

Grant Confirmation

1. This **Grant Confirmation** is made and entered into by **the Global Fund to Fight AIDS, Tuberculosis and Malaria** (the "Global Fund") and **Secrétariat Permanent du Conseil National de Lutte contre le Sida et les Infections Sexuellement Transmissibles (SP/CNLS-IST)** (the "Principal Recipient") on behalf of Burkina Faso (the "Grantee"), as of the date of the last signature below and effective as of the start date of the Implementation Period (as defined below), pursuant to the Framework Agreement, dated as of 30 April 2015, as amended and supplemented from time to time (the "Framework Agreement"), between the Global Fund and the Grantee, to implement the Program set forth herein.
2. **Single Agreement.** This Grant Confirmation, together with the Integrated Grant Description attached hereto as Schedule I, sets forth the provisions (including, without limitation, policies, representations, covenants, Program Activities, Program budget, performance framework, and related implementation arrangements) applicable to the Program, and forms part of the Grant Agreement. Each capitalized term used but not defined in this Grant Confirmation shall have the meaning ascribed to such term in the Framework Agreement (including the Global Fund Grant Regulations (2014), available at <http://www.theglobalfund.org/GrantRegulations>). In the event of any inconsistency between this Grant Confirmation and the Framework Agreement (including the Global Fund Grant Regulations (2014)), the provisions of this Grant Confirmation shall govern unless expressly provided for otherwise in the Framework Agreement.
3. **Grant Information.** The Global Fund and the Grantee hereby confirm the following:

3.1	Host Country or Region:	Burkina Faso
3.2	Disease Component:	HIV/AIDS
3.3	Program Title:	Scaling-up of high impact interventions in the fight against HIV/AIDS
3.4	Grant Name:	BFA-H-SPCNLS
3.5	GA Number:	1994
3.6	Grant Funds:	Up to the amount of EUR 35,285,088 or its equivalent in other currencies
3.7	Implementation Period:	From 1 January 2021 to 31 December 2023 (inclusive)
3.8	Principal Recipient:	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les Infections Sexuellement Transmissibles (SP/CNLS-IST) 01 BP 6464 Ouagadougou 01 Burkina Faso

		<p>Attention:</p> <p>Dr. Smaïla Ouedraogo Secrétaire Permanent</p> <p>Telephone: +226 25 30 66 22 Email: smaila11@yahoo.fr</p>
3.9	Fiscal Year:	1 January to 31 December
3.10	Local Fund Agent:	<p>Swiss Tropical and Public Health Institute Socinstrasse 57 P.O. Box - 4002 CH-4051 Basel Swiss Confederation</p> <p>Attention: Odile Pham-Tan</p> <p>Telephone: +41 612848264 Email: odile.phamtan@swisstph.ch</p>
3.11	Global Fund contact:	<p>The Global Fund to Fight AIDS, Tuberculosis and Malaria Global Health Campus, Chemin du Pommier 40 1218 Grand-Saconnex, Geneva, Switzerland</p> <p>Attention: Maria Kirova Department Head Grant Management Division</p> <p>Telephone: +41587911700 Facsimile: +41445806820 Email: maria.kirova@theglobalfund.org</p>

4. **Policies.** The Grantee shall, and shall cause the Principal Recipient to, take all appropriate and necessary actions to comply with (1) the Global Fund Guidelines for Grant Budgeting (2019, as amended from time to time), (2) the Health Products Guide (2018, as amended from time to time), and (3) any other policies, procedures, regulations and guidelines, which the Global Fund may communicate in writing to the Grantee and the Principal Recipient, from time to time.
5. **Representations.** In addition to the representations set forth in the Framework Agreement (including the Global Fund Grant Regulations (2014)), the Principal Recipient hereby represents that the Principal Recipient has all the necessary power, has been duly authorised by or obtained all necessary consents, approvals and authorisations to execute and deliver this Grant Confirmation and to perform all the obligations on behalf of the Grantee under this Grant Confirmation. The execution, delivery and performance by the Principal Recipient on behalf of the Grantee of this Grant Confirmation do not violate or conflict with any applicable law, any provision of the Grantee's and Principal Recipient's constitutional documents, any order or judgment of any court or any competent authority, or any contractual restriction binding on or affecting the Grantee or the Principal Recipient.

6. **Covenants.** The Global Fund and the Grantee further agree that:

6.1 The Program budget may be funded in part by Grant Funds disbursed under a previous Grant Agreement, which the Global Fund has approved to be used for the Program under the current Grant Agreement ("Previously Disbursed Grant Funds"), as well as additional Grant Funds up to the amount set forth in Section 3.6 hereof. Accordingly, the Global Fund may reduce the amount of Grant Funds set forth in Section 3.6 hereof by the amount of any Previously Disbursed Grant Funds. Previously Disbursed Grant Funds shall be governed by the terms of this Grant Agreement.

6.2 Personal Data

(1) Principles. The Principal Recipient, on behalf of the Grantee, acknowledges that Program Activities are expected to respect the following principles and rights ("Data Protection Principles"): (a) Information that could be used to identify a natural person ("Personal Data") will be: (i) processed lawfully, fairly and transparently; (ii) collected for specified, explicit and legitimate purposes and not further processed in a manner not compatible with those purposes; (iii) adequate, relevant and limited to what is necessary for the purposes for which they are processed; (iv) accurate and, where necessary, kept up to date; (v) kept in a form which permits identification of the individuals for no longer than is necessary for the purposes for which the Personal Data is processed; and (vi) processed in a manner that ensures appropriate security of the Personal Data; and (b) Natural persons are afforded, where relevant, the right to information about Personal Data that is processed; the right to access and rectify or erase Personal Data; the right to data portability; the right to confidentiality of electronic communications; and the right to object to processing.

(2) Limitations. Where collection and processing of Personal Data is required in order to implement Program Activities, whether by the Principal Recipient, a Sub-recipient, or Supplier, the Principal Recipient should respect the Data Protection Principles: (a) to the extent that doing so does not violate or conflict with applicable law and/or policy; and (b) subject to the Principal Recipient balancing the Data Protection Principles with other fundamental rights in accordance with the principle of proportionality, taking into account the risks to the rights and freedoms of natural persons.

6.3 With respect to Section 7.6 (Right of Access) of the Global Fund Grant Regulations (2014), (1) the Global Fund may collect or seek to collect data, and it is possible that such data may contain Personal Data, and (2), prior to collection and at all times thereafter, the Principal Recipient shall take all necessary actions to ensure that the transfer of such information to the Global Fund does not violate any applicable law or regulation.

