team of national experts summoned for that purpose. Reviewing the Policy included making the amendments resulting from the changes that have been made in the laws, plans, and strategies, highlighting: the Law to Promote, Protect, and Defend Human Rights for HIV Prevention and Care; the Penal Procedural Code's articles on discrimination, sexual exploitation and sexual abuse; the National Strategy on Reproductive Sexual Health; the General Education Law; the Law on Food Security; the Law against Sexual Exploitation; the Labor Code; updating the national policy framework; the National Human Development Plan, and updating international commitments ratified by the Nicaraguan State.

Estimations and projections of the epidemic for 2020. From June to September 2013, USAID/PASCA provided technical assistance to CONISIDA in order to review estimations on the epidemic jointly with the UNAIDS office in Panama, given the discrepancies in Spectrum data. The project provided assistance to use the estimations tool and provided the data to update and analyze the model.

DAIA –Disponibilidad Asegurada de Insumos Anticonceptivos y ARV (Ensured Availability of Contraceptive Supplies and ARVs)– Committee. In July 2013 USAID/PASCA promoted incorporating the issue of ARV sustainability into the DAIA Committee, with the aim of having the country gradually assume the responsibility of purchasing ARVs with Treasury funds. CONISIDA is part of this Committee. The integration of ARVs to this Committee and the participation of CONISIDA in it are part of the progress achieved in the National response sustainability strategy. As part of Global Fund requirements, the country made a commitment to purchase 20% of ARVs with Treasury funds by Fiscal Year 2014. This amount was included in the relevant budget.

Publishing studies in CONISIDA webpage. USAID/PASCA helped to activate CONISIDA's webpage. The page is operating and documents produced by the country in 2012-13 have been uploaded. CONISIDA received this work to its entire satisfaction. Publications include the NSP; the M&E Plan; the NASA Report; the Modes of Transmission Report and its norms and manuals; Reports on Progress in the National Response, and Global Fund Round 2 and 8 published studies. The availability of that computer resource allowed improved dissemination of the information to key actors involved in the National Response.

Research Agenda. USAID/PASCA provided technical assistance to the Nicaraguan AIDS Commission, in order to analyze the information gaps existing in the country and to identify priority research, by means of a process coordinated by CONISIDA and performed by summoning a group of experts. USAID/PASCA prepared matrices to gather information on available research, to identify the gaps, and to establish the National HIV Research Agenda, led by CONISIDA. They will provide the information needed for decision making and strategic planning, program design, and improving existing actions, focusing them on responding to real needs posed by the dynamics of the epidemic. This process concluded in March 2014.

Strengthening Monitoring and Evaluation capacities. In May 2013, USAID/PASCA held a training workshop for 17 members of CONISIDA and its Technical Secretariat who work in monitoring and evaluation. They participated in a Global Fund on-line Monitoring and Evaluation course. This course provided them with the basic knowledge on how monitoring and evaluation is used in the context of

executing Global Fund projects. The contents of this training covered the following topics: Basic Elements of Monitoring and Evaluation, Performance-Based Funding, and Performance Framework. At the end of the training session, participants expressed the pertinence and usefulness of learning about how monitoring is used in the context of performance-based funding and the Global Fund performance framework to apply a grant, and furthermore, to have the tools to execute the funds.

Disseminating the National HIV Strategic Plan 2011-2015. CONISIDA and its President authorized the publication of the National HIV Strategic Plan 2011-2015, which was disseminated by CONISIDA's Technical Secretariat among National and Departmental CONISIDA delegates. Having these two documents published was key to ensuring dissemination and operative planning of the NSP and its M&E plan.

NSP Operating Plan 2013. USAID/PASCA provided technical assistance to design the NSP 2011-2015 operating plan corresponding to 2013. Technical assistance entailed designing a planning tool containing the strategic lines, results, activities, tasks, indicators, verifications means, and funding sources. This tool was used in two working meetings with national delegates. Work was performed along with the technical team from CONISIDA's Technical Secretariat and Monitoring and Evaluation Committee to fill the form and to hold working sessions that were increasingly opening up to multi-sectoral participation. These operating plans were a tool to implement the NSP and to generate the information that feeds Monitoring and Evaluation of the National Response.

CCM technical assistance. USAID/PASCA completed and delivered the Strategic Monitoring Manual to the CCM M&E Commission. It was approved by the CCM Board of Directors and then sent to the Global Fund. The CCM requested technical assistance to automatize the dashboard for strategically monitoring the grants for the three diseases.

Activities aimed at achieving Result 2: HIV Advocacy Agendas effectively implemented

Measuring the HIV policy environment. In September 2009, PASCA measured the country's API. As a result of this measurement, it was detected that there was an 11 point improvement in the index, which meant a shift in scores, from 48.0 in 2006 to 59.0 in 2009. Although there were significant gaps in all the index components, inputs were indispensable to promote analysis. A summary of the policy environment was performed and submitted to the Ministry of Health in October 2010.

HIV stigma and discrimination study. From February to May 2010 a study on HIV stigma and discrimination was performed. It measured the 15 questions that had been studied in other countries. There is a report summarizing the results of the main variables, which was published in September 2010.

Analyzing and positioning HIV strategic information. USAID/PASCA's work in 2010 focused mainly on analyzing and positioning the HIV information that was available. Various issues were addressed with key audiences, such as the Ministry of Health, the National M&E Committee, the Country Coordinating Mechanism, the civil-society sector, and the Group of Donors. To that end, summarized presentations were prepared in order to include priorities in the policy and technical agenda. Among them: the need to assess the implementation of the NSP, accountability by means of official reports that enable knowledge of the epidemic, multi-sectoral participation in public policies, and citizen surveillance of the response to HIV.

Strengthening technical capabilities for advocacy and policy dialog. In mid-2010, USAID/PASCA started to provide technical assistance to the La Iniciativa network, constituted by 15 civil-society organizations working on HIV, which was seeking to consolidate and acquire representativeness in the

HIV political arena. USAID/PASCA's technical assistance consisted of participating in sessions in which it presented epidemiological information and the way in which civil society may be strengthened to ensure its active participation in the country's public and policy agenda. Support was also provided to them for their Strategic Plan, which included defining their Mission and their organizational format to achieve improved political impact.

Creating a network to watch over the country's response to HIV. In Augusto 2010, USAID/PASCA mobilized an international consultant with expertise in advocacy and policy impact. She, along with the Country Representative, organized a workshop to help organizations strengthen their capacities to establish and keep civil-society networks focused on citizen surveillance and policy impact. During the workshop the Red La Iniciativa was established by means of a constitution statement. It is composed of 15 organizations: Fundación Xochiquetzal, Asociación Quincho Barrilete, Centro de Investigaciones y Estudios en Salud (Health Research and Study Center–CIES-UNAN in Spanish), Red de Personas Trans de Nicaragua (Network of Nicaraguan Trans Individuals), PASMO, ProFamilia, Instituto de Medicina Tradicional (Traditional Medicine Institute), University of the Autonomous Nicaraguan Caribbean Coastal Regions (URACCAN in Spanish), Red de Trabajadoras Sexuales (Network of Female Sex Workers), World Vision Nicaragua, Movimiento Juvenil Municipal de Derechos Humanos por la diversidad sexual (Municipal Youth Movement for Sexual Diversity Human Rights), Asociación de Hombres contra la Violencia (Association of Men against Violence), Movimiento de Jóvenes Universitarios contra el VIH (University Youth Movement against HIV), Centro de Mujeres Ixchen, Red de Comunicadores para el abordaje del VIH (Communicators Network to Address HIV). The short-term objectives of the Network focused on holding a campaign on behalf of political commitments for HIV programs in the presidential elections 2011.

Using information on the policy environment and HIV. In October 2010, USAID/PASCA presented the results of the Study on NSP Implementation 2006-2010 and a summary of the results of the last measurement of the HIV Policy Environment –API– to the Ministry of Health's General Secretariat and CONISIDA's Technical Secretariat. These results were discussed with the aim of positioning the main challenges for the country. At the request of the Ministry of Health's General Secretary, the results of the studies on National Strategic Plan implementation and the results of Measuring the Policy Environment were presented to CONISIDA. This analysis highlighted the critical points in the response to the epidemic on which the country focused. The outcome was that workshops were organized to discuss the results of these studies as input to re-write the NSP 2011-2015.

Advocacy on behalf of the NSP 2006-2010 evaluation. USAID/PASCA designed and implemented a process to evaluate the National Strategic Plan 2006-2011. This process had impact on Ministry of Health and CONISIDA authorities. Various civil-society organizations accepted the need to demand a multi-sectoral evaluation that allowed the country to build a new, more assertive, planning process. At the beginning of 2011, the Ministry of Health, CONISIDA, and the CCM gave their approval to promote this process in the country.

Diagnosing MARPS organizations. In order to perform this diagnosis, USAID/PASCA sought to coordinate with the USAID/Prevensida project, since it had already performed a diagnosis that covered 38 organizations out of the 58 that had been identified in the country. The USAID/PASCA project focused its study on establishing which organizations did not have any data. This process was concluded in July 2011, when a joint session was held with USAID partners that also had updated information on these populations. During that session, working groups were established to identify actions aimed at improving the work focus, based on the diagnosis.

Strengthening MARPS organizations. In March 2011, USAID/PASCA provided assistance to Red Trans and its 11 groups. Specifically, the objectives were drafted for a mini-grant, which was aimed at identifying the groups existing in 11 municipalities, develop their strategic plan, and present it to various entities for their participation. The umbrella organization that managed administrative issues was the CIES-UNAN organization. This process enabled the network to identify its members, establish common needs to define its objectives and participate in the national decision-making mechanisms.

Strengthening groups of people living with HIV. In March 2011, USAID/PASCA facilitated sessions on Policy Impact, HIV social oversight, and fundraising, aimed at 25 members of organizations of people living with HIV/AIDS. The aim was to strengthen the group so that they can present evidence-based proposals that have impact on authorities and at the community level. The activity was coordinated by the Red Centroamericana de Personas con VIH (Central American Network of People Living with HIV) and the Centro de Investigaciones y Estudios de la Salud de Nicaragua. The meetings were part of a process to develop institutional capacities aimed at gaining access to resources provided by cooperation agencies, including the Global Fund.

Engaging Faith-Based Organizations. In May 2011, 27 members of Nicaragua's faith communities participated in a workshop to strengthen their capacities and to analyze the way in which they can better contribute to the national response to HIV from their pastoral, theological, and community perspectives. Representatives from the Catholic, Baptist, Evangelical, Morava, Asambleas de Dios, and Metropolitana del Pacífico churches and from churches in the Nicaraguan Autonomous Atlantic Regions participated. As a result of the workshop, attendants improved their network communications to share information on the national response to HIV and the decisions taken by multi-sectoral coordination spaces.

Strengthening the Organización Las Girasoles to work on HIV issues. USAID/PASCA provided technical assistance to the sex-workers' association Las Girasoles, aimed at validating the organizational proposal and at acquiring legal status in order to opt for the financial resources to implement HIV prevention strategies and to engage in advocacy to diminish stigma and discrimination. In October 2011, USAID/PASCA facilitated a process that helped them to make decisions on their organizational proposal, the legal establishment of the association, and the appointment of their new Board of Directors. At the end of March 2012, a consultation was received from USAID/Nicaragua about this work with Las Girasoles, since it is an organization of sex workers. After such consultation, the project's technical assistance was no longer provided to this organization.

Strengthening the Red La Iniciativa to work on HIV issues. USAID/PASCA provided technical assistance to representatives from this network in order to develop its strategic plan and to better position itself with national authorities and thus impact on public policies. In addition, they were invited and accompanied to participate in multi-sectoral decision-making spaces. From March to April 2012, the network completed its strategic plan, which was disseminated among groups participating in the network. USAID/PASCA provided technical assistance to monitor implementation of this plan, with the aim of strengthening the network and achieving proposed objectives.

Strengthening the Red Trans organization. In February 2012, USAID/PASCA provided support to the Red Trans de Nicaragua in order for them to disseminate their Strategic Plan 2011-2016. This plan was an outcome of the previous technical assistance that USAID/PASCA had provided to this organization and by means of which this group's capability to plan for HIV advocacy and policy impact was strengthened. Red Trans' Strategic Plan centers on: improving the quality of the response by the Trans population to the HIV epidemic, and their participation in comprehensive health-care programs; promoting changes in high-risk sexual behavior within the Trans community; developing strategic alliances with key actors to make social integration of the Trans community easier in local, regional and national spheres, and

strengthening network members' capacities to create impact and to participate, aimed at diminishing discrimination and stigma associated with sexual orientation. This strengthening process allowed RedTrans' selection as a sub-recipient for the Global Fund's Phase II, Round 8, for the first time ever.

Strengthening the Red de Personas con VIH. USAID/PASCA provided technical assistance to REDCA in order to design a training route for REDCA members on issues such as M&E, computer tools, conflict resolution, and effective communication, in order to support effective implementation of the REDCA project in Nicaragua. Training events were held in July and August 2012.

Training workshop on HIV advocacy and policy dialog. In November 2011, USAID/PASCA held a workshop for eight organizations of populations most at risk for HIV in order to develop their capacities to prepare and implement advocacy proposals to access justice, education, health, and employment. Representatives from the following organizations participated in the workshop: Safo, Gay Gas, Asociación por los Derechos de la Diversidad Sexual (Association for the Human Rights of Nicaraguan Sexual Diversity), Red Trans, Las Golondrinas, Movimiento Intermunicipal de los Derechos Humanos por la Diversidad Sexual del Municipio de Ciudad Sandino (Inter-Municipal Movement for Sexual Diversity Human Rights of the Ciudad Sandino Municipality), Movimiento Feminista por la Diversidad Sexual (Feminist Movement for Sexual Diversity), and Asociación JODIG. During this workshop, participants worked on three advocacy proposals, in accordance to affected populations. Proposals were aimed at securing representation for Trans groups in inter-sectoral coordination spaces; securing agreements with security-force institutions in order to reduce instances of discrimination toward sex workers, and reducing stigma and discrimination of sexually-diverse populations when they seek employment.

Training workshop on the use of computer tools that promote accountability for MARPS organizations. In August 2012, the Training Workshop on Computer Tools, targeting MARPS, was held. This workshop was aimed at strengthening computer capabilities of MARPS organization members, so that they may participate more effectively in the HIV national response policy environment. Participants were trained on basic abilities in Microsoft Word, Microsoft Excel, Microsoft Power Point, Skype, and Elluminate. Participants included 29 representatives from 11 organizations.

Advocacy campaigns on behalf of the HIV Law. In August 2012, the ASONVIHSIDA President contacted USAID/PASCA to request technical assistance in order to help them determine the gaps in the Law and to make a counter-proposal. The ASONVIHSIDA was informed that USAID/PASCA had provided assistance in 2010, when it participated in the commission –summoned by CONISIDA– to consolidate the three reform proposals and that it was available to provide support to develop an advocacy intervention to use the strategic information that had been presented to decision makers. In December 2012, in the midst of multiple debates, the law was approved and produced changes such as increased multi-sectoral participation in CONISIDA, humane treatment and respect for the human rights of affected people; prevention commitments, and provision of the PEP included in the Law, among other issues.

Situation analysis of sexual diversity and HIV. In November 2012, USAID/PASCA performed a regional "Analysis of the Current Situation of Sexual Diversity in Regard to HIV" in Nicaragua, in which 6 organizations of sexually-diverse populations participated. The aim of this activity was to engage members from various sexually-diverse groups in a consultative group established by USAID/PASCA in the countries of the region, as strategic partners, in order to implement a work agenda to focus policies and programs for the response to HIV that contribute to reduce existing barriers to the universal access of sexually-diverse populations. As an outcome of the round table in Nicaragua, it was agreed that this group should be constituted and strengthened.

Training to strengthen MARPS and other groups. In October 2012, USAID/PASCA trained sixteen people from nine MARPS organizations on advocacy and networking to create impact on HIV policies. The contents of the workshop included: defining a network; experience in networking and the benefits stemming from it; maintaining and managing a Network; decisions by consensus; effective communication; negotiation, mission and vision of a network; analyzing information, and developing an advocacy plan. Post-evaluation indicated that there had been a 20% average increase in participants' competencies.

Strengthening the ADESENI. In August 2013, USAID/PASCA trained twenty-three promoters from the Asociación por los Derechos de la Diversidad Sexual Nicaragüense (Association for the Human Rights of Nicaraguan Sexual Diversity–ADESENI in Spanish) on networking and advocacy for HIV policy dialog. As an outcome of the workshop, participants designed an Advocacy Plan so that the Municipal Statements issued in July 2013 in three municipalities would become Municipal Regulations, which have increased force of law. In September 2013, the ADESENI organization reported 4 agreements reached with municipal governments in order to promote zero tolerance for stigma and discrimination toward Trans communities. The ADESENI organization sent a communication to USAID/PASCA acknowledging the use of the tools that they had received in the advocacy training to promote these municipal agreements. The work plan for these agreements was funded by a European Union project.

Activities aimed at strengthening the response to HIV by way of processes to develop, implement, and monitor policies that address gender-based and sexual violence.

