



The Global HIV/AIDS Program (GHAP)
The World Bank



ASAP Progress Report: June 2010

1.0 INTRODUCTION

This Progress Report is an update on the ASAP Services for the reporting period January to June 2010. It provides recent highlights under the Program; an operational update; capacity building initiatives; and partnerships and cosponsor engagement. This report reflects our desire to provide a broader view of ASAP work over the period.

RECENT HIGHLIGHTS

ASAP supports Haiti’s disaster response: Following Haiti’s devastating earthquake in January, ASAP provided support to UNAIDS and the UN in planning the emergency response to ensure that HIV and AIDS issues were adequately addressed. ASAP participated in a rapid needs assessment, and at the request of Haiti’s Ministry of Health, contributed to the national HIV/AIDS Post Disaster Emergency Mid-Term Plan. ASAP support has enabled Haiti to forge a strategic working relationship with local and international partners while focusing on key results that are backed by critical actions.

Independent evaluation of ASAP (March 2010): An independent evaluation of ASAP’s operations concluded that ASAP had successfully implemented the 2008-2009 Business Plan, and in doing so provided direct assistance to 56 countries, one regional initiative and two civil society networks. ASAP conducted 17 Peer Reviews, and assisted in the development of 18 National Strategic Plans, 21 Operational Plans, 22 Costing exercises, and 42 other types of technical assistance (mostly to help strengthen evidence bases). The findings of the evaluation were endorsed by the UNAIDS ASAP Advisory Group and ASAP Technical Advisory Group during their meetings in Vienna, Austria, in April 2010.

ASAP Business Plan 2010-11 (April 2010): Following the evaluation, the ASAP Business Plan 2010-2011 was completed and endorsed by the ASAP advisory groups in April. The plan emphasized the need to: expand support to develop evidence-based strategies and costed operational plans; improve alignment with Global Fund processes; strengthen integration of HIV/AIDS and health sector strategies; strengthen linkages with World Bank regional and country programs; and improve country planning, efficiency and effectiveness in the current resource constrained era.

Business case for HIV: In collaboration with UNDP and the World Bank, ASAP developed a work-plan for “Bringing AIDS Planning and Action Into Development Policy and Broader Accountability Frameworks” as part of efforts to operationalize the UNAIDS Outcome Framework. The results set for this cross cutting issue were included in the Outcome Framework as part of the Bold Results to be achieved.

What is ASAP?

ASAP services, hosted by the World Bank on behalf of UNAIDS, are undertaken in consultation with the UNAIDS Secretariat, cosponsors, governments, the Technical Support Facilities and other partners.

Since beginning operations in July 2006, ASAP has been active in over 75 countries and has supported two regional initiatives and three civil society networks.

ASAP services include the following:

- Peer reviews of draft national strategies
- **Technical and financial support** to assist countries and regions to strengthen their strategic response to HIV/AIDS
- Development of **tools** to assist countries in their strategy and action planning work
- **Capacity building** for policymakers, practitioners and UNAIDS colleagues in strategic and action planning to strengthen the response to HIV/AIDS

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Central America Sub-regional AIDS Strategy: With ASAP support, preparation of the Central America Sub-regional AIDS Strategy was completed. The strategy focuses on areas of common interest in the sub-region: mobile populations; HIV reference laboratory; and purchasing of medications. Five Ministers of Health in the region commended the strategy for prioritizing areas and population groups common to all the countries—Belize, Costa Rica, Guatemala, El Salvador, Honduras, Nicaragua and Panama. An epidemiological synthesis, which will provide baselines and analysis for this strategy, is under review.

2.0 OPERATIONAL UPDATE

ASAP continues to experience fast growing demand for its services around the world. During the reporting period, there were 38 country requests from East and Southern Africa, West and Central Africa, Latin America and the Caribbean, Asia and Pacific, MENA, and Europe. Of these, 26 were new country requests. ASAP responded to all requests, working with countries and partners to put in place improved strategic and operational plans that are evidence-informed, prioritized, costed, and focused on efficiency and effectiveness. Details on the specific country requests are provided in Annex 1.

“Databases and result-based frameworks developed with ASAP support have been fundamental inputs for other complementary strategies and studies aiming at strengthening the AIDS national strategy and response by other technical support providers.”

— *Andrea Boccardi, UNAIDS Latin America Regional Office, May 2010*

Europe and Central Asia, WCA and MENA: The ASAP Programme of Work in Europe and Central Asia, West and Central Africa (WCA), and Middle east and North Africa (MENA), was developed in collaboration with UNAIDS Country Offices, Regional Support Teams (RSTs) and Cosponsors.

It outlines the priority countries and main areas of support for 2010–2011. More than 25 countries are finalizing implementation of their current strategies, and are likely to solicit support to update the profile of the epidemic, set priorities, and devise new strategies and costed operational plans.

