

Annual Progress Report - 2007

Award ID:

00046947

Award Title:

Support to National HIV/AIDS Programme (NEP/07/007)

Project ID:

00056165

00056166

00056496

Source of Funds:

TRAC and Cost Sharing

Executing Modality:

Direct Implementation

Designated Institution:

UNDP

Project Beginning Year:

October 2006

Project Ending Year:

September 2008

Signature

Name: Dr. Mohammed Siddig

Programme Manager HIV/AIDS PMU

UNDP

Annual Progress Report – Part I

I. A Introduction to Programme Components (maximum 1/2 page)

Imagine that you are visiting UNDP Headquarters in New York, you find yourself in the elevator with the UNDP Administrator. You have about 30 seconds to tell him about your project, its objectives and strategies. What do you tell him?

Project Overview

The HIV/AIDS PMU UNDP continued the implementation of the comprehensive programme entitled: Support to the National HIV/AIDS Programme. A revised project document was approved to capture the Global Fund Round Two Phase II grant and the addendum in the agreement between DFID and UNDP. During 2007, HIV/AIDS PMU implemented 119 projects in HIV/AIDS prevention and care delivered by 77 partners in 27 districts. The activities implemented ranges from information and awareness; peer education; Voluntary Counselling and Testing and Sexually Transmitted Infection services; harm reduction; rehabilitation; and care and support to people living with HIV/AIDS to safe blood supply. The services were primarily provided to the mobile population and their families; young people; injecting drug users; people living with HIV/AIDS and uniformed personnel to reduce their risk of HIV/AIDS infection, men having sex with men and male sex workers.

• Key aspects of the project strategy, including any innovations in 2007

Project Strategy:

- Continuation of comprehensive services for most at risk populations
- Mobilization of existing networks in bringing the communication and technical know how gaps.
- Coordination with stakeholders at all levels
- Promote multi sectoral and decentralized response in HIV/AIDS by establishing linkage with other related programmes.
- Establish linkage of HIV/AIDS with MDGs and mainstreaming into the planning process.
- Identify service gaps through mapping of existing services such as STI treatment, VCT, safe transfusion services, diagnostic facilities for PLHWA including pediatric facilities and services for MARPs to assist in developing more effective coverage and program.
- Document the best practices and lessons learned and share them with the proposed semi autonomous body as well as with other stakeholders.

Innovations in 2007:

- Initiation of livelihood programme for people living with HIV/AIDS
- The project developed a detail capacity building plan to provide better technical support to the NGOs. Regional review meetings were conducted to update the partners on recent developments, reporting template and to provide a forum for the partners to bring out their issues and address it.

 In this year, UNDP implemented the standard administrative and program cost proportion per service line. The proportion differs between the service line due to different scope of work. This was implemented for this contractual period and has contributed maintaining standard costing per service line.

Key partnerships

This project is implemented in close collaboration with the government and other external development partners. The project is assisting in building national level capacity by providing trainings and contributing in national system strengthening efforts such as logistic committee and strategic information technical working group. Moreover, the project has implemented part of the national HIV/AIDS action plan directly contributing in achieving the one harmonized program goal.

Like wise, the project is also complementing the effort of UNODC in implementing harm reduction program. The effort ranges from establishing additional drop in centre, expanding coverage in the district by implementing multiple harm reduction programmes and supporting the entire harm reduction program with rehabilitation services.

I. B - Project Contribution to the UNDP Outcomes - Summary

Practice Area: HIV/AIDS

Service Line: Development planning, implementing and HIV/AIDS response

Intended Outcome: Capacities created for an expanded response to the HIV/AIDS epidemic

Outcome Baseline:

- (1) NGO and other Civil society have not been actively involved in HIV/AIDS response.
- (2) National strategy exists however, its capacities to respond to the HIV/AIDS weak.

Outcome Indicator: (1) Number of NGOs involved in response to HIV/AIDS issues increased from 17 in 2005 by 50%.

(2) New national entities identified and approved for HIV/AIDS response.