National Round Table on GBV, SV, and HIV. In March 2012, USAID/PASCA facilitated a Round Table on Sexual Violence, Gender-Based Violence, and HIV. This Round Table included new organizations that had not been traditionally included in the topic. Representatives from 12 government and civil-society entities participated. The main gaps that were identified included: Sexual violence against women is not treated as a medical emergency; the regulatory framework and care protocols were fractioned; there are no links between both epidemics (SV and HIV) and inter-institutional coordination mechanisms had to be established; access to post-exposure prophylaxis for sexual-violence victims is limited; the social security system has not incorporated post-exposure prophylaxis; the Trans population and MSMs had limited access to care and to post-exposure prophylaxis when they were victims of sexual violence, and there was no mechanism to report and care for rape in the prison system. The focus of the SV/GBV project, linked to HIV, evidenced significant gaps in the policies and the regulatory framework of HIV comprehensive care.

Technical assistance to strengthen MARPS and other groups. USAID/PASCA facilitated technical-assistance meetings for a group of Sexual-Diversity organizations, with the aim of identifying the actions that this group could engage in regarding the Sexually-Diverse population's barriers to access HIV comprehensive care. USAID/PASCA was able to have this group be constituted as the Working Group for Sexual Diversity, in order to address access to post-exposure prophylaxis in sexual-violence cases as a priority issue. Constituting this working group was a significant achievement, since it has always been difficult for sexual-diversity groups to work together. In March 2013, these organizations developed their Advocacy Plan and an agreement to engage in advocacy with the Nicaraguan AIDS Commission in order to activate PEP provision to MARPS in public-health facilities.

Advocacy campaigns to approve the PEP protocol. USAID/PASCA supported the design of an advocacy campaign by a sexual-diversity working group to promote access to HIV post-exposure prophylaxis. This campaign was developed by ADESENI (Trans); Organización de Vida Integral (MSM); ANICP+VIDA, (PLWA); REDTRANS; ANIT, (Trans), Asociación Nuevos Horizontes, and Grupo Safo

(Lesbians). As a result of this advocacy by the sexually-diverse working group, CONISIDA approved the design for the Post-Exposure Prophylaxis Clinical Guide for Occupational and Sexual-Violence Cases.

USAID/PASCA provided technical assistance to design the guide and presented it to the Sexually-Diverse Working Group for its validation. Subsequently, the document was submitted to CONISIDA, which presented it to MINSA in August 2013. The guide was approved by MINSA's Regulations Department. The Sexually-Diverse Working Group considered that the objective of the campaign had been achieved.

Activities aimed at achieving Result 3: the business sector involved in the response to HIV.

Policy support to the HIV issue among business leaders. USAID/PASCA worked in conjunction with the Consejo Superior de la Empresa Privada (Private-Enterprise Superior Council—COSEP in Spanish) as an ally and representative of the Nicaraguan business leaders. This organization created the HIV Commission as one of its working commissions in December 2010. USAID/PASCA worked with this commission when it started its work, which focused on raising the awareness of the members of the various chambers constituting COSEP. USAID/PASCA presented information on HIV workplace to 5 chambers. Among those participating were the Chamber of Health; Chamber of Industry with the Asociación Nicaragüense de Textil y Confección (Nicaraguan Textile and Manufacturing Association); Chamber of Commerce, and Industrial Parks.

In November 2010, COSEP, with USAID/PASCA's technical assistance presented the forum "The Impact of HIV in the Nicaraguan Business Sector". The current state of the HIV epidemic in Nicaragua was presented at the forum, in addition to the economic perspective of the HIV impact in the coming five-year period by FUNIDES, and the experience of the Business Sector in Panama, inasmuch as implementing HIV workplace policies under the responsibility of the COSEP representative. As an immediate result of this activity, the Federación de Cámaras Nicaragüenses de Zonas Francas (Federation of Nicaraguan Free-Zone Chambers), and the Nicaraguan Chamber of Mines expressed their requests to USAID/PASCA and COSEP to receive technical assistance and implement HIV policies in 15 industrial parks headed by them.

In September 2011, during the celebration of the National Businesspersons' Day, COSEP underscored the cooperation provided by USAID/PASCA to develop and implement HIV workplace policies in front of 800 of the country's businesspersons. This was later reiterated in the quarterly publication on the work of this association. Similar work was possible at the celebration of the Businessperson's Day in 2012 and 2013.

In 2011, USAID/PASCA continued to support COSEP, when it requested the President of the Republic for a COSEP delegate to be included in CONISIDA and the CCM. This request obtained a favorable response in November 2011. Thus, the private sector was included in this multi-sectoral decision-making mechanism.

USAID/PASCA provided technical assistance to the HIV Commission created within COSEP in order to analyze the priority issues to be discussed and to write the Commission's program. Additionally, as per the request of USAID/Nicaragua, USAID/PASCA provided technical assistance to COSEP so that it could access funds from the USAID|Alianzas II project, which supported prevention activities in companies relating to testing promotion, information, and no stigma and discrimination for seropositive people.

In August and September 2012, technical assistance was provided to COSEP's HIV Commission to develop its Work Plan. In September 2012, the Commission focused on promoting the design of HIV policies at the level of chambers and companies, and to make effective the representation of the private sector in the inter-sectorial space of the national response, CONISIDA. In September 2011, the project

to implement prevention actions in participating companies was signed by COSEP and the USAID|Alianzas II project to implement prevention actions in participating companies. This project provided US\$175,000 to COSEP, in order to implement prevention actions in those companies that already had HIV workplace policies. USAID/PASCA supported COSEP in order to design the project.

With technical assistance from USAID/PASCA, and in consultation with its Chambers and Associations, the Directive Council approved the HIV Policy in February 2014. The policy encourages its Chambers and Associations to promote non-discrimination when hiring employees; non-inclusion of the HIV test as a requirement when applying for a job; providing strategic information on HIV to Human Resource departments; promoting training for workers in order to promote HIV prevention; establishing a healthy working environment, with social dialog, confidentiality and acceptance for all the workers who could be affected by HIV/AIDS, and promoting zero tolerance to any kind of discrimination stemming from HIV. The Policy was presented by COSEP's President, who underscored that this was a decision that was part of a commitment undertaken by COSEP since 2010, and which they will continue to work on. Within this framework, the Nicaraguan Chamber of Tourism also approved its HIV Policy to encourage its associates to incorporate into workplace prevention activities. This is a significant initiative, due to the political weight that the Nicaraguan business sector has in the country as an interlocutor with the Government.

Building capacities to design HIV workplace policies. As an outcome of USAID/PASCA's coordination with COSEP, USAID/PASCA trained the first 12 Nicaraguan companies in order for them to develop their HIV workplace policies

In January 2012, COSEP, in conjunction with the Nicaraguan Chamber of Commerce –CACONIC–, with technical support from USAID/PASCA, held the second training workshop on designing HIV workplace policies for Nicaraguan companies. The workshop was attended by 20 representatives from 11 firms. Organizations developed their preliminary HIV policies at this workshop.

In August 2012, USAID/PASCA trained 18 more officers from textile-industry firms. USAID/PASCA provided technical assistance to these firms in order for them to write the first draft of their HIV policies.

Training events were also held in 2013, jointly with COSEP. USAID/PASCA held these workshops every quarter, and through them, it provided training to over 55 companies in 2013.

Adopting HIV policies in Nicaraguan companies. USAID/PASCA provided assistance to a group of companies that had been trained to develop their HIV policies. This technical assistance entailed refining and managing the whole process to seek the approval of the organizations' Boards of Directors. In March 2012, the first 5 companies adopted their HIV policies. In August 2012, another firm had joined, and by March 2014, 16 HIV policies had been adopted by Nicaraguan companies.

HIV policies for groups of companies. In February 2013, with USAID/PASCA's technical assistance, 100% of the companies in the Industrial Park of the Free Trade Zone Las Mercedes had HIV policies. This group of firms is constituted by textile industries. This coordination was possible through COSEP as a strategic ally. A total of 8700 direct workers of this group of companies benefitted from these programs.

Project-closing activities. In March 2014, USAID/PASCA held 2 activities to close the project. The first one was a study forum where 6 HIV studies performed in the country were presented. This activity helped to disseminate the evidence on the behavior or the epidemic. The second activity was a project-closing session, in which the progress achieved in the country in regard to the HIV policy environment was presented. The project received much recognition from counterpart organizations.

2.7 Panama

At the onset of the Project, Panama had a National Strategic Plan 2007-2010, which had been costed in 2008. In addition, it had an AOP for the 2008-2009 period and had a National Monitoring and Evaluation Plan.

Activities aimed at achieving Result 1: HIV Plans budgeted, monitored, and evaluated

The National Strategic Plan 2007-2010 did not have quantitative goals, which limited its quantitative evaluation. USAID/PASCA applied the methodology or tool to monitor HIV policy implementation in the country, with the aim of implementing the NSP. This provided qualitative and operational information that contributed, from that perspective, to the process to evaluate the NSP. To that end, it performed interviews with NSP developer and implementers. The results of applying this tool were analyzed with the committee that updated the NSP. The final report on applying this tool was published in December 2009.

In May 2009, the Country Coordinating Mechanism submitted a revised HIV proposal to the Global Fund, for Round 9 funding. USAID/PASCA provided technical assistance in the process to reformulate the proposal so that it responded to Global Fund recommendations. The consultancy to accompany this process also helped to align the GM proposal with the type of epidemic prevailing in the country. Before it was sent, the proposal was validated and agreed on by the various sectors. USAID/PASCA participated in the CCM, representing international cooperation agencies.

Panama published its National STI, HIV, and AIDS Multi-Sectoral Strategic Plan for the 2009-2014 period and a new National Monitoring and Evaluation Plan for the same period. The Strategic Plan was developed through a very guarded process by NAP and the ASAP project funded by the World Bank. This was highly criticized by civil-society sector, which argued that the process was not open to participation from the various sectors. This fact notwithstanding, USAID/PASCA participated in internal discussion groups with colleagues from the World Bank and NAP. One of the achievements of this participation was that, in the end, the process was opened up to ample consultation in order to validate the results framework.

New Strategic Plan 2009-2014. In October 2009, USAID/PASCA facilitated the dissemination of the Strategic Plan so that civil-society organizations would be aware of its contents before it was published. This was accomplished by means of workshops that allowed sharing information and gathering suggestions from this sector. At the same time, the consultation process with international cooperation agencies was initiated, and USAID/PASCA participated in it along with UNAIDS, and the UNFPA.

Institutional Strengthening to implement the NSP 2009-2014. NSP implementation began among civil-society organizations. In January 2010, USAID/PASCA held a workshop that allowed 16 organizations to strengthen their competencies to develop operating plans aligned with National Strategic Planning. This workshop helped organizations to define interventions that support the national response. Support for these organizations will continue by means of their participation in Alianza Estratégica, an umbrella organization of which most of them are members.

Operating Plan for NAP, as CONAVIH's executing branch. As part of the efforts to strengthen the national HIV/AIDS authority, USAID/PASCA developed the Operating Plan for the National Aids Program, as CONAVIH's operating manager, administrator, and executor. The development of this plan was promoted as a mechanism to implement the National Strategic Plan approved at the end of 2009. In order to perform this job, a consultant was hired to hold consultation meetings with the National AIDS Program. The AOP was endorsed by CONAVIH at its ordinary meeting in April 2010. It was also approved by the Minister of Health and became a work tool.

Study on monitoring implementation of NSP 2007-2010. In October 2010, USAID/PASCA presented the results of applying the policy monitoring tool –applied to the NSP 2007-2010– to NAP, civil-society representatives, and members of the M&E unit, which constituted the Coordinating Committee for the study. This input was used by USAID/PASCA to provide feedback to the National Strategic Plan. The report on the study was concluded and presentations were made to various audiences.

Strengthening the M&E Information System. USAID/PASCA provided technical assistance to develop a workshop held in October 2009, which simplified the coordination of anti-retroviral therapy clinics with NAP. The aim was to identify and coordinate aspects to eliminate bottlenecks in reporting and feedback. It also provided input at meetings to develop the national report on UNGASS indicators submitted by the country.

In January 2010, in cooperation with the National AIDS Program, USAID/PASCA hired a consultant to implement the information flows that had been proposed in the Monitoring and Evaluation Plan 2009-2011. With this support, the process to consult with several organizations and information providers that feed the system began, in order to analyze gaps and to put forward recommendations. These consultations ended in May 2010 with a workshop that targeted the Multi-sectoral Monitoring and Evaluation Committee.

Subsequently, in coordination with NAP and the M&E Committee, USAID/PASCA facilitated a workshop on strengthening the M&E information system, held in June 2010. This workshop identified and analyzed gaps, and established an action plan to eliminate the barriers to generating indicator information. The methodology proposed by USAID/PASCA for the region was used. This document was the input used to guide technical assistance and to foster an agenda for the M&E Committee aimed at implementing the system.

Official report on epidemic indicators. In March 2010, the country submitted its UNGASS report, developed by a consultant hired by USAID/PASCA. The country reported on 17 out of the 25 UNGASS indicators, which also represent 15 out of the 39 indicators contained in the National M&E Plan (38%). On March 18 and 26, meetings were held to validate this report with civil-society organizations, the Ministry of Health, and Cooperation Agencies. An indicator worth noting among those that were reported is the one corresponding to the National AIDS Spending Assessment –NASA– 2008, which was obtained by means of a consultancy facilitated by USAID/PASCA. This process focused on gathering, validating and generating data.

Implementing the National HIV Strategic Plan 2009-2014. The National AIDS Program, with USAID/PASCA technical support held a workshop aimed at non-governmental organizations working on the response to HIV, with the aim of disseminating the contents of the National HIV Strategic Plan 2009-2014 and promoting better understanding of it, while discussing the proposal for the Annual Operating Plan 2011.

HIV Operating Plans. USAID/PASCA provided technical assistance to develop the AOP 2011, based on a previous plan that had been developed in 2010. This plan sought to implement the National HIV

Strategic Plan 2009-2014. The technical assistance that was provided consisted of developing a simplified version that would comply with the strategy of the new Head of NAP. A strategy to disseminate the plan among the main actors working on the response to HIV was created. The Plan was developed at the beginning of 2011, and it was submitted to consultations with various interest groups from March to May. In June 2011, the document was published. Ups supported similar planning processes in 2012 and 2013. For the AOP 2013, USAID/PASCA facilitated an evaluation exercise that constituted the basis for 2013 planning.

Workshop on using the Resource Needs Model. USAID/PASCA organized and facilitated a workshop on the use and applications of the RNM. The workshop was held in February 2011. The 16 participants included representatives of the Ministry of Health, the Social Security Institute, the Ministry of Finances, civil society, health economists, and demographic experts, among others. The workshop also included a session on the Spectrum model, used for demographic projections on the HIV epidemic. As follow-up to workshop results, the Ministry of Health requested support to develop an information proposal to be used in estimation exercises, projections, and cost estimates which were performed as follow-on to the regional estimation and projection workshop held in June 2011. To that end, a consultant was hired to gather information and prepare the documentation for the exercises, which was later used in their implementation. The capabilities generated in the group of people participating in RNM workshops were used when performing the exercise on HIV estimations and projections.

Strengthening the National HIV Commission, CONAVIH. This Commission requested technical support from USAID/PASCA to undertake its internal organization. USAID/PASCA supported the design of a strategy to ensure CONAVIH's autonomy and sustainability, fostering consensus among the actors involved. Work was performed in conjunction with the National STI/HIV/AIDS Program to develop the proposal for CONAVIH's action plan. At times there were doubts about its viability, but they were resolved through multiple consultations. Finally, it was decided that institutions would prepare their own operating plan. The most advanced one was developed by the Ministry of Economy and Finance, which created an HIV Commission, and has an operating plan. CONAVIH requested support from USAID/PASCA to develop a proposal to modify the Executive Decree creating the institution, in such a way as to allow better decision making and follow up.

National HIV Monitoring and Evaluation Plan. At the request of the National AIDS Program, USAID/PASCA hired a consultant to review the National Monitoring and Evaluation Plan. This review was performed to adjust the M&E Plan to the Multisectoral Strategic Plan (MSP), since there was a small discrepancy between them that had to be corrected. In addition, the plan lacked the datasheets for the indicators and information flows. As part of the consultancy that was facilitated by USAID/PASCA, meetings were held with MINSA's Epidemiology Department and other national actors in order to define information flows for prioritized indicators. CONAVIH and NAP approved the National Monitoring and Evaluation Plan for the 2011-2015 period.

Prioritizing national indicators on the HIV epidemic. In April 2011, USAID/PASCA facilitated a workshop to define a basic indicator package, attended by representatives from institutions and organizations that generate, analyze, and use data on the epidemic. The outcome of this workshop was a basic package of 41 prioritized indicators, which were reduced from a total of 100 initial indicators included in the National M&E Plan, the PMTCT Plan, UNGASS, and UA. In addition, 23 indicators were identified as already having information flows, sources of data, and reporting processes. These were later reported in the M&E half-yearly report. Discussions and analysis meetings were also held with those responsible for monitoring and evaluation at the National STI/HIV/AIDS Program to promote ownership and detailed knowledge of this process that has national implications. This Basic Indicator Package is a set of indicators established by the country in the revised National M&E Plan.

Report on national indicators to monitor and evaluate the epidemic. With the incorporation of the new USAID/PASCA Technical Coordinator, negotiations began in order to develop the M&E half-yearly report containing data for the January-June 2011 period. During the first half of the year, NAP had gathered information pertaining to the indicators that need information from the ART clinics, which constitute 8 out of the 23 that must be reported. In the coming months, a multi-sectoral committee gathered and updated the data for the rest of the pending indicators. At the end of September 2011, the committee completed the report and officially endorsed the publication of the first National Monitoring Report on the Response to HIV in Panama. This report was developed with the aim of having these data disseminated, analyzed, and used, mainly within the country itself.

