

Project Document

Angola

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| Project Title: | Reducing the Burden of HIV/AIDS in Angola. | |
| UNDAF Outcome(s): | <p>UNDAF Outcome #4: <i>Strengthened pro-poor economic growth and accountable macroeconomic management and integrated rural development, natural resources and energy management to promote environmental protection and adaptation to climate change.</i></p> | |
| Expected CP Outcome(s): | <p>OUTCOME 5: <i>National response to the HIV/AIDS and other priority diseases mainstreamed and implemented at national and local level</i></p> | |
| Expected Output/Annual Targets: | <p>Output 5.1: Strengthened institutional capacity of the National HIV/AIDS programme and STI activities</p> | <p>Targets:</p> <ul style="list-style-type: none"> i) Increase by 20,000 patients per year with sexual transmitted infections (STIs) diagnosed and treated according to national guidelines. ii) Increase by 15 per year number of functional reference laboratories. |
| | <p>Output 5.2: National health information systems strengthened including epidemiological surveillance</p> | <p>Target:</p> <ul style="list-style-type: none"> i) Increase by 100 per year staff trained in HIV/AIDS sentinel surveillance. ii) Increase by 20 per number health centres informing in timely and efficient manner. |
| | <p>Output 5.3: Expansion of the VCT and Integrated Centres for Treatment are supported nationwide</p> | <p>Target:</p> <ul style="list-style-type: none"> i) Increase by 50,000 per year number of people counselled and tested on HIV/AIDS. ii) Increase by 15,000 per year number of people living with HIV/AIDS (PLWHA) receiving antiretroviral (ARV) treatment (adults and children). |
| | <p>Output 5.4 Capacity developed for CSOs to engage in home care basis, palliative care and psycho-social support to PLHIV</p> | <p>Target:</p> <ul style="list-style-type: none"> i) Increase by 300 per year number of people from civil society organizations (CSOs), trained in psychosocial support and home care ii) Increase by 10,000 per year number of children and adults who receive psycho-social and nourishment support |

Implementing Partner:

▪ National Institute for Fighting Against HIV (Ministry of Health)

Responsible Parties:

▪ UNDP Angola

Programme Period: 1 Oct 2007 - 30 Sep 2010
Programme Component: HIV/AIDS
Project Title: Reduce the Burden of HIV in Angola
Project ID: 00046824 (Award # 00041138)
Project Duration: 3 years
Management Arrangement: DEX

Total Budget: US\$ 66.673.003, 00
Allocated Resources:
• Government _____
• Regular _____
• Other _____
Donor: GFATM US\$ 66.673.003, 00
• In Kind Contributions _____
Unfunded Budget: _____

Signature

Date

Name and Title

Agreed by Implementing Partner

José Dias Vieira Van Dunem

14.06.07

José Dias Vieira Van Dunem
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Agreed by UNDP

Gita Honwana Welch

14.06.07

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Country Director

Index

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|------|---------------------------------------|----|
| 1. | SITUATION ANALYSIS | 1 |
| 2. | STRATEGY AND PROJECT OBJECTIVES | 2 |
| 2.1. | <i>Project Objectives</i> | 2 |
| 2.2. | <i>Strategy</i> | 2 |
| 3. | PROJECT DELIVERABLES..... | 3 |
| 4. | RESULTS AND RESOURCES FRAMEWORK | 6 |
| 5. | ANNUAL WORK PLAN..... | 13 |
| 6. | MANAGEMENT ARRANGEMENTS..... | 40 |
| 7. | MONITORING PLAN AND EVALUATION..... | 41 |
| 8. | BUDGET | 43 |
| 9. | LEGAL CONTEXT | 43 |
| 10. | RISKS..... | 43 |

implementation of complimentary social services; (c) health workers (medical doctors, nurses, lab technician, etc.) through sensitization and training activities; (d) non-governmental organizations (NGOs) through training of their staff and funding for carrying out several projects on health and social care on VIH/AIDS control activities; and (e) school teachers and military trainers through training activities on VIH and STI prevention.