6.4 In accordance with the Global Fund Sustainability, Transition and Co-financing Policy (GF/B35/04) (the "STC Policy"), the Grantee shall:

(1) progressively increase government expenditure on health to meet national universal health coverage goals; and increase domestic funding of Global Fund-supported programs, with a focus on progressively absorbing the costs of key Program components as identified in consultation with the Global Fund. The Principal Recipient acknowledges that the Global Fund may reduce Grant Funds during the current or any subsequent Implementation Period in the event the Grantee fails to meet these requirements;

(2) comply with the requirements to access the ‘co-financing incentive’ as set forth in the STC Policy (the “Co-Financing Incentive Requirements”). The commitment and disbursement of EUR 5,292,763.14 (the “Co-Financing Incentive”), is subject to the Global Fund’s satisfaction with the Grantee’s compliance with the Co-Financing Incentive Requirements. The Global Fund may reduce all or part of the Co-Financing Incentive during the current or any subsequent Implementation Period, in the event the Grantee fails to comply with the Co-Financing Incentive Requirements; and

(3) acting through the Principal Recipient, no later than 31 March of each calendar year of the Implementation Period, submit to the Global Fund, in form and substance satisfactory to the Global Fund, information on funding received by the Principal Recipient and the Sub-recipients from the Government of Burkina Faso and other donors for the previous year as well as the planned contribution for the on-going year.

6.5 The procurement of Health Products shall be carried out through the Pooled Procurement Mechanism (“PPM”) of the Global Fund, unless the Global Fund directs the Principal Recipient otherwise in writing. The Principal Recipient has all the necessary power and authority to execute, deliver and carry out its obligations under the wambo.org - PPM registration letter in the form approved by the Global Fund.

[Signature Page Follows.]

IN WITNESS WHEREOF, the Global Fund and the Principal Recipient, acting on behalf of the Grantee, have caused this Grant Confirmation to be executed and delivered by their respective duly authorized representatives on their respective date of signature below.

**The Global Fund to Fight AIDS,
Tuberculosis and Malaria**

By: M. Eldon Edm

Name: Mark Eldon-Edington

Title: Head, Grant Management Division

Date: Dec 18, 2020

**Secrétariat Permanent du Conseil National
de Lutte contre le Sida et les Infections
Sexuellement Transmissibles (SP/CNLS-IST)
on behalf of Burkina Faso**

By: Smaïla Ouedraogo

Name: Smaïla Ouedraogo

Title: Secrétaire Permanent

Date: **16 DEC. 2020**



Acknowledged by

By: Pascal Antoine NIAMBA

Name: Pascal Antoine NIAMBA

Title: Chair, Country Coordinating Mechanism of Burkina Faso

Date: **16/12/20**

By: Geoffroy SAWADOGO

Name: Geoffroy SAWADOGO

Title: Civil Society Representative, Country Coordinating Mechanism of Burkina Faso

Date: **16/12/2020**

Schedule I

Integrated Grant Description

A. PROGRAM DESCRIPTION

1. Background and Rationale for the Program

Burkina Faso, with an HIV prevalence of 0.7% in the general population, is classified as a country with a mixed epidemic (UNAIDS 2019). There was a downward trend between 1997 and 2018, with HIV prevalence in the general population falling from 3.1% in 1997 to 0.7 in 2018, a reduction of 77.4%. There is a higher prevalence among women than men, and much higher prevalence noted among some key populations: 5.4% among female sex workers, 1.9% among men who have sex with men, and 2.2% among prisoners [2017 survey, NSP pp.17-20]. The 2017 survey also found relatively high HIV prevalence among women (4.6%), and men (3.6%) living with disabilities and health care workers living in urban areas (1.9%). There is insufficient data for other key populations, notably people who use drugs, transgender and vulnerable populations, including clients of female sex workers, truckers, and gold miners [NSP p.20]. An Integrated Biological and Behavioural Survey (IBBS) is currently under implementation.

In 2019, UNAIDS estimated the number of new infections at 2400 and the number of deaths due to HIV at 3300. HIV prevalence among TB patients was 9.1% in 2018.

With regards to the 90/90/90 targets, the Burkina Faso cascade stands at 70/74/25 – 70% of people living with HIV have been identified, 74% of those who know their status have been initiated on antiretroviral treatment (ART), and 25% of people living with HIV have demonstrated a viral load suppression (2018 data). Only 23% of children with HIV are on ART. ART coverage among HIV-positive pregnant women was 74.8% in 2019. Stigma and discrimination towards key populations also persists.

Retention on ART and access to viral load testing, as well as insufficient early infant diagnosis, are among the root causes of the poor cascade.

Despite widespread insecurity in geographic areas with high HIV burden, the current HIV national strategic plan (NSP) has set ambitious targets to reach HIV epidemic control by the year 2030.

2. Goals, Strategies and Activities

Goals:

- New HIV infections are reduced by 75% in general population by 2025;
- The mortality of people living with HIV is reduced by 70% by 2025;
- Human rights and gender-related barriers and inequalities that impede access to services are reduced by 2025; and
- Governance is strengthened at central and regional levels.

Objectives

- 95% of key populations (sex workers, MSM, drug users, prisoners, PLWHIV), vulnerable populations (adolescents and young people, people with disabilities, women of childbearing age, IDPs and refugees) and bridge populations (gold diggers and truck drivers) will use the combined prevention services package according to differentiated approaches by 2025;
- 100% of facilities involved in STI/HIV service provision, Transfusion Safety and HIV Post Exposure Prophylaxis adopt measures to eliminate cases of new HIV infections by 2025;
- The elimination of mother-to-child transmission of HIV and STIs is certified in Burkina-Faso by 2025;
- 95% of PLWHIV are enrolled on treatment by 2025;

- 95% of PLWHIV on ARV treatment have an undetectable viral load and 95% of PLWHIV are retained on ARV treatment by 2025;
- Quality strategic information on the national response to HIV is available and of good quality; and
- Death rate among TB/HIV patients is reduced from 20% (cohort 2018) to less than 5% (cohort 2024).

Strategies:

- Pursuit the implementation of differentiated care guidelines issued by WHO with regard to treatment and care of PLWHIV, targeting in particular key populations, HIV+ pregnant women, TB/HIV patients, serodiscordant couples and children under the age of 15;
- Implementation of targeted measures and actions for the health workforce;
- Targeted testing of populations most at risk of contracting HIV;
- Monitoring of the epidemic (sentinel surveillance, EWI, bio-behavioural surveys amongst specific populations);
- Scale-up and decentralization of viral load testing; and
- Community support for beneficiaries for prevention, care, support and the treatment of HIV.