Evaluation of the National Strategic Plan 2009-2014. After several advocacy actions, USAID/PASCA was able to obtain the request for support from the National AIDS Program in order to develop a mid-term evaluation of the NSP. This achievement was the outcome of efforts to inform them about the importance of evaluating in order to assertively guide the course of the epidemic.

From June to September 2012, a mid-term evaluation of the MSP 2009-2014 was undertaken. To that end, meetings were held with National AIDS Program staff and with the Multi-sectoral M&E Committee, who defined the evaluation methodology and development the instruments to assess the level of implementation, pertinence, and response to the epidemic in the country. In August 2012, 6 regional workshops were held to apply the evaluation instruments. Participants in this workshop included national authorities, authorities from all the health regions in the country, and civil-society organizations. In September 2012, the M&E Multi-Sectoral Committee approved the report for its publication. Among the main results of this evaluation are the pertinence of the plan with the situation of the epidemic in Panama, and the perception of how objectives are being achieved, considering that 50% of achievement is expected by mid-term of the implementation process, except in regard to institutional strengthening, which is less. The need to increase the number of human resources working on the response to HIV and their training was underscored in this report.

National Monitoring and Evaluation Plan 2009-2014. USAID/PASCA provided support to the National STI/HIV/AIDS Program in order to publish this plan, which was presented and distributed during the II National Forum on M&E of the epidemic in May 2012.

Improvements to the M&E Information System. In October 2011, USAID/PASCA, in conjunction with the National AIDS Program held a meeting to disseminate the commitment to report national HIV indicators and to comply with the new norms to manage anti-retroviral therapy. This meeting targeted Ministry of Health and Social Security Fund staff who gather data and provide services to people living with HIV.

In November 2012, USAID/PASCA supported efforts to review and adjust the instruments that were used in all of the country's regions to register, gather, and notify data on the indicators contained in the National M&E Plan. The trial run started in the Bocas del Toro region, where USAID/PASCA accompanied the National AIDS Program's technical team in order to verify proper application of the instruments. Through this process, it was possible to identify the weaknesses in capturing, registering, and notifying the data that would feed indicators. This field work allowed the development of a more assertive proposal on gathering instruments.

Report on HIV prioritized indicators contained in the Basic Package 2012. In October 2011, the National STI/HIV/AIDS Program approved the publication of the Report on the HIV Basic Indicator Package, which had been developed with technical assistance from USAID/PASCA in September 2011. In addition, half-yearly monitoring of ART clinics was performed in order to obtain data on the first 2011

half-year period, which were included in the 2012 annual report. Both reports were presented and disseminated at the II National M&E Forum.

At the beginning of 2012, USAID/PASCA was able to secure a commitment to continue publishing data. In July 2012, a tour was undertaken to verify collected data. The aim of this tour was to verify that information flows were adequately complied with, and that information being sent was in accordance with requested data. On previous occasions, tours were aimed at gathering all the information, but that year, information flows were already in place as a result of USAID/PASCA cooperation. A second report was published in September 2012. It contained data on 25 out of the 41 indicators established for the basic package. This meant that there were two additional indicators reported that year in comparison with the previous year.

Central American Diploma Course on Monitoring and Evaluation for HIV/AIDS Policy and Program Management. In November 2011, USAID/PASCA executed a sub-agreement with INCAP in order to implement the first diploma course in the country. From March to July 2012, 37 participants studied the course and presented their first seminar papers, aimed at improving the National M&E Information System. Subsequently, USAID/PASCA held a second diploma course from April to September 2013. Thirty-two local-organization officers were trained in this course.

Basic HIV M&E Course. From April to June 2012, USAID/PASCA facilitated 4 basic-level M&E workshops aimed at organizations feeding the National Monitoring and Evaluation System. Health staff, along with representatives of civil society and organizations providing information in the local sphere, was trained at these workshops. After each workshop ended, regional committees were established to oversee information flows for the indicators reported by the region.

Strengthening the capacities of the National HIV M&E Committee. A training workshop with the Inter-Institutional M&E Committee was held in June 2012. The proposal for the contents of the Norms and Procedures Manual was presented at this workshop. This manual details the responsibilities and organizational structure for the operation of this Committee. USAID/PASCA trained 13 Committee members.

AIDS Spending Assessment –NASA– 2010 and 2012. USAID/PASCA, by means of a consultancy, supported the National AIDS Program in its efforts to gather information and develop the 2010 report. Technical assistance included gathering data and, in November 2011, discussing preliminary data with the National AIDS Program, which were later used as input for an ample validation meeting. In December 2011, a meeting with multi-sectoral participation was held in order to discuss the report. The input from these meetings was used to develop the final NASA 2010 document, which was approved by the Ministry of Health and published in May 2012. A similar process was undertaken from August 2013 to January 2014, in order to develop the NASA 2012 study. In this case, USAID/PASCA coordinated with UNAIDS, which hired a consultant to perform this study. As of March 2014, the country had a database, but the report had not yet been completed.

Study on the progress achieved by the HIV policy response. From October to December 2011, USAID/PASCA performed interviews aimed at measuring this indicator in the country. In January 2012, field work was completed and a total of 30 interviews had been performed. Quantitative results were validated at an analysis session in August 2012. The most outstanding results of this study show that among all policy areas, Monitoring and Evaluation is the stage with the highest scores. The highest scores for policy areas are the ones obtained by MARPS, followed by Access to Medications. The worst scores were for the Business Sector, followed by Multi-Sectoral Response. It is worth noting that none of them surpassed 60%.

Applying the Modes of Transmission Model. In December 2011, with technical assistance from USAID/PASCA, the National AIDS Program decided to assume ownership of the process and to perform this exercise with Program officials. From January to May 2012, USAID/PASCA supported the process to gather information, and in June 2012, meetings were held to complete the information that was required for the MoT. Pending information included the one from the Central American Survey of Sexual Behavior and HIV/STI Prevalence among Vulnerable Populations (ECVC in Spanish) being performed by the Gorgas Institute. This delayed the development of this exercise. In July 2013, USAID/PASCA hired a consultant to update the model. At this time, discussion and analysis meetings were held in coordination with UNAIDS. The Program made official the data for the model in January 2014.

HIV Estimation and Projection Exercise. USAID/PASCA supported this process, which required a number of meetings to analyze, disseminate, and seek consensus on the data that were developed. Specifically, USAID/PASCA facilitated meetings among UNAIDS, the National STI/HIV/AIDS Program and the Epidemiology Department. At the end of July 2012, consensus had been reached on HIV estimations and projections, and only the development of the report by the national authority was pending.

Disseminating HIV Strategic Information. In March 2012, the National AIDS Program held the II National Monitoring and Evaluation Forum. Its aim was to disseminate the most recent information produced by the country in order to monitor and evaluate the response to HIV. All the actors involved in the response participated in the Forum, which included national and international speakers. The general assessment of the Forum by participants was positive, and there were numerous requests for the Forum to be held periodically. The activity was supported by various international agencies, including USAID, as well as by private companies. The USAID/PASCA project presented the results of the study on Stigma and Discrimination in the Central American Region, the progress achieved in the evaluations of HIV Strategic Plans in the region, and a preview of the report on the progress achieved in the policy response to HIV. The following documents were distributed: National AIDS Spending Assessment Report 2012; Mapping of MARPS Organizations in Panama; Operating Plan 2012; Strategic Monitoring and Evaluation Plan 2009-2014, and the Report on the Basic Package of Prioritized Indicators in Panama. The activity establishes the links required to harmonize the various sectors of the country in order to engage in monitoring the epidemic. To implement this activity, USAID/PASCA provided technical assistance to the National STI/HIV/AIDS Program aimed at preparing the agenda, coordinating speakers, and coordinating cooperation agencies. It also provided partial support to the logistics of the whole activity.

Report on indicators in the M&E Plan and the National Supportive Supervision Guide to improve the quality of reported indicators. In January 2013, USAID/PASCA coordinated with the National M&E Committee to hold a number of meetings and develop topics focusing on gathering data and developing the national report on prioritized indicators. This time, the National AIDS Program led this process to gather, consolidate, and analyze information. Concurrently with this process, NAP decided to develop a proposal to improve quality data. With USAID/PASCA technical assistance, it developed a National Supportive Supervision Guide that sought to validate and, at the same time, train the people who are gathering and providing data on HIV to the National Information System. After holding a series of validation meetings in health regions, the Multi-Sectoral M&E Committee approved the Report on Monitoring and Evaluation of the Basic Indicator Package and the Supportive Supervision Guide in order to ensure the quality of reported indicators. Through this technical assistance, USAID/PASCA helped to improve opportunities to gather data as well as to improve data quality, so that the country may have information from primary sources in real time. This will produce strategic information for the response to HIV.

HIV training and monitoring. In March 2013, two workshops were held to disseminate the HIV Supportive Supervision Guide. In both workshops, competencies were developed in order to recognize

the importance of institutionalizing monitoring and evaluation and presenting quality reports. Through these workshops, groups working in the response to HIV were strengthened, so that their reports to the Monitoring and Evaluations Systems are increasingly accurate, timely, and of better quality.

Strengthening the M&E Information Systems. A National Monitoring and Evaluation Sub-Commission to Evaluate Anti-Retroviral Therapy Schemes was created within the National Monitoring and Evaluation Committee, in order to contribute to the work performed by the National Commission to Evaluate Anti-Retroviral Therapy Schemes that USAID/PASCA had been supporting. USAID/PASCA provided technical assistance to the meetings held in January 2013, in order to plan and execute an annual activity agenda, centered on generating and analyzing data and national reports for Early Warning Indicators (IAT in Spanish) included in the Monitoring and Evaluation Plan and in the definition of the Sub-Commission responsibilities. The data gathered by NAP pertaining to ART and the opportunities to improve recording and interventions in regard to it were disseminated.

Forum to Disseminate HIV Studies. USAID/PASCA provided technical assistance to the National AIDS Program, in order to develop an agenda for the III Forum on Monitoring and Evaluation that was held in May 2013. That year, PNVS decided to combine two exposition modes: a forum and a symposium. In the Forum, which constituted the first part of the event, participants discussed and analyzed the monitoring and evaluation information on the response to the epidemic stemming from NGOs, MARPS, cooperation agencies, and civil society. In the second part, the topic Supply Chain was presented. In the symposium, specialists presented topics pertaining to improvements in HIV diagnosis, treatment, and clinical care.

Developing a proposal for GF R10 Funding. In response to a request by the Country Coordinating Mechanism, USAID/PASCA supported it with one of the three consultants who developed the proposal to participate in the Global Fund's Round 10. The proposal that was developed focused on prevention and on promoting MARPS human rights. In order to bolster the proposal, an analysis was performed on the conditions, vulnerability, and stigma/discrimination in these populations, which was discussed and adjusted to be included as part of the strategy defined in the proposal. In this proposal, data from the NASA 08 report, which were gathered and developed by a consultancy funded by USAID/PASCA, were also used. Assistance was also provided so that MARPS were present in the process to validate the proposal, and they were provided support so that they justify their requirements to the group with proper arguments.

Implementing the HIV project funded by the Global Fund. USAID/PASCA provided technical assistance to the Country Coordinating Mechanism so that it could fulfill the requirements of the Global Fund's Technical Revision Panel, before the grant was received. Specifically, it supported the translation of the winning proposal into Spanish, and it hired a consultant to coordinate the answers to all the questions posed by the Technical Revision Panel. Coordination was established with the Principal Recipient, Cicatelli Associates, in order to identify the gaps that had to be filled when implementing the proposal. The main gaps that were identified were the lack of a plan to supply and distribute the supplies for HIV prevention and diagnosis that were needed to execute the proposal, and the lack of thorough knowledge of the proposal by CCM members and possible sub-recipients. As follow-up to this, USAID/PASCA hired a consultant to develop a plan to supply and distribute the HIV prevention and diagnosis supplies, which was completed when sub-recipients were selected. In order to remedy the second weakness, two workshops were held with CCM members and possible sub-recipients to closely examine all the components of the program that had been approved, as well as its budget.

Technical assistance to implement the project funded by the Global Fund. In October 2011, CCM members attended a workshop aimed at engaging in a thorough analysis of the budget that was being

negotiated with the Global Fund. At those workshops held with USAID/PASCA support, 25 CCM members closely examined the role of that multi-sectoral entity in the implementation of the proposal approved for Panama. As a result of this meeting, CCM members gained further understanding of the various budget items in the proposal and the characteristics and implications of the negotiation process with the Global Fund.

USAID/PASCA also provided technical assistance for the CCM meetings that were held in November 2011, with the specific aim of analyzing the 12.56% reduction in the original budget. At the end of November, the Principal Recipient informed that the Global Fund was suggesting changes, including reducing the number of feminine condoms and reducing the line item of sub-recipient infrastructure. This generated much debate among CCM members. USAID/PASCA acted as a mediator to solve these conflicts, among them, selecting the people who would occupy key positions to implement the project in the country.

In December 2011, the Principal Recipient, and CCM and Global Fund representatives executed a grant agreement, approved for the first 3 years, for a total of US\$5.7 million.

In 2012 and 2013, USAID/PASCA's technical assistance to CCM consisted of facilitating communication and negotiation processes between the Principal Recipient and the sub-recipient organization. There were frequent differences of opinion owing to the interests of the sub-recipients and those of the Principal Recipient in regard to the ways in which selections were made, the distribution of geographic areas to execute prevention actions, the bases for selection and budget allotments, among others. USAID/PASCA also provided support to train civil society on issues such as monitoring and evaluation, developing projects, managing budgets, as well as to complete the Plan to Manage and Purchase Supplies (GAS in Spanish) once the sub-recipients had been identified. Furthermore, the National Monitoring and Evaluation System was evaluated and support was provided for advocacy actions to minimize the impact of gender-based violence on the results of the project.

Strengthening the Country Coordinating Mechanism. In March 2012, USAID/PASCA facilitated a workshop to have institutions implementing the GF project assume their roles and to review the CCM's By-Laws and Conflict Management Manual, which resulted in a proposal approved by the full CCM assembly.

In August 2012, the CCM held a meeting to elect the members of its Board of Directors. During this process, USAID/PASCA supported MARPS groups to elect representatives from sectors such as men who have sex with me, people living with HIV, sex workers, and Trans individuals. To this end, it mobilized over two hundred people from several of the country's provinces, so that the election would be as inclusive as possible. Elections took place with no surprises among all sectors, except for the MSM sector, in which representatives did not receive the majority of votes, and consequently, two other people were elected. This resulted in a tense situation in which USAID/PASCA played a mediating role.

In 2013, USAID/PASCA provided support to CCM in order to follow up on Global Fund recommendations. Specifically, technical assistance consisted in facilitating the selection and transition of a temporary Principal Recipient, reviewing the CCM internal set of regulations, reviewing the manual on conflict of interests, and providing support to seek and select sub-recipients.

Activities aimed at achieving Result 2: HIV Advocacy Agendas effectively implemented

Strengthening Civil-Society Networks. In October 2009, USAID/PASCA provided technical assistance to organize the first workshop with civil society, in which consensus was reached to constitute the National

Network of People Living with HIV. During the first 2010 quarter, the By-Laws governing this network's operations were created and reviewed. Technical assistance was provided to its members in order to constitute committees and establish the roles of each one, as well as to promote the participation of representatives from various regions in the country. In the middle of 2010, this network, organized with USAID/PASCA technical assistance, came before CONAVIH to secure its recognition in the HIV policy arena at the national level.

Analyzing the trends in HIV/AIDS expenditures in Panama. USAID/PASCA performed an analysis on the trend of HIV/AIDS spending distribution in Panama, according to the results of the NASA 2004-2008 exercises. It also analyzed the degree in which each line item contributed to achieving international commitments, such as the Millennium Goals, the Declaration of Universal Access, and the UNGASS commitment declaration for the 2004-2008 period. The results were presented to the Ministry of Health and approved in October 2009. This analysis showed that there were inconsistencies in the data for the same year in the reports corresponding to different years, due to their undocumented reviews. It was also used to promote analyses of the country's investment in HIV.

Estimations and projections on the epidemic. Through a consultancy facilitated by USAID/PASCA, the process to gather country data for the HIV estimations and projections 2010 was completed. Cost estimates were also performed. These were all used as inputs for the exercise on estimations and projections. The country attended the regional workshop on the use of programs to perform said estimations and it performed its first one.

Support to developing the national report on the progress in Universal Access indicators. USAID/PASCA provided technical assistance and was able to support PNSIDA to present the report on Panama's progress in achieving Universal Access indicators for the year 2011. At the request of the Ministry of Health, a summary and an analysis on the overall progress of the country in achieving UNGASS and Universal Access indicators were developed, in order to reinforce the participation of the Ministry of Health at the United Nations' High-Level Meeting on HIV, which took place in June 2011.

Support to developing the National Norm on Therapeutic Care to people living with HIV. USAID/PASCA provided technical assistance to reach consensus on the contents, publication, and dissemination of the Norms for Therapeutic Management of People Living with HIV. This was achieved in July 2011. This norm sought to have health-care services provided to people living with HIV delivered with quality and equity, and to standardize first- and second-line treatments in the country, as well as to facilitate better anti-retroviral needs estimates. This made gathering data and generating nationwide reports easier. The norm that was implemented will also expedite compliance with several UNGASS and Universal Access indicators. USAID/PASCA supported this initiative as part of implementing operative policies that ensure equitable service delivery. Technical assistance consisted in facilitating consensus on the technical aspects of the norms. USAID/PASCA coordinated its participation with the Capacity Project, and helped with publication/ printing of the norms, while Capacity was in charge of training health personnel working at anti-retroviral clinics. Complying with this activity was a condition to achieve clinical indicators for the National Monitoring and Evaluation Plan.