Latin America, Hispaniola: In Latin America, ASAP’s activities have enabled partners to carry the work forward into their own programs. For example, the baselines and strategic information gaps identified by ASAP are guiding UNAIDS monitoring and evaluation team’s support to the construction of national research agendas in Uruguay, Nicaragua and Bolivia. The UNAIDS RST is complementing ASAP’s work in Guatemala, El Salvador and Panama by developing national technical support plans.

Asia and the Pacific: ASAP met with the UNAIDS RST for the Asia and Pacific region, to discuss regional work programming and means to strengthen collaboration. Directors of the region’s two Technical Support Facilities (TSFs) participated by teleconference. An immediate outcome of the discussion was ASAP’s commitment to sponsor two experienced consultants to participate in the upcoming regional expert consultation on costing, learn more about the Asia costing approaches, and share experiences from other regions. Since January, ASAP has responded to requests from four countries in the region.

East and Southern Africa: ASAP and the RST for ESA organized a half-day video-conference to share information on regional planning needs and activities, and discuss how to work more closely in future. The meeting discussed UNAIDS and ASAP collaboration on: provision of technical support; capacity development and peer review assistance on planning processes; alignment of country planning processes; health sector planning and AIDS planning, and harmonizing planning tools and approaches; and ongoing work and support to country plans in 2010.

3.0 CAPACITY BUILDING

The following were the main capacity building activities during the period:

Aligning ASAP training tools to local context in Francophone West and Central Africa: The UNAIDS RST for WCA, ASAP, the World Bank, and French Ministry of Foreign Affairs, commenced the review and update of its strategic planning training materials to align their content to the challenges in the region. These tools will help to build the capacities of national teams and consultants in WCA through regional and country training.

Building capacity in Anglophone West and Central Africa: In April, ASAP facilitated a one week regional capacity building workshop in Accra, Ghana, for program managers and consultants in HIV/AIDS strategy and action planning in WCA. The workshop was delivered in collaboration with the UNAIDS RST and TSF. The training was organized in response to requests from countries for capacity development to improve the planning process and ensure that strategic plans are evidence based and results oriented. There were 25 participants from Ghana, Liberia, Nigeria, Sierra Leone, and The Gambia. Most participating countries were either preparing to develop their strategic plans or developing operational plans for existing strategic plans.

Strengthening the technical and consulting skills of specialists in Latin America: ASAP continued to identify and coach national specialists on strategic planning, enabling them to become effective regional and international consultants. This on-going communication and periodic formal meetings help to introduce new subjects and to strengthen expertise, which in turn improves ASAP team efficiency in support to clients.

Moving from Strategy to Implementation: ASAP and the UNAIDS RST for East and Southern Africa, ASAP organized a one week regional capacity building workshop in Johannesburg, South Africa, to enhance the skills of technical staff in national HIV/AIDS operational planning. The workshop followed requests from countries to

address major challenges and barriers to operationalizing NSPs. The workshop attracted 65 participants from Uganda, Botswana, Kenya, South Africa, Namibia, Zimbabwe, Mozambique, Lesotho, Rwanda, Swaziland and Ethiopia. Countries that had developed their operational plans prior to the workshop used the opportunity to review their plans and identified gaps. For others, the workshop provided a unique opportunity to develop a draft operational framework. Several countries requested ASAP to replicate the training at the national level to reach a critical mass. Specific follow up will include workshops in South Africa and Zimbabwe in 2010.

Improving sustainability and use of strategic information: ASAP supported the development of user-friendly software that will help countries in Latin America and the Caribbean to maintain their national database so that they reflect the priority areas and emerging trends in their epidemics.

Allocating resources efficiently: In April, ASAP and the UNAIDS RST for LAC held a workshop on unit costs for civil society organizations in Argentina. Costing is a crucial step in both the Results Cycle and in creating a national strategic plan. Inaccurate information on program costs can result in inefficient use of resources. The workshop focused on costing aimed at reaching Most at Risk Populations (MARPs), currently a major gap; and presented the components of unit costs, the difference between economic and financial costs, and the concepts inherent in costing methodologies. Most importantly, it identified core services. Several participants reported increased understanding of how their organizations may have been undervaluing their work.

