

# ANNUAL REPORT

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## 2023

Multi-Country Western Pacific  
Integrated HIV/TB Programme



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Project Summary Information	
Project Title	Integrated HIV /TB Programme
Project ID	00123467
Project Duration	2021- 2023
Location	Cook Islands, Federated State of Micronesia, Kiribati, Nauru, Niue, Palau, Republic of Marshall Islands, Samoa, Tonga, Tuvalu and Vanuatu
CPD/UNSDCF/RPD/ SP Outputs	<p><b>United Nations Pacific Sustainable Development Cooperation Framework (UNSDCF) 2023 – 2027</b></p> <p><b>Outcome 2: STRATEGIC PRIORITY: PEOPLE</b></p> <p>By 2027, more people, particularly those at risk of being left behind, benefit from more equitable access to resilient, and gender-responsive infrastructure, quality basic services, food security/ nutrition and social protection systems.</p> <p><b>Multi-country programme document for the Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Nauru, Niue, Palau, Republic of the Marshall Islands, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu, and Vanuatu (MCPD): 2023-2027</b></p> <p><b>OUTPUT 3.1:</b> Governance institutions are accountable and have improved capacities for service delivery.</p> <p><b>Indicator 3.1.3</b> Percentage of people living with HIV who are receiving antiretroviral therapy.</p> <p><b>Sustainable Development Goals</b></p> <p><b>GOAL 3: Ensure healthy lives and promote well-being for all at all ages.</b></p> <p><b>Target 3.3:</b> End the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases</p> <p><b>GOAL 5: Achieve gender equality and empower all women and girls.</b></p> <p><b>TARGET 5.6:</b> Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences</p>
Gender marker	<p><b>Gen 2: Gender equality as a significant objective</b></p> <p>The programme actively promotes universal health coverage and is reflected in its interventions and targeted approach of reaching key and vulnerable populations.</p>
Digitalization marker	Output partially enabled through digital technology.
Implementing Partner	Australasian Society For HIV, Viral Hepatitis and Sexual Health Medicine, Chuuk Women Council, Cook Islands Ministry of Health, Federated States of Micronesia Department of Health and Social Affairs, Kiribati Ministry of Health and Medical Services, Marshal Islands Ministry of Health and Human Resources, Nauru Department of Health, Niue Ministry of Health, Palau Bureau of Health, Samoa Fa’afafine Association, Samoa Family Health Association, Samoa Ministry of Health, Tonga Family Health Association, Tonga Letis Association, Tonga Ministry of Health, Tuvalu Ministry of Health, Vanuatu Family Health Association, Vanuatu Ministry of Health, Wan Smolbag Theatre and World Health Organization Suva Fiji.
Total budget (2021-2023)	<p>HIVTB: USD10,286,474</p> <p>C19RM: USD3,313,711</p> <p>Total- USD13,600,185</p>
Donors (funding sources)	Global Fund (000327)

## Annual Report 2023: Multi-Country Western Pacific Integrated HIV/TB Programme

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<b>Budget (2023 annual budget)</b>	HIVTB- USD4,516,042 C19RM- USD1,796,057 Total- USD6,312,100
<b>Expenditure recorded for the reporting period (2023)</b>	HIVTB & C19RM: USD 6,707,823.97 (inclusive of commitment)
<b>Expenditure recorded for the total project (2021-2023)</b>	HIVTB & C19RM: USD 13,151,270.75 (inclusive of commitment)
<b>Project Manager name:</b>	Gayane Tovmasyan

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## 1. Executive Summary

The Multi-Country Western Pacific Integrated HIV/TB Programme, supported by the Global Fund, continued to face challenges throughout 2023, primarily as a result of the post- COVID-19 pandemic. The region is also one of the most prone to natural disasters. Vanuatu, Fiji, Tonga and Kiribati are all among the top 15 countries for disaster risk globally. Frequent cyclones, earthquakes and other natural disasters weaken and drain government resources. Yet despite these challenges, through close collaboration with partners and sub-recipients – including civil society organizations and ministries of health – and the adoption of innovative approaches, the programme succeeded in achieving 70 percent of its overall HIV and TB key performance indicator targets across the 11 countries (Cook Islands, Federated State of Micronesia, Kiribati, Nauru, Niue, Palau, Republic of Marshall Islands, Samoa, Tonga, Tuvalu and Vanuatu) till December 2023. The expected achievement by the end of the year was 101%.

UNDP and sub-recipients worked closely together to ensure that programme targets were achieved, through innovative methods to reach beneficiaries such as conducting outreach in a one-to-one format rather than in larger groups. Despite the challenges, the programme made significant achievements in 2023, including procuring Fuji Xair digital X-ray machines with CAD software for six countries, which will increase TB case detection during mobile clinics and mass screening. It also procured 10-colour GeneXpert machines for Kiribati and the Republic of the Marshall Islands, allowing in-country drug-resistant TB diagnosis and mitigating the impact of COVID-19 on extended drug susceptibility testing in regular programming.

In addition, the programme supported development of national strategic plans on HIV and STIs for Nauru, Palau, Samoa and Vanuatu. The plans are helping the countries to accelerate progress towards ensuring adequate protection, care and support for vulnerable groups, to reflect the strategic direction affirmed in the 2016 UN Political Declaration on HIV/AIDS, and to achieve the Sustainable Development Goals.

To ensure that TB services are not compromised, UNDP in partnership with the World Health Organization signed a UN-to-UN Agreement specifically to improve TB services and care. Multiple trainings, webinars and ongoing mentoring for health care workers are being organized as part of the agreement.

# 2. Progress Review

## Key results achieved

### Programmatic Update

2023 was the last year of implementing the GC6 (2021- 2023). It has been quite a challenging period for the programme implementation, as this was the final year for grant implementation which included realigning National priorities following the C-19 Pandemic in 2021 and 2022 that majorly affected the countries included under the 2021-2023 grant implementation cycle. As part of addressing the implementation challenges caused by the C-19 Pandemic, the PR in close collaboration and partnership with the SRs, revisited the priorities, developed revised workplans and repurposed the savings from 2022 to ensure that the HIV/TB programs are back on track in all the grant supported countries and annual targets are met.

For the reporting period, the PR achieved 101% of overall HIV and TB 2023 key performance indicator targets. The PR considers this a major success in fighting against HIV and TB after the impact of C19. The collaboration between CSOs and Ministries of Health was renewed as some CSOs suspended their functions in 2021 – 2022 due to the C-19 pandemic. The lockdowns in 2021 – 2022 limited the screening activities, active case finding and contact tracing for TB. Significant improvement was seen in 2023, noting the case for FSM which in 2022 notified 49 active TB cases compared to 212 cases found in 2023. The PR considers this a great success considering the COVID-19-related challenges and restrictions causing delays in previous years.

In 2023, with the countries opening their borders, in-country missions became possible, and the PR restarted active monitoring of the program in line with regular programmatic monitoring through Zoom, teams, or telecommunications to ensure sufficient support was provided to the SRs. Despite the significant efforts by the PR and the SRs, the primary programmatic target that has yet to be achieved by the programme is MDR-TB case notification. Four RR-TB and/or MDR-TB cases were notified (two in RMI and one each in Kiribati and Vanuatu), which is 55% of the annual 2023 target. Even with the increase in case notification rate and mass screening activities conducted in RMI, FSM and Kiribati there was still low number of RR/ MDR-TB case notified. During the mass screening in Chuuk FSM, no RR/ MDR-TB case was detected. The regional average RR/ MDR-TB has been 4 cases per year. The RR/ MDR-TB trend from 2016- 2022 is 3, 3, 8, 5, 7, 2, and 3, respectively. This trend aligns with the Western Pacific Regional and End TB Strategy. The program also ensured scaling up of the TB service by (i) training healthcare workers on finding the missing cases of TB, (ii) conducting activities to increase awareness among general population on TB, (iii) reaching the hard-to-reach population through active case finding, (iv) supporting the mass screening for FSM and (v) ensuring that TB service is not compromised, the PR, in partnership with WHO in Suva, Fiji, signed an UN-to-UN Agreement specifically to improve TB services providing technical assistance to countries and provision of care and support to people with TB. Multiple trainings, webinars, and ongoing mentoring for HCW are part of the agreement.

Despite all the challenges, the 2023 significant achievements are:

- Mass Screening in FSM Chuuk State using the Fuji Xair digital X-ray machines with CAD software which significantly assisted in the screening process as this made it convenient to reach individuals such as PLWD and elderly individuals who could not visit the screening centers. This screening improved the case notification to 212 active TB cases diagnosed in 2023 from this mass screening. Due to this success, the other states in FSM expressed an interest to conduct such activities, however due to the scarce funds a large-scale screening is not affordable for the FSM government at the moment.
- Procurement of 10-colour GeneXpert machines for 11 countries. This machine will allow in-country DR-TB diagnosis by using MTB/XDR tests available, which was difficult to conduct having only 6-colour GeneXpert machines. These DR- TB/ XDR tests will mitigate the logistics of sending samples to PATHLAB in Australia and NZ.
- Regional Financial workshop conducted in Fiji included the participation of representatives from the Ministries of Health and CSOs. A comprehensive knowledge was transferred to implementing partners on UNDP and the GF financial reporting guidelines and processes.
- The regional training for Fuji Xair digital X-ray machines with CAD software included participants from countries who were trained on the usage and maintenance of the new machine.
- The Kiribati MHMS supported under C19 RM grant recently launched an innovative new initiative that uses a health-based geographic information system (GIS) to improve syndromic surveillance of diseases and ensure greater pandemic preparedness in Kiribati.

- Prep Feasibility Assessment which was conducted in Kiribati, RMI, Samoa, Tonga, and Vanuatu to understand the limited uptake of PrEP in Pacific Island Countries and to support planning for the PrEP implementation, a situational and feasibility assessment was conducted.
- A new template for reporting the consumption of pharmaceuticals, testing and prevention commodities was developed during the procurement workshop and was provided to the participating countries. This training was rolled out online to all the SRs.
- In 2023, three PLHIV-positive mothers were expected to deliver. The PR was able to provide ART for the newborn children on a timely basis in consultation with the regional HIV mentor to ensure the babies are free of HIV.
- A regional Civil Society Organization was recruited to support CSOs in enhancing their capacity through a review process where they shared best practices and collaborated to address challenges in providing prevention and testing services to key populations. The Regional CSO hosted a regional workshop for people living with HIV (PLHIV) with delegates from FSM, Kiribati, Palau, RMI, Samoa, Tonga, Vanuatu, and Fiji (FJN+). The training enhanced the confidence, peer leadership skills, and mentoring abilities of PLHIV across the Pacific region, while also fostering strong interpersonal bonds among participants from different countries.