2007 Annual Target: 1. HIV/AIDS comprehensive prevention packages provided to higher risk groups (IDUs, MSMs, PLWHA, young people, migrants & their families)

- 2. HIV/AIDS care, support services throughout a continuum from health facilities to home and communities are enhanced
- 3. National capacities have improved to effectively manage and monitor the national HIV/AIDS program

Key Project Achievements contributing to the Annual Target and/or Intended Country Programme Outcome (list up to three with a very brief description, and quantitative data where relevant):

- 519,639 migrants and families reached through outreach and peer education program;
 1944 IDU/DU receiving detoxification, treatment and counseling services through
 Rehabilitation Centres;
 1674 IDU receiving Continuous Harm Reduction Services;
 39029 MSM/MSW reached by at least one component of comprehensive package;
 2662 MSM/MSW completed voluntary counseling and testing process and
 2502 PLHA accessing crisis care and support.
- Semi Autonomous Entity was formed to coordinate the national HIV/AIDS activities.
- 1344 HIV/AIDS patients enrolled in ART program

I. C. Drivers of development effectiveness

• Developing national capacities

The project has entered into partnership with seventy seven non governmental organizations out of which most are community based organizations. The project has regularly conducted capacity building training to the partners in the area of program monitoring and evaluation, financial management, counselling, STI case management, and lab management UNDP is also an active member of national M&E technical working group and the national logistic committee and has contributed extensively in the formulation of national strategic plan framework. UNDP, with DFID resources have contributed to the strengthening of networks and civil society which is one of the top agenda of the national HIV/AIDS strategy.

UNDP has recently supported the first national congress of PLHAs. Near about 300 PLHAs from 56 districts witnessed the general election of the NAP+N and drafted the declaration of 1st National Congress of PLHA in Nepal.

Moreover, with DFID resources UNDP has supported the Semi Autonomous Entity in establishing its office and has be providing other immediate supports.

With the objective of the strengthening the network, UNDP has channalised resources through networks for strengthening the CBOs under their constituencies. National Association of People Living with HIV (NAPN) - PLHA network and Recovering Nepal – Drug users' networks are supported.

• Enhancing national ownership

UNDP has the responsibility of the procurement of Anti Retro Viral (ARV), pharmaceuticals, medical products, laboratory reagents and equipments. All these drugs and health commodities are given to the government for national distribution. UNDP has installed CD4 count machines in the government

hospitals. Moreover, UNDP is also supporting the national blood bank to strengthen the blood safety program.

Advocating for and fostering an enabling policy environment

As part of the UNDP's mandate to build the national capacity and to exit the implementation role, UNDP together with other stakeholders advocated for forming of semi autonomous entity to coordinate the entire national HIV/AIDS response. The entity was formed as a result of this effort.

Seeking South-South Solutions

The Regional Center in Colombo (RCC), UNDP selected this project's achievement during MSA period as best practice. A best practice document was prepared by consultants from the Regional Center.

Promoting Gender Equality and Social Inclusion

UNDP continued the support to the harm reduction activity and rehabilitation services for female injecting drug users

One of the major accomplishments in 2007 was the creation of livelihood opportunities for women living with HIV/AIDS. This is a completely new program implemented in Nepal where the HIV/AIDS prevention and care program expanded to address additional essential needs of infected people. Twenty-five infected women, mostly from far west districts and mostly widows, were included in the training on entrepreneurship. In the next training phase they will receive seed money to run small businesses. This will be replicated for other vulnerable groups in 2008.

Forging partnerships for results

This project is implemented in close collaboration with the government and other external development partners. The project is assisting in building national level capacity by providing trainings and contributing in national system strengthening efforts such as logistic committee and strategic information technical working group. Moreover, the project has implemented part of the national HIV/AIDS action plan directly contributing in achieving the one harmonized program goal.

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Challenges and how they were overcome

- a. In 2007 the security situation in Nepal was challenged by constant strikes and bandh especially in the Terai. The strikes and bandh have affected timely reporting and timely delivery of IEC and communities.
- b. Recording and reporting systems, especially among the community based organisations are still very weak despite repeated orientation. The sub recipient managing the CBOs has developed a simple format for record keeping and reporting and is constantly providing on the job training to the CBOs.
- c. Six months delay in grant signing