Introduction

This paper is submitted to the African Local Government Action Forum (ALGAF) to catalyze dialogue and discussions on Challenges of developing Monitoring and Evaluation (M&E) Mechanisms for HIV/AIDS Interventions within the context of Decentralization and Local Governance.

The Paper presents a snapshot of the epidemic in the 7 Global Distance Learning Network countries of Ethiopia, Ghana, Kenya, Rwanda, Tanzania, Uganda and Zimbabwe.
Introduction

The paper reminds participants about the global and national obligations for monitoring the HIV/AIDS epidemic with specific discussion on the challenges of developing the M&E systems at the decentralized level in Uganda provides a case and justification for the dialogue on the issue.

A conclusion is made pointing at action areas that could be addressed across countries to improve monitoring and evaluation of the epidemic at the sub-national level.

- As of December 2007, an estimated 33.2 million people worldwide were living with HIV and an estimated 2.5 million people were newly infected.
- The seven countries on which this paper focus, happen to be part of Sub-Saharan Africa which has continued to bare the brunt of the HIV and AIDS epidemic.
- It's important to note that no disease in history has prompted a comparable mobilization of resources.

Despite the level of effort exhibited by the countries and global partners, all the countries have HIV epidemics that is over 1 percent.

The projected prevalence estimates by UNAIDS in 2007 reveal Ethiopia and Ghana as having the lowest prevalence of 2.2% while Zimbabwe’s prevalence is highest, at 16.1%. (Please refer to Table 1).
Table 1: Adult (15-49) high estimate prevalence (%) by country during 1990, 2000 and 2007

Please refer to hand out for table 1 on Page 2
Table 2: AIDS death in adults and children (number) by country during 1990, 2000 & 2007

While there is increasing evidence of progress made in providing treatment and care for the infected and affected people, AIDS remains a key strain the health systems and a major cause of death in the world today. In 2007, ARV coverage rose by 42%, reaching 3 million people in low-and middle-income countries. Only 31% of individuals living with HIV and TB co-infection received both antiretroviral and anti-TB drugs (UN, 2008).

AIDS deaths are more or less increasing in all the 7 countries except Uganda where there has been a halving of the deaths in the recent 7 years and deaths in Zimbabwe have increased six times in the last 17 years (Table 2). and increasing levels of widowhood.
Monitoring and Evaluating the HIV/AIDS epidemic

- M & E refers to the continuous assessment of progress made towards set targets and the impact made from the planned activities, respectively.

- The benefits of M&E span from improving decision making to enhancing accountability relationships and transparency.

- While decision making is very important at implementation level, M&E for accountability and transparency largely serves to establish evidence on progress made on various national and global commitments by governments to improve the socio, political and economic status of the populations.
Monitoring and Evaluating the HIV/AIDS epidemic

There are specific reasons why monitoring and Evaluating the HIV/AIDS epidemic is critical at both global and implementation levels.

First, the HIV epidemic is a global development challenge and all nations are interested in finding lasting solutions to the worldwide suffering. There are global commitments by nations to respond to the problem that are monitored on a regular basis.
Monitoring and Evaluating the HIV/AIDS epidemic

The three current notable global monitoring frameworks for the HIV/AIDS are:

- The Core indicators for monitoring the declaration of commitment on HIV/AIDS response;
- The Universal access targets;
- The Millennium Development goals (MDGs).
Monitoring and Evaluating the HIV/AIDS epidemic

In the 2001 UN General Assembly (UNGASS), Member States unanimously embraced a series of time-bound targets in the Declaration of Commitment on HIV/AIDS.

More specifically, in adopting the Declaration, member states obligated themselves to regularly report on their progress to the General Assembly. Member states are required to submit Country Progress reports to UNAIDS every two years.
Monitoring and Evaluating the HIV/AIDS epidemic

In addition, efforts have been made by UNAIDS to develop a Country Reporting Information System (CRIS) data entry software to aid the global reporting.

The number of countries reporting on these indicators, and the completeness of national reports has steadily improved since reporting began in 2003. In 2008, over 80 percent of the 47 Sub-Saharan counties submitted their UN General Assembly (UNGASS) commitment reports.
The second major reason why monitoring and evaluating the HIV/AIDS response is critical is the volatile nature of the epidemic. As the health and social effects and impacts of the epidemic change, the national responses have to be in tandem with the changes. For effective responses, countries have to know the populations who are most at risk, the source of new infections, and the most cost-effective interventions. Evaluating the HIV/AIDS response is critical in monitoring and evaluating the HIV/AIDS epidemic.
Monitoring and Evaluating the HIV/AIDS epidemic

The third reason is the increasing dedicated global funding for HIV. There is a 6-fold increase in financing for HIV programs in low-and middle income countries (UNAIDS, 2008).

For details on disbursement for countries under review, please refer to table 4 in the hand out.
M&E Mechanisms at Decentralized level in Uganda

The Decentralization policy was launched in Uganda in 1992 in which varying powers and service provision have been devolved to popularly elected local governments.

At both national and local government levels, the reforms have resulted into more demand for accountability, transparency and evidence of results.
M&E Mechanisms at Decentralized level in Uganda

HIV/AIDS is seen as a mainstream crosscutting development challenge and considerable efforts have been made at all levels in the country to address the problem. A mechanism that brings together all stakeholders in the national response and led by the Uganda AIDS Commission (UAC) has been set up.