### Finance Update

In the reporting period, the 2023 budget was \$6,312,100 while the delivery was \$5,310,532 (excl. of commitment) which is 84% of the budget and the finance team has successfully contributed to the outcome of the HIV/TB and C19 grant. This accomplishment underscores the team's diligent efforts in financial management and allocation across the program, which supported 19 sub-recipients in 11 countries along with bilateral partners such as the WHO-TB.

The finance team's ensured timely disbursement of advances and acquittals to all sub-recipients in alignment with the approved work plans for 2023. In overall the sub-recipients achieved the efficient utilization of allocated funds in comparison to budgeted expenditure.

Additionally, the team facilitated the audit requirements carried out by external auditors. The audits were for three SRs; RMI, Vanuatu, and Kiribati in 2023. These audits were completed successfully, and any findings identified were promptly addressed, demonstrating the team's commitment to transparency and accountability in financial management and closing the audit findings. There were number of spot checks there were carried out as well for SRs and it was successfully completed and ensuring the spot check findings were addressed working together with the SRs.

In the last quarter of the grant, the team was actively involved in the closure of the GC6 grant, ensuring that all expenditures were accurately recorded before grant closure. Simultaneously, preparations for the GC7 grant were underway, showcasing the team's proficiency in multitasking and strategic planning for future grant cycles.

### Procurement Update

In the year 2023, significant procurements were undertaken to enhance healthcare services across Pacific Island Countries (PICs). The major acquisitions were eight Fuji Xair digital X-ray machines equipped with CAD software. Valued at USD 746,700, these machines were allocated to FSM, Kiribati, Palau, RMI, Samoa, Tonga, Tuvalu, and Vanuatu. This initiative marked a pivotal step towards achieving the goal of leaving no one behind by extending essential screening services beyond centralized centers, thereby reaching remote communities.

In addition, the UNDP facilitated the procurement of 17 units of 10-colour GeneXpert machines for 11 PICs. This procurement, totaling USD 499,430, further strengthened the diagnostic capabilities in the region, enabling more efficient and accurate detection of various diseases.

Furthermore, the PR procurement unit played a crucial role in implementing Geographic Information System (GIS) systems in Kiribati. This undertaking involved hiring individual consultants, supplying IT equipment worth USD 61,657.99, and acquiring a GIS website license for USD 103,250. These investments aimed to enhance data management and analysis capabilities, particularly in the context of public health initiatives.

Moreover, Tonga's Ministry of Health received a cold storage facility valued at USD 59,419.23, courtesy of PR procurement efforts. This infrastructure upgrade was designed to support the storage requirements of essential health commodities, ensuring their integrity and availability when needed.



## 2. Progress Review

Further support was provided to Tonga and Vanuatu by supplying the vehicle to empower their HIV and TB Programme with mobility. Tonga received a TOYOTA LC78 4.2L DIESEL M/T 11STR TROOPER for USD22,000, whereas Vanuatu received L200 4WD Double Cabin GL 2.5L Turbo Diesel for USD30383.00.

Continuing its commitment to healthcare provision, UNDP sustained the supply of condoms and antiretroviral therapies (ARTs), thereby contributing to increased mass screening efforts across the PICs. Additionally, UNDP maintained a Regional Tuberculosis (TB) Stockpile of First-Line Drugs (FLD) through a regional pool procurement mechanism. This initiative catered to seven PICs with low TB caseloads, including Cook Islands, Niue, Nauru, Palau, Samoa, Tonga, and Tuvalu. Moreover, a buffer was established to support four PICs with high TB caseloads, ensuring the timely provision of quality assured FLD to national TB programs. This strategic approach helped prevent shortages or stockouts of essential medications, thereby facilitating uninterrupted treatment for TB patients throughout the region.

## Output Progress

PR achieved 101% of overall HIV and TB 2023 key performance indicator targets. The PR considers this a major success in fighting against HIV and TB considering the COVID-19-related challenges and restrictions causing delays in previous years. The only coverage indicator which performed poorly was RR-TB and/or MDR-TB notified. The regional average RR/MDR-TB has been 5 cases per year which is in alignment with Western Pacific Regional trend and End TB Strategy. In consideration of the RR-TB and/or MDR-TB cases notified trend for the past 8 years, the indicator has been changed to GC7 key performance indicator. The table below shows the details of regional MCWP program performance against 2023 key performance indicator targets. *For more details, refer to the Annex.*

### Regional MCWP programme performance

Indicator Type	Indicator Code	Indicator Name	2023 Target			2023 Results			Achievement Rate
			Numerator	Denominator	Rate	Numerator	Denominator	Rate	
Impact	HIV I-9a(M)	Percentage of men who have sex with men who are living with HIV			0%	1	1545	0%	120%
Impact	HIV I-9b(M)	Percentage of transgender people who are living with HIV			0%	0	2326	0%	0%
Impact	HIV I-10(M)	Percentage of sex workers who are living with HIV			0%	0	1590	0%	0%
Impact	TB I-3(M)	TB mortality rate per 100,000 population			9	59	988226	6	66%
Impact	TB I-4(M)	RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB			1%	6	831	1%	72%
Outcome	HIV O-12	Percentage of people living with HIV and on ART who are virologically suppressed			92%	41	64	64%	70%
Outcome	HIV O-4a(M)	Percentage of men reporting the use of a condom the last time they had anal sex with a male partner			40%	1141	1689	68%	120%

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Outcome	HIV O-4.1b(M)	Percentage of transgender people reporting the use of a condom the last time they had sex with a partner			79%	2115	2516	84%	106%
Outcome	HIV O-5(M)	Percentage of sex workers reporting the use of a condom with their most recent client			54%	1006	1589	63%	117%
Outcome	TB O-4(M)	Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated			100%	1	2	50%	50%
Outcome	TB O-5(M)	TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)			93%	661	1007	66%	71%
Coverage	KP-1a(M)	Percentage of men who have sex with men reached with HIV prevention programs - defined package of services	1,612	9,284	17%	1724	9,284	19%	107%
Coverage	HTS-3a(M)	Percentage of men who have sex with men that have received an HIV test during the reporting period and know their results	1,274	9,284	14%	1545	9,284	17%	120%
Coverage	KP-1b(M)	Percentage of transgender people reached with HIV prevention programs - defined package of services	2,221	18,569	12%	2,541	18,569	14%	114%
Coverage	HTS-3b(M)	Percentage of transgender people that have received an HIV test during the reporting period and know their results	2,066	18,569	11%	2,326	18,569	13%	113%
Coverage	KP-1c(M)	Percentage of sex workers reached with HIV prevention programs - defined package of services	1,568	3,904	40%	1590	3,904	41%	101%

## 2. Progress Review

Coverage	HTS-3c(M)	Percentage of sex workers that have received an HIV test during the reporting period and know their results	1,490	3,904	38%	1590	3,904	41%	107%
Coverage	TCS-1(M)	Percentage of people living with HIV currently receiving antiretroviral therapy	81	90	90%	64	68	94%	105%
Coverage	TCP-1(M)	Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	948			1156			120%
Coverage	TCP-2(M)	Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases			93%	562	661	85%	91%
Coverage	MDR TB-3(M)	Number of RR-TB and/or MDR-TB that began second line treatment	11			6			55%
Coverage	MDR TB-2(M)	Number of TB cases with RR-TB and/or MDR-TB notified	11			6			55%
Coverage	TCP-6b	Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)	145			460			120%

Using the Global Fund performance rating methodology to assess the performance of MCWP against the 2023 targets, the performance indicators rating is **B** despite of 101% achievement. The performance rating is downgrading from A to B due to:

\* Individual indicators should have a **maximum score of 120%**, when calculating the mean.

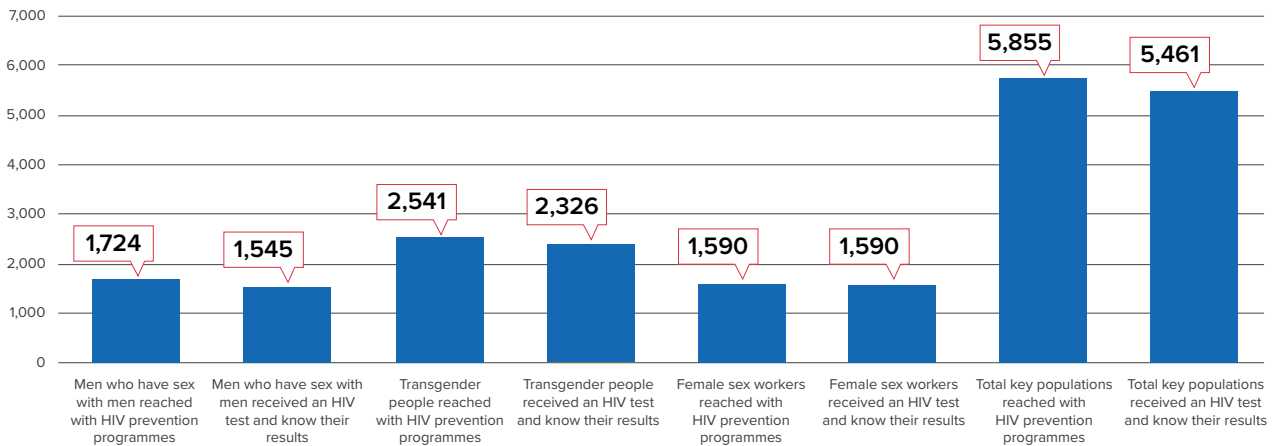
\* If an indicator is rated **less than 60%** then the final Quantitative Rating is downgraded by **one rating level** unless indicator rating is C,D or E.