Support to develop advocacy plans for civil-society organizations. USAID/PASCA reviewed the work plans for the Asociación de Hombres y Mujeres Nuevos de Panamá, the Citizen HIV and Human Rights Observatories, and the campaign "Tengo un Amigo Gay" (I Have a Gay Friend), and submitted its proposals to adapt them in order to attain increased effectiveness in the advocacy work performed by these organizations.

Advocacy Campaigns. Technical and financial assistance was provided to the Asociación de Hombres y Mujeres Nuevos de Panamá and the campaign “Tengo un Amigo Gay” so that they organized their activities for the Day against Homophobia and the Gay Pride Day in May and June 2011, based on the advocacy plans of both associations. The main objective was to secure support to approve Law 50, which promotes diminished discrimination as a result of sexual orientation and gender identification. USAID/PASCA supported the publication of a bulletin with public demands to approve the law, and it helped in printing specific posters for bus stops, postcards, and promotional materials for the event. These actions contributed to the explicit support for this law by CONAVIH and the CCM, as well as from the Ombudsman and the Social-Development Minister.

Technical assistance to review the HIV Law. USAID/PASCA provided technical assistance to review the proposal to amend the HIV Law. This proposal sought to adapt the postulates of the law to the current situation and to adapt it to the international human-rights instruments of which Panama is a signatory. Specifically, USAID/PASCA facilitated consultation meetings in which civil-society organizations, the Ombudsman, and the Legal Counsel of the Legislative Assembly participated. Furthermore, it provided strategic information on the human-rights approach of the Panamanian HIV legislation.

Diagnosing MARPS organizations and groups. USAID/PASCA concluded a diagnosis on MARPS organizations, whose results were disseminated to the organizations participating in the process on July 20, 2011. Some of the opportunities to work with these groups include their needs for organizational and legal strengthening in order for them to become Global Fund sub-recipients and for strengthening their administrative, governance, and communication-process aspects.

Strengthening MARPS organizations and groups. USAID/PASCA supported non-formal groups of Trans individuals and sex workers (Asociación Mujeres con Dignidad y Derechos) to develop an action-strengthening plan that would ensure their capabilities in order to implement the Global Fund proposal. Specifically, support was provided to Trans individuals to obtain legal standing. In this same context, training was provided on institutional strengthening, planning, monitoring, and evaluation for members of the PROBIDSIDA Foundation, which was one of the main sub-recipients of the Global Fund proposal, as well as the organizations that will be included under this umbrella organization.

Involving Faith Based Organizations in the response to the epidemic. In June 2011, members of Panama’s Faith Communities participated in a workshop to strengthen their capabilities and analyze the way in which they can contribute to the national response to HIV, from their pastoral, theological and community perspectives, and to examine and adopt the FBO guide. The workshop was led by the Director of Proyecto Vida and a USAID/PASCA consultant.

Positioning MARPS strategic information on the public agenda. In November 2011, a breakfast meeting was held with journalists, in order to discuss topics relating to MARPS discrimination and human rights in the media. This meeting was organized by the National STI/HIV/AIDS Program. USAID/PASCA’s role was providing technical assistance to develop the appropriate methodology to conceptualize the terms, so that it would raise awareness and strengthen the knowledge of those social communicators who attended.

In April 2012, USAID/PASCA facilitated two workshops to analyze the results of the survey on stigma and discrimination. Twenty representatives of the governmental, non-governmental, and business sectors participated. They learned about and analyzed, first hand, the situation of stigma and discrimination by reason of HIV and toward MARPS in the country. As a result of these workshops, civil-society and governmental organizations were made aware and handled historical data from the various surveys

performed by USAID/PASCA; they used cross-variables related to age, sex, and education, and they engaged in an in-depth analysis in order to approach the subject.

Advocacy campaigns for ARV supply. USAID/PASCA provided technical assistance to the Citizen's HIV and Human Rights Observatory so that it would develop its advocacy plan aimed mainly at policy impact in order to put an end to ARV stock-outs and to strengthen advocacy capabilities of community defenders. Since November 2011, the Citizen's HIV and Human Rights Observatory has been present in the policy arena with a series of activities that inspired the Ministry of Health, CONAVIH and the First Lady of the country. As an achievement of this campaign, in September 2012, the National STI/HIV/AIDS Program announced that all the medications that had had stock-outs had arrived.

Advocacy campaign on behalf of health services for MARPS. Another advocacy campaign that received USAID/PASCA technical assistance was the one led by the Asociación Nuevos Horizontes, whose objective was to implement international care protocols in sexual health and HIV to MSM in Panama's Western Health Region. In May 2012, this organization implemented policy-impact activities on the International Day against Homophobia, seeking to draw attention to the need for protocols. In this context, USAID/PASCA facilitated a training meeting on human rights and the contents of the protocol for the LGBT population and the health staff in Panama's Western Health Region. The contents of the international proposal to adapt care services to the needs of MSM's sexual health and HIV were discussed, and it was agreed that said proposal had to be adapted to the Panama's Western Health Region.

Strengthening the Citizen's Human Rights and HIV Observatory. In November 2011, USAID/PASCA held a workshop in cooperation with the Citizen's Human Rights and HIV Observatory with the aim of strengthening Community Observers in six of the country's provinces on issues such as human rights in the national and international spheres, advocacy, and strategic planning. During this workshop, the annual plan 2012 for the Observatory was reviewed. In view of the imminent stock-out of anti-retrovirals in the country, this organization summoned to a round table in which governmental agents, the business sector, civil society, and the international cooperation agencies participated. The invitation was not accepted by four entities under the Ministry of Health. However, the initiative did achieve results, such as a written response from the Ministry of Health and a public communiqué. During this process, USAID/PASCA provided its technical assistance to evaluate the data and information that was available and to achieve consensus for the stance of the Observatory with other governmental and non-governmental entities. Nevertheless the stock-out problems continued to be significant until September 2012, when it was resolved.

Strengthening Organización Hombres y Mujeres Nuevas de Panamá (AHMNP) in regard to HIV issues. Due to juncture situations stemming from the efforts to approve the bill aimed at diminishing stigma and discrimination by reason of sexual orientation and gender identity, this organization requested technical assistance from USAID/PASCA in order to design an advocacy campaign. USAID/PASCA supported them to develop their plan, and provided guidance to their implementing public activities to diminish stigma and discrimination.

Strengthening Asociación Panameña de Personas Trans (APPT) in regard to HIV issues. In response to a request from this organization, USAID/PASCA provided them with technical assistance to finish their procedures with the Ministry of Economy and Finances, with the aim of obtaining their legal standing. This procedure enabled them to become sub-recipients of the Global Fund project.

Strengthening Asociación Nuevos Horizontes in regard to HIV issues. In response to a request from this organization, USAID/PASCA supported it in its efforts to obtain its legal standing, in order to be eligible to become sub-recipients of the GF project, and with the aim of causing impact on behalf of

positive HIV policy changes pertaining to MARPS. It was the second sexual-diversity organization legally established in the country. This made it considerably easier for this LGBT group to participate in decision-making bodies related to the response to HIV. USAID/PASCA also provided support so that they could develop their strategic and operating plan.

Training workshop on HIV advocacy and policy dialog. In November 2011, USAID/PASCA facilitated a national advocacy workshop for MARPS groups. Twenty-five representatives of these organizations participated. During three days, attendants learned about and practiced advocacy capacities and strategies, as well as techniques to develop and follow up advocacy plans. At the end of the workshop, as a result of it, all participating organizations had an advocacy plan specifically adapted to the characteristics and needs of their target populations and aimed at achieving priority objectives for them.

Training workshop on communication processes and conflict resolution. In August 2012, a training workshop was facilitated by USAID/PASCA. It was aimed at MARPS that participate in implementing a program approved by the Global Fund to create negotiation and communication skills. Twenty-three representatives of 11 MARPS organizations participated. The topics that were discussed including negotiation capacities within the framework of implementing the GF project, creating better assertive communication techniques, as well as strengthening self-esteem and the capacity to engage in collaborative work with other organizations.

Training workshop on the use of computer tools that expedite accountability in MARPS organizations. In April 2012, USAID/PASCA held a workshop on the use of computer tools (Office and Elluminate) for MARPS organizations and groups and REDCA+ representatives, with excellent results. At this workshop, seven organizations acquired competencies to strengthen their planning processes, develop their proposals, render accounts, develop the reports of their organizations, and engage in administrative processes that need to use computer tools.

Advocacy campaign to reduce stigma by reason of HIV in the justice sector. USAID/PASCA, in conjunction with UNDP lobbied with authorities from the justice sector, who accepted training on HIV. USAID/PASCA and UNDP facilitated a technical-assistance workshop for judges and secretaries of Family Courts on the application of human rights in cases relating to HIV and MARPS. Participants then had the tools to understand the complexity of HIV and the discrimination against MARPS when resolving family cases. Participants, especially the promoter of the activity, the Director of Legal Counsel for the Judicial Body, proposed a review of the legislation that relates to HIV and MARPS discrimination or treatment, especially the HIV Law, in order to submit a proposal to adapt it according to human rights.

Reviewing the Guide for Care at user friendly clinics. In May 2013, NAP presented a proposal adapted to the Guide for Care at User-Friendly Clinics, as a proposal for a Model for Care to MARPS. This guide was the result of systematizing the experience of the Ministry of Health's work with these populations. USAID/PASCA supported NAP to provide follow up with the Ministry of Health in order to ensure its approval. Although as of March 2014 the guide had not yet been approved, it was being used by clinics that are providing health services to sexually-diverse populations.

Activities aimed at strengthening the response to HIV by way of processes to develop, implement, and monitor policies that address gender-based and sexual violence.

Defining a work agenda for GBV, SV and HIV. USAID/PASCA held a National Round Table on GBV/SV/HIV in March 2012, with 18 institutions and organizations working on SV and/or HIV in the country. The round table included experts, such as the Director of the United Nations UNiTE to End

Violence against Women Campaign for Latin America and the Caribbean, the Santo Tomás Hospital, and the USAID/PASCA Director. At this round table, lines of action were proposed, among the reviewing the legal protection and normative for MARPS in sexual-violence cases, as well as training for groups and institutions working separately on HIV and GBV on the links between both issues.

Reviewing the policy and legal frameworks of GBV, SV, and HIV. USAID/PASCA undertook a consultancy to identify the various protocols and other norms existing in the country with regard to providing Post-Exposure Prophylaxis (PEP), as well as to identify the gaps in the route to achieving a sole protocol to provide PEP to all sexual-violence victims, including MARPS. This diagnosis was validated by a group of national experts, including representatives of the Ministry of Health, the National Policy, the country's infectious disease specialists, gender-based violence organizations, and organizations participating in the response to HIV.

Developing a multi-sectoral mechanism to address GBV, SV, and HIV issues. The group of institutions and organizations that participated in the National Round Table on SV and HIV, and in validating the diagnosis of the norms relating to SV and PEP is constituted by the main actors involved in the response to HIV and the work on sexual violence. These actors have proven experience in this area, and they will constitute a multi-sectoral consultation mechanism on this issue.

Approval for the PEP protocol aimed at everyone who is a victim of sexual violence. In November 2013, USAID/PASCA facilitated a multi-sectoral proposal for a national protocol to apply post-exposure prophylaxis (PEP) for HIV to all sexual-violence victims. The main issues that have been included in this expanded protocol include: eliminating barriers so that ARV services do not have to be provided only by an infectious-disease specialist; increasing service access and availability, and establishing PEP as a health priority. Previously, this protocol had been included in the norms for therapeutic ARV management and was not noticeable in the midst of such amounts of information, so that the intention was for it to be specifically for PEP. In July 2013, the General Health Director gave his approval to implement and disseminate the Protocol. The PNVS, with technical assistance from USAID/PASCA, developed a training program for the various entities engaged in providing comprehensive care to sexual-violence victims and to community-based organizations, in order for them to become promoters of this protocol with their members and the community in general.

Inter-institutional committee to implement the PEP protocol. USAID/PASCA provided technical assistance for the Ministry of Health to issue an internal agreement recognizing the inter-institutional committee that will facilitate the development, adoption, and implementation of the post-exposure prophylaxis for all sexual-violence victims. This was an important step to instill validity to the inter-institutional committee and to act as a guarantor to ensure the provision of this service.

Round table on the access to HIV Post Exposure Prophylaxis. In April 2013, representatives from government institutions, civil society, people living with HIV, and most-at-risk populations (MARPS) met at a round table with the purpose of identifying the progress and prioritizing actions to ensure access to Post-Exposure Prophylaxis for all sexual-violence victims, with the aim of preventing HIV. This round table was facilitated by USAID/PASCA. Attendants had the opportunity to learn about the opportunities and challenges faced when implementing this protocol, and discussed relevant aspects to continue advancing. They concluded that analyzing all these issues requires subsequent working sessions to be held as soon as possible in order to establish a course of action that leads to implementing and overseeing compliance with the access to post-exposure prophylaxis for all victims of rape, in general.

Activities aimed at achieving Result 3: the business sector involved in the response to HIV.

In November 2008, USAID/PASCA started by presenting its availability to provide technical assistance in the fields of HIV/AIDS labor policies to representatives of the Panamanian National Council of Business Enterprises (CoNEP). This organization gathers together the country's business sector and was part of CONAVIH and the CCM in Panama. CoNEP has undertaken successful interventions with selected companies. At that time, its outreach was restricted, due to the lack of administrative resources to support the coordination of an HIV executive agenda, and also due to the lack of a strategy and prioritization of actions. In July 2009, USAID/PASCA hired a consultant to provide technical assistance in order to define a strategy that would identify opportunities for the business sector to participate in the response to the epidemic, and facilitated the identification of areas in which CoNEP could establish a strategic alliance with USAID/PASCA. In September 2009, USAID/PASCA and CoNEP signed a Memorandum of Understanding to contribute to strengthening, organizing, and coordinating the business sector in order to respond to the HIV epidemic in Panama.

Information on the participation of the business sector in the response to HIV. USAID/PASCA gathered information in Panama on the structure of the business sector and the level in which it had adopted HIV/AIDS labor policies. This information was presented in the document Structure of the Business Sector: Mapping Main Companies, Associations, and Chambers. The main policies, laws, and decrees supporting the work of the business sector in the response to HIV were also presented. Similarly, elements on the analysis a HIV/AIDS social responsibility norm were gathered, in order to develop such norm in conjunction with the Panamanian business sector. These three documents were developed by a local consultant, and they provided the input to implement collaborative activities with CoNEP.

Positioning the HIV issue within the business sector. In order to commemorate the World Day against AIDS in December 2009, CoNEP, with technical assistance provided by USAID/PASCA, summoned and led a policy dialog on the participation of the business sector in the response to HIV in Panama. This dialog was widely covered by the media, and CoNEP reiterated its commitment to advance the economic and social development of the country through this decision to cooperate in reducing HIV, in conjunction with its allies from the public sector, the international cooperation, and civil-society organizations. At this same ceremony, it launched a program aimed at raising the awareness of business leaders, strengthening capacities in the field of HIV in the workplace, and transferring the tools and methodologies that could contribute to this effort. CoNEP also issued a press release in which it described these advances and commitments.

In February 2010, USAID/PASCA provided advisory services to CoNEP aimed at implementing its program to establish HIV workplace policies. As part of this assistance, CoNEP increased the number of its strategic allies on this issue and engaged the Ministry of Health to provide support to referral, treatment, and test/ and counseling processes for those companies that request them.

Training on how to develop HIV workplace policies. Within the framework of the USAID/PASCA and CoNEP agreement, in May 2010, a workshop was held for representatives of 7 Panamanian companies. The aim of this workshop was to present the Workplace Policy Builder tool and to foster the development and implementation of HIV workplace policies. Participating firms committed to developing their individual policies, for which USAID/PASCA provided individualized technical assistance using the Workplace Policy Builder. At another opportunity that came up with these same companies, the Project presented "The Economic Impact and Competitiveness in Companies working on HIV". This initiative

was widely covered by the media, and it raised the interest of Amcham, whose companies participated in the workshops organized by CoNEP. As follow up to this process, a second workshop was held in June 2010 with another group of companies; this time, the host was Cervecería Nacional. This workshop focused on discussing internationally-recommended principles to develop workplace policies.

Adopting HIV workplace policies. In August 2010, Cervecería Nacional de Panamá, which employs approximately 1700 workers, officially signed its HIV policy, which was developed with USAID/PASCA's technical assistance. This firm participated in the first group of companies receiving individual assistance to develop their policies. Another company that ratified its commitment at this time was the Panama Canal Authority, which has 1900 employees. This firm reviewed the guidelines on this subject, with technical assistance from USAID/PASCA, and re-distributed it among all its personnel.

Support provided to the Panamanian business sector for the proposal it submitted to GF R10 for funding. The business sector represented by CoNEP gained full knowledge about and endorsed the Mobile Population Proposal that was submitted for R10. This was done by means of a meeting in which CoNEP, with technical assistance from USAID/PASCA, summoned the representatives of its chambers, and informed them about the actions contained in the proposal.