“We were able to redefine our planning process and start thinking of planning from an evidence based starting point”

— *East African country*

4.0 PARTNERSHIPS AND COSPONSOR ENGAGEMENT

Role of Cosponsors: During the reporting period, cosponsors provided both strategic and operational support to ASAP. In addition to their role in ASAP Governance through the UNAIDS Advisory Group which met and discussed strategic orientations for the 2010–2011 ASAP Business Plan, cosponsors were actively involved in peer review processes, regional training workshops, and development of work programmes. At the global level, UNDP supported ASAP in developing a business case for HIV and national planning based on the cross-cutting areas of the UNAIDS Outcomes Framework. In Tajikistan, the UNDP country office took the lead in supporting national partners to review the NSP. In Syria, the WHO regional team provided support on the NSP in collaboration with the UNAIDS RST. Similarly, in Jordan, the UNICEF country office and regional team is coordinating support on the situation assessment and the new NSP, in collaboration with the UNAIDS RST. Additionally, in Burkina Faso, Namibia, Georgia, and Sudan, regional cosponsors provided comments on the ASAP peer review of the NSP, requested by the national partners in countries. Lastly, regional cosponsors offices contributed to the development of the ASAP programme of work in Europe and Central Asia, MENA and West and Central Africa.

Partnership with Civil Society/NGOs: ASAP has continued to leverage partnerships with civil society to strategically contribute to improved national responses. During the reporting period, ASAP provided technical support to Tearfund, an international faith-based organization, which used the support to develop operational plans for networks of faith based organizations in three countries: Mozambique, Russia and Ivory Coast. In addition to the development of clear and realistic plans to address HIV in the 3 countries, partners including church groups are proactively engaging in the development and review of national strategic plans of the respective governments. This has helped build mutual respect and good relationships between the various stakeholders. Country representatives have found the process thorough and essential for bringing stakeholders together, building ownership and developing detailed plans for their work.

“For Tearfund, this experience and learning has been critical during the first phase of its corporate response to HIV. The strategy results cycle outlined by ASAP has now become the organisation’s proposed model to develop work across its 10 focus countries as Tearfund enters the second phase of its HIV response. This is evident in Tearfund’s revised HIV strategy 2010-15.”

— *Veena O’Sullivan, Head Tearfund’s HIV Unit.*

Global Fund: ASAP and the Global Fund to Fight AIDS, Tuberculosis and Malaria (GF) conducted a successful joint mission to the Dominican Republic, and met with clients as one team. The GF and ASAP have collaborated on a variety of activities in the past two years, but the DR mission was the first formal joint mission. This close collaboration rests on the common objective of ensuring that national programs constitute strategic plans and use quantifiable targets, a strategy strongly supported by the GF.

Our strategy is more focused, bringing on the ground new issues. The main cost saving is reduced infections because we are more focused.”

— *Southern African country*

“We now have a plan which is costed and realistic.”

— *Caribbean*

We have realised that we have high prevalence in central regions, concentrated epidemic in southern regions, and different risk groups in different parts of the country. The new regional plans mean we can address these differences.”

— *Northern African country*

ANNEX 1: REQUEST FOR ASAP SUPPORT: JANUARY – JUNE 2010

Region	Country	Type of Support
<i>East and Southern Africa</i>	Namibia	Peer Review
	Mauritius	Mid-Term Review and revised NSP
	Madagascar	Mid-Term Review and revised NSP
	Zambia	Results Framework
	Seychelles	NSP
	Comoros	NSP
<i>West and Central Africa</i>	Liberia	M&E
	Burkina Faso	Peer Review of the NSP
	Cote d'Ivoire	NSP, Costing
	Ghana	Epidemic Update, New NSP, Operational Plan, M&E and Costing
<i>Latin America</i>	Argentina	Unit Costs Study
	Belize	NSP
	Brazil	Unit Cost Study
	Costa Rica	Synthesis - Evidence
	Central America	NSP
	Dominican Republic	NSP
	Guatemala	NSP
	Haiti	Addressing HIV in disaster response
	El Salvador	NSP
	Nicaragua	NSP
	Peru	NSP
	Uruguay	Evidence
Venezuela	NSP	
<i>Caribbean</i>	OECS	Regional strategy and costed action plan
	Trinidad and Tobago	NSP and costed action plan
	St Lucia	NSP and Peer Review
<i>Asia and Pacific</i>	Laos	Review, NSP and costed action plan
	Papua New Guinea	Peer Review
	Pakistan	Provincial Operational Plans for four main provinces.
	Afghanistan	NSP, Costing.
	Thailand	Cost-effectiveness technical support

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Region	Country	Type of Support
<i>Europe</i>	Ukraine	Decentralized Costed Operational Plan
	Tajikistan	Input to NSP (led by UNDP Country Office)
	Georgia	Situation Assessment, NSP, Costing, Peer Review
<i>Middle East and North Africa</i>	Egypt	Situation Response Analysis, Gap Analysis, Priority setting, Results Framework
	Sudan (North)	NSP finalized, Peer Review, NSP costing,
	Jordan	Epidemic Update, Priorities, NSP, Costed Operational Plan
	Morocco	Mid-Term Review, Gap Analysis
	Syria	NSP, Gap Analysis, Costing
<i>NGO</i>	Tearfund	Three action plans in direct follow up to strategies