## Coverage Indicator Analysis

### HIV

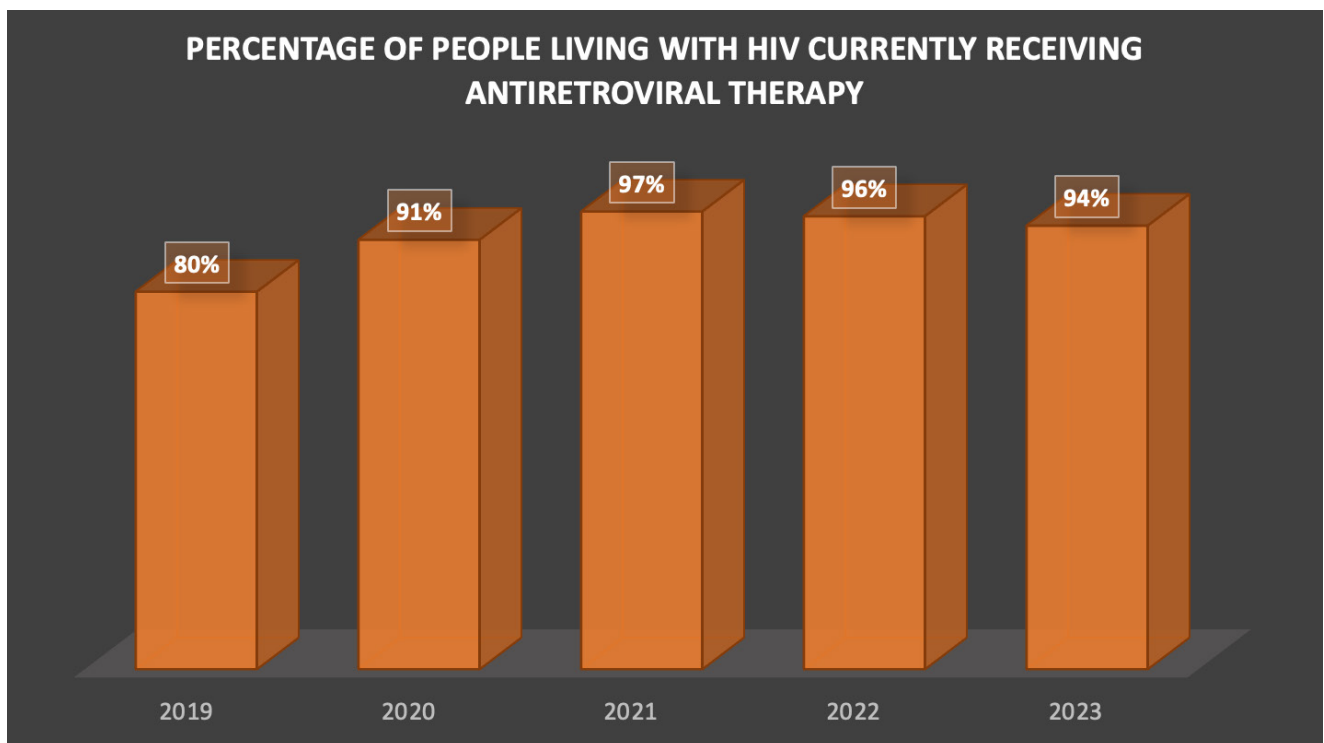
#### Key and vulnerable populations reached with HIV/STI prevention and testing programmes

Despite post COVID-19 pandemic and other on- going challenges, the SRs expanded their services for screening and testing at non-clinical settings and reaching **5,401** key populations (transgender women (2,221), men who have sex with men (1,612), and female sex workers (1,568)) with HIV/STI prevention while **4,830** key populations (transgender women (2,066), men who have sex with men (1,274), and female sex workers (1,490)) were reached with testing services.



#### People Living with HIV

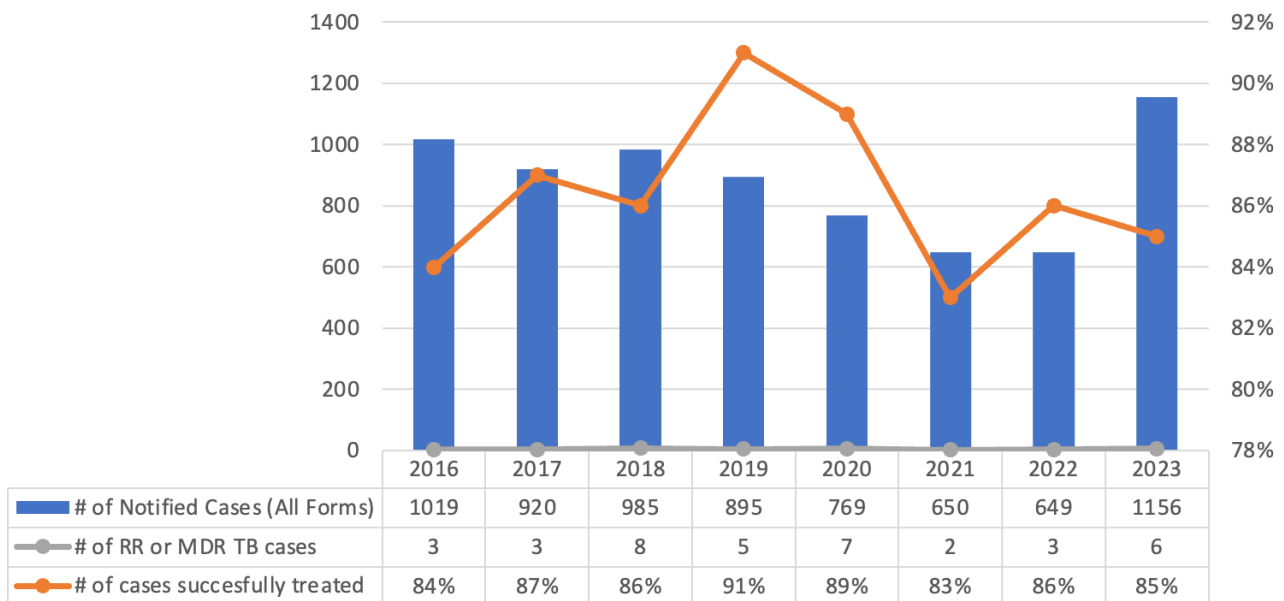
The percentage of people living with HIV (PLHIV) currently receiving antiretroviral therapy (ART) has been above 90% for the past 4 years. The high number of PLHIV on ART can be attributed to the clinical HIV/ STI consultant who provide on- going support and mentoring to the in- country clinicians and HCW. To ensure this service continues, a similar arrangement is made in GC7.



## 2. Progress Review

### TB

**Trend Analysis- TB Coverage Indicator**



The regional TB case notification increased in 2023 by 79% compared to 2022 and this is attributed to:

- Mass screening conducted in Chuuk state in FSM, PEARL study in Kiribati and outer island mass screening in RMI.
- Covid-19 impacts and overstretched health systems from 2020- 2022 may have resulted in increased TB case notification in 2023.
- Active case finding and hot-spot screening was conducted in multiple countries which did not take place from 2020- 2022 due to restricted travel measures during covid-19. Hard to reach areas, outer Islands and other populations were left out which were reached in 2023.

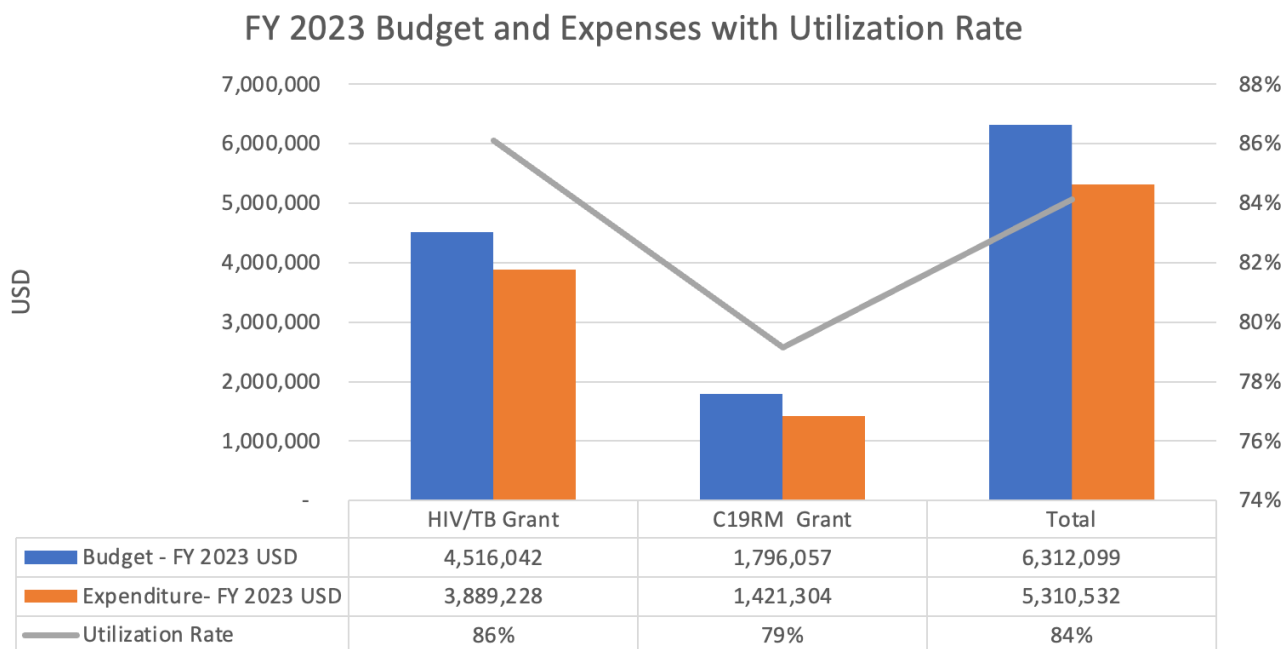
The 2023 TB Treatment success rate target was not achieved which can largely be attributed to COVID 19 impacts and overstretched health systems in 2022. The monitoring and access to TB care was largely hindered due to a diversion of health priorities away from TB programme to the COVID 19 response. TB implementation approaches were suppressed to accommodate lockdown, travel and mass gathering restrictions. Continuing supply for on treatment TB patients was a challenge due to complete lockdown and restriction of movement. Also supply chain and logistics disruption further added to the issue for starting treatment.

The regional average RR/ MDR-TB has been 5 cases per year. This trend is in alignment with Western Pacific Regional trend and End TB Strategy. In consideration of the RR-TB and/or MDR-TB cases notified trend for the past 8 years, the indicator has been changed in GC7 KPI.