Adopting HIV policies in Panamanian companies. USAID/PASCA continued to provide individual technical assistance to develop and adopt HIV workplace policies. The actions to raise awareness on the HIV issue and show the importance of establishing workplace policies using the Workplace Policy Builder were transferred to the various chambers constituting CoNEP. One of these chambers is the Association of Panama's Company Executives –ADAPE–, with which a session on the use of the Workplace Policy Builder software tool propose by USAID/PASCA to develop HIV workplace policies. The Director of the AIDS Program was invited to attend this working meeting, where he presented a statement on HIV status. As an immediate result of this session, participants decided to put this issue before the full APEDE assembly at their March 2011 ordinary meeting. The involvement of this trade organization had considerable impact, due to the policy-decision impact that this sector has in the country.

In that same context, CoNEP, with USAID/PASCA's technical assistance held two meetings on developing workplace policies, attended by members of the Panamanian Hotel Association; the Chamber of Commerce; the National Housing Promoters Council; the Panamanian Construction Chamber, and the Panamanian Association of Real Estate Agents and Promoters, as well as the Industrial Trade Union; the Association of Producers, Processors, and Exporters of Sea Products; the Panamanian Exporters' Association, and the Panamanian National Poultry Association.

In April 2011, a third training workshop was held, targeting the Chamber of Commerce and Associated Trade Organizations on the use of the Policy Builder tool. In addition, CoNEP facilitated a fourth training workshop for the administrative staff of Universidad Latina, in which its Sector participated. This workshop focused on the need to include HIV policies in human-resource interventions within companies. Working with this personnel was key, since the University has a two-pronged function. On the one hand it is a private company, and had already requested support to develop its own policy, and on the other, it has a mandate to disseminate knowledge among thousands of its students, which can constitute a valuable and strong means to communicate USAID/PASCA postulates. As a result of this cooperation, it was decided that the National Business Sector and HIV Forum would take place in the main Universidad Latina auditorium. As of September 2011, 10 companies had already developed their HIV workplace policies.

Public positioning of the importance of having HIV workplace policies. As part of the USAID/PASCA- CoNEP alliance, a media strategy was designed. This effort was joined by the non-governmental organization Aid for Aids. The alliance held several press and television conferences in which the USAID/PASCA Country Representative gave technical statements on the impact that the

business-sector participation can have on the epidemic. CoNEP's president publicly presented the work that has been undertaken by the Panamanian business sector and encouraged other firms to join in this initiative. This public campaign generated at least six spaces on national television, three spaces on the radio, and five spaces in the written media.

Similarly, USAID/PASCA provided technical assistance to CoNEP in order to organize the National Business Sector and HIV Forum, which was held in July 2011. This forum was aimed at highlighting the impact of HIV on the private sector, informing about the results of the CoNEP project funded by USAID/PASCA, as well as promoting the response to HIV as a company policy. This activity was the last one included in the USAID/PASCA-CoNEP agreement. Within the framework of this forum, CoNEP developed a corporate video with information on the activities performed under the USAID/PASCA-CoNEP cooperative agreement. Given the excellent results of this cooperation, negotiations were undertaken to sign a new agreement.

Strengthening the Business Committee to Combat HIV-AIDS – Business Red Ribbon Committee.

The Business Committee to Combat HIV-AIDS - Business Red Ribbon Committee was constituted by companies with an interest in developing corporate strategies that contribute to controlling and reducing HIV/AIDS prevalence in Panama. This committee was established on December 1, 2011. USAID/PASCA was appointed as member of the Technical Support Group, which is the supporting and technical consultation body for the member companies of the committee. USAID/PASCA provided technical assistance to strengthen the committee as a representative entity of the Panamanian business sector in order to implement, execute, and monitor HIV workplace policies that include programs to eliminate stigma and discrimination related to HIV in member companies.

USAID/PASCA provided technical assistance to develop the Committee's internal set of regulations, which was approved by the committee at its first 2012 ordinary meeting of the committee, held in March.

USAID/PASCA presented the proposal to provide assistance to business firms and trade organizations in order for them to develop their policies, and a system to monitor policy implementation, and for the Committee's 2012-2013 work plan. USAID/PASCA provided technical support to develop the action plan for the Committee for the 2012-2013 period.

In March 2013, the Business Committee to Combat HIV-AIDS - Business Red Ribbon Committee started performing personalized one-on-one visits with member companies. USAID/PASCA provided assistance on the importance of developing HIV policies and gave support to this committee in order to develop a tool to monitor implementation of HIV policies in companies. This tool was developed and validated with 8 interested companies in April and May 2013. USAID/PASCA presented the following documents at the Committee Ordinary Meeting: instruments, manuals, and notification flows from companies to the Coordinating Monitoring Unit and the Ministry of Education's Evaluation of the National STI/HIV/AIDS Program.

Systematizing experiences in developing HIV workplace policies. USAID/PASCA facilitated, by means of a consultancy, the systematization of experiences with the CoNEP and USAID/PASCA agreement. This process evaluated the lessons learned and the best practices aimed at generating the interest within the business sector to become involved in the issue and to respond by adopting HIV workplace policies. USAID/PASCA supported the publication of the document, whose objective was to support workplace policy development. The results of this systematization were disseminated among participating companies in March 2012.

Technical assistance provided to CoNEP to exercise HIV leadership. USAID/PASCA provided technical assistance to CoNEP in order to plan for a grant that was provided to it in October 2013 and

executed from November 2013 to March 2014. With this grant, CoNEP was able to: 1) develop its own trade policy to address HIV; 2) develop a public forum for over 20 companies and 8 trade organizations that adhered to this HIV umbrella policy; 3) share materials on HIV in the workplace with member companies, and 4) publish in the media the progress achieved by the sector in the response to the epidemic.

In March 2014, USAID/PASCA held 2 activities to close the project. The first one was a study forum where 12 studies on HIV in the country were presented. This activity helped to disseminate the evidence on the behavior or the epidemic. The second activity was a project- closing session, in which the progress achieved in the country in regard to the HIV policy environment was presented. The project received much recognition from counterpart organizations.

III. DIFFICULTIES ENCOUNTERED

Following are the main difficulties encountered during USAID/PASCA implementation and achievement of results:

Due to the Situation:

- Government policy agendas focused on national emergencies, with which HIV issues had to compete. Among them, the most significant ones were the emergency due to the H1N1 influenza (2009), Tropical Storm Agatha (2010), and the *Dengue* epidemic (2011).

Due to Policy Changes:

- Even though the USAID/PASCA project facilitated positioning the HIV issue on the national policy agendas of the countries in the region to endure even through foreseen Government changeovers, electoral processes always paralyzed decision making at least 6 months before and 6 months after the electoral process.
- The lack of continuity due to constant changes in officials in counterpart organizations, mainly in the public sector. There were times when agreements had already been signed or were about to be signed, when there were unexpected changes that entailed having to establish new institutional relationships and to position the issues once again.
- Governments' decision making was generally enveloped by internal bureaucracy that demanded engaging in time-consuming evidence-based information, awareness-raising, and persuasion activities.
- Shortcomings in conducting the response by the national HIV authority promotes fragmented decision making, and thus hampered effective and opportune agreement implementation.

Due to Counterparts' Technical Capacities:

- The areas that the USAID/PASCA project sought to strengthen were expanded during the life of the project. This required increased knowledge about the national health system, public activity, and organizational structure, so that strategic-planning processes and operative-policy definition focused on concrete, viable, and feasible objectives within the public-administration institutional framework.
- Conversely, the lack of prioritization and the absence of feasibility and cost-effectiveness studies in the process to develop National Strategic Plans and National M&E Plans resulted in unrealistic compliance at the beginning of the project. At the onset of the project, there were plans with over 100 indicators, which were later re-formulated.
- Civil society groups that were already institutionalized in the countries kept a low profile insofar as engaging in HIV advocacy. The project faced the challenge of identifying and strengthening new and emerging groups.
- National actors had very busy agendas. It was a challenge to coordinate objectives with cooperation agencies and the various sectors in the country in order to focus the technical assistance provided by the project.

Due to the Level of Complexity and Available Technical Resources:

- USAID/PASCA's work plan contained several issues than required technical expertise in many instances, so work with consultants was planned. In some countries, it was difficult to find consultants that would comply with the profile and the technical expertise that was required.
- Especially insofar as policies were concerned, the use of information and operative policies are quite specialized. A high-level professional or technician does not necessarily respond to those needs; "know-how" is required to implement actions in countries and, in many instances, they are hard to find.

Due to the Verticality of Program/Response:

- Even though monitoring and evaluation were issues always present in national responses, generating reports for selected indicators was a great challenge. Groups of people had been trained; however, the coordination that was needed among the various sub-systems operating in the countries was missing, among them: the Global Fund, Ministry of Health departments; social security institutes, and epidemiological surveillance units.
- Monitoring and Evaluation work demanded much from USAID/PASCA. It had to coordinate, seek agreements, review processes that had been developed in countries at some point (such as plans, information flows, among others), and which evidently needed more detail and analysis to achieve significant reforms.

Due to Constitution of the USAID/PASCA Team:

- There were constraints when identifying candidates for regional M&E and MARPS-groups assistant directors, coordinators, and advisors. These two last vacancies were filled until the end of year 2 of the project, and there was considerable personnel turnover in these work areas during the whole life of the project.
- Finding the person who fits the profile of an ideal Country Representative was a challenge during the life of the project, since the same project provides technical assistance to government, civil-society, and business organizations. Often, Country Representatives had to assume different roles to achieve project results.

IV. LESSONS LEARNED AND RECOMMENDATIONS

Following are the lessons learned during USAID/PASCA's implementation and accomplishment of results, as well as recommendations for future projects.

On Implementing Strategic National and Regional HIV Plans:

- National plans should undergo at least one evaluation process during their life. This evaluation should be a critical judgment on the relevance, validity of plan contents, and feasibility of complying with their goals and objectives. During the life of the project, countries created a second generation of more solid and robust plans, taking into account the evaluations undertaken during the first generation of strategic plans.
- The annual operating plans of the various sectors working on the response to HIV in every country and the operational guidelines issued by organizations frequently constituted the links that expedited implementation of National HIV Strategic Plans.
- Holding workshops to develop operating plans was useful to disseminate National Strategic Plans, since they helped to define the connection between the country strategy and the actions of organizations to help manage the epidemic.
- Performing the NASA exercise every year helped the countries to establish the efficient use of their available resources; data provided by the study require that analysis and interpretations be used by decision makers, MARPS groups and various audiences. These analyses are useful to build national mechanisms' and civil-society groups' capacities. This tool helped to mobilize resources for countries.
- Although country multi-disciplinary groups were trained on the use of the Resource Needs Model to cost National HIV Strategic Plans, it was necessary for the trained group to be led by a person with experience in the frequent use of the model, given that they are specialized models that required constant use.
- When there is adequate consensus, the various sectors can take on an active role in promoting and monitoring National HIV Strategic Plans. It is not convenient to perform updates to the National HIV Plan with a very tight circle of actors as an emergency measure aimed solely at complying with grant requirements.
- Facilitating sessions to analyze cultural, operative, and administrative barriers to Strategic Plan implementation was useful for civil-society organizations to generate objectives for policy dialog and advocacy on behalf of implementing improved health services.
- Even though strengthened national leadership is required to implement National Strategic Plans, this responsibility cannot lie solely on the national health authority. It is useful to strengthen other multi-sectoral mechanisms so that implementation is viewed as an integral and dynamic process.
- The operative planning processes of those organizations that make feasible the national response to HIV must be led by a technical/advisory entity, in order to ensure their coherence with National HIV Strategic Plans.

On Strengthening National HIV Information and M&E Systems:

- It was useful for the program to work in strengthening multi-sectoral committees at the national level in order to lead HIV monitoring and evaluation processes. As part of their strengthening, mechanisms should at least: be officially recognized as part of a government and have an operating plan based on generating reports and analyzing official information. It is useful that the summons to constitute these committees be made by any member entity, based on a national operating plan.
- It is important for multi-sectoral monitoring and evaluation committees promote, generate, analyze, and disseminate the information for the country, and that it be made official, since this will expedite decision making by national authorities; CCMs' use of it for their new grant proposals, and its use by civil-society organizations to design and implement advocacy campaigns based on this existing information.
- It is extremely beneficial to strengthen the consolidation of multi-sectoral monitoring structures that play a technical/advisory role, since these are the entities that will ensure implementation of the countries' National Monitoring and Evaluation Plan.
- There are HIV information and M&E sub-systems in the countries. When analyzing information flows, it is useful to examine and map the information produced by each subsystem and its interaction with the national information system.
- It is useful for countries to review or perform an annual exercise to prioritize national HIV indicators, since commitments to report them are constantly being added as a result of changes in United Nations reports and new proposals to the Global Fund, among others.
- Institutions and actors involved in implementing National HIV Strategic Plans must have information on the progress of foreseen objectives. To this end, it was useful to promote the generation of a report on prioritized HIV indicators to be used nationally. It is feasible for countries to produce this report to be used nationally at least once a year.

On Developing and Implementing HIV Proposals Funded by the GF:

- Regional Coordinating Mechanisms, by means of their Technical Secretariat, must exercise solid leadership in order to coordinate the development of winning proposals. In order to develop proposals, it is useful to constitute work teams that guide their actions based on data evidencing the present state of the epidemic in their countries.
- In order to develop a proposal, countries must at least have updated information stemming from NASA exercises; National HIV Strategic Plan costing exercises; HIV estimations and projections exercises, and the scenarios generated by the Modes of Transmission Model. In order to substantiate the proposal, the country must have a database with official information on the epidemic. Generating executive summaries of these national documents helps to achieve consensus on defining a national strategy to request funding.
- CCMs must periodically update their manuals on: governance; conflicts of interest management, and administrative and financial procedures. This increases their preparedness to develop and implement successful proposals.
- It is useful for a development agency to participate as the guarantor of a democratic election of sector representatives to the CCM, given that it favors their acknowledgment by members of the sector and the commitment to ensure adequate information flows among all members of the sector.
- Holding periodic public meetings on the performance of a country's CCM is a good accountability practice because it gives all sectors access to information.
- CCMs must maintain effective coordination with the national authority and keep continually updated in order to provide effective responses to the Global Fund and other donors. This ensures that there is no duplication of efforts and that there is a joint vision of the national strategy.

On Strengthening MARPS Groups and Organizations:

- Periodic sessions lasting approximately three hours with groups of 10-20 participants to discuss HIV policy issues help civil-society mechanisms and networks to oversee public policy processes.
- The role of the technical secretariat to provide instruction and strengthen citizen surveillance mechanisms on HIV must be constantly kept in mind, given that it expedites analyzing the context in which policies are being developed or implemented and it simplifies seeking and agreeing on objectives and advocacy campaigns.
- Even though reports reflect an increase in universal access, civil-society organizations still do not undertake advocacy campaigns, however budding, to guarantee opportune supply of ARVs in the countries of the region.
- MARPS groups' situation analyses are simplified when they, themselves, develop their own diagnostic processes to identify and pursue their own objectives when engaging in HIV advocacy.
- Incorporating young and new leaders to undertake HIV advocacy efforts helps to keep civil-society networks dynamic. To that end, youth organizations and groups must be identified, strengthened, and encouraged, so that they undergo a long-term process to develop their capacities.
- Legal standing for Trans organizations enables them to manage resources; become Global Fund project sub-recipients, and increase their personal, inter-personal, and policy empowerment to build alliances.
- Strengthening MARPS organizations is synonymous with developing their capacities to identify themselves as organizations; developing their strategic plans to address HIV; working on reconciliation and negotiation processes, and providing them with tools to improve their communications and their accountability.
- Given the emergence of new organizations of key populations with structural education and instruction shortcomings, it was essential that continuous strengthening be provided to organizations on topics such as advocacy, computer tools, orality techniques, and conflict resolution in order to achieve their development and the national and international positioning of their efforts to claim their rights. This task must be renewed, re-formulated, and continued.

On Strengthening Gender-Based Violence, Sexual Violence, and HIV Policies:

- The gender-violence, sexual violence, and HIV round tables in which all involved sectors participated were useful to define a work agenda.
- Establishing specific multi-sectoral mechanisms to address the issue of HIV and sexual violence helped to position on the policy agenda the need to update PEP protocols that include MARPS.
- The work performed by specific multi-sectoral mechanisms to address the issue of HIV and sexual violence helped to prioritize health care in cases of sexual violence for the whole populations, in a multi-sectoral context.
- Reviewing regulatory frameworks on sexual violence and HIV post-exposure prophylaxis helped to develop advocacy objectives on behalf of updating health care protocols.
- Health authorities' acknowledgement that there is a multi-sectoral mechanism interested in updating the PEP protocols expedited the revision and update of PEP protocols, including the cases of MARPS sexual violence cases.
- In order to ensure access to PEP, coordinated efforts are necessary among entities providing health services, those prosecuting sexual-violence crimes, and those administering justice.

On Involving the Business Sector in HIV:

- In order to capture the attention of the business sector as to HIV, it is useful to show economic models on the impacts of the epidemic and the data on the overall evolution of the epidemic. In order to establish HIV workplace policies, it was necessary to first build capabilities among

- business leaders so that they could have a full understanding of the epidemic. Linking HIV with social responsibility was very useful in most companies and trade organizations.
- The Workplace Policy Builder software can be useful to build capacities aimed at developing HIV policies, given that it provides step-by-step guidance for the process. Some companies did not use it because they preferred more-personalized processes to develop their policies.
 - Public acknowledgment of the work being undertaken by companies helped to raise the interest of other companies and to encourage them to develop their own HIV policies.
 - Developing an HIV policy for each company or trade organization favors communication among employees and Boards of Directors, since it becomes a process being developed and assessed by the company.
 - Working with trade organizations and groups connected with companies helps to maximize the impact of the project. Generally, the initial approach was achieved with officers who work with human resources and business social responsibility.
 - In order to implement HIV workplace policies, it is useful to constitute a working team in charge of the policy and of developing a specific implementation plan that reflects the commitment of the various departments within the organization.
 - The business sector could contribute considerably to multi-sectoral mechanisms working on the response to HIV, since it has the experience to manage consolidated purchases, logistical procedures, and cost-efficiency analyses.
 - The participation of the business sector in multisectoral coordination mechanisms, such as CONASIDA and CCM, is very useful so that they can become bridges to legitimize the information and actions to respond to the epidemic when engaging business leaders.