Planned Activities:

- Procurement of health products; Ensure the acquisition of ARVs and laboratory reagents;
- Ensuring condoms availability;
- Trainings and refreshment trainings to optimize case management at public, private and community levels;
- Supervision and coordination at the regional, district, heath facility and community levels;
- Monitoring and Evaluation-related activities, including all studies, surveys and data collection for the program;
- Capacity-building for public and community health workers;
- Digitize the transmission of viral load results;
- Conduct communication and awareness campaigns on prevention through posters in all health centers;
- Ensuring strong linkages to care among newly diagnosed HIV-positive individuals; strengthening laboratory and diagnostic capacities for pre-ART and ART, TB/HIV and PMTCT services, including CD4 testing, viral load testing, TB screening and PCR for EID;
- Carrying out surveys and monitoring and evaluation studies; and
- Establishment of a computerized system for managing supplies; supervision/monitoring; quality assurance for health-care products and laboratory examinations.

2. Target Group/Beneficiaries

- Adults and children living with HIV/AIDS;
- Key populations: sex workers, MSM, prisoners, people with disabilities, etc.;
- People living with HIV in the insecure areas;
- Internally displaced people;
- TB patients, and HIV-TB co-infected patients;
- Infants born to HIV-positive mothers;
- Health care workers; and
- Women / Pregnant women.

B. PERFORMANCE FRAMEWORK

Please see attached.

C. SUMMARY BUDGET

Please see attached.

Country	Burkina Faso																					
Grant Name	BFA-H-SPCNLS																					
Implementation Period	01-Jan-2021 - 31-Dec-2023																					
Principal Recipient	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso																					
Reporting Periods	<table border="1"> <tr> <td>Start Date</td><td>01-Jan-2021</td><td>01-Jul-2021</td><td>01-Jan-2022</td><td>01-Jul-2022</td><td>01-Jan-2023</td><td>01-Jul-2023</td></tr> <tr> <td>End Date</td><td>30-Jun-2021</td><td>31-Dec-2021</td><td>30-Jun-2022</td><td>31-Dec-2022</td><td>30-Jun-2023</td><td>31-Dec-2023</td></tr> <tr> <td>PU includes DR?</td><td>No</td><td>Yes</td><td>No</td><td>Yes</td><td>No</td><td>No</td></tr> </table>	Start Date	01-Jan-2021	01-Jul-2021	01-Jan-2022	01-Jul-2022	01-Jan-2023	01-Jul-2023	End Date	30-Jun-2021	31-Dec-2021	30-Jun-2022	31-Dec-2022	30-Jun-2023	31-Dec-2023	PU includes DR?	No	Yes	No	Yes	No	No
Start Date	01-Jan-2021	01-Jul-2021	01-Jan-2022	01-Jul-2022	01-Jan-2023	01-Jul-2023																
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PU includes DR?	No	Yes	No	Yes	No	No																

Program Goals, Impact Indicators and targets

1 Les nouvelles infections sont réduites de 75% à l'horizon 2025.

New infections are reduced by 75% by 2025.

La mortalité liée au VIH est réduite de 70% chez les PLWHIV à l'horizon 2025.

HIV-related mortality is reduced by 70% among PLWHIV by 2025.

Les obstacles et inégalités liés aux droits humains et au genre qui entravent l'accès aux services sont réduites à l'horizon 2025.

Human rights and gender-related barriers and inequalities that impede access to services are reduced by 2025.

La gouvernance est renforcée au niveau central et régional.

Governance is strengthened at central and regional levels.

Impact Indicator	Country	Baseline Value	Baseline Year and Source	Required Disaggregation	Responsible PR	2021	2022	2023
						N: D: P: 0.60%	N: D: P: 0.55%	N: D: P: 0.54%
HIV I-13 Percentage of people living with HIV	Burkina Faso	N: D: P: 0.7%	2019 Spectrum	Gender Age,Gender,Age	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Due Date: 14-Aug-2022	Due Date: 14-Aug-2023	Due Date: 14-Aug-2024
Comments								
Numerator: Number of people living with HIV Denominator: Total population The base value is taken from the UNAIDS GAM report produced annually and the 2021-2023 estimates are taken from the Spectrum projections that are updated regularly. The targets are aligned with the CSN 2021-2025.								
HIV I-4 Number of AIDS-related deaths per 100,000 population	Burkina Faso	N: 9.77 D: P:	2019 Spectrum	Age,Gender,Gender Age	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	N: 8.2 D: P: %	N: 6.9 D: P: %	N: 5.7 D: P: %
Comments								
Numerator: Estimated number of people who died of AIDS-related causes during the year Denominator: Total population regardless of HIV status x 100,000 The base value is the UNAIDS report and the projections were taken from the CSN 2021-2025 performance framework (page 77). Targets are aligned with CSN 2021-2025.								
HIV I-6 Estimated percentage of children newly infected with HIV from mother-to-child transmission among women living with HIV delivering in the past 12 months	Burkina Faso	N: D: P: 12.9%	2019 Spectrum		Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	N: D: P: 6.90%	N: D: P: 5.70%	N: D: P: 4.50%
Comments								
Numerator: Estimated number of children newly infected with HIV through mother-to-child transmission among women living with HIV who gave birth in the last 12 months Denominator: Estimated number of women living with HIV who gave birth in the last 12 months This value includes the breastfeeding period. The base value and projections were taken from the CSN 2021-2025 Performance Framework (page 78). The targets are aligned with the CSN 2021-2025.								



			2017				N: D: P: %	N: D: P: %	N: D: P: 1.10%
4	HIV I-9a_M_ Percentage of men who have sex with men who are living with HIV	Burkina Faso	N: D: P: 1.9%	Biobehavioural Survey Report in Key Populations	Age	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Due Date:	Due Date:	Due Date: 29-Feb-2024

Comments
 Numerator: Number of MSM who test positive for HIV Denominator: Number of MSM tested for HIV A bio-behavioral survey of key populations is underway in 2020 and will provide an update on HIV prevalence among MSM. Another survey is planned for 2023 with data to be reported in late February 2024. The targets are aligned with the CSN 2021-2025.

		2017					N: D: P: %	N: D: P: %	N: D: P: 3.10%
5	HIV I-10_M_ Percentage of sex workers who are living with HIV	Burkina Faso	N: D: P: 5.4%	Biobehavioural Survey Report in Key Populations	Gender,Age	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Due Date:	Due Date:	Due Date: 29-Feb-2024

Comments
 Numerator: Number of sex workers testing positive for HIV Denominator: Number of female sex workers tested for HIV A bio-behavioral survey of key populations is underway in 2020 and will provide an update on HIV prevalence in NSPs. Another survey is planned for 2023 with data to be reported in February 2024. Targets are aligned with the CSN 2021-2025.