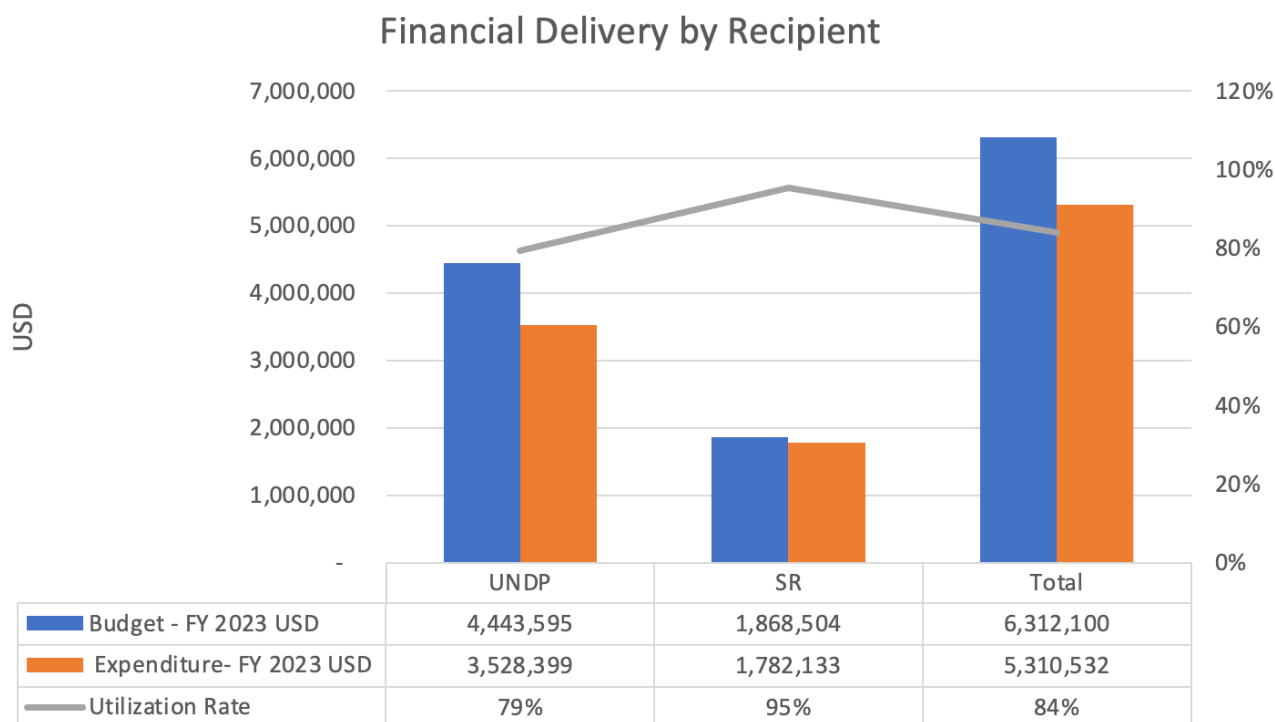
The program is also ensuring to scaling up of the TB service in 2024 by: training of HCWs on finding the missing cases of TB, activities to increase awareness within the population on TB and reaching the hard-to-reach population through ACF. In 2024, mass screening is planned for Pohnpei state in FSM and the continuation of PEARL study in Kiribati which may increase the TB case notification. To ensure that TB service is not compromised, PR in partnership with WHO is working towards signing an UN-to-UN Agreement for GC7 specifically targeted towards improvement of TB services and care. Multiple trainings, webinars and on- going mentoring for HCW will be part of the agreement.

### Financial Delivery for FY2023

In 2023, of the USD6,312,099 budget allocation 72% was for HIV/ TB and 28% was for C19. Below graph presents overall budget for the HIV/TB and C19RM grant accordingly with the expenses and utilization rate for the year.



For 2023, 70% of the budget allocated to PR while 30% was for SRs. Below graph illustrates delivery by recipient, UNDP, and SR delivery.



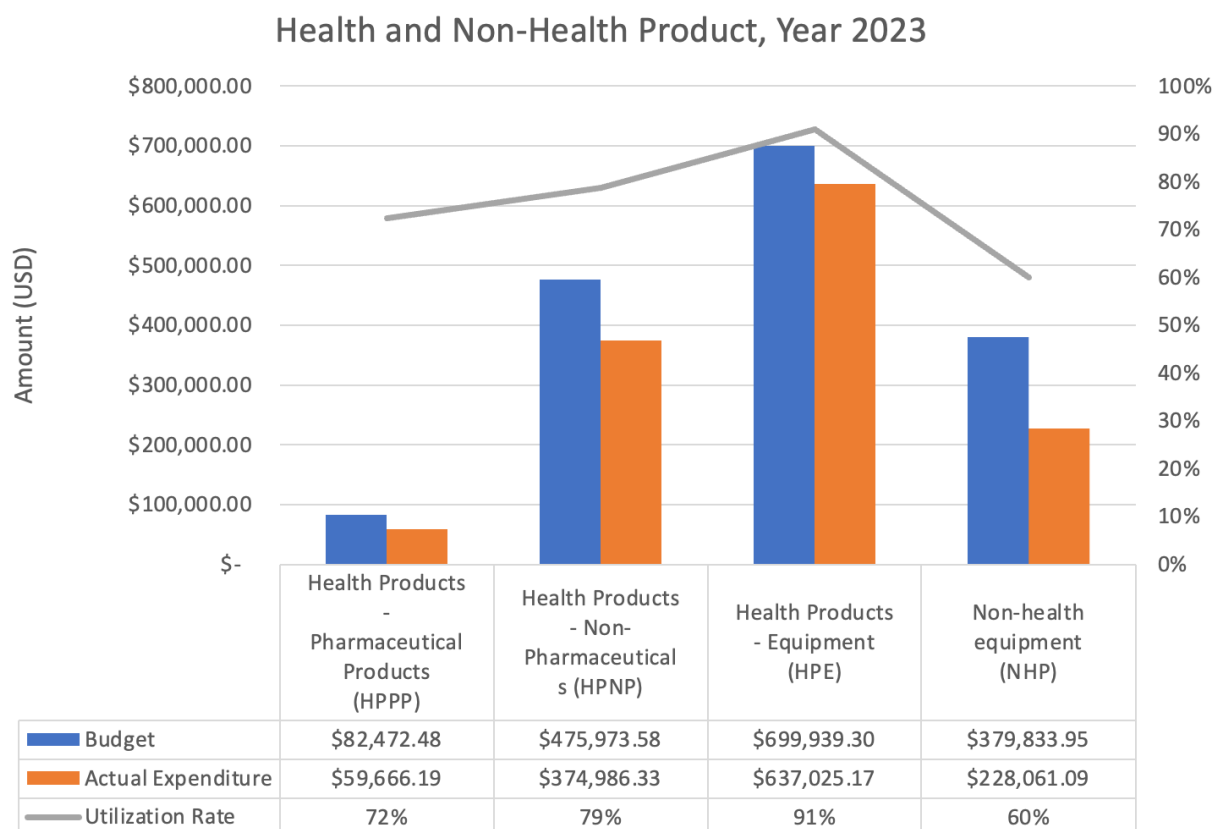
In 2023, the highest budget allocation was for Covid 19 followed by program management and TB care and prevention. Below table presents budget breakdown by output/ Global Fund modules for the HIV/TB and C19RM grant with the expenses and utilization rate for the year.

## 2. Progress Review

Output/ Global Fund Module	Budget - FY 2023 USD	Expenditure- FY 2023 USD	Utilization Rate
COVID-19	1,673,391	1,302,129	78%
Differentiated HIV Testing Services	228,016	199,033	87%
MDR-TB	5,873	32,443	552%
PMTCT	292.5	293	100%
Prevention	561,418	545,215	97%
Program management	1,402,353	1,235,826	88%
Reducing human rights-related barriers to HIV/TB services	7,728	2,905	38%
RSSH: Community systems strengthening	137,980	137,500	100%
RSSH: Health management information systems and M&E	98,323	88,085	90%
RSSH: Health products management systems	156,660	199	0%
RSSH: Health sector governance and planning	4,032	2,748	68%
RSSH: Human resources for health, including community health workers	266,496	291,306	109%
RSSH: Integrated service delivery and quality improvement	19,610	21,084	108%
RSSH: Laboratory systems	519.86	486	93%
TB care and prevention	1,177,505	989,102	84%
TB/HIV	198,079	189,294	96%
Treatment, care and support	373,822	272,885	73%
<b>Total</b>	<b>6,312,100</b>	<b>5,310,532</b>	<b>84%</b>

### Procurement and Supply Chain Delivery for FY2023

In 2023, budget allocations for healthcare grants, including those for HIV, TB, and COVID-19, reflected a strategic investment in essential resources. Below graph presents overall PSM budget and expenditure for the HIV/TB and C19RM grant for year 2023.



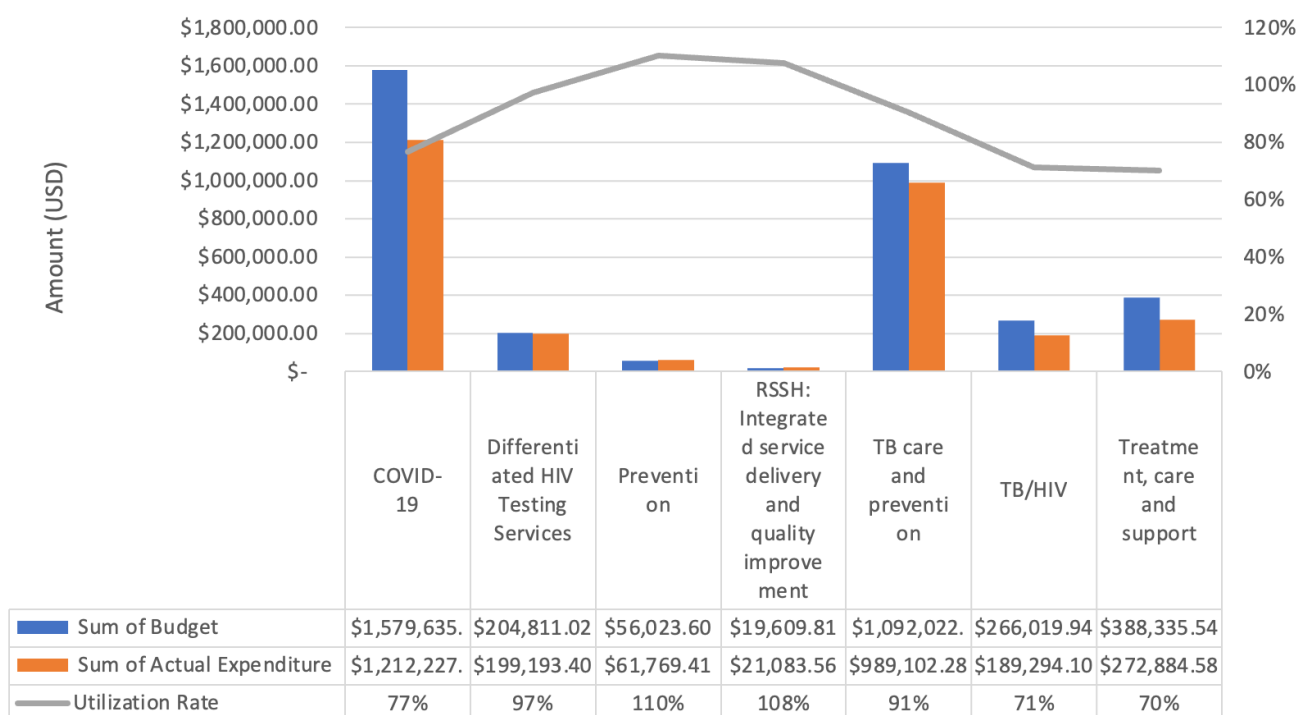
### Expenditure by Cost Grouping

For Health Products - Pharmaceutical Products (HPPP), the expenditure accounted for approximately 72% of the budget, indicating a significant utilization of allocated funds. Conversely, Health Products - Non-Pharmaceuticals (HPNP) saw a slightly higher utilization rate, with expenditure representing around 79% of the budget, demonstrating a focused approach to resource allocation. In the realm of Health Products - Equipment (HPE), the expenditure percentage stood at approximately 91%, suggesting a thorough utilization of allocated funds to procure critical medical equipment. Finally, non-health equipment (NHP) showcased the widest variance, with expenditure representing approximately 60% of the budget, indicating potential areas for optimization or reallocation. Despite these variances, the total expenditure accounted for around 79% of the allocated budget, showcasing a concerted effort to efficiently utilize resources in the pursuit of healthcare provisioning. For details refer to the table above.