On an HIV regional program:

- Developing regional strategies and methodologies expedited implementing actions at the national level adapted to local contexts, while it maximized impact when seeking results.
- It was determined that there is increased use of strategic information when it is aimed at specific audiences, such as CCM members, CONASIDA members, and others. It was also more widely used when it was presented directly at decision-making meetings.
- The www.pasca.org was a useful resource in which all the countries could share and access the bank of resources produced by the Central American region.

V. PRODUCTOS GENERADOS POR LAS ACTIVIDADES.

Este apartado incluye informes, análisis, planes, protocolos, guías y cualquier otro documento finalizado durante la vida del proyecto, que fue generado por USAID/PASCA directamente, por contrapartes con asistencia técnica y/o financiera de USAID/PASCA, o por otros socios de la cooperación con la participación activa (financiera y/o técnica) de USAID/PASCA.

| | Productos | Descripción |
|---|--|--|
| 1 | Acelerando la paz: alcanzando a la población marginada y vulnerable con servicios. | Proyecto de país presentado por el Mecanismo Coordinador de Belice –MCP o NAC- para ser financiada por el Fondo Mundial en Ronda 9 de VIH. Mayo 2007 |
| 2 | Informe de Taller de Abogacía para la formación de un Comité de Incidencia Política en VIH y sida en Belice. | Documento que resume los aspectos metodológicos, resultados y estrategia identificada en taller con organizaciones de la sociedad civil. Belice Mayo, 2009. |
| 3 | Informe de opinión pública sobre la percepción del VIH y sida en Belice | Documento que tabula los resultados de la encuesta sobre estigma y discriminación. Enfoque nacional y regional. Belice, agosto 2009. |
| 3 | Informe de Taller de Abogacía para la formación de un Comité de Incidencia Política en VIH y sida en Costa Rica | Documento que resume los aspectos metodológicos, resultados y estrategia identificada en taller con organizaciones de la sociedad civil. Enfoque nacional. Costa Rica, septiembre 2009 |
| 4 | Informe de opinión pública sobre la percepción del VIH y sida en Costa Rica. | Documento que tabula los resultados de la encuesta sobre estigma y discriminación. Enfoque nacional y regional. Costa Rica, junio 2009. |
| 5 | Plan de Abogacía del Comité Coordinador de El Salvador | Documento que describe un mapeo político, análisis del contexto, objetivos de abogacía, actividades de incidencia y diálogo y estrategias para posicionamiento de compromisos internacionales en VIH y sida dirigidas a candidatos presidenciales. 17 diciembre 2008. |
| 6 | Análisis de brechas y propuesta poblacional de intervención. | Documento que recopila y analiza datos sobre la situación de TB y la co-infección VIH/TB en El Salvador, muestra tendencias, cobertura, brechas y recomendaciones para ser considerados por el país en la definición de la estrategia que será presentada en Ronda 9 de TB al Fondo Mundial. Enero 2009. |
| 7 | Informe del taller sobre fortalecimiento I del Comité Coordinador de El Salvador –CCE- con base en las buenas prácticas de dirección | Documento que resume los aspectos metodológicos y resultados del taller realizado con miembros del Comité Coordinador de El Salvador para fortalecer sus capacidades institucionales. Enfoque nacional. Mayo, 2009. |
| 8 | El Salvador: Marco de resultados y estimación de costeo. Plan Estratégico Nacional para la prevención, atención y control del VIH-Sida e ITS, El Salvador 2005 – 2010. | Documento que sistematiza el ejercicio de la iniciativa ASAP de ONUSIDA (recolección de evidencias y la propuesta de marco de resultados para el Plan Estratégico Nacional). Enfoque Nacional. Mayo, 2009. |
| 9 | Informe de Taller de Incidencia Política y Contraloría Social en VIH y sida en El | Documento que resume los aspectos metodológicos, resultados y estrategia identificada en taller con |

| | Productos | Descripción |
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| | Salvador. | organizaciones de la sociedad civil. Enfoque nacional. Junio, 2009. |
| 10 | Informe de opinión pública sobre la percepción del VIH y sida en El Salvador. | Documento que tabula los resultados de la encuesta sobre estigma y discriminación. Enfoque nacional y regional. Agosto 2009. |
| 11 | Informe de Taller de Abogacía para la formación de un Comité de Incidencia Política en VIH y sida en Guatemala. | Documento que resume los aspectos metodológicos, resultados y estrategia identificada en taller con organizaciones de la sociedad civil. Septiembre, 2009. |
| 12 | Informe de opinión pública sobre la percepción del VIH y sida en Guatemala. | Documento que tabula los resultados de la encuesta sobre estigma y discriminación. Junio 2009. |
| 13 | Informe de Taller de Abogacía para la formación de un Comité de Incidencia Política en VIH y sida en Panamá | Documento que resume los aspectos metodológicos, resultados y estrategia identificada en taller con organizaciones de la sociedad civil. Septiembre, 2009 |
| 14 | Informe de opinión pública sobre la percepción del VIH y sida en Panamá | Documento que tabula los resultados de la encuesta sobre estigma y discriminación. Septiembre 2009 |
| 15 | Informe de opinión pública sobre la percepción del VIH y sida en Regional | Documento que tabula los resultados de la encuesta sobre estigma y discriminación. Enfoque nacional y regional. Septiembre 2009. |
| 16 | Plan Estratégico Regional de VIH y sida de Centroamérica y República Dominicana 2010-2015. | Regional, marzo 2010. Define los principales objetivos y estrategias para la región. Documento aprobado por COMISCA el 3 de marzo 2010. |
| 17 | Plan Regional de Monitoreo y Evaluación 2010-2015. | Regional, marzo 2010. Define el marco de seguimiento para la implementación del Plan Estratégico Regional en VIH y sida. Documento aprobado por COMISCA el 3 de marzo 2010. |
| 18 | Comparación entre las Metodologías API Medición del Ambiente Político y ICPN Índice Compuesto de Políticas Nacionales. | Regional, mayo 2010. Documento que analiza las ventajas y desventajas en cada metodología. |
| 19 | Paquete metodológico para realizar talleres nacionales sobre Fortalecimiento del Sistema Nacional de Información, monitoreo y evaluación. | Regional, mayo 2010. Describe la metodología que fue adaptada en los países de la región centroamericana para realizar un taller de análisis y elaboración de un plan operativo. |
| 20 | Plan de Acción 2010 Comité Nacional de Abogacía. | Belice, diciembre 2009. Establece las metas, objetivos y prioridades para el grupo de abogacía en VIH para el período mencionado. |
| 21 | Hoja informativa No. 4 Medición del ambiente político en relación al VIH y sida en Belice 2008/09. | Belice, diciembre 2009. Resumen que contiene la medición del ambiente político con base en 10 componentes definidos. |
| 22 | Reporte de progreso de indicadores UNGASS para Belice. | Belice, 31 de marzo 2010. Documento oficial del país presentado a las Naciones Unidas, reporta indicadores del país. |
| 23 | Diagnóstico de la Participación del Sector Privado de Belice en la respuesta al VIH. | Belice, marzo 2010. Documento que describe los principales hallazgos de un estudio realizado con las empresas miembros de Cámara de Comercio e Industria de Belice y describe el marco legal sobre el tema de VIH en los lugares de trabajo. |
| 24 | Belice. Medición del Gasto en Sida en Belice 2008-2009. | Belice, mayo 2010. Informe Nacional que oficializa la inversión en VIH y sida de Belice para el período fiscal abril 2008- marzo 09. |

| | Productos | Descripción |
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| 25 | Hoja informativa No. 5 Medición del ambiente político en relación al VIH y sida en Costa Rica 2008/09. | Costa Rica, diciembre 2009. Resumen que contiene la medición del ambiente político con base en 10 componentes definidos. |
| 26 | Costa Rica –Avances y Retos en la Implementación del Plan Estratégico Nacional en VIH y Sida 2006-2010. | Costa Rica, octubre 2009. Publicación del informe de estudio sobre Monitoreo de la Implementación del Plan Estratégico Nacional de VIH y sida elaborado por PASCA. |
| 27 | Diagnóstico de situación y respuesta al VIH en Costa Rica. | Costa Rica, noviembre 2009. Documento que resume y analiza la situación del VIH desde una perspectiva demográfica, socioeconómica, del sistema de salud, el financiamiento, entre otros temas. |
| 28 | Mapeo de Proyectos y Organizaciones que trabajan en VIH en Costa Rica. | Costa Rica, noviembre 2009. Resume en un mismo formato el trabajo que realizan las organizaciones gubernamentales, no gubernamentales y cooperación internacional que trabaja el tema de VIH. |
| 29 | Marco Legal en Costa Rica, sobre VIH y sida. | Costa Rica, noviembre 2009. Resume las políticas, leyes, acuerdos y compromisos del Estado a favor del tema. |
| 30 | Reporte sobre la estructura del sector empresarial costarricense. | Costa Rica, diciembre 2009. Documento que contiene una caracterización del sector privado de Costa Rica y muestra el grado de participación en el tema de VIH. |
| 31 | Seguimiento de la declaración de los compromisos sobre VIH y sida UNGASS Costa Rica 2008-2009. | Costa Rica, 31 de marzo 2010. Documento oficial del país presentado a las Naciones Unidas, reporta datos para indicadores del país. |
| 32 | Reporte sobre la recolección de información para la elaboración de MEGAS 2008 en Costa Rica. | Costa Rica, abril 2010. Reporte de la consultoría para la recolección de datos sobre medición del gasto en sida. |
| 33 | Manual del Usuario –ficha de investigación y caso- del Sistema de Información Nacional SINVIH en Costa Rica. | Costa Rica, junio 2010. Describe el correcto llenado y traslado en base de datos del seguimiento de casos de VIH en centros de atención. |
| 34 | Reglamento Interno de la Mesa Ciudadana de Contraloría Social en VIH de El Salvador. | El Salvador, noviembre 2009. Contiene los lineamientos internos de este mecanismo para su organización y funcionamiento. |
| 35 | Estatutos del Mecanismo Coordinador de País El Salvador. | El Salvador, noviembre 2009. Documento que describe el tipo de organización, estructura y roles de esta organización. |
| 36 | Reglamento del Mecanismo Coordinador de País El Salvador. | El Salvador, noviembre 2009. Documento que establece las normas de funcionamiento para esta organización. |
| 37 | Hoja informativa No. 2 Medición del ambiente político en relación al VIH y sida en El Salvador 2008/09. | El Salvador, diciembre 2009. Resumen que contiene la medición del ambiente político con base en 10 componentes definidos. |
| 38 | Plan Operativo 2010 de la Comisión Nacional contra el SIDA CONASIDA de El Salvador. | El Salvador, enero 2010. Documento que enmarca las acciones para el año 2010 de la autoridad nacional en materia de VIH y sida. |
| 39 | Manual de Contratación y Adquisiciones de la Comisión Nacional Contra el Sida CONASIDA. | El Salvador, enero 2010. Documento que contiene la normativa para las operaciones de la autoridad nacional en materia de VIH y sida. |
| 40 | Informe UNGASS 2010 El Salvador. | El Salvador, 31 de marzo 2010. Documento oficial del país presentado a las Naciones Unidas. |
| 41 | Informe Sobre la Estructura del Sector | El Salvador, enero 2010. Documento que resume la |

| | Productos | Descripción |
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| | Privado y su Situación Actual en cuanto al Involucramiento en VIH y sida. | composición de la estructura del sector privado en El Salvador y analiza el marco político y legal para la implementación de políticas de VIH en los lugares de trabajo. |
| 42 | Informe de la Evaluación del Plan Estratégico Nacional para la Prevención, atención y control de ITS, VIH y sida 2005-2010. | El Salvador, abril 2010. Documento que contiene la evaluación al actual PEN 2005-2010 de El Salvador. |
| 43 | Resumen de evaluación del Plan Estratégico Nacional para la Prevención, atención y control de ITS, VIH y sida 2005-2010. | El Salvador, abril 2010. Resumen de la evaluación al PEN 2005-2010. |
| 44 | Análisis comparado del Gasto en Sida 2005-2007 de El Salvador. | El Salvador, mayo 2010. Análisis de la inversión en sida utilizando los informes MEGAS. |
| 45 | Plan General de Monitoreo y Evaluación para las Subvenciones del Fondo Mundial en El Salvador. | El Salvador, agosto 2010. Documento que describe la metodología para dar seguimiento a la ejecución de los proyectos del Fondo Mundial en el Ministerio de Salud Pública y el Programa de Naciones Unidas para el Desarrollo. |
| 46 | Estrategia Nacional para fortalecer la integración de actividades colaborativas en VIH y TB. | El Salvador, agosto 2010. Documento que resume la coordinación y establece intervenciones para coordinar lo referente a co-infección VIH/TB entre programas. |
| 47 | Informe de la evaluación del Plan Estratégico de la Respuesta a ITS, VIH y sida en Guatemala. | Guatemala, noviembre 2009. Documento que contiene una valoración y juicio crítico sobre la implementación de esta política pública en el país. |
| 48 | Hoja informativa No. 1 Medición del ambiente político en relación al VIH y sida en Guatemala 2008/09. | Guatemala, noviembre 2009. Resumen que contiene la medición del ambiente político con base en 10 componentes definidos. |
| 49 | Informe de progreso de UNGASS Guatemala. | Guatemala, 31 de marzo 2010. Documento oficial del país presentado a las Naciones Unidas, reporta indicadores oficiales del país. |
| 50 | Publicación en diario oficial del Decreto Legislativo 12-2010. | Guatemala, 7 de abril 2010. Contiene la aprobación del Congreso de la República de Guatemala para la implementación de la Fase II del proyecto de TB financiado por el Fondo Mundial. |
| 51 | Trilogía Legal de ITS, VIH y SIDA en Guatemala. | Guatemala, junio 2010. Documento que contiene transcripción literal del Decreto 27-2000 Ley de VIH, Acuerdo 317-2002 Reglamento de la Ley de VIH y Política Pública de VIH 638-2005. |
| 52 | Informe Nacional sobre los progresos realizados en la aplicación del UNGASS Nicaragua. | Nicaragua, 31 de marzo 2010. Documento oficial del país presentado a las Naciones Unidas, reporta datos oficiales del país. |
| 53 | Documento: presentación de la estructura del sector empresarial en Panamá, mapeo de las principales empresas, asociaciones, cámaras e información. | Panamá, octubre 2009. Describe con detalle la composición del sector empresarial en Panamá como elemento de análisis para la formulación de políticas en VIH. |
| 54 | Documento: recopilación de políticas, leyes, y decretos con relación al sector empresarial y la respuesta al VIH en Panamá. | Panamá, octubre 2009. Describe el marco político y legal panameño que respalda el trabajo en VIH desde la empresa privada como elemento de análisis para la formulación de políticas en VIH. |

| | Productos | Descripción |
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| 55 | Documento para la aplicación de una norma en materia de responsabilidad social, específicamente en cuanto al VIH y sida. | Panamá, octubre 2009. Provee elementos para la elaboración de una propuesta de norma en el tema de VIH y sida en los lugares de trabajo, con el sector privado. |
| 56 | Hoja informativa No. 3 Medición del ambiente político en relación al VIH y sida en Panamá 2008/09. | Panamá, diciembre 2009. Resumen que contiene la medición del ambiente político con base en 10 componentes definidos. |
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| 168 | Informe de Costa Rica sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. | Informe de Costa Rica sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. Julio 2012. |
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| 170 | Estatutos de la Asociación COMCAVIS. | Publicación del diario oficial que da vida legal a la organización COMCAVIS. El Salvador 8 de diciembre 2011. |
| 171 | Medición del Gasto en Sida en El Salvador 2010. | Informe sobre la aplicación de la metodología MEGAS. El Salvador marzo 2012 |
| 172 | Política de VIH de la Empresa Confecciones Jiboa. | Política para aplicación a lo interno de la organización empresarial. El Salvador febrero 2012. |
| 173 | Política de VIH de la Empresa Confecciones El Pedregal. | Política para aplicación a lo interno de la organización empresarial. El Salvador febrero 2012. |
| 174 | Política de VIH de la Empresa Pettenati. | Política para aplicación a lo interno de la organización empresarial. El Salvador febrero 2012. |
| 175 | Política de VIH de la Empresa Termoencogibles. | Política para aplicación a lo interno de la organización empresarial. El Salvador febrero 2012. |
| 176 | Política de VIH del Ingenio El Angel. | Política para aplicación a lo interno de la organización empresarial. El Salvador febrero 2012. |
| 177 | Política de VIH de la Empresa Livsmart. | Política para aplicación a lo interno de la organización empresarial. El Salvador febrero 2012. |
| 178 | Política de VIH de la Empresa Transactel. | Política para aplicación a lo interno de la organización empresarial. El Salvador febrero 2012. |
| 179 | Política de VIH de la Empresa Facela. | Política para aplicación a lo interno de la organización empresarial. El Salvador febrero 2012. |
| 180 | Plan Estratégico 2012-2015 de la Organización Atlacat, Vivo Positivo. | Lineamiento estratégico de una organización de personas que viven con VIH. El Salvador, marzo 2012. |
| 181 | Plan Operativo 2012 de la Organización Atlacat, Vivo Positivo. | Lineamiento operativo de una organización de personas que viven con VIH. El Salvador, marzo 2012. |
| 182 | Informe de Consultoría sobre Capacitaciones en el marco político y legal relativo al VIH en El Salvador. | Informe de Consultoría sobre Capacitaciones en el marco político y legal relativo al VIH en El Salvador, abril, 2012 |
| 183 | Código de Ética del Mecanismo Coordinador de País de El Salvador. | Código de Ética del Mecanismo Coordinador de País de El Salvador, mayo 2012. |
| 184 | Reglamento Interno del Mecanismo | Reglamento Interno del Mecanismo Coordinador de País El |