		2019					N: 1.5 D: P: %	N: 1.4 D: P: %	N: 1.4 D: P: %
6	TB/HIV I-1 TB/HIV mortality rate per 100,000 population	Burkina Faso	N: 1.6 D: P:	WHO_HQ_TB_REPORT 2019		Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Due Date: 31-Oct-2022	Due Date: 31-Oct-2023	Due Date: 31-Oct-2024

Comments
 Numerator: Number of HIV-positive people who die of HIV with tuberculosis as a contributing cause of death. Denominator: Number of people in the population x 100'000 The base value is taken from the WHO report TB 2020 giving the values for 2019. The 2015 values are 1.7 per 100,000; 1.7 per 100,000 in 2016; 1.6 per 100,000 in 2017; 1.6 per 100,000 in 2018; 1.6 per 100,000 in 2019. These data show an almost 0.1 point decrease every two years, which will reach 1.4 per 100,000 in 2023. According to WHO estimates, the tuberculosis/HIV mortality rate is almost stable at around 1.7 deaths per 100,000 population between 2015 and 2018. The interventions planned in the TB and HIV NSPs aim at progressively reducing this mortality through the strengthening of the management of co-morbidities, the extension of the TB/HIV Single Window, etc. The interventions planned in the TB/HIV NSPs are aimed at progressively reducing this mortality through the strengthening of the management of co-morbidities, the extension of the TB/HIV Single Window, etc. These interventions could reduce this mortality from 1.6 deaths per 100,000 inhabitants to 1.5 deaths per 100,000 inhabitants in 2021, to 1.4 deaths per 100,000 inhabitants in 2022 and 2023.

		2017					N: D: P: %	N: D: P: 2.40%	N: D: P: %
7	HIV I-12 Percentage of other vulnerable populations (specify) who are living with HIV	Burkina Faso	N: D: P: 4.6%			Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Due Date:	Due Date: 14-Feb-2023	Due Date:

Comments
 Numerator: Number of other populations (people with disabilities) testing positive for HIV Denominator: Number of other populations (people with disabilities) tested for HIV The baseline value comes from the report of the 2017 Bio-Behavioral Study of the Vulnerability of People with Disabilities to HIV. Based on the forecast reduction of new infections by 75% in the CSN by 2025, i.e. an expected prevalence of 1.2%, a prevalence of 2.4% among people with disabilities will be expected in 2022. It is planned to conduct the next survey among this disabled population in 2022 and the results will be available in 2023.

Program Objectives, Outcome Indicators and targets

95% des populations clés (TS, HSH, Usagers de drogue, Détenus, PVVIH), vulnérables (adolescents et jeunes, Personnes handicapées, femmes en âge de procréer, PDI et réfugiés) et passerelles (Orpailleurs et routiers) utilisent le paquet de services de prévention combinée selon des approches différencierées à l'horizon 2025.

1 95% of key populations (sex workers, MSM, drug users, prisoners, PLW-HIV), vulnerable populations (adolescents and young people, people with disabilities, women of childbearing age, IDPs and refugees) and bridge populations (gold diggers and truck drivers) will use the combined prevention services package according to differentiated approaches by 2025.

2 100% des structures impliquées dans la PEC des IST, la Sécurité transfusionnelle et la Prophylaxie post exposition au VIH adoptent des mesures pour l'élimination des cas de nouvelles infections à VIH d'ici 2025.

3 L'élimination de la transmission du VIH et des IST de la mère à l'enfant est certifiée au Burkina Faso à l'horizon 2025.

4 The elimination of mother-to-child transmission of HIV and STIs is certified in Burkina Faso by 2025.

95% des PVVIH sont intégrées dans le dispositif de prise en charge médicale en vigueur à l'horizon 2025.

4 95% of PLWHIV are integrated into the medical care system in force by 2025.



95% des PVVIH sous traitement ARV ont une charge virale indétectable et 95% des PVVIH sont retenues sous traitement ARV à l'horizon 2025.

5 95% of PLWHIV on ARV treatment have an undetectable viral load and 95% of PLWHIV are retained on ARV treatment by 2025.

L'information stratégique de qualité sur la réponse nationale au VIH est disponible.

6 Quality strategic information on the national response to HIV is available.

Réduire le taux de décès chez les patients TB/VIH de 20% (cohorte 2018) à moins de 5% (cohorte 2024).

7 Reduce the death rate among TB/HIV patients from 20% (cohort 2018) to less than 5% (cohort 2024).

	Outcome Indicator	Country	Baseline Value	Baseline Year and Source	Required Disaggregation	Responsible PR	2021	2022	2023
1	HIV O-11_ M Percentage of people living with HIV who know their HIV status at the end of the reporting period	Burkina Faso	N: D: P: 74.0%	2019 cascade of care report 2019	Gender	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	N: D: P: 79.00%	N: D: P: 83.00%	N: D: P: 87.00%
Comments									
Numerator: Number of people living with HIV who know their HIV status Denominator: Estimated number of people living with HIVBasic data are from Spectrum 2020 and projections are from CSN-SIDA 2021-2025 page 77.									
2	HIV O-4a_ M Percentage of men reporting the use of a condom the last time they had anal sex with a non regular partner	Burkina Faso	N: D: P: 87.2%	2017 bio-behavioural study report 2017	Age	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	N: D: P: %	N: D: P: %	N: D: P: 93.00%
Comments									
Numerator: Number of MSM who report that a condom was used the last time they had anal sex with a non-regular partner in the last six months Denominator: Number of MSM who report having had anal sex with a male partner in the past six months A study is underway in 2020 to update the estimates and size of MSM, which will be reported in 2021. With the increased coverage and quality of the program, it is estimated that this rate will be 93% in 2023. Values will be provided by the 2023 Biobehavioral Survey of Key Populations and reported in the PUDR due February 29, 2024. The targets are aligned with the CSN 2021-2025.									
3	HIV O-5_ M Percentage of sex workers reporting the use of a condom with their most recent client	Burkina Faso	N: D: P: 93.0%	2017 bio-behavioural study report 2017	Gender,Age	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	N: D: P: %	N: D: P: %	N: D: P: 95.00%
Comments									
Numérateur : Nombre de professionnel (le) s du sexe ayant déclaré avoir utilisé un préservatif avec leur dernier client Dénominateur : Nombre de professionnel (le) s du sexe ayant déclaré avoir eu des relations sexuelles commerciales au cours des 12 derniers mois Une étude est en cours en 2020 pour la mise à jour des estimations et de la taille des PS, ces données seront rapportées en 2021. Avec le renforcement de la couverture et de la qualité du programme, il est estimé que ce taux serait de 95% en 2023. Les valeurs seront fournies par l'enquête biocomportementale chez les populations clés de 2023 et renseignées dans le PUDR dû au 29 février 2024. Les cibles sont alignées avec le CSN 2021-2025.									
4	HIV O-12 Percentage of people living with HIV and on ART who are virologically suppressed	Burkina Faso	N: 19,617 D: 24,080 P: 81.5%	2019 spectrum	Gender	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	N: 35,746 D: 41,565 P: 86.00%	N: 46,074 D: 52,209 P: 88.25%	N: 57,024 D: 63,010 P: 90.50%
Comments									
Numérateur : Nombre de personnes vivant avec le VIH sous traitement antirétroviral pendant au moins 6 mois et avec au moins un résultat de test de routine de la CV qui ont présenté une répression virologique (<1000 copies / ml) au cours de la période de rapport Dénominateur : Nombre de personnes vivant avec le VIH sous traitement antirétroviral pendant au moins 6 mois et avec au moins un résultat de test de CV dans un dossier médical ou de laboratoire au cours de la période de rapport La valeur de base est tirée du rapport annuel charge virale du PSSUS-IST qui donne 81.5% des PVVIH ayant réalisé la charge virale qui ont présenté une charge virale indétectable. En faisant une projection linéaire partant de la valeur de 2019 (81.5%) pour atteindre celle souhaitée en 2025 qui est de 95%, nous avons déterminé les niveaux à atteindre qui sont respectivement de : 86% en 2021, 88.25% en 2022 et 90.5% en 2023. Le dénominateur est la prévision de réalisation des charge virales de routine par année entre 2021 et 2023, ces valeurs tiennent compte des efforts de décentralisation de la charge virale, des transports des échantillons de prélevement pour la charge virale et du renforcement du circuit des infants.									