### PSM Deliverables by Output/ Global Fund Module

Below table presents budget breakdown by module for the HIV/TB and C19RM grant with the expenses and utilization rate for the year. The COVID-19 grant efficiently utilized 77% of its allocated PSM budget, reflecting a substantial investment in pandemic response strategies. Similarly, the Differentiated HIV Testing Services grant demonstrated a commendable utilization rate of 97%, emphasizing the prioritization of HIV testing initiatives. The Prevention and Integrated Service Delivery grants surpassed their budgets, with utilization rates of 110% and 108% respectively, showcasing effective resource management in targeted interventions. However, the TB/HIV and Treatment, Care, and Support grants displayed lower utilization rates of 71% and 70%, indicating potential areas for optimization in resource allocation. Despite variances across grants, the collective expenditure amounted to 82% of the total allocated budget, underlining diligent efforts in navigating the complex landscape of healthcare funding for combating HIV, TB, and COVID-19.

PSM Expenditure by Output/Global Fund Module, Year 2023

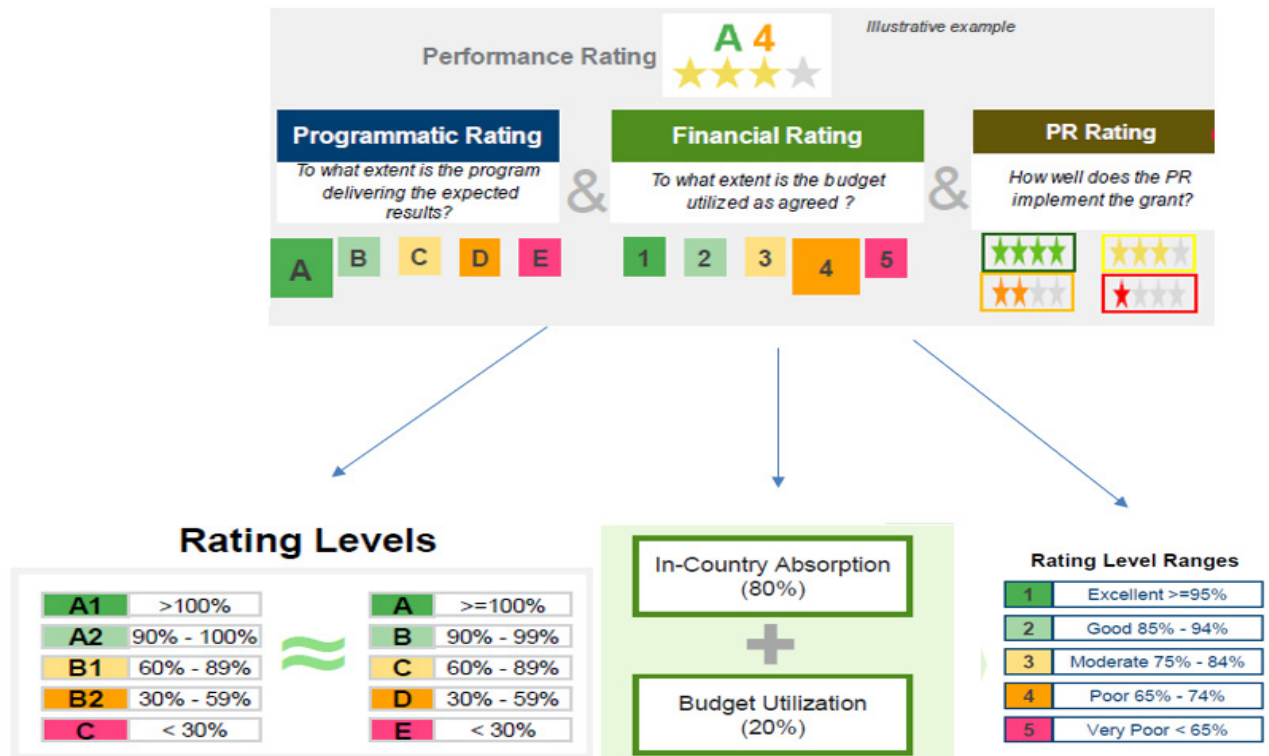


### Sub- Recipients Performance Rating

The performance of the sub- recipients is based on the Global Fund (GF) performance rating methodology that covers/combines programmatic and financial. It involves two separate ratings (programmatic, financial) which are aggregated into one overall performance rating. A similar rating system is used by GF to assess PRs performance.



## 2. Progress Review



### Programmatic Performance Achievement for Sub- Recipients

In 2023, seven (39%) of the SRs programmatic performance achievement against the coverage indicator was >100%, three (17%) between 90%- 99%, five (28%) between 60%- 89%, two (11%) between 30%- 59% and no SRs achievement rate was below 30%. Niue's performance was not rated since not KPI targets was assigned.

Country	Performance
<b>MoH</b>	
COOK ISLANDS	98%
FSM	58%
KIRIBATI	101%
RMI	73%
NIUE	*KPI targets assigned
NAURU	105%
PALAU	60%
SAMOA	87%
TONGA	97%
TUVALU	97%
VANUATU	82%
<b>CSO</b>	
CWC	35%
SFHA	102%
SFA	109%
TLA	112%
TFHA	113%
VFHA	110%
WSB	69%

## Financial Delivery for FY 2023 by Recipients

For the year 2023, the highest budget allocation was for Vanuatu Ministry of Health (22%), followed by Kiribati Ministry of Health (10%) and Marshal Islands Ministry of Health (10%). 11 (61%) SRs had financial utilization rate above 95%, while three (17%) SRs was between 85%- 94%, one (8%) SRs between 75%- 84%, one (7%) SRs between 65%- 74% and one (7%) SRs <65%. Below table presents budget breakdown by recipient for the HIV/ TB and C19RM grant with the expenses and utilization rate for the year.

By Recipients	Budget - FY 2023 USD	Expenditure- FY 2023 USD	Utilization Rate
Cook Islands Ministry of Health	52,143	54,296	104%
Federated States of Micronesia Department of Health	140,649	122,683	87%
Kiribati Ministry of Health	187,236	191,576	102%
Marshal Islands Ministry of Health	194,435	179,618	92%
Nauru Ministry of Health	29,039	10,839	37%
Niue Ministry of Health	35,704	37,671	106%
Palau Ministry of Health	97,725	75,190	77%
Samoa Ministry of Health	153,691	141,488	92%
Tonga Ministry of Health	94,170	104,089	111%
Tuvalu Ministry of Health	69,054	57,713	84%
Vanuatu Ministry of Health	402,290	396,970	99%
Wan Smolbag Theatre	95,885	106,903	111%
Vanuatu Family Health Association	70,996	77,605	109%
Chuuk Women Council-FSM	50,747	31,751	63%
Tonga Family Health Association	20,759	20,770	100%
Tonga Letis Association	27,576	27,085	98%
Samoa Family Health Association	48,511	48,394	100%
Samoa Fa'afafine Association	97,896	97,491	100%
Total	1,868,504	1,782,133	95%

The range of combined programmatic and finance achievement is 106% to 69%. Below table presents the overall (programmatic and financial) rating of the sub- recipients.

Country	Combined Programmatic and Finance Performance	Programmatic Performance Rating	Finance Performance Rating	Overall Performance Rating
<b>MoH</b>				
COOK ISLANDS	101%	B	1	B1
FSM	73%	D	3	D3
KIRIBATI	102%	A	2	A2
RMI	83%	C	1	C1
NIUE		*KPI targets assigned	1	
NAURU	106%	A	5	A5
PALAU	69%	C	4	C4
SAMOA	90%	C	2	C2
TONGA	104%	B	4	B4

## 2. Progress Review

TUVALU	91%	B	2	B2
VANUATU	91%	C	4	C4
<b>CSO</b>				
CWC	73%	D	5	D5
SFHA	106%	A	1	A1
SFA	86%	A	1	A1
TLA	106%	A	1	A1
TFHA	106%	A	1	A1
VFHA	105%	A	1	A1
WSB	85%	C	1	C1

### Data Management

**Facility Level:** Not all countries have M&E focal points and staff responsible for project data management are the same staff responsible for project management and implementation. Programme data is mainly stored in excel and word files. Data quality checks and reporting of KPI data to UNDP is done at the facility level and varies from country to country. UNDP conducts data verification and provides feedback to all SRs reports on a quarterly basis and the UNDP verified data is considered final for donor reporting.

**National Level:** At the national level, TB and HIV data management responsibilities rest with the respective National HIV/STI Programmes as well as the National TB Programmes and this is performed by the National HIV and TB Coordinators. There are PICs such as Samoa, FSM, Niue that have their own M&E specialist within the health ministry that support data management and reporting of programme results to UNDP. Verification of national programme results is carried out by the UNDP Programme/Country Focal Points and final SR verification, regional synthesis and reporting of programme results is coordinated by the UNDP M&E Analyst.

**Regional Level:** All MWP SRs report to UNDP on a quarterly basis. UNDP country focal points conduct the first level verification of all SR reports, and the final verification of all SR data is carried out by the UNDP M&E focal point. The M&E focal point is responsible for data analysis, aggregation into regional summaries and the production of programme results communication materials that are disseminated to programme partners and stakeholders.

### Data Quality Assurance Mechanisms and Related Supportive Supervision

In this regard, data at all levels of implementation, and at all data management points (source, process, storage and end points), is reviewed for accuracy and completeness. PR supports this process through the following initiatives.