A Multi sectoral Approach to the response with central coordination from a neutral institution (The office of the President) was adopted by the establishment of the Uganda AIDS Commission way back in 1992.
M&E Mechanisms at Decentralized level in Uganda

While the Partnership Committee (PC) that meets every month is responsible for monitoring progress at national level, the District AIDS Committee (DAC) and the District AIDS Task Force (DAT) are the organs responsible for overseeing implementation at the district level.
M&E Mechanisms at Decentralized level in Uganda

- Uganda has recently completed a participatory process to develop a National Strategic Plan (NSP) 2007/8 - 2011/12 and the supporting National Performance Measurement and Management Plan (PMMP).

- The Plan clearly describes the process of monitoring at the district and lower levels. The understanding is that within the decentralization policy, the districts’ leadership is expected to play a significant role in the provision of technical services and coordination of HIV/AIDS activities at the local government and lower local government levels.
Challenges of M&E Mechanisms at district level in Uganda

It is important to note that challenges of M&E cut across all service delivery with however varying severity. The Local Government Sector Investment Plan describes Monitoring and Evaluation as a process intended to establishing conformity to stipulated guidelines, efficiency and value for money, effectiveness, impact, sustainability and relevance to local contexts.
Challenges of M&E Mechanisms at district level in Uganda

The Plan the challenges to M&E to include:

- Multiple M&E tools for specific projects; PMA, NAADS, NUSAF, LGDPII
- Several parallel levels of M&E structures; Line Ministries, IGG, OAG, Office of the Prime Minister, National Planning Authority (NPA)
- Lack of a Central storage and clearing system from the several structures
- Lack of capacity by LG to undertake the M&E function; like filling of forms and interpretation of information
Challenges of M&E Mechanisms at district level in Uganda

These challenges apply to monitoring HIV and AIDS by Local governments. More specifically to HIV and AIDS the following challenges are observed and some of them are general applying to the national level but affect the districts as well.
Challenges

- Defining and developing a shared understanding of indicators: collecting and reporting on the same information.
- Harmonizing indicators: most service providers are not using the indicators outlined in the M&E framework (variation depending on funding agencies.)
- Weak or no linkage of the UAC database with existing data reporting systems i.e., HMIS, EMIS, M&E for OVC
- Inadequate staffing and capacity (skills and infrastructure); Varing levels of detail required by stakeholders’ reports
Challenges.......  

- Different planning and reporting cycles for Government of Uganda, Implementing Partners, Development Partners.  
- High level of aggregation of data from national surveys (e.g. sero-survey; UDHS)  
- Expensive methods of obtaining data on key indicators like incidence.  
- Demand for data by program managers for planning is limited  
- The stigma around HIV.  
- With increasing advocacy for mainstreaming HIV, attribution and establishing value for money becomes a challenge.
Despite the many challenges, there is some monitoring and evaluation of HIV and AIDS programs by Local Governments which is largely ad-hoc and not well institutionalized in the local government structures. The lack of substantive evidence on the epidemic at the local government levels has slowed down the agenda of mainstreaming HIV and AIDS in District Development Plans.
Innovations to Overcome M&E Challenges

The need for strengthening the M&E systems is very evident given that the epidemic is at a stage where untargeted implementation can result in an upsurge in the prevalence rates and negate all the hard achieved success in our countries.

In Uganda there are innovative arrangements to improve and institutionalize M & E of HIV and AIDS at Local Government levels including:

- The Ministry of Local Government annually carries out a National Assessment Exercise to establish district performance on the implementation of the annual workplans (coordination of HIV is assessed).
Challenges

- The Ministry of Finance passed a circular which requires all districts and Lower Local Governments to create budget lines for HIV and AIDS.
- With support from Irish Aid, districts will be supported for three years to undertake district Partnership Forums during which information on the status of the epidemic in the district is shared and priorities set for the next financial year.
- A national Facilitation Team has been formed by UAC to support Strategic Planning at the District.
Conclusion and suggestions

The paper has highlighted the global and specific country status of the epidemic, examined the critical need for monitoring the AIDS epidemic and outlined the specific challenges of the M&E mechanisms in Uganda.

Action is required to address the situation because of the likely negative effect on the success of the national programs if there is limited evidence on what is working, how is it working, why it is working and what can be done differently.
Conclusion and suggestions

- Answers to these questions require institutionalized, robust and sustainable M&E systems to be put in place at the decentralized level.
- As body corporate, Local Government have to be in the driver’s seat for this to happen.
- Suggestions are made around three key interventions that can be undertaken across the 7 countries towards institutionalizing and improving M&E mechanisms at the decentralized level.
Conclusion and suggestions

Subject to discussion, the following may need to be looked into:

- In-depth Diagnosis of country M&E systems to establish the strength and challenges facing the institutionalization of M&E at decentralized levels is urgent.

- The diagnosis should result into identifying non-monetary incentives/rewards schemes to enhance demand and utilization of M&E data by program managers for planning and budgeting.

- To establish an E-forum for M&E focal persons to share methodologies, mechanisms and best practices of monitoring HIV/AIDS at decentralized level.
Conclusion and suggestions

- Monitoring progress is essential for maintaining the momentum of success in responding to the HIV epidemic.
- The task is enormous but manageable and taking a phased approach, starting with standardizing indicator definitions and tools will lead to great improvement of M&E mechanisms at Decentralized level in our countries.
Thank you So much for your attention!!!

I welcome any comments, remarks, sharing experiences from the participants