The Global Fund

Average indicators and targets																
Number	Population	Coverage Indicator	Country and Scope of Targets	Baseline Value	Baseline Year and Source	Required Disaggregation	Include in GF Results	Responsible PR	Cumulation Type	01-Jan-2021 30-Jun-2021	01-Jul-2021 31-Dec-2021	01-Jan-2022 30-Jun-2022	01-Jul-2022 31-Dec-2022	01-Jan-2023 30-Jun-2023	01-Jul-2023 31-Dec-2023	
1	Men who have sex with men	KP-6a Percentage of eligible men who have sex with men who initiated oral antiretroviral PrEP during the reporting period	Country: Burkina Faso; Coverage: Geographic Subnational, 100% of national program target	N: 120 D: P:			Yes		Non cumulative	N: 204 D: 509.5 P: 40.1%	N: 204 D: 508.5 P: 40.1%	N: 314 D: 523.5 P: 60.0%	N: 314 D: 523.5 P: 60.0%	N: 431 D: 538.5 P: 80.0%	N: 431 D: 538.5 P: 80.0%	
Comments																
2	Sex workers and their clients	KP-6c Percentage of eligible sex workers who initiated oral antiretroviral PrEP during the reporting period	Country: Burkina Faso; Coverage: Geographic Subnational, 100% of national program target	N: 1 D: P:			Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative	N: 719 D: 3,592 P: 20.0%	N: 719 D: 3,592 P: 20.0%	N: 1,035 D: 3,696.5 P: 28.0%	N: 1,035 D: 3,696.5 P: 28.0%	N: 1,521.5 D: 3,803.5 P: 40.0%	N: 1,521.5 D: 3,803.5 P: 40.0%	
Comments																
3	PMTCT-1	PMTCT-1 Percentage of pregnant women who know their HIV status	Country: Burkina Faso; Coverage: Geographic National, 100% of national program target	N: 773,050 D: 1,106,113 P: 69.9%		HIV test status	Yes		Non cumulative - special	N: 293,202.9 D: 814,452.5 P: 36.0%	N: 293,202.9 D: 814,452.5 P: 36.0%	N: 301,999.2 D: 838,886,666667 P: 36.0%	N: 301,999.2 D: 838,886,666667 P: 36.0%	N: 311,059.2 D: 864,053,333333 P: 36.0%	N: 311,059.2 D: 864,053,333333 P: 36.0%	
Comments																
4	PMTCT-2.1	PMTCT-2.1 Percentage of HIV-positive women who received ART during pregnancy and/or labour and delivery	Country: Burkina Faso; Coverage: Geographic National, 100% of national program target	N: 4,529 D: 6,058 P: 74.8%			Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative - special	N: 1,855.65 D: 4,170 P: 44.5%	N: 1,855.65 D: 4,170 P: 44.5%	N: 1,826.29 D: 4,036 P: 45.2%	N: 1,826.29 D: 4,036 P: 45.2%	N: 1,796.76 D: 3,906 P: 46.0%	N: 1,796.76 D: 3,906 P: 46.0%	
Comments																
5	PMTCT-3.1	PMTCT-3.1 Percentage of HIV-exposed infants receiving a virological test for HIV within 2 months of birth	Country: Burkina Faso; Coverage: Geographic National, 100% of national program target	N: 959 D: 2,383 P: 40.2%		HIV test status	Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative	N: 1,042.5 D: 2,085 P: 50.0%	N: 1,042.5 D: 2,085 P: 50.0%	N: 1,109.9 D: 2,018 P: 55.0%	N: 1,109.9 D: 2,018 P: 55.0%	N: 1,171.8 D: 1,953 P: 60.0%	N: 1,171.8 D: 1,953 P: 60.0%	
Comments																
6																

The Global Fund

Comments

Numerator: Number of HIV-exposed infants born during the reporting period who received an HIV virological test within two months of birth. Denominator: Estimated number of HIV-positive women who gave birth during the reporting period. Baseline data is for 2019, as compiled. For the period 2021-2023, the program will focus on monitoring the mother-child couple with the support of community actors (community-based STME) and AGBOs. In addition, the reporting system will be updated, the POC and GeneXpert platforms will be used to increase the availability of early HIV testing. The numerator is the number of HIV-exposed children born during the reporting period who received an HIV virological test within two months of birth. The data will come from the ENDOS-BF system, which contains all reported and validated data. The denominator is the estimated number of HIV-positive pregnant women who gave birth during the reporting period. This corresponds to the number of seropositive pregnant women in need of PMTCT (Spectrum estimate) with a coefficient of 1.2 (Statistical Yearbook 2018). The needs will be covered by the government (40% in 2021; 45% in 2022 and 50% in 2023), the World Bank and PEPFAR (10% annually). The share of the Fund is 50%, 45% and 40% respectively for the years 2021, 2022 and 2023.