2. STRATEGY AND PROJECT OBJECTIVES

2.1. Project Objectives

The main goal of the project is to prevent HIV transmission and reduce social-economic impact of the HIV epidemic in Angola through the implementation of a multi-sectoral and integrated approach that reinforces and extends existing efforts in HIV prevention, treatment and surveillance while increasing institutional capacity, mobilizing and supporting people living with HIV/AIDS, coordinating partners and monitoring the distribution and use of resources. The project is composed of seven specific objectives:

- a) To strengthen the institutional capacity of the National HIV/AIDS programmes to manage HIV/AIDS and STI activities
- b) To strengthen the epidemiological surveillance system of the HIV/AIDS by continued development of sentinels surveillance site system and implementing and decentralized information system.
- c) To expand access to and demand for HIV/AIDS Voluntary counselling and testing services (VCT) nation wide
- d) To increase HIV prevention awareness and behavioral changes
- e) To reduce the vertical transmission of HIV and improve the quality of life of parents and children infected by HIV by means of a national PMTCT in maternities, hospitals and reproductive health services.
- f) To ensure integrated medical assistance to People Living with HIV/AIDS (PLWHA) through specialized centres.
- g) To expand psycho-social support actions for People Living with HIV/AIDS (PLWHA).

2.2. Strategy

For the achievement of the objectives, the main strategies of the projects are prevention, care and support, treatment, supportive environment and cross cutting aspects. They are:

- *Prevention:* Increasing HIV educational campaigns; training of peer activists; distribution of condoms; increase of the availability and access to voluntary counseling and testing (VCT) services;

- *Care and Support:* Implementation of interventions for reducing mother to child transmission; support to the treatment of sexually transmitted infections (STIs) and ensuring of safe blood supply.
- *Treatment:* Strengthening of clinical and laboratory capacity to provide and monitor antiretroviral treatment; treatment of HIV-related opportunistic infections by building capacity and assuring access to commodities in the public and private sectors in synergy with prevention efforts.
- *Surveillance:* Improvement of the capacity to evaluate programs and monitor changes in behavior, knowledge and spread of the disease over time.
- *Mobilizing and Supporting People with HIV:* Improvement of the delivery of socio-psychological services to PLWHA and encouragement of self-care among PL WHA.
- *Institutional Capacity Building:* Increase of the number of skilled health providers; strengthening of health facilities and non-governmental organizations (NGOs) at the municipal, provincial and national levels to ensure that the aims are achieved and sustainable.
- *Coordination of Partners:* Coordination and synergizing of the efforts of national, international, governmental, non-governmental and private entities to most effectively combat HIV/AIDS.
- *Monitoring and Distribution of Resources:* Improvement of the acquisition, management and conservation of essential drugs, supplies and equipment

3. PROJECT DELIVERABLES

The following are the main deliverables planned under the current project by activity:

a) Activity 1: Strengthening of institutional capacity

- 40 staff recruited to support the National Institute for Fight against AIDS at professional, administrative and support levels.
- 72 people recruited to reinforce provincial team to respond to HIV/AIDS.
- 216 people from governmental, civil society trained in strategic planning, management, monitoring & evaluation, advocacy and project proposal writing.
- 3 workshops conducted to evaluate yearly performance.
- 12 meetings conducted with provincial teams to evaluate performance and plan future activities.
- 108 supervision visits to evaluate the performance and quality of services in clinical areas.