### Reporting Accuracy

- Promotes reporting accuracy through diversifying verification roles and having two levels of verification at the PR level. The first level of verification is conducted by the Programme Country Focal Points then second and final verification by the M&E Focal Point.
- All reported results are verified against approved MWP supporting documents and compared with other verifiable data sources, e.g. number of PLHIV in country is crosschecked against global AIDS monitoring reports. Bacteriologically confirmed cases is verified against the TB register and results confirmed through verification of the lab register. For TB, all reports on MDR-TB is crosschecked against reports from the WHO Regional MDR Helpdesk Support. In addition, referencing past PUDR reports, and other available statistics help to identify skewed trends that may be a result of erroneous reporting.
- To reduce data entry errors into reporting templates, it restricts input through the utilization of excel functions such as data validation, conditional formatting and sheet protection.
- Site visits by UNDP Programme Management Unit staff.

### 3. Communications, visibility, and partnerships

#### **Innovative Geographic Information System Aims to Strengthen Syndromic Disease Surveillance and Pandemic Preparedness in Kiribati**

The Ministry of Health and Medical Services (MHMS) and UNDP recently launched an innovative new initiative that uses a health-based geographic information system (GIS) to improve syndromic surveillance of diseases and ensure greater pandemic preparedness in Kiribati.



Increasingly used in health administration, GIS is a powerful tool that enables the visualization and analysis of geographic data. This allows insights into relationships among factors such as population density, health care access and disease prevalence. Such information will help facilitate targeted resource allocation, allowing health care officials to identify patterns and correlations in disease spread. GIS also optimizes existing health care infrastructure by analyzing service locations.

Along with the GIS system, information and communications technology hardware such as laptops and tablets were also handed over to the MHMS and will be deployed to clinics and medical centers throughout the country.

UNDP and the MHMS are confident that this new initiative, which combines digital technology and geospatial insights, will not only enhance disease surveillance capabilities, but also will contribute to improving the broader public health landscape in Kiribati.

Read more: <https://www.undp.org/pacific/stories/innovative-geographic-information-system-aims-strengthen-syndromic-disease-surveillance-and-pandemic-preparedness-kiribati>

#### **New health technologies bring hope to the fight against TB across the Pacific**

The introduction of the mini portable x-ray machine, equipped with advanced artificial intelligence (AI)-powered software. These systems are particularly well suited for the challenging operating environments that are so common in the Pacific, where TB incidence is high, populations are disbursed across distant island communities with limited access to health care and there is a lack of health care professionals with advanced training.

The United Nations Development Programme (UNDP), through the Multi-Country Western Pacific Integrated HIV/TB Programme, has procured mini portable x-ray systems for the Ministries of Health in the Federated States of Micronesia, Kiribati, Republic of Marshall Islands, Samoa, Tuvalu and Vanuatu, with additional machines on the way for Palau and Tonga.

### 3. Communications, visibility, and partnerships



Systematic screening, also known as active case-finding, is a TB control strategy that typically targets at-risk populations outside of health facilities. It plays an important role in reducing TB transmission within the community by identifying individuals with TB and shortening the duration of their infectiousness.

A recent four-day workshop in Nadi, Fiji provided hands-on training on the new x-ray systems for health workers from the eight countries. Chest x-rays are an essential and cost-effective screening tool for detecting TB disease in a person's lungs. However, the devices are difficult to transport and require a full health care team to operate, including a technician who takes the radiographic images and a radiologist (typically a doctor) who interprets the images.

The new mini portable versions, on the other hand, can be operated in outreach screening campaigns by a trained technician and clinician. This is an especially important improvement given the shortages of radiologists and doctors across the region.

Read more: <https://www.undp.org/pacific/stories/new-health-technologies-bring-hope-fight-against-tb-across-pacific>

#### **Regaining lost ground against TB**

Kiribati and the Republic of the Marshall Islands are among the [top countries](#) in the Western Pacific region for their TB burden. Limited in-country laboratory and testing capacity means timely diagnosis and treatment is challenging, especially for remote communities.

As part of a Global Fund-financed [Regional Grant](#), UNDP supports testing for [drug-resistant TB](#) in the two countries. Through the Pacific TB Laboratory Initiative, TB samples are sent to reference laboratories in countries such as Australia for testing with advanced diagnostic tools.

However, long shipping distances create delays for patients, who need the correct and timely diagnosis to make treatment plans. Delays have been exacerbated by logistical challenges and higher costs due to COVID-19.

Recently, UNDP supported the health ministries of Kiribati and the Marshall Islands to procure 10-color GeneXpert machines to, with deliveries scheduled for an additional nine countries in the region.



As a portable system, GeneXpert provides rapid testing at both point-of-care and hospital settings. This will allow more patients to access quicker diagnosis and start appropriate treatment sooner, while limiting further transmission. This latest technology also detects resistance to six commonly prescribed TB medicines within 90 minutes. Lastly, these machines will also boost diagnostic capacity for other pathogens such as SARS-CoV-2, which causes COVID-19.

Read more: <https://www.undp.org/blog/regaining-lost-ground-against-tb>

## Results for 2022 on HIV, TB and Malaria

The programmes, which are supported by the Global Fund and led by the United Nations Development Programme (UNDP) in partnership with civil society organizations and ministries of health, continue to strengthen the national health systems of the 11 programme countries, and to improve the delivery of vital HIV, TB and malaria prevention, care and support services.

Read more: <https://www.undp.org/pacific/publications/multi-country-western-pacific-integrated-hiv/tb-programme-2022-results-glance>

## Multi-Country Western Pacific Integrated HIV/TB Programme: Key Performance Indicators 2022

The Multi-Country Western Pacific Integrated HIV/TB Programme, supported by the Global Fund, continued to face challenges throughout 2022, primarily as a result of the ongoing COVID-19 pandemic. Pacific island countries endured lockdowns, travel restrictions and closed borders, hindering the ability of the principal recipient, UNDP, and sub-recipients to optimally implement the programme.

Read more: <https://www.undp.org/pacific/publications/multi-country-western-pacific-integrated-hiv/tb-programme-key-performance-indicators-2022>



### 3. Communications, visibility, and partnerships

#### Partnerships

The FSM Department of Health and Social Affairs, UNDP, WHO and CDC collaboratively provided support to the mass screening conducted in Chuuk State. From May – September 2023, a total of 12,194 individuals were screened of which there were 176 confirmed TB cases while 2,170 were diagnosed with LTBI and commenced treatment.



#### Regional Finance Workshop

As part of its mandate, UNDP-led Multi-Country Western Pacific Integrated HIV/TB Programme works to strengthen the financial management systems of 11 Pacific Island countries to increase accountability and encourage the attainment of national strategic goals aligned with health initiatives.

This week at the Novotel hotel in Fiji, we are organizing a four-day regional finance workshop, with over 30 participants from across the 11 countries. The workshop will support finance focal points to accelerate the implementation of national health policies and programmes.

It is part of UNDP's continuous capacity-building assistance in the region, including providing guidance and technical assistance to government institutions and civil society organizations in order to develop financial management capacities for the effective execution of large-scale health programmes, such as those funded by the Global Fund to Fight AIDS, Tuberculosis, and Malaria.



This post was published on the UNDP- Global Fund Western Pacific HIV, TB and Malaria Programmes Facebook page.

**Facebook: Multi Country Western Pacific Programme. UNDP FIJI.**

The project has a Facebook account in which the project stories/ posts are regularly updated. The page has 2,215 followers.

← Page Insights ⓘ

Last 28 days

**Page Overview**  
Followers: 2,215

- Post Reach: 344
- Post Engagement: 45
- New Page Likes: 2
- New Page Followers: 2

See Details

**Top Performer**

UNDP has been entrusted by the Pacific Islands Regional Multi-Countr...  
15 February at 16:23

Impressions	Reach	Engagement
37	35	15

See Details

← Audience ⓘ

**Location**      Cities    Countries

Fiji	657
Vanuatu	384
Samoa	185
Australia	164
Tonga	137
Nauru	99
New Zealand	95
Solomon Islands	67
United States	49
Tuvalu	26

← Audience ⓘ

**Age and Gender**

- Men: 38.00%
- Women: 62.00%

URL: <https://www.facebook.com/UNDPGlobalFundPacific>



## 4. Project risks and mitigation measures

The Pacific region remains one of the leaders prone to disaster risk. Vanuatu, Fiji, Tonga, and Kiribati are in the top 15 countries for disaster risk globally. Frequent cyclones, earthquakes, and other natural disasters weaken and drain government resources.

In 2023, the Pacific Island nation of Vanuatu experienced a series of intense tropical cyclones, Cyclone Judy, Cyclone Kevin and Cyclone Lola. The back-to-back cyclones, Judy and Kevin posed significant challenges for Vanuatu, and recovery efforts were immense, along with these cyclones an earthquake off the coast of Vanuatu with a Tsunami warning but fortunately, nothing eventuated. In 2023 there were droughts in Kiribati and Tuvalu which impacted the activities as well.

Frequent staff turnovers in the Ministries of Health and national HIV/STIs/TB programme continue to be one of the leading factors contributing to the slow progress of the program implementation. Staff changes and lack of leadership frequently negate tremendous efforts by the PR to raise SRs' capacity. Currently, FSM DOHSA to ensure staff retention has conducted a market analysis and proposed to increase staff salary up to 45% which is currently in each state cabinet and waiting for endorsement. RMI, similarly, to improve staff retention is doing a job analysis through their PSC afterwards there will be changes to Job Descriptions and salaries which will retain staff.

With the C-19 pandemic and restrictions being lifted in the 11 countries and a return to normality the National Level priorities were reassessed, this included not just a renewed focus on HIV/TB but all other health conditions, so in 2023 there are multiple priorities for the Ministries to consider and as a result, some activities were National cancelled as the timelines were not feasible as senior management and stakeholders were involved with other activities.

The finance team's commitment to capacity building and support was evident through various initiatives, including continuous mentorship, regular Zoom meetings, and the organization of a regional finance workshop held in Fiji. Additionally, in-country missions were conducted, leveraging the opening of country borders in 2023 to provide on-the-ground support and guidance. These efforts collectively contributed to enhancing the quality of financial reporting within the program. However, the timeliness of financial reports yet requires improvement. The delayed reporting also resulted in delayed disbursement of funds by the PR affecting planned activities implementation. Delays in financial reporting from the SRs were mainly due to internal staff turnover, and challenges of in-country finance systems whereby acquittals documentations were not provided on time. Some SRs faced activity implementation black-out periods; whereby significant (2-3 weeks) time was taken to transfer funds from the Treasury (Ministry of Finance) to the Ministries of Health. The PR ensured 100% supporting financial document verification. While significant progress was made, the team acknowledges the need for improvement in the timeliness of financial reporting. Recognizing this, efforts will continue to streamline processes and enhance efficiency to meet reporting deadlines effectively.