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| | Coordinador de País El Salvador, mayo 2012. | Salvador, mayo 2012. |
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| 186 | Informe sobre el Costeo del Plan Nacional de Monitoreo y Evaluación 2011-2015 de El Salvador. | Informe sobre el Costeo del Plan Nacional de Monitoreo y Evaluación 2011-2015 de El Salvador. Julio 2012. |
| 187 | Recopilación del marco jurídico, político y normativo sobre prevención del VH, violencia de género y violencia sexual relacionada con grupos PEMAR. | Recopilación del marco jurídico, político y normativo sobre prevención del VH, violencia de género y violencia sexual relacionada con grupos PEMAR. El Salvador, julio 2012. |
| 188 | Reporte Nacional sobre Indicadores Priorizados para la epidemia de VIH de El Salvador. | Reporte Nacional sobre Indicadores Priorizados para la epidemia de VIH de El Salvador. Septiembre 2012. |
| 189 | Política de VIH de la Empresa Job Connection SA de CV. | Política para aplicación a lo interno de la organización empresarial. El Salvador septiembre, 2012. |
| 190 | Política de VIH de la Empresa Tiendas y Franquicias TyF. | Política para aplicación a lo interno de la organización empresarial. El Salvador septiembre, 2012. |
| 191 | Política de VIH de la Empresa ACAVISA, S. A. de C. V. | Política para aplicación a lo interno de la organización empresarial. El Salvador septiembre, 2012. |
| 192 | Política de VIH de la Empresa INTRADESA. | Política para aplicación a lo interno de la organización empresarial. El Salvador septiembre, 2012. |
| 193 | Política de VIH de la Fundación El Volcán. | Política para aplicación a lo interno de la organización empresarial. El Salvador septiembre, 2012. |
| 194 | Informe de El Salvador sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. | Informe de El Salvador sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. Julio 2012. |
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| 196 | Documento sobre la Aplicación del Modelo Modos de Transmisión en Guatemala. | Documento que resume el proceso y resultados de aplicar el modelo Modos de Transmisión en Guatemala, Diciembre 2011. |
| 197 | Política de VIH de la Gremial de Azucareros de Guatemala. | Política para aplicación a lo interno de la gremial, que agrupa a 11 Ingenios Azucareros y 4 Empresas Afiliadas. Guatemala, marzo 2012. |
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| 199 | Informe del Conversatorio sobre VBG, VS y VIH en Guatemala. | Informe del Conversatorio sobre VBG, VS y VIH en Guatemala. Abril 2012 |
| 200 | Informe sobre la aplicación del Modelo Modos de Transmisión en Guatemala. | Informe sobre la aplicación del Modelo Modos de Transmisión en Guatemala. Septiembre 2012. |
| 201 | Resumen ejecutivo de la aplicación del Modelo Modos de Transmisión en Guatemala. | Resumen ejecutivo de la aplicación del Modelo Modos de Transmisión en Guatemala. Septiembre, 2012. |
| 202 | Informe de Guatemala sobre la implementación del Diplomado | Informe de Guatemala sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación |

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| | Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. | para la gestión de políticas y programas de VIH y sida. Julio 2012. |
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| 204 | Plan Estratégico 2011-2016 de la Red <i>Trans</i> de Nicaragua. | Plan Estratégico de la Red <i>Trans</i> en Nicaragua, Diciembre 2011. |
| 205 | Política de VIH de la Aseguradora AMOCSA | Política para aplicación a lo interno de la organización empresarial. Nicaragua febrero 2012. |
| 206 | Política de VIH de la Maquila CyC | Política para aplicación a lo interno de la organización empresarial. Nicaragua febrero 2012. |
| 207 | Política de VIH de la Maquila Formosa | Política para aplicación a lo interno de la organización empresarial. Nicaragua febrero 2012. |
| 208 | Política de VIH de la Maquila Hansae | Política para aplicación a lo interno de la organización empresarial. Nicaragua febrero 2012. |
| 209 | Política de VIH del Hospital Privado Central de Managua | Política para aplicación a lo interno de la organización empresarial. Nicaragua febrero 2012. |
| 210 | Estatutos de la Red <i>Trans</i> en Nicaragua. | Publicación en el diario oficial que da vida legal a la organización Red <i>Trans</i> . Nicaragua, marzo 2012. |
| 211 | Plan de Monitoreo y Evaluación del Plan Estratégico Nacional de ITS/VIH sida 2011 2012 Nicaragua | Plan de Monitoreo y Evaluación del Plan Estratégico Nacional de ITS/VIH sida 2011 2012 Nicaragua. Abril 2012. |
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| 214 | Informe del Conversatorio sobre VBG, VS y VIH en Nicaragua. | Informe del Conversatorio sobre VBG, VS y VIH en Nicaragua, abril 2012 |
| 215 | Informe sobre Medición del Gasto en Sida 2010, Nicaragua. | Informe sobre Medición del Gasto en Sida 2010, Nicaragua. Julio 2012. |
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| 217 | Informe de Nicaragua sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. | Informe de Nicaragua sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. Julio 2012. |
| 218 | Afiche promocional, cuarto festival de cine gay, bisexual, lésbico y <i>trans</i> de Panamá. | Afiche promocional, cuarto festival de cine gay, bisexual, lésbico y <i>trans</i> de Panamá, noviembre 2011. |
| 219 | Plan Operativo Anual 2012. | Documento para guiar acciones operativas multisectoriales para la implementación del Plan Estratégico Nacional en VIH. Panamá, marzo 2012. |
| 220 | Medición del Gasto en Sida en Panamá 2010. | Informe sobre la aplicación de la metodología MEGAS. Panamá, marzo 2012 |
| 221 | Sistematización del Proyecto de | Documento que describe lecciones aprendidas y retos en |

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| | Prevención y Sensibilización en Políticas de VIH en el lugar de trabajo CoNEP-USAID/PASCA. | la elaboración de políticas de VIH en empresas de Panamá. Panamá, febrero 2012. |
| 222 | Estatutos del Mecanismo Coordinador de País de Panamá. | Estatutos del Mecanismo Coordinador de País de Panamá, abril 2012 |
| | Manual de Manejo de Conflictos del Mecanismo Coordinador de País de Panamá. | Manual de Manejo de Conflictos del Mecanismo Coordinador de País de Panamá. Abril 2012 |
| 223 | Informe del Conversatorio sobre VBG, VS y VIH en Panamá. | Informe del Conversatorio sobre VBG, VS y VIH en Panamá, abril 2012 |
| 224 | Atención a víctimas de violencia sexual, población PEMAR y aplicación de protocolo para profilaxis post exposición por VIH. | Mapeo de organizaciones que trabajan con violencia de género, violencia sexual y VIH en Panamá y compendio de instrumentos legales para el acceso a la profilaxis post exposición en Panamá, julio 2012. |
| 225 | Informe sobre Medición del Gasto en Sida 2010. Panamá. | Informe sobre Medición del Gasto en Sida 2010. Panamá. Marzo 2012. |
| 226 | Informe de Nicaragua sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. | Informe de Nicaragua sobre la implementación del Diplomado Centroamericano en Monitoreo y Evaluación para la gestión de políticas y programas de VIH y sida. Julio 2012. |
| 227 | Evaluación del Plan Estratégico Multisectorial en ITS/VIH/SIDA 2009-2014 de Panamá. | Evaluación del Plan Estratégico Multisectorial en ITS/VIH/SIDA 2009-2014 de Panamá. Julio 2012. |
| 228 | Reporte Nacional sobre Indicadores Priorizados para la epidemia de VIH de Panamá. | Reporte Nacional sobre Indicadores Priorizados para la epidemia de VIH de Panamá. Septiembre 2012. |
| 229 | Estrategia de Sostenibilidad de los avances de Centroamérica y República Dominicana hacia el Acceso Universal a la Prevención, Atención, Tratamiento y Apoyo relacionados con el VIH. | Documento propuesta a la Comisión de Ministros de Salud de Centroamérica por el Mecanismo de Coordinación Regional, noviembre 2012. |
| 230 | Resumen Ejecutivo Estrategia de Sostenibilidad de los avances de Centroamérica y República Dominicana hacia el Acceso Universal a la Prevención, Atención, Tratamiento y Apoyo relacionados con el VIH. | Versión resumida de la propuesta para una estrategia de sostenibilidad de los avances de Centroamérica y República Dominicana hacia el Acceso Universal a la Prevención, Atención, Tratamiento y Apoyo relacionados con el VIH. Regional, noviembre 2012. |
| 231 | Acta de la XL reunión ordinaria del Consejo de Ministros de Salud de Centroamérica y República Dominicana. | Documento que expresa la satisfacción de los Presidentes de la Región por la Estrategia de Sostenibilidad del VIH. Diciembre 2012. |
| 232 | Las poblaciones de la diversidad sexual - Situación y temas clave para la incidencia política en VIH - | Resumen Ejecutivo elaborado por USAID PASCA para la región centroamericana, enero 2013. |
| 233 | II Diplomado centroamericano para la gestión de políticas y programas de VIH y sida. Énfasis en economía y salud. -Folleto Informativo- | Folleto informativo con resumen sobre los contenidos y metodología para la II Cohorte del Diplomado. Regional, mayo 2013 |
| 234 | Paquete metodológico del II Diplomado centroamericano para la gestión de | Documento que describe el programa educativo para el II Diplomado centroamericano, detalla temas, horarios, |

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| | políticas y programas de VIH y sida. Énfasis en economía y salud. | metodologías, entre otros. Regional, mayo 2013. |
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| 236 | Guía para la legislación, políticas y servicios sobre violencia sexual en Belice. | Lineamiento del Ministerio de Desarrollo Humano sobre violencia sexual en Belice, diciembre 2012. |
| 237 | Protocolo para la respuesta multisectorial a la violencia sexual de Belice. | Lineamiento del Ministerio de Desarrollo Humano sobre violencia sexual en Belice, diciembre 2012. |
| 238 | Plan Estratégico de la Red de Personas con VIH de Belice CNET+ | Documento que describe el plan estratégico para el trabajo que realiza la organización de personas positivas con VIH de Belice, junio 2013. |
| 239 | Política laboral de la empresa Ministerios Mano a Mano. | Política para el abordaje del VIH en Ministerios Mano a Mano de Belice, julio 2013. |
| 240 | Política laboral de la empresa Médicos Asociados de Belice. | Política para el abordaje del VIH Médicos Asociados de Belice, julio 2013. |
| 241 | Política laboral de la empresa Constructora Rodla Compañía Limitada. | Política para el abordaje del VIH en Constructora Rodla compañía limitada de Belice, julio 2013. |
| 242 | Política laboral de la empresa Telemédicos de Belice | Política para el abordaje del VIH en Tele-medios de Belice, julio 2013. |
| 243 | Decreto oficial del Ministerio de Salud No. 160 | Decreto Ministerial donde se obliga a involucrados en producción de datos de VIH a notificar al Ministerio de Salud casos en forma oportuna. Costa Rica 22 de octubre 2012. |
| 244 | Guía para la prevención y atención del VIH / sida en personas privadas de libertad. | Guía para el manejo de casos de violencia sexual en centros penitenciarios de Costa Rica, 2 de noviembre 2012. |
| 245 | Directriz para la prevención y el abordaje de la discriminación por orientación sexual e identidad de género de Costa Rica. | Directriz aprobada por el Ministerio de Trabajo y Seguridad Social de Costa Rica, el 24 de noviembre 2012. |
| 246 | Declaratoria pública de la Universidad Estatal a Distancia UNED de Costa Rica como institución libre de discriminación y respetuosa de las diferencias, incluida la diversidad sexual. | Documento emitido por la Universidad Estatal a Distancia UNED de Costa Rica el 9 de mayo 2013. |
| 247 | Política laboral de la Empresa Punto Rojo, S. A. | Documento que describe la política de VIH adoptada por esta empresa. Costa Rica, mayo 2013. |
| 248 | Política laboral de la Empresa RITEVE, S. A. | Documento que describe la política de VIH adoptada por esta empresa. Costa Rica, mayo 2013. |
| 249 | Política laboral de la Empresa Universidad de Costa Rica. | Documento que describe la política de VIH adoptada por esta empresa. Costa Rica, mayo 2013. |
| 250 | Reporte de Indicadores para el monitoreo de la epidemia de VIH en Costa Rica | Documento que presenta datos y análisis sobre indicadores reportados del paquete básico priorizado para Costa Rica. Septiembre 2013. |
| 251 | Medición del Gasto en Sida 2010, afiche | Este afiche resume seis gráficas sobre el financiamiento de la respuesta al VIH en El Salvador. Noviembre 2012 |
| 252 | Lineamientos técnicos para el abordaje en salud de las personas lesbianas, gay, bisexuales y transgénero. | Normativa interna del Ministerio de Salud para trabajar con personas de la diversidad sexual. El Salvador 18 de octubre 2012. |

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| 253 | Guía clínica de la profilaxis post exposición El Salvador. | Normativa interna del Ministerio de Salud para ofrecer la profilaxis post exposición por VIH. El Salvador, diciembre 2012. |
| 254 | Reglamento Interno de la Subcomisión de MyE de la CONASIDA | Reglamento Interno de la Subcomisión de MyE de la CONASIDA. El Salvador, 15 de noviembre 2012. |
| 255 | Reglamento Interno de la CONASIDA | Reglamento Interno de la Comisión Nacional del Sida CONASIDA. El Salvador 14 de diciembre 2012. |
| 256 | Plan de abogacía en VIH del Foro de ONGs de la lucha contra el Sida. | Plan de abogacía en VIH del Foro de ONGs de la lucha contra el Sida. El Salvador, marzo 2013. |
| 257 | Nota Conceptual de El Salvador para recibir financiamiento de Fondo Mundial | Propuesta del Mecanismo Coordinador Nacional de El Salvador para acceder a financiamiento de 30 millones de dólares del Fondo Mundial. Marzo 2013 |
| 258 | Guía informativa sobre lineamientos técnicos para el abordaje en salud de las personas lesbianas, gay, bisexuales y transgénero en el Ministerio de Salud. | Folleto informativo utilizado para diseminar el recién aprobado lineamiento técnico dentro del Ministerio de Salud de El Salvador. Abril 2013. |
| 259 | Plan Operativo Anual 2013-2014 del Plan Estratégico Nacional Multisectorial de la Respuesta al VIH-Sida e ITS 2011-2015 | Documento que contiene el Plan Operativo Anual en VIH 2013-2014. El Salvador, mayo 2013. |
| 260 | Propuesta presentada por el MCP de El Salvador: Innovando servicios, reduciendo riesgo, renovando vidas en El Salvador. | Propuesta presentada por El Salvador con lo cual se logró financiamiento por US\$26.9 millones de dólares. El Salvador, abril 2013. |
| 261 | Informe Nacional sobre el estado de situación del VIH en el Salvador en cumplimiento del Plan Nacional de Monitoreo y Evaluación año 2012. | Documento que presenta datos y análisis sobre indicadores reportados del paquete básico priorizado para El Salvador. Septiembre 2013. |
| 262 | Política de VIH de la empresa Carvajal Empaques de S. A. de C. V | Política laboral de esta empresa salvadoreña. Octubre 2012. |
| 263 | Manual para la Gestión de la Calidad del Dato en Guatemala. | Manual para calificar la calidad de los datos para indicadores de VIH en Guatemala, Diciembre 2012. |
| 264 | Informe del Progreso de la Respuesta Nacional al VIH/SIDA, 2013. | Informe que contiene indicadores nacionales en VIH, presentados a Naciones Unidas. Versión electrónica Guatemala, marzo 2013. |
| 265 | Plan de monitoreo y evaluación de las ITS, VIH y sida 2011-2015 de Guatemala. | Versión de imprenta, para publicación del plan nacional de Guatemala para MyE en VIH. Guatemala, mayo 2013. |
| 266 | Primer informe MANGUA para el fortalecimiento del sistema de información y procesos de monitoreo y evaluación del programa Nacional de Prevención y Control de ITS, VIH y sida en el seguimiento a personas con VIH a Nivel Nacional. | Documento que publica por primera vez indicadores sobre el seguimiento clínico a pacientes con VIH de Guatemala a nivel nacional. Junio 2013. |
| 267 | Propuesta para renovación de la subvención “Conteniendo la Transmisión del VIH en Guatemala: Intensificación de las acciones de prevención y atención integral del VIH o sida en grupos vulnerables y áreas prioritarias de Guatemala. | Propuesta de país, para obtener la renovación de la subvención del proyecto de VIH financiado por el Fondo Mundial para Guatemala. Junio 2013. |