- 12 meetings held with other partners (governmental & non-governmental).
- 21 referral laboratories equipped.
- 34.848 kits purchased for testing viral load & PCR.
- 90 lab technicians trained in advanced-level laboratory: PCR real time (HIV & Hepatitis B), ARV Resistance testing, immune fluorescence.
- 108 supervision visits to evaluate the performance and quality of services in laboratories and blood banks.
- 1.000 copies of the norms and criteria for selection for blood donors distributed.
- 162 technicians of the blood banks trained on counseling and criteria for restrictions on blood donors.
- 1 logistician recruited to reinforce the logistics team at central level of National Blood Bank.
- 45 blood banks equipped.
- 30.000 copies of the algorithms about elimination criteria for blood donors distributed

b) Activity 2: Strengthening of epidemiological surveillance

- 21 surveillance sites equipped in priority provinces and municipalities
- 54 Supervision visit to monitor case notification system
- 6.000 HIV/AIDS surveillance manuals for health personnel distributed
- 150 Surveillance technicians trained in Information Technology
- 180 Technicians teams trained working in surveillance sites and within the information system.
- 150 Technicians teams trained at Angolan Armed Forces in statistics and surveillance methods
- 3 National Seroprevalence studies conducted: Bi-annual Antenatal study, others (Truck drivers, TB patients, Prisoners, Sex Workers, MSM)
- 30.000 Case notification forms (HIV) distributed
- 165 National surveillance technician staff trained in data analysis methods
- 3 Annual coordination/evaluation meeting held for the national surveillance system (2 participants per province)

- 3.000 Bulletins of HIV/AIDS epidemiological, elaborated and published in the Armed Forces of Angola
- 15.000 Bulletins of a national HIV/AIDS Epidemiological distributed

c) **Activity 3:**

d) **Activity 4:**

4. RESULTS AND RESOURCES FRAMEWORK

| <p>Intended Outcome as stated in the Country Programme Results and Resource Framework: OUTCOME 5 (CPAP): National response to the HIV/AIDS and other priority diseases mainstreamed and implemented at national and local level</p> <p>Outcome indicators as stated in the Country Programme Results and Resources Framework, including baseline and targets:</p> <p>Indicators:</p> <ul style="list-style-type: none"> i) Number of provincial operational plans consistent with the national strategic plans ii) Number of people undertaking Counselling Voluntary for HIV/AIDS iii) Number of DOT centres providing regular and efficient treatment for TB iv) Number of DOT centres providing regular and efficient treatment for TB <p>Baselines:</p> <ul style="list-style-type: none"> i) 5 provinces elaborated provincial operational plans ii) Limited capacity of the health system to implement the national strategy iii) Insufficient coordination and inclusion of CSOs and other stakeholders in the implementation of the national response | | | | | |
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| <p>Applicable Key Result Area (from 2008-11 Strategic Plan): Poverty Reduction and Achievement of MDGs</p> <p>Partnership Strategy: Partnerships are crucial for achieving impact through joint advocacy, knowledge sharing, networking, increasingly resource mobilization and possible joint programming and evaluation</p> | | | | | |
| <p>Project title and ID (ATLAS Award ID): 00046824 (Award # 00041138)</p> | | | | | |
| INTENDED OUTPUTS | OUTPUT TARGETS FOR (YEARS) | INDICATIVE ACTIVITIES | RESPONSIBLE PARTIES | INPUTS | |
| <p>Output 5.1 Strengthened institutional capacity of the National HIV/AIDS programme and STI activities</p> <p>Indicators:</p> <ul style="list-style-type: none"> i) Number of patients with STIs diagnosed and treated according to national guidelines ii) Number of functional reference laboratories established <p>Baseline:</p> <ul style="list-style-type: none"> i) 43,244 patients with STIs diagnosed and treated according to national guidelines (2008) ii) 33 functional reference laboratories established (2008) | <p>Target:</p> <ul style="list-style-type: none"> i) Increase by 20,000 patients per year with STIs diagnosed and treated according to national guidelines ii) Increase by 15 per year number of functional reference laboratories established | <p>Activity 1: Strengthening of institutional capacity</p> <ul style="list-style-type: none"> ▪ Quarterly meetings with provincial teams every 6 months to evaluate performance and plan future activities. ▪ Supervision visits to every province to evaluate the performance and quality of services in clinical areas: VCT, PMTCT, Pharmacy, Treatment, etc. ▪ Periodic Meetings with other partners (governmental & non-governmental). ▪ Strengthen the national Reference Laboratory network (6 laboratories in Luanda, 10 provincial capitals, 9 in municipalities) ▪ Create conditions for Viral Load & PCR testing by purchasing reagents. ▪ Train advanced-level laboratory technicians in: PCR real time (HIV & Hep. B), ARV Resistance testing, immunofluorescence. ▪ Supervision visits to every province to evaluate the performance and quality of services in laboratories and blood banks. | <ul style="list-style-type: none"> ▪ UNDP Angola ▪ National Institute for Fighting against HIV (INLS) | <p>10,265,087 USD (corresponding to Objective 1 of the GF County Proposal for years 3, 4 and 5 of the Project: To strengthen the institutional capacity of the National HIV/AIDS programmes to manage HIV/AIDS and STI activities)</p> | |