Also, currently Assets valued over USD 5,000.00 need to be insured by the SR but currently this is not being done due to insurance agents in-country not providing coverage for the items or the SR does not have funds allocated in the annual budget for this and thus needs government approval and endorsement to allocate funds for insurance of assets.

## 5. Lessons Learned

### Stakeholder/target group engagement

- The programme's target beneficiaries are well reached however not reaching the other vulnerable populations. Hence, the programme will not limit its work with KPs, but also supports reaching out to other vulnerable groups such as prisoners, young adults, ANC mothers, sexual and gender-based violence survivors.
- Key populations are considered a hard-to-reach group due to human rights issues related to stigma and discrimination of sexual minorities at the community and health facility level as well as policy legal barriers that hinders access. In this context, CBOs representing the LGBTI community in several countries needs not only provide HIV/STI services to these groups, but also implement community mobilization and advocacy in defense of their sexual and human rights.
- For TB, most PICs lack disaggregated epidemiological data on TB among risk groups, such as prisoners, PLHIV, household contacts, migrants, diabetics, and seafarers. The lack of disaggregated data limits accuracy of risk group selection and choice of adapted TB diagnosis approach. In 2024, data disaggregation needs to be emphasized.

### South-South and triangular cooperation

A regional SRs workshop planned in 2025 will bring together government and CSO SRs and implementing partners from all disease components, allowing for the exchange of experiences and lessons learned across the diseases, including programme management, M&E, finance and PSM.

### Digital Solutions

Digital innovations is required to ensure improvement of; 1) high-quality, evidence-based and people-centred services; 2) optimising systems, sectors and partnerships; 3) strengthening the availability and use of data for decision making and action; 4) engaging empowered communities and civil society; and fostering innovations – such as HIV-ST, PrEP, ultraportable CAD-enhanced digital X-ray; Xpert XDR assay; TrueNat and use of digital tools support screening and TPT – for impact.

### Health equity, gender equality and human rights

**Gender equality** needs to be supported by a balanced approach that recognizes the specific service needs of girls and boys, women and men, the LGBTQI+ community (including trans women and men). This includes attention for sexual and gender-based violence, with a focus on support for GBV survivors, as well as working with (adolescent) men and boys to address their role in diminishing GBV.

It is important to protect the **human rights** in terms of supporting the right to health and health care for all, as well as the human rights of marginalized populations, including MSM, transgender people, sex workers, PLWD, people with disabilities: this includes support for reducing stigma and discrimination; legislative and policy reform; sensitization of communities and healthcare and other service providers and (community, political and religious) leaders. It is important to support initiatives to **address human rights-based barriers** to service access, including reducing stigma and discrimination through: 1) capacity building and online courses for health-care workers; 2) multi-media advocacy campaigns for the rights of key populations; 3) legislative reform campaigns; 4) reducing HIV-related gender discrimination, harmful gender norms and violence against women and girls through sensitization of policy makers and counselling support for GBV survivors; community-awareness campaigns and other activities; 5) support for a regional network to strengthen access for people with disabilities; as well as: 6) activities to address specific human rights violations.

# 6. Way Forward

The project has a very wide geographic spread and reduced resources compared to previous allocations. It is crucial therefore that strategies are adopted to ensure maximum results. There are four key strategies that the project will focus on:

1. The project will undertake regional procurement of health products and equipment using the UNDP–Global Fund procurement architecture designed to facilitate timely supply of quality assured pharmaceutical and health products to meet the needs of Global Fund-financed grants implemented by UNDP, at affordable cost through a value for money service proposition. The project will undertake forecasting and quantification of health products on an annual basis using an adjusted consumption method; develop a timeline-based procurement plan; action procurement, receipt and manage supplies at its regional warehouse; and undertake biannual distribution to countries with quarterly stock reporting to monitor stock at the country level. The project will undertake the role of managing the supply and ensure sound forecasting strategies are used to minimize and avoid health products and medicines expiration and wastage. The project will also undertake PSM capacity development activities both at country and regional level to upskill pharmacy, lab, procurement and programme staff knowledge in forecasting, quantification, inventory management, distribution and procurement of health products.
2. The project will make use of modern technology and support the use of telemedicine activities whereby mentorship and coaching for the health staff will be provided through online media, saving on cost of travel. Online courses and platforms will be used for sharing knowledge among countries.
3. In communicating results, UNDP will use digital technologies such as social media, websites, electronic newsletters, email dissemination, annual reports and other electronic tools, saving on production and paper while ensuring wide reach.
4. The project will utilize standardized programmatic and financial reporting and recording forms. This will ensure comparability of data and an equal approach to all implementers.

## 7. Annex: Programmatic performance achievement

### Country Breakdown

Indicator Name	2023 Target		2023 Results		Achievement Rate
	Numerator	Rate	Numerator	Denominator	
<b>COOK ISLANDS</b>					
Percentage of men who have sex with men who are living with HIV		0%	0	145	0%
Percentage of transgender people who are living with HIV		0%	0	152	0%
Percentage of sex workers who are living with HIV		0%	0	16	0%
TB mortality rate per 100,000 population		0	0	17003	0
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	0	1	0%
Percentage of people living with HIV and on ART who are virologically suppressed		92%	0	0	
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		77%	62	129	48% 62%
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		79%	50	149	34% 42%
Percentage of sex workers reporting the use of a condom with their most recent client		73%	7	16	44% 60%
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	0	
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	0	2	0% 0%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	61		145		120%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	55		145		120%
Number of transgender people reached with HIV prevention programs - defined package of services	101		152		120%

## 7. Annexures

Indicator Name	2023 Target		2023 Results		
	Numerator	Rate	Numerator	Denominator	Achievement Rate
Number of transgender people that have received an HIV test during the reporting period and know their results	91		152		120%
Number of sex workers reached with HIV prevention programs - defined package of services	30		16		53%
Number of sex workers that have received an HIV test during the reporting period and know their results	29		16		55%
Percentage of people living with HIV currently receiving antiretroviral therapy		100%	0	0	
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	0		3		120%
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		93%	0	0	
Number of TB cases with RR-TB and/or MDR-TB notified	0		0		0%
Number of RR-TB and/or MDR-TB that began second line treatment	0		0		0%
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			0		
<b>FEDERATED STATE OF MICRONESIA</b>					
Percentage of men who have sex with men who are living with HIV		0%	0	37	0%
Percentage of transgender people who are living with HIV		0%	0	16	0%
Percentage of sex workers who are living with HIV		0%	0	32	0%
TB mortality rate per 100,000 population		8	7	113131	6 77%
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	0	186	0%
Percentage of people living with HIV and on ART who are virologically suppressed		92%	6	14	43% 47%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		50%	9	35	26% 51%

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Indicator Name	2023 Target		2023 Results			
	Numerator	Rate	Numerator	Denominator	Rate	Achievement Rate
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		79%	16	16	100%	120%
Percentage of sex workers reporting the use of a condom with their most recent client		54%	32	32	100%	120%
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	0		
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	48	60	80%	86%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	76		37			49%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	60		37			62%
Number of transgender people reached with HIV prevention programs - defined package of services	115		16			14%
Number of transgender people that have received an HIV test during the reporting period and know their results	107		16			15%
Number of sex workers reached with HIV prevention programs - defined package of services	72		32			44%
Number of sex workers that have received an HIV test during the reporting period and know their results	68		32			47%
Percentage of people living with HIV currently receiving antiretroviral therapy		90%	14	18	78%	86%
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	98		212			120%
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		95%	39	48	81%	86%

## 7. Annexures

Indicator Name	2023 Target		2023 Results		Achievement Rate
	Numerator	Rate	Numerator	Denominator	
Number of RR-TB and/or MDR-TB that began second line treatment	1		0		0%
Number of TB cases with RR-TB and/or MDR-TB notified	1		0		0%
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			121		
<b>KIRIBATI</b>					
Percentage of men who have sex with men who are living with HIV		0%	1	327	0%
Percentage of transgender people who are living with HIV		0%	0	231	0%
Percentage of sex workers who are living with HIV		0%	0	711	0%
TB mortality rate per 100,000 population		15	28	128874	22
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		1%	2	474	0%
Percentage of people living with HIV and on ART who are virologically suppressed		92%	5	8	63%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		40%	59	327	18%
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		79%	104	231	45%
Percentage of sex workers reporting the use of a condom with their most recent client		60%	560	711	79%
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	0	
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	360	570	63%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	251		327		120%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	199		327		120%

Indicator Name	2023 Target		2023 Results			
	Numerator	Rate	Numerator	Denominator	Rate	Achievement Rate
Number of transgender people reached with HIV prevention programs - defined package of services	137		231			120%
Number of transgender people that have received an HIV test during the reporting period and know their results	137		231			120%
Number of sex workers reached with HIV prevention programs - defined package of services	658		711			108%
Number of sex workers that have received an HIV test during the reporting period and know their results	653		711			109%
Percentage of people living with HIV currently receiving antiretroviral therapy		100%	8	8	100%	100%
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	434		565			120%
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		94%	313	360	87%	92%
Number of TB cases with RR-TB and/or MDR-TB notified	4		2			50%
Number of RR-TB and/or MDR-TB that began second line treatment	4		2			50%
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			246			
<b>REPUBLIC OF THE MARSHALL ISLANDS</b>						
Percentage of men who have sex with men who are living with HIV		0%	0	27	0%	
Percentage of transgender people who are living with HIV		0%	0	24	0%	
Percentage of sex workers who are living with HIV		0%	0	21	0%	
TB mortality rate per 100,000 population		24	7	42050	17	69%
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	2	59	3%	



## 7. Annexures

Indicator Name	2023 Target		2023 Results			Achievement Rate
	Numerator	Rate	Numerator	Denominator	Rate	
Percentage of people living with HIV and on ART who are virologically suppressed		92%	4	7	57%	62%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		92%	25	27	93%	101%
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		85%	22	24	92%	108%
Percentage of sex workers reporting the use of a condom with their most recent client		77%	19	21	90%	118%
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	0		
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	104	200	52%	56%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	43		27			63%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	40		27			68%
Number of transgender people reached with HIV prevention programs - defined package of services	47		24			51%
Number of transgender people that have received an HIV test during the reporting period and know their results	44		24			55%
Number of sex workers reached with HIV prevention programs - defined package of services	47		21			45%
Number of sex workers that have received an HIV test during the reporting period and know their results	46		21			46%
Percentage of people living with HIV currently receiving antiretroviral therapy		100%	7	7	100%	100%
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	235		205			87%