treatment, care and support

6	All people living with HIV	TCS-1. ^m Percentage of people on ART among all people living with HIV at the end of the reporting period	Country: Burkina Faso; Coverage: Geographic National, 100% of national program target	N: 68,730 D: 98,759 P: 69.6%	Age,Gender,Gender Age,Duration of treatment,Target / Risk population group	Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative – other	N: 74,722 D: 97,933 P: 76.3%	N: 76,972 D: 97,933 P: 78.6%	N: 79,115 D: 97,746 P: 80.9%	N: 81,258 D: 97,746 P: 83.1%	N: 82,917 D: 97,627 P: 84.9%	N: 84,577 D: 97,627 P: 86.6%
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Comments

Numerator: Number of people on ART at the end of the reporting period Denominator: Estimated number of people living with HIV. The baseline data is the 2019 SSTI-P-IST data. For the period 2021-2023, it is planned to strengthen the effectiveness of screening, linkage with management services and control of retention in cohorts in order to reduce attrition and increase the number of PLHA on ARVs. Based on the results of HIV testing and the 95% annual referral rate, the number of new inclusions per year will be 8928 in 2021, 8135 in 2022 and 7381 in 2023. Taking into account the annual attrition rate of 5% per year, the increase in the number of active adults among PLHA on ARVs will be 5,242 in 2021, 4,287 in 2022 and 3,318 in 2023, respectively. The numerator will be filled in from the quarterly report of the SHSCP or ENDOS and represents the number of HIV-positive people on ARVs, all ages and lines combined at the time of the reporting period. The denominator will be the estimate of the number of PHAs provided by Spectrum. PEPFAR will contribute 10% in 2021. For the rest, the State will cover 40%, 45% and 50% respectively in 2021 to 2023 and the Global Fund will cover 50% in 2021, 55% in 2022 and 50% in 2023.

7	Children living with HIV (under 15)	TCS-1. ^m Percentage of children (under 15) on ART among all children living with HIV at the end of the reporting period	Country: Burkina Faso; Coverage: Geographic National, 100% of national program target	N: 2,824 D: 6,808 P: 41.5%	Gender,Duration of treatment	Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative – other	N: 3,308 D: 5,679 P: 58.2%	N: 3,379 D: 5,679 P: 59.5%	N: 3,494 D: 5,277 P: 66.2%	N: 3,610 D: 5,277 P: 68.4%	N: 3,719 D: 4,891 P: 76.0%	N: 3,829 D: 4,891 P: 78.3%
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Comments

Numerator: Number of children (under 15 years of age) on ART at the end of the reporting period Denominator: Estimated number of children (under 15 years of age) living with HIV. For the period 2021-2023, it is planned to increase the effectiveness of screening in the different entry points for children, to link them to care services, to control retention in cohorts in order to control attrition and to increase the number of PLHA on ARVs. Based on the results of HIV testing and the 95% referral rate for 2021, 2022 and 2023, the annual change in the active file is estimated at 450 in 2021, 400 in 2022 and 400 in 2023. The number of PHAs under 15 years of age on ARVs will then be 3,379 in 2021, 3,610 in 2022 and 3,829 in 2023. The numerator will be filled in from the quarterly reports of the PLWHA-IST and represents all PLWHA under 15 years of age on ARVs, all lines combined, during the reporting period. The denominator will be based on the Spectrum estimate of the estimated number of PLWHA under 15 years of age (Spectrum projection). PEPFAR will contribute 10% for patients in 2021. For the remainder, the government will cover 40%, 45% and 50% respectively for 2021 to 2023 and the Global Fund will cover 50% in 2021, 55% in 2022 and 50% in 2023.

8	Non-specified population groups	HTS-4 Percentage of HIV-positive results among the total HIV tests performed during the reporting period	Country: Burkina Faso; Coverage: Geographic National, 100% of national program target	N: 14,839 D: 834,819 P: 1.8%	Age,Gender,Comm unity testing,Facility testing	Yes		Non cumulative	N: 4,801 D: 434,422 P: 1.1%	N: 4,801 D: 434,422 P: 1.1%	N: 4,408.5 D: 434,422 P: 1.0%	N: 4,408.5 D: 434,422 P: 1.0%	N: 3,987 D: 434,422 P: 0.9%	N: 3,987 D: 434,422 P: 0.9%
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Comments

Numerator: the number of new positive HIV tests performed during the reporting period (positivity) Denominator: Number of HIV tests performed (volume of tests) The source data are taken from the reports of all the facilities (health facilities, PMTCT, PEPFAR, PC, PAMAC) that conducted screening in 2019. The data for the health facility entry points are probably underestimated because of the shift movement of the population. For the period 2021-2023, the targeted and differentiated screening strategies will be strengthened in order to improve performance, detect as many positive cases as possible and enrol them in treatment cohorts using the "Drop-Screen-Treat" strategy. To do this, strategies for strengthening the link with treatment sites will be reinforced to avoid waste. The data will be taken from the period reports of all the facilities carrying out HIV testing. The numerator and denominator cover the CSN AIDS targets to be tested (MSM, sex workers and their clients, prisoners, UDs, handicapped persons, young people and adolescents, truck drivers, gold miners, pregnant women and their partners, children born of HIV-positive mothers, testing in health care facilities, tuberculosis patients). In 2021, the screening targets will be covered by Global Fund, government, and PEPFAR resources. The Global Fund's contributions represent 60%, 55% and 50% for the years 2021, 2022, and 2023, respectively.

9/HIV	TB/HIV-6. ^m Percentage of HIV-positive new and relapse TB patients on ART during TB treatment	Country: Burkina Faso; Coverage: Geographic National, 100% of national program target	N: 455 D: 457 P: 99.6%	Age,Gender	Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative	N: 263,34 D: 266 P: 99.0%	N: 263,34 D: 266 P: 99.0%	N: 283,14 D: 286 P: 99.0%	N: 283,14 D: 286 P: 99.0%	N: 303,93 D: 307 P: 99.0%	N: 303,93 D: 307 P: 99.0%
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Comments