| INTENDED OUTPUTS | OUTPUT TARGETS FOR (YEARS) | INDICATIVE ACTIVITIES | RESPONSIBLE PARTIES | INPUTS |
|--|--|---|---|--|
| Output 5.2 National health information systems strengthened including epidemiological surveillance Indicators: i) Number of staff trained in HIV/AIDS sentinel surveillance ii) Number of Health Centres informing in timely and efficient manner Baseline: i) 289 staff trained in HIV/AIDS sentinel surveillance (2008) ii) 45 health centres informing in timely and efficient manner | Target: i) Increase by 100 per year staff trained in HIV/AIDS sentinel surveillance ii) Increase by 20 per number health centres informing in timely and efficient manner Means of verification: Training reports; project reports; surveys of used of the health centres. | <u>Activity 1: Strengthening of institutional capacity (Cont...)</u> <ul style="list-style-type: none"> ▪ Reproduction and dissemination of norms and criteria for selection for blood donors. ▪ Training of teams at Blood Banks in counselling and criteria for restrictions on blood donors. ▪ Reinforce of the logistics team at central level of National Blood Bank ▪ Maintenance of the provision of reagents and rapid tests for blood banks ▪ Equipping of Blood Banks (procurement list) (# sites equipped). ▪ Creation and distribution of algorithms to explain elimination criteria for blood donors. <u>Activity 2: Strengthening of epidemiological Surveillance</u> <ul style="list-style-type: none"> ▪ Equipping of surveillance sites in priority provinces and municipalities ▪ Supervision visit to monitor case notification system. ▪ Reproduction and dissemination of HIV/AIDS surveillance manuals for health personnel. ▪ Training of statisticians and surveillance technicians in Information Technology. ▪ Training of teams working in surveillance sites and within the information system. ▪ Training of technical teams at Angolan Armed Forces in statistics and surveillance methods (50 per year) ▪ Conduction of National Seroprevalence studies: Bi-annual Antenatal study, others (Truck drivers, TB patients, Prisoners, Sex Workers, MSM) ▪ Reproduction of case notification forms (HIV) ▪ Training of national surveillance staff in data analysis methods ▪ Carrying out of annual coordination/evaluation meeting for the national surveillance system (2 participants per province) ▪ Elaboration and publication of HIV/AIDS Epidemiological Bulletin in the Armed Forces of Angola. ▪ Elaboration and publication of a national HIV/AIDS Epidemiological Bulletin. | <ul style="list-style-type: none"> ▪ UNDP Angola ▪ National Institute for Fighting against HIV (INLS) | (corresponding to Objective 2 of the GF Country Proposal for years 3, 4 and 5 of the Project: <i>To strengthen the epidemiological surveillance system of the HIV/AIDS by continued development of sentinel surveillance site system and implementing and decentralized information system</i>) |