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| 268 | Carta de entendimiento entre el Ministerio de Trabajo y Previsión Social y el Ministerio de Salud Pública y Asistencia Social | Documento que manifiesta la voluntad por parte del Ministerio de Trabajo para desarrollar con asistencia técnica de USAID PASCA su política interna de VIH. Guatemala, mayo 2013 |
| 269 | Política laboral de VIH de la Gremial de Vestuarios y Textiles de Guatemala VESTEX | Política laboral de este gremial que agrupa a más de 160 empresas de maquila de Guatemala. Julio 2013. |
| 270 | Informe Nacional del Paquete Básico de Indicadores –PBI- del Plan Nacional de Monitoreo y Evaluación de la Respuesta al VIH en Guatemala. | Documento que presenta datos y análisis sobre indicadores reportados del paquete básico priorizado para Guatemala. Septiembre 2013. |
| 271 | Plan Estratégico Regional ante el Sida 2012-2016 de la Región Autónoma Atlántico Sur Nicaragua. | Plan Estratégico Regional ante el Sida 2012-2016 de la Región Autónoma Atlántico Sur Nicaragua, Octubre 2012 |
| 272 | Plan Nacional de MyE en VIH para Nicaragua. | Documento publicado por la CONISIDA, julio 2012. |
| 273 | Política sobre VIH de la empresa Rovedes. | Política interna que fue adoptada por esta empresa nicaragüense. 10 de octubre 2012. |
| 274 | Política sobre VIH de la empresa China Unida. | Política interna que fue adoptada por esta empresa nicaragüense. 10 de octubre 2012. |
| 275 | Política sobre VIH de la empresa Metro Garments. | Política interna que fue adoptada por esta empresa nicaragüense. 10 de octubre 2012. |
| 276 | Política sobre VIH de la empresa Universidad Centroamericana. | Política interna que fue adoptada por esta empresa nicaragüense. 14 diciembre 2012. |
| 277 | Política sobre VIH de la empresa Hospital SuMedico. | Política interna que fue adoptada por esta empresa nicaragüense. 12 diciembre 2012. |
| 278 | Ley para la protección, promoción y defensa de los derechos humanos y el VIH de Nicaragua. | Ley No. 820 de la Asamblea Nacional de Nicaragua, 12 de diciembre 2012. |
| 279 | Plan Operativo Anual 2013 de la CONISIDA. | Documento que se constituye como lineamiento para la planificación de la CONISIDA en el año 2013. Febrero 2013. |
| 280 | Informe del Progreso de la Respuesta Nacional al VIH/SIDA, 2013. | Informe que contiene indicadores nacionales en VIH, presentados a Naciones Unidas. Versión electrónica Nicaragua, marzo 2013. |
| 281 | Informe de costeo del Plan Estratégico de ITS, VIH y sida 2011-2015 de Nicaragua | Informe de la realización del ejercicio de costeo de la respuesta al VIH en Nicaragua. Abril 2013. |
| 282 | Plan de abogacía de grupos y organizaciones de la diversidad sexual para el acceso a la profilaxis post exposición por VIH. | Documento que contiene el plan de abogacía que impulsan las organizaciones de la diversidad sexual en Nicaragua. Abril 2013. |
| 283 | Política para el abordaje del VIH y sida en DASOLTEX, S. A. | Documento que describe la política laboral de DASOLTEX para el abordaje del VIH. Nicaragua mayo 2013. |
| 284 | Plan de Trabajo de la Comisión de VIH del CoSEP. | Documento que detalla objetivos, actividades y responsables para dar seguimiento a la estrategia de involucramiento del sector privado en la respuesta al VIH. Nicaragua julio 2013. |
| 285 | Situación del VIH y sida en Nicaragua – Monitoreo y Evaluación de avances para contener la epidemia 2012 | Documento que presenta datos y análisis sobre indicadores reportados del paquete básico priorizado para Nicaragua. Septiembre 2013. |
| 286 | Guía clínica para la profilaxis post | Normativa del Ministerio de Salud de Nicaragua con |

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| | exposición por VIH en casos ocupacional y no ocupacional. | relación acceso a profilaxis post exposición para todas las personas víctimas de violencia sexual. Septiembre 2013. |
| 287 | Informe Nacional de monitoreo y evaluación del paquete básico de indicadores de VIH 2012 | Documento que presenta datos y análisis sobre indicadores reportados del paquete básico priorizado para Panamá. Septiembre 2013. |
| 288 | Protocolo para ofrecer profilaxis post exposición por VIH en casos ocupacional y no ocupacional a toda víctima de violencia sexual. | Normativa del Ministerio de Salud de Panamá con relación acceso a profilaxis post exposición para todas las personas víctimas de violencia sexual. Septiembre 2013. |
| 289 | Guía de supervisión capacitante para garantizar la calidad de datos de indicadores de VIH. | Lineamiento del Ministerio de Salud para las organizaciones que reportan datos para alimentar indicadores de VIH en Panamá, septiembre 2013. |
| 290 | Política para el abordaje del VIH y sida en Cable Onda, S. A. | Documento que describe la política laboral de Cable Onda para el abordaje del VIH. Panamá, septiembre 2013. |
| 291 | Política para el abordaje del VIH y sida en el bufete Morgan y Morgan. | Documento que describe la política laboral de Morgan & Morgan para el abordaje del VIH. Panamá, septiembre 2013. |
| 292 | Política para el abordaje del VIH y sida en el Banco General de Panamá. | Documento que describe la política laboral del Banco General de Panamá. Panamá, septiembre 2013. |

VI. RESULTADOS

A continuación se presenta un resumen de los resultados de USAID/PASCA durante toda la vida del proyecto. Los resultados fueron organizados, con base en el último Plan de Monitoreo y Evaluación (PMP por sus siglas en Inglés) presentado a USAID. Adicionalmente, en las tablas del Anexo A se presentan en detalle los resultados logrados.

| INDICADOR | META | LOGROS Al 31 marzo 2014 | % de cumplimiento de metas |
|---|---|---|---|
| Resultado 1: Planes estratégicos regionales y nacionales en VIH y sida con presupuesto, implementados, monitoreados y apoyados | | | |
| 1.1 Número de PEN con evaluaciones de medio término | Durante la vida del proyecto: 6 países con evaluaciones de medio término (una por país) Año 6: NA | 6 países con evaluación del PEN. De acuerdo con cambios en el presupuesto y discusión en reunión con CTO en Panamá (25 sep 2012) esta actividad fue pospuesta para el año 6. | 100% durante la vida del proyecto. Año 5: NA |
| 1.2 Número de planes nacionales de MyE implementados anualmente | Año 1: 5 países preparan informe anual sobre el 25% de los indicadores del Plan Nacional de MyE Año 2: 6 países preparan informe anual sobre el 50% de los indicadores del Plan Nacional de MyE Año 3: 6 países reportan indicadores del paquete básico priorizado. La meta en % de indicadores reportados varía para cada país. Año 4: 6 países reportan indicadores del paquete básico priorizado. La meta en % de indicadores reportados varía para cada país. Año 5: 6 países reportan indicadores del paquete básico priorizado. La meta en % de indicadores reportados varía para cada país. Año 6: NA | — 2 países reportaron el 50% de los indicadores. 5 países reportan acorde con su meta los indicadores priorizados. 6 países reportan acorde con su meta los indicadores priorizados. 6 países reportan acorde con su meta los indicadores priorizados. | 0% 33% 83% 100% 100% |
| 1.3 Monitoreo del proceso de implementación de políticas realizado | Año 1: Línea base en dos nuevos países (CR y PAN). Año 2: Línea base en dos nuevos países (BE y NI). Año 3: Línea base en Belice. Año 4: NA Año 5: seguimiento en 6 países Año 6: 2 países en la región | 2 países con estudio concluido 1 país con estudio concluido (NI) 1 país con estudio concluido (BE) NA De acuerdo con cambios en el presupuesto y discusión en reunión con CTO en Panamá (25 sep 2012) esta actividad fue pospuesta. 2 países con estudio concluido (ES y PA) pendiente publicación | 100% 50% NA NA NA 0% |
| 1.4 Número de subvenciones del FM que reciben asistencia | Año 1 y 2: NA. Este indicador se incluyó hasta el año 3. Año 3: Por lo menos 5 subvenciones con calificación A o B1 donde hay proyectos del FM. | 5 subvenciones con calificación A o B1 en su última evaluación del desempeño. | 100% |

| INDICADOR | META | LOGROS Al 31 marzo 2014 | % de cumplimiento de metas |
|---|--|--|---|
| técnica del Gobierno de los Estados Unidos y tienen calificación A o B1 en su última evaluación del desempeño. | Año 4: Por lo menos 6 subvenciones con calificación A o B1 donde hay proyectos del FM. Año 5: Por lo menos 7 subvenciones con calificación A o B1 donde hay proyectos del FM. Regional: Durante la vida del proyecto: 1 Año 6: NA | 6 subvenciones con calificación A o B1 en su última evaluación del desempeño. 6 subvenciones con calificación A o B1 en su última evaluación del desempeño. 1 subvención a nivel regional SICA-REDCA logró calificación A1 | 100% 100% 100% |
| 1.5 Porcentaje de indicadores UNGASS provenientes de un sistema nacional de información | Año 1 y 2: NA Este indicador se incluyó hasta el año 3. Año 3: NA, se reportarán indicadores UNGASS que vengan de un sistema de información nacional durante el año 4. Año 4: 6 países reportan indicadores UNGASS provenientes de un sistema nacional de información. Los porcentajes varían para cada país. Año 5: 6 países reportan indicadores UNGASS provenientes de un sistema nacional de información. Los porcentajes varían para cada país. Año 6: NA | NA 6 países reportaron indicadores UNGASS provenientes de un sistema nacional de información, logros con base en metas de país. 6 países reportaron indicadores UNGASS provenientes de un sistema nacional de información, logros con base en metas de país | NA 100% 100% |
| Resultado 2: Agendas de abogacía regional y nacionales, efectivamente implementadas | | | |
| 2.1 Número de instancias que usan información facilitada por PASCA | Año 1: <u>En los países:</u> Al menos 8 en 3 países Año 2: <u>En los países:</u> Al menos 18 en 5 países Año 3: <u>En los países:</u> Al menos 27 en 6 países Año 4: <u>En los países:</u> Al menos 51 en 6 países Año 5: <u>En los países:</u> Al menos 63 en 6 países Durante la vida del proyecto: <u>Regional:</u> 12 instancias usan información Año 6: 30 en 6 países | 7 instancias utilizaron información en 5 países. 18 instancias utilizaron información en 6 países. 38 instancias utilizaron información en 6 países. 66 instancias utilizaron información en 6 países. 86 instancias utilizaron información en 6 países. 33 instancias regionales utilizaron información facilitada por PASCA 35 en 6 países | 87.5% - # instancias / 166% - # de países 100% - # instancias / 120% - # de países 140% - # instancias / 100% - # de países 129% - # instancias / 100% - # de países 129% - # instancias / 100% - # de países 275% 117% |
| 2.2 Número de campañas de abogacía con objetivos específicos, desarrolladas por organizaciones, alianzas estratégicas o redes | Año 1: <u>En los países:</u> Al menos 3 en 3 países Año 2: <u>En los países:</u> Al menos 3 en 3 países Año 3: <u>En los países:</u> Al menos 6 en 6 países Año 4: <u>En los países:</u> Al menos 13 en 6 países | 3 campañas de abogacía en 3 países 2 campañas de abogacía en 2 países 7 campañas de abogacía en 5 países 12 campañas de abogacía en 5 países | 100% - # campañas / 100% - # de países 67% - # campañas / 67% - # de países 117% - # campañas / 83% - # de países 92% - # campañas / 83% - # de países |

| INDICADOR | META | LOGROS Al 31 marzo 2014 | % de cumplimiento de metas |
|--|--|---|--|
| | Año 5: <u>En los países:</u> Al menos 13 en 6 países Durante la vida del proyecto: <u>Regional:</u> 4 campañas Año 6: 1 por país, 6 en total | 15 campañas de abogacía en 6 países 6 campañas de abogacía regionales durante la vida del proyecto 4 campañas de abogacía en 3 países | 115% - # campañas / 100% - # de países 150% 67% - # campañas / 50% - # de países |
| 2.3 Número anual de cambios políticos positivos en VIH y sida | Año 1: <u>En los países:</u> Al menos 6 cambios en por lo menos 3 países. <u>Regional:</u> 1 cambio político Año 2: <u>En los países:</u> Al menos 10 cambios en por lo menos 4 países. <u>Regional:</u> 1 cambio político Año 3: <u>En los países:</u> Al menos 15 cambios en por lo menos 6 países. <u>Regional:</u> 4 cambios políticos Año 4: <u>En los países:</u> Al menos 24 cambios en por lo menos 6 países. <u>Regional:</u> 4 cambios políticos Año 5: <u>En los países:</u> Al menos 32 cambios en por lo menos 6 países. <u>Regional:</u> 4 cambios políticos Año 6: 12 cambios políticos en 6 países | 7 cambios políticos en 5 países 2 cambios político regional logrado 21 cambios políticos en 6 países 7 cambios políticos regionales 21 cambios políticos en 6 países 3 cambios políticos regionales 30 cambios políticos en 6 países 7 cambios políticos regionales 33 cambios políticos en 6 países 2 cambios políticos regionales 9 cambios políticos en 6 países | 117% - # de cambios / 166% - # de países 200% 180% - # de cambios / 150% - # de países 700% 140% - # de cambios / 100% - # de países 75% 125% - # de cambios / 100% - # de países 175% 103% - # de cambios / 100% - # de países 50% 75% - # de cambios / 100% - # de países |
| 2.4 Indicador para monitoreo / progreso de la respuesta política al VIH. | <u>Año 1 y 2:</u> (NA), el indicador se inició a partir del año 3 de PASCA. Año3: TBD Año 4: TBD Año 5: TBD Año 6: NA | ----- Promedio General (8 componentes): 0.54 Componentes: Empresa Privada: 0.39; Financiamiento: 0.49; VS y VBG: 0.54; Derechos Humanos 0.57; Respuesta Multi-sectorial: 0.57; PEMAR: 0.58; EyD: 0.56; Acceso a medicamentos: 0.58 De acuerdo con cambios en el presupuesto y discusión con CTO en reunión en Panamá (25 septiembre 2012) esta actividad se pospuso. | ----- 100% línea de base NA |
| 2.5 Componentes del Índice de Esfuerzo de Programas de VIH (API) <i>Medición de país, reporte regional</i> | Año 2009: <u>Regional:</u> Medición API sobre 5 componentes: 65.6 (Componentes: Apoyo político 67; Legal y regulatorio 72; Formulación de políticas 76; M&E 60; Derechos Humanos 53) Año 2013: <u>Regional:</u> Medición API sobre 5 componentes: 67.8 | API reportado: 62 (incluye los 6 países) (Componentes: Apoyo político 62.4; Legal y regulatorio 72.6; Formulación de políticas 72.0; M&E 54.7; Derechos Humanos 46.3) De acuerdo con cambios en el presupuesto y discusión con CTO en | 94.5% API es un índice compuesto, el % de cumplimiento de metas se calcula bajo el principio de la construcción del índice. |

| INDICADOR | META | LOGROS Al 31 marzo 2014 | % de cumplimiento de metas |
|---|---|---|--|
| | (Componentes: Apoyo político 68; Legal y regulatorio 74; Formulación de políticas 78; M&E 65; Derechos Humanos 56) Año 2014: <u>Regional</u> : Medición API sobre 5 componentes: 72 (Componentes: Apoyo político 70; Legal y regulatorio 76; Formulación de políticas 80; M&E 75; Derechos Humanos 60) | reunión en Panamá (25 septiembre 2012) esta actividad se pospuso. API 2013-2014 reportado: 68.4 (incluye los 6 países) (Componentes: Apoyo político 61.5; Legal y regulatorio 76.2; Formulación de políticas 79.5; M&E 67; Derechos Humanos 58) | 100% |
| 2.6 Medición del gasto nacional en prevención y programas de atención en VIH y sida (MEGAS) | Informe en por lo menos 5 países en la región cada 2 años Año 6: NA | 3 países publicaron informe MEGAS 2008 5 países publicaron informe MEGAS 2010 (excepto GT informe pendiente de publicación) 3 países iniciaron a elaborar MEGAS 2012 | 60% 100% NA |
| Resultado 3. Sector Empresarial comprometido con la respuesta al VIH | | | |
| 3.1 Número de políticas de VIH en el lugar de trabajo, adoptadas o implementadas. | Año 1: <u>En los países</u> : Por lo menos 5 políticas en por lo menos 2 países. Año 2: <u>En los países</u> : Por lo menos 7 políticas en por lo menos 3 países. Año 3: <u>En los países</u> : Por lo menos 12 políticas en por lo menos 4 países. Año 4: <u>En los países</u> : Por lo menos 12 políticas en por lo menos 5 países. Año 5: <u>En los países</u> : Por lo menos 14 políticas en por lo menos 6 países. Durante la vida del proyecto: <u>Regional</u> : 1 política multipaís (regional) Año 6: 10 políticas nuevas en la región | 1 política de VIH en un país. 18 políticas de VIH en 3 países 16 políticas de VIH en 4 países 41 políticas de VIH en 5 países 28 políticas de VIH en 6 países 1 política regional de FEDEPRICAP 39 políticas de VIH en 5 países | 20% - # políticas / 50% - # de países 257% - # políticas / 100% - # de países 133% - # políticas / 100% - # de países 341% - # políticas / 100% - # de países 200% - # políticas / 100% - # de países 100% 390% - # políticas |