The Global Fund

10	<p>Numerator: Number of tuberculosis patients (new cases and relapses) and HIV-positive patients, recorded during the reporting period, who are receiving antiretroviral therapy (who have started or are continuing previously initiated antiretroviral therapy). Denominator: Total number of tuberculosis patients (new cases and relapses) and HIV-positive patients registered during the reporting period. In accordance with national guidelines, it is recommended that TB/HIV co-infected patients be routinely put on ARVs between D14 and D30 after initiation of TB treatment. As part of the application for the allocation, it is envisaged to provide ARV treatment for at least 95% of co-infected patients from 2021 to 2023. Performance will be measured on a % basis, with actual numerators and denominators as documented during the reporting period. In addition, the Global Fund has financed the recovery of tuberculosis data following the generalized strikes by health sector workers in 2019. This adjustment resulted in corrected data that were entered into the TB-Endorsement. The reference value of this indicator is therefore 99.6% (source: Endos-TB) instead of 82% (Source: WHO Report 2020). Indeed, WHO published the unadjusted data transmitted by the country before the adjustment.</p> <table border="1"> <tr> <td>TB/HIV-7 Percentage of PLHIV on ART who initiated TB preventive therapy among those eligible during the reporting period</td><td>Country: Burkina Faso;</td><td>Coverage: Geographic National, 100% of national program target</td><td>N: D: P:</td><td>Age,Gender,TPT regimen</td><td>Yes</td><td>Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso</td><td>Non cumulative</td><td>N: D: P:</td><td>N: D: P:</td><td>N: D: P:</td><td>N: D: P:</td><td>N: D: P:</td><td>N: D: P:</td></tr> </table>														TB/HIV-7 Percentage of PLHIV on ART who initiated TB preventive therapy among those eligible during the reporting period	Country: Burkina Faso;	Coverage: Geographic National, 100% of national program target	N: D: P:	Age,Gender,TPT regimen	Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative	N: D: P:	N: D: P:				
TB/HIV-7 Percentage of PLHIV on ART who initiated TB preventive therapy among those eligible during the reporting period	Country: Burkina Faso;	Coverage: Geographic National, 100% of national program target	N: D: P:	Age,Gender,TPT regimen	Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative	N: D: P:																				
11																												
Comments																												
12																												
<p>Numerator: Number of PLWHA on ART who initiated preventive treatment for tuberculosis (PTB) during the reporting period. Denominator: Number of PLHIV on ART who are eligible for TPT during the (same) reporting period. There is no baseline data for this indicator. The activity is part of national policy, but there is still reluctance at the provider level to prescribe FFT. A study of barriers will be done in 2021 and targets and activities will be proposed to decolonize the activity.</p> <table border="1"> <tr> <td>TB/HIV-5 Percentage of registered new and relapse TB patients with documented HIV status</td><td>Country: Burkina Faso;</td><td>Coverage: Geographic National, 100% of national program target</td><td>N: 5,294 D: 5,016 P: 69.5%</td><td>Age,Gender,HIV test status</td><td>Yes</td><td>Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso</td><td>Non cumulative</td><td>N: 3,088.96 D: 3,152 P: 98.0%</td><td>N: 3,088.96 D: 3,152 P: 98.0%</td><td>N: 3,326.12 D: 3,394 P: 98.0%</td><td>N: 3,326.12 D: 3,394 P: 98.0%</td><td>N: 3,566.22 D: 3,639 P: 98.0%</td><td>N: 3,566.22 D: 3,639 P: 98.0%</td></tr> </table>														TB/HIV-5 Percentage of registered new and relapse TB patients with documented HIV status	Country: Burkina Faso;	Coverage: Geographic National, 100% of national program target	N: 5,294 D: 5,016 P: 69.5%	Age,Gender,HIV test status	Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative	N: 3,088.96 D: 3,152 P: 98.0%	N: 3,088.96 D: 3,152 P: 98.0%	N: 3,326.12 D: 3,394 P: 98.0%	N: 3,326.12 D: 3,394 P: 98.0%	N: 3,566.22 D: 3,639 P: 98.0%	N: 3,566.22 D: 3,639 P: 98.0%	
TB/HIV-5 Percentage of registered new and relapse TB patients with documented HIV status	Country: Burkina Faso;	Coverage: Geographic National, 100% of national program target	N: 5,294 D: 5,016 P: 69.5%	Age,Gender,HIV test status	Yes	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	Non cumulative	N: 3,088.96 D: 3,152 P: 98.0%	N: 3,088.96 D: 3,152 P: 98.0%	N: 3,326.12 D: 3,394 P: 98.0%	N: 3,326.12 D: 3,394 P: 98.0%	N: 3,566.22 D: 3,639 P: 98.0%	N: 3,566.22 D: 3,639 P: 98.0%															
9																												
Comments																												