| INTENDED OUTPUTS | OUTPUT TARGETS FOR (YEARS) | INDICATIVE ACTIVITIES | RESPONSIBLE PARTIES | INPUTS |
|--|--|--|--|---------------|
| Output 5.3 Expansion of the VCT and Integrated Centres for Treatment are supported nationwide Indicators: ii) Number of people counselled and tested on HIV/AIDS iii) Number of PLWHA receiving ARV treatment (adults and children) Baseline: ii) 238,941 people counselled and tested on HIV/AIDS iii) 13,800 PLWHA receiving ARV treatment (adults and children) | Target: ii) Increase by 50,000 per year number of people counselled and tested on HIV/AIDS iii) Increase by 15,000 per year number of PLWHA receiving ARV treatment (adults and children) Means of verification: Project reports, national statistics. - iii) 13,800 PLWHA receiving ARV treatment (adults and children) | Activity 3: Expansion of VCT and other HIV services. <ul style="list-style-type: none"> ▪ Creation of VCT centres specifically for military regions and provincial commands (police, fire fighters, incarcerated populations). ▪ Increase of the national coverage of VCT centres. ▪ Establishment of mobile VCT facilities. ▪ Acquisition of rapid tests for HIV, syphilis and Hep. B ▪ Training of counsellors to work in VCT centres. Activity 4: Increase of HIV prevention awareness <ul style="list-style-type: none"> ▪ Carry out national KAP studies to evaluate behaviour and knowledge in the population. ▪ Incorporation of HIV/AIDS and sexual responsibility material into the national school curriculum. ▪ Training of out-of-school youth as HIV/AIDS peer educators. ▪ Training of school-going youth as HIV/AIDS peer educators. ▪ Training of primary and secondary school teachers in basic HIV/AIDS information. ▪ Acquisition of basic educational materials for HIV/AIDS & Gender clubs in Schools. ▪ Reinforcement and expansion of HIV/AIDS and Gender clubs in schools and universities. ▪ Elaboration, reproduction and distribution of IEC materials for populations in transition (truck drivers, internally displaced people, migrants, etc.). ▪ Training of MINARS staff members in basic HIV/AIDS information. ▪ Training of staff working in Military/Police training centres in HIV/AIDS prevention. ▪ Carrying out of KAP survey in the workplace: Construction, Telecommunications, diamond mines, transport sector. | <ul style="list-style-type: none"> ▪ UNDP Angola ▪ National Institute for Fighting against HIV (INLS) <p>(corresponding to Objective 3, of the GF Country Proposal for years 3, 4 and 5 of the Project: <i>To increase HIV prevention awareness and behavioural changes</i>)</p> | 2.913.661 USD |

| INTENDED OUTPUTS | OUTPUT TARGETS FOR (YEARS) | INDICATIVE ACTIVITIES | RESPONSIBLE PARTIES | INPUTS |
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| Output 5.3 (Cont...) | | <p>Activity 4: Increase of HIV prevention awareness</p> <p>(cont...)</p> <ul style="list-style-type: none"> ▪ Dissemination of national HIV/AIDS in the workplace law: lawyers, provincial directors of justice, magistrates, health workers, union leaders, work inspectors, employers. ▪ Promotion of a National tripartite committee Activities (1st of May celebration): Parade, fun run, Fair (VCT centers) and visits to AIDS patients. ▪ Training of teachers in professional training centres and workplaces en basic HIV/AIDS information (100 per year). ▪ Carry out annual campaign related to Stigma & HIV/AIDS in the Workplace. ▪ Reproduce IEC materials for HIV/AIDS in the Workplace. (# of materials distributed) ▪ Training of Religious Leaders in basic HIV/AIDS information. ▪ Carrying out of primary prevention projects directed at youth with community-based organizations. ▪ Carrying out primary prevention projects directed at vulnerable populations (specifically sex workers) with community-based organizations ▪ Training of local NGOs in the areas of: Administration, management, monitoring & evaluation. ▪ Carrying out of a national HIV/AIDS awareness campaign with Children and adolescents (Reproduce materials). ▪ Conduction of a mass media campaign for the prevention of HIV/AIDS and promotion of VCT centres. ▪ Production of HIV/AIDS IEC material in Portuguese and national languages for vulnerable populations. ▪ Training of trainers in national NGOs in Interpersonal communication for behaviour change. ▪ Acquisition of condoms. | <ul style="list-style-type: none"> ▪ UNDP Angola ▪ National Institute for Fighting against HIV (INLS) | |