Indicator Name	2023 Target		2023 Results			
	Numerator	Rate	Numerator	Denominator	Rate	Achievement Rate
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		93%	88	104	85%	91%
Number of TB cases with RR-TB and/or MDR-TB notified	2		2			100%
Number of RR-TB and/or MDR-TB that began second line treatment	2		2			100%
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			59			
<b>NAURU</b>						
Percentage of men who have sex with men who are living with HIV		0%	0	0		
Percentage of transgender people who are living with HIV		0%	0	0		
Percentage of sex workers who are living with HIV		0%	0	0		
TB mortality rate per 100,000 population		5	1	12512	8	120%
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	0	18	0%	
Percentage of people living with HIV and on ART who are virologically suppressed		92%	2	2	100%	109%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		0%	0	0		
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		0%	0	0		
Percentage of sex workers reporting the use of a condom with their most recent client		0%	0	0		
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	0		
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	19	22	86%	93%

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Indicator Name	2023 Target		2023 Results			Achievement Rate
	Numerator	Rate	Numerator	Denominator	Rate	
Number of men who have sex with men reached with HIV prevention programs - defined package of services	0		0			
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	0		0			
Number of transgender people reached with HIV prevention programs - defined package of services	0		0			
Number of transgender people that have received an HIV test during the reporting period and know their results	0		0			
Number of sex workers reached with HIV prevention programs - defined package of services	0		0			
Number of sex workers that have received an HIV test during the reporting period and know their results	0		0			
Percentage of people living with HIV currently receiving antiretroviral therapy		90%	2	2	100%	111%
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	13		18			120%
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		93%	15	19	79%	85%
Number of TB cases with RR-TB and/ or MDR-TB notified	0		0			
Number of RR-TB and/or MDR-TB that began second line treatment	0		0			
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			8			
<b>PALAU</b>						
Percentage of men who have sex with men who are living with HIV		0%	1	30	3%	120%
Percentage of transgender people who are living with HIV		0%	0	5	0%	0%
Percentage of sex workers who are living with HIV		0%	0	2	0%	0%

Indicator Name	2023 Target		2023 Results		Achievement Rate	
	Numerator	Rate	Numerator	Denominator		
TB mortality rate per 100,000 population		3	2	18024	11	120%
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	0	14	0%	0%
Percentage of people living with HIV and on ART who are virologically suppressed		92%	4	8	50%	54%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		45%	8	23	35%	77%
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		48%	2	5	40%	83%
Percentage of sex workers reporting the use of a condom with their most recent client		55%	2	2	100%	120%
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	1	1	100%	100%
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	7	8	88%	94%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	15		30			120%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	12		30			120%
Number of transgender people reached with HIV prevention programs - defined package of services	12		5			42%
Number of transgender people that have received an HIV test during the reporting period and know their results	11		5			45%
Number of sex workers reached with HIV prevention programs - defined package of services	19		2			11%
Number of sex workers that have received an HIV test during the reporting period and know their results	18		2			11%
Percentage of people living with HIV currently receiving antiretroviral therapy		90%	8	8	100%	111%

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Indicator Name	2023 Target		2023 Results		Achievement Rate	
	Numerator	Rate	Numerator	Denominator		
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	9		14		120%	
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		93%	5	7	71%	77%
Number of TB cases with RR-TB and/or MDR-TB notified	1		0		0%	
Number of RR-TB and/or MDR-TB that began second line treatment	1		0		0%	
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			8			
<b>SAMOA</b>						
Percentage of men who have sex with men who are living with HIV		0%	0	811	0%	
Percentage of transgender people who are living with HIV		0%	0	1518	0%	
Percentage of sex workers who are living with HIV		0%	0	66	0%	
TB mortality rate per 100,000 population		0.5	0	218764	0.00	0%
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	0	12	0%	0%
Percentage of people living with HIV and on ART who are virologically suppressed		92%	12	12	100%	109%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		40%	816	816	100%	120%
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		90%	1465	1514	97%	108%
Percentage of sex workers reporting the use of a condom with their most recent client		54%	63	66	95%	120%
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	0		

Indicator Name	2023 Target		2023 Results			
	Numerator	Rate	Numerator	Denominator	Rate	Achievement Rate
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	9	10	90%	97%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	904		816			90%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	714		811			114%
Number of transgender people reached with HIV prevention programs - defined package of services	1247		1525			120%
Number of transgender people that have received an HIV test during the reporting period and know their results	1159		1518			120%
Number of sex workers reached with HIV prevention programs - defined package of services	69		66			96%
Number of sex workers that have received an HIV test during the reporting period and know their results	66		66			100%
Percentage of people living with HIV currently receiving antiretroviral therapy		100%	12	12	100%	100%
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	21		14			67%
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		93%	8	9	89%	96%
Number of TB cases with RR-TB and/or MDR-TB notified	0		0			0%
Number of RR-TB and/or MDR-TB that began second line treatment	0		0			0%
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			8			

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Indicator Name	2023 Target		2023 Results		Achievement Rate
	Numerator	Rate	Numerator	Denominator	
<b>TONGA</b>					
Percentage of men who have sex with men who are living with HIV		0%	0	87	0%
Percentage of transgender people who are living with HIV		0%	0	337	0%
Percentage of sex workers who are living with HIV		0%	0	341	0%
TB mortality rate per 100,000 population		0.65	0	106017	0.00
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	0	4	0%
Percentage of people living with HIV and on ART who are virologically suppressed		92%	5	5	100%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		90%	87	87	100%
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		90%	337	337	100%
Percentage of sex workers reporting the use of a condom with their most recent client		75%	89	341	26%
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	0	
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	2	2	100%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	95		87		92%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	75		87		116%
Number of transgender people reached with HIV prevention programs - defined package of services	268		337		120%
Number of transgender people that have received an HIV test during the reporting period and know their results	249		337		120%
Number of sex workers reached with HIV prevention programs - defined package of services	306		341		111%

Indicator Name	2023 Target		2023 Results			Achievement Rate
	Numerator	Rate	Numerator	Denominator	Rate	
Number of sex workers that have received an HIV test during the reporting period and know their results	290		341			118%
Percentage of people living with HIV currently receiving antiretroviral therapy		90%	5	5	100%	
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	11		8			73%
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		93%	2	2	100%	108%
Number of TB cases with RR-TB and/or MDR-TB notified	0		0			0%
Number of RR-TB and/or MDR-TB that began second line treatment	0		0			0%
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			2			
<b>TUVALU</b>						
Percentage of men who have sex with men who are living with HIV		0%	0	12	0%	
Percentage of transgender people who are living with HIV		0%	0	13	0%	
Percentage of sex workers who are living with HIV		0%	0	23	0%	
TB mortality rate per 100,000 population		10	7	11204	62	120%
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	1	10	10%	
Percentage of people living with HIV and on ART who are virologically suppressed		92%	1	1	100%	109%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		40%	2	11	18%	45%
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		79%	1	2	50%	63%
Percentage of sex workers reporting the use of a condom with their most recent client		54%	2	22	9%	17%



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Indicator Name	2023 Target		2023 Results			Achievement Rate
	Numerator	Rate	Numerator	Denominator	Rate	
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	1	0%	0%
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		96%	28	33	85%	88%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	13		12			92%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	10		12			120%
Number of transgender people reached with HIV prevention programs - defined package of services	19		13			68%
Number of transgender people that have received an HIV test during the reporting period and know their results	18		13			72%
Number of sex workers reached with HIV prevention programs - defined package of services	17		23			120%
Number of sex workers that have received an HIV test during the reporting period and know their results	16		23			120%
Percentage of people living with HIV currently receiving antiretroviral therapy		90%	1	1	100%	111%
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	29		16			55%
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		93%	17	28	61%	65%
Number of TB cases with RR-TB and/or MDR-TB notified	0		1			120%
Number of RR-TB and/or MDR-TB that began second line treatment	0		1			120%
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			7			

Indicator Name	2023 Target		2023 Results		Achievement Rate	
	Numerator	Rate	Numerator	Denominator		
<b>VANUATU</b>						
Percentage of men who have sex with men who are living with HIV		0%	0	69	0%	
Percentage of transgender people who are living with HIV		0%	0	30	0%	
Percentage of sex workers who are living with HIV		0%	0	378	0%	
TB mortality rate per 100,000 population		3.5	7	319137	2.19	63%
RR-TB and/or MDR-TB prevalence among new TB patients: Proportion of new TB cases with RR-TB and/or MDR-TB		0%	1	53	2%	120%
Percentage of people living with HIV and on ART who are virologically suppressed		92%	2	7	29%	31%
Percentage of men reporting the use of a condom the last time they had anal sex with a male partner		40%	73	234	31%	78%
Percentage of transgender people reporting the use of a condom the last time they had sex with a partner		79%	118	238	50%	63%
Percentage of sex workers reporting the use of a condom with their most recent client		54%	232	378	61%	114%
Treatment success rate of RR TB and/or MDR TB. Percentage of cases with RR and/or MDR TB successfully treated		100%	0	0		
TB treatment coverage: Percentage of new and relapse cases that were notified and treated among the estimated number of incident TB cases in the same year (all form of TB - bacteriologically confirmed plus clinically diagnosed)		93%	84	99	85%	91%
Number of men who have sex with men reached with HIV prevention programs - defined package of services	155		243			120%
Number of men who have sex with men that have received an HIV test during the reporting period and know their results	123		69			56%
Number of transgender people reached with HIV prevention programs - defined package of services	276		238			86%
Number of transgender people that have received an HIV test during the reporting period and know their results	256		30			12%
Number of sex workers reached with HIV prevention programs - defined package of services	351		378			108%

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Indicator Name	2023 Target		2023 Results			Achievement Rate
	Numerator	Rate	Numerator	Denominator	Rate	
Number of sex workers that have received an HIV test during the reporting period and know their results	334		378			113%
Percentage of people living with HIV currently receiving antiretroviral therapy		90%	7	7	100%	111%
Number of notified cases of all forms of TB (ie bacteriologically confirmed + clinically diagnosed), includes new and relapse cases	99		101			102%
Treatment success rate - all forms: Percentage of TB cases, all forms, bacteriologically confirmed plus clinically diagnosed, successfully treated (cured plus treatment completed) among all TB cases registered for treatment during a specified period, new and relapse cases		94%	75	84	89%	95%
Number of TB cases with RR-TB and/ or MDR-TB notified	2		1			50%
Number of RR-TB and/or MDR-TB that began second line treatment	2		1			50%
Number of TB cases (all forms) notified among key affected populations/ high risk groups (other than prisoners)			1			



**United Nations Development Programme**  
**Pacific Office in Fiji**