orkplan Tracking Measures

Population	Intervention	Key Activity	Milestones	Criteria for Completion	Country

Comments

Country	Burkina Faso																			
Grant Name	BFA-H-SPCNLS																			
Implementation Period	01-Jan-2021 - 31-Dec-2023																			
Principal Recipient	Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso																			
By Module	01/01/2021 - 31/03/2021	01/04/2021 - 30/06/2021	01/07/2021 - 30/09/2021	01/10/2021 - 31/12/2021	Total Y1	01/01/2022 - 31/03/2022	01/04/2022 - 30/06/2022	01/07/2022 - 30/09/2022	01/10/2022 - 31/12/2022	Total Y2	01/01/2023 - 31/03/2023	01/04/2023 - 30/06/2023	01/07/2023 - 30/09/2023	01/10/2023 - 31/12/2023	Total Y3	Grand Total	% of Grand Total			
Differentiated HIV Testing Services	€1,053,833	€44,178	€249,260	€188,794	€1,546,065	€2,586,373	€23,909	€23,909	€23,909	€2,634,190	€3,189,653	€23,909	€23,909	€3,237,470	€7,417,725	21.0 %				
PMTCT	€251,513	€213,737	€209,768	€670,981	€1,345,999	€210,940	€210,940	€210,940	€210,940	€843,762	€218,222	€212,124	€212,124	€212,124	€854,596	€3,044,357	8.6 %			
Prevention	€134,947				€134,947	€532,939				€532,939	€568,251				€568,251	€1,236,137	3.5 %			
Program management	€239,851	€269,091	€207,351	€254,193	€970,485	€187,407	€226,977	€153,389	€192,800	€760,573	€187,937	€211,275	€128,639	€223,480	€751,330	€2,482,388	7.0 %			
RSSH: Health management information systems and M&E	€111,472	€269,098	€136,782	€6,144	€523,495	€55,736	€278,426	€184,159	€6,144	€524,465	€569,494	€68,096	€6,144	€643,733	€1,691,693	4.8 %				
TB/HIV			€21,634	€65,309	€86,943			€21,634		€21,634			€21,634		€21,634	€130,211	0.4 %			
Treatment, care and support	€6,081,629	€59,889	€318,777	€529,612	€6,989,906	€4,778,541	€227,498	€79,265	€52,975	€5,138,278	€6,939,954	€70,740	€84,994	€58,704	€7,154,392	€19,282,577	54.6 %			
Grand Total	€7,873,244	€855,993	€1,143,572	€1,725,032	€11,597,840	€8,351,936	€967,749	€649,388	€486,768	€10,455,841	€11,104,017	€1,087,541	€515,487	€524,361	€13,231,406	€35,285,088	100.0 %			
By Cost Grouping	01/01/2021 - 31/03/2021	01/04/2021 - 30/06/2021	01/07/2021 - 30/09/2021	01/10/2021 - 31/12/2021	Total Y1	01/01/2022 - 31/03/2022	01/04/2022 - 30/06/2022	01/07/2022 - 30/09/2022	01/10/2022 - 31/12/2022	Total Y2	01/01/2023 - 31/03/2023	01/04/2023 - 30/06/2023	01/07/2023 - 30/09/2023	01/10/2023 - 31/12/2023	Total Y3	Grand Total	% of Grand Total			
Human Resources (HR)	€195,564	€174,100	€196,567	€196,567	€762,797	€161,218	€139,753	€139,753	€139,753	€580,479	€162,616	€141,151	€141,151	€159,301	€604,219	€1,947,495	5.5 %			
Travel related costs (TRC)	€256,786	€543,612	€802,069	€1,434,067	€3,036,534	€394,876	€407,733	€341,415	€246,883	€1,390,907	€204,328	€533,620	€254,929	€259,199	€1,252,077	€5,679,518	16.1 %			
External Professional services (EPS)		€26,367			€26,367		€207,918			€207,918		€285,109			€285,109	€519,394	1.5 %			
Health Products - Pharmaceutical Products (HPPP)	€4,149,840				€4,149,840	€2,534,291				€2,534,291	€4,126,381				€4,126,381	€10,810,512	30.6 %			
Health Products - Non-Pharmaceuticals (HPNP)	€1,415,358				€1,415,358	€3,259,339				€3,259,339	€3,999,319				€3,999,319	€8,674,016	24.6 %			
Health Products - Equipment (HPE)		€22,944			€22,944		€112,214			€112,214		€21,800			€21,800	€156,957	0.4 %			
Procurement and Supply-Chain Management costs (PSM)	€1,736,661				€1,736,661	€1,888,850				€1,888,850	€2,485,867				€2,485,867	€6,111,379	17.3 %			
Infrastructure (INF)								€5,298		€5,298						€5,298	0.0 %			
Non-health equipment (NHP)	€25,451	€25,451	€47,160	€25,451	€123,514	€25,451	€25,451	€47,160	€25,451	€123,514	€25,451	€25,451	€25,451	€25,451	€101,805	€348,834	1.0 %			
Communication Material and Publications (CMP)	€28,965	€9,284	€16,007		€54,256			€27,851		€27,851	€6,098				€6,098	€88,206	0.2 %			
Indirect and Overhead Costs	€41,183	€30,800	€41,183	€28,361	€141,528	€41,592	€28,361	€41,592	€28,361	€139,906	€41,908	€28,361	€41,908	€28,361	€140,538	€421,972	1.2 %			
Payment for Results	€23,435	€23,435	€40,586	€40,586	€128,041	€46,319	€46,319	€46,319	€46,319	€185,275	€52,048	€52,048	€52,048	€52,048	€208,193	€521,508	1.5 %			
GrandTotal	€7,873,244	€855,993	€1,143,572	€1,725,032	€11,597,840	€8,351,936	€967,749	€649,388	€486,768	€10,455,841	€11,104,017	€1,087,541	€515,487	€524,361	€13,231,406	€35,285,088	100.0 %			

By Recipients	2021				2022				2023				Total Y3	Grand Total	% of Grand Total		
	Q1		Q2		Q3		Q4		Q1		Q2						
	01/01/2021 - 31/03/2021	01/04/2021 - 30/06/2021	01/07/2021 - 30/09/2021	01/10/2021 - 31/12/2021	Total Y1	01/01/2022 - 31/03/2022	01/04/2022 - 30/06/2022	01/07/2022 - 30/09/2022	01/10/2022 - 31/12/2022	Total Y2	01/01/2023 - 31/03/2023	01/04/2023 - 30/06/2023	01/07/2023 - 30/09/2023	01/10/2023 - 31/12/2023			
PR	€6,892,810	€294,192	€349,026	€209,012	€7,745,040	€7,167,090	€472,159	€335,498	€156,682	€8,131,429	€9,862,296	€675,226	€200,336	€193,013	€10,930,871	€26,807,340	76.0 %
Secrétariat Permanent du Conseil National de Lutte contre le Sida et les IST du Burkina Faso	€6,892,810	€294,192	€349,026	€209,012	€7,745,040	€7,167,090	€472,159	€335,498	€156,682	€8,131,429	€9,862,296	€675,226	€200,336	€193,013	€10,930,871	€26,807,340	76.0 %
SR	€980,434	€561,800	€794,546	€1,516,020	€3,852,800	€1,184,846	€495,590	€313,889	€330,086	€2,324,412	€1,241,721	€412,315	€315,152	€331,348	€2,300,535	€8,477,747	24.0 %
CAMEG	€694,175				€694,175	€738,505				€738,505	€984,666				€984,666	€2,417,346	6.9 %
DRS	€9,394	€9,394	€45,857	€9,394	€74,038	€9,394	€9,394	€45,857	€9,394	€74,038	€9,394	€9,394	€45,857	€9,394	€74,038	€222,115	0.6 %
DS			€225,403	€1,112,055	€1,337,459	€190,548				€190,548						€1,528,007	4.3 %
DSF	€7,133	€46,433	€7,133	€19,997	€80,697	€7,133	€19,997	€7,133	€19,997	€54,261	€7,133	€19,997	€7,133	€19,997	€54,261	€189,220	0.5 %
PSSLS-IST	€21,844	€307,052	€294,764	€153,186	€776,847	€16,628	€243,562	€38,262	€78,057	€376,508	€16,628	€159,024	€38,262	€78,057	€291,970	€1,445,325	4.1 %
REGIPIV/BF	€247,887	€198,921	€221,388	€221,388	€889,584	€222,638	€222,638	€222,638	€890,551	€223,900	€223,900	€223,900	€895,600	€223,900	€895,600	€2,675,734	7.6 %
Grand Total	€7,873,244	€855,993	€1,143,572	€1,725,032	€11,597,840	€8,351,936	€967,749	€649,388	€486,768	€10,455,841	€11,104,017	€1,087,541	€515,487	€524,361	€13,231,406	€35,285,088	100.0 %