| INTENDED OUTPUTS | OUTPUT TARGETS FOR (YEARS) | INDICATIVE ACTIVITIES | RESPONSIBLE PARTIES | INPUTS |
|-----------------------------|----------------------------|---|---|--|
| Output 5.3 (Cont...) | | <p>Activity 5: Reduce vertical transmission.</p> <ul style="list-style-type: none"> ▪ Reproduction and distribution of norms and protocols for PMTCT service provision. ▪ Equipping of municipal PMTCT sites (Equipment list). ▪ Training of community members (activists) to create awareness related to PMTCT services ▪ Acquisition and distribution of PMTCT medications (to stop vertical transmission) for all national centres. | <ul style="list-style-type: none"> ▪ UNDP Angola Fighting against HIV (INLS) | <p>(Corresponding to Objective 5, of the GF Country Proposal for years 3, 4 and 5 of the Project: <i>To reduce the vertical transmission of HIV and improve the quality of life of parents and children infected by HIV by means of a national PMTCT in maternities.</i></p> |

| INTENDED OUTPUTS | OUTPUT TARGETS FOR (YEARS) | INDICATIVE ACTIVITIES | RESPONSIBLE PARTIES | INPUTS |
|--|---|---|--|---|
| <p>Output 5.4 Capacity developed for CSOs to engage in home care basis, palliative care and psychosocial support to PLHIV</p> <p>Indicators:</p> <ul style="list-style-type: none"> i) Number of people from CSOs trained in psychosocial support and home care for PLWHA ii) Number of children and adults receiving psycho-social and nourishment support <p>Baselines</p> <ul style="list-style-type: none"> i) 493 trained in psychosocial support and home care for PLWHA ii) 6747 of children and adults received psycho-social and nourishment support by 2007 | <p>Target:</p> <ul style="list-style-type: none"> i) Increase by 300 per year number of people from CSOs, trained in psychosocial support and home care ii) Increase by 10,000 per year number of children and adults who receive psycho-social and nourishment support <p>Means of verification: Project reports; workshop reports; surveys and studies.</p> | <p>Activity 7: Expand psycho-social support.</p> <ul style="list-style-type: none"> - Training of NGOs, Faith-Based Organizations and community volunteers in psycho-social support and home-based care for PLWHA. - Creation of educational awareness materials for PLWHA, family members and community members related to HIV/AIDS treatment, care and prevention. - Strengthening of existing and support new networks of PLWHA to create support/adherence groups connected to clinical services. - Support projects for PLWHAs (Adults & children); psycho-social support, adherence support, home-based care, nutritional support <p>Activity 8: Capacity building of the Ministry of Health and the INLS.</p> <ul style="list-style-type: none"> - Capacity development on programme management. - Capacity development on financial management. - Capacity development on procurement and supply management. - Capacity development on monitoring and evaluation. | <ul style="list-style-type: none"> ▪ UNDP Angola ▪ National Institute for Fighting against HIV (INLS) ▪ National network of NGOs for HIV (ANASO) ▪ Angolan and international NGOs. | <p>2.716.906 USD</p> <p>(Corresponding to Objective 7, of the GF Country Proposal for years 3, 4 and 5 of the Project: <i>To expand psycho-social support actions for People Living with HIV/AIDS</i>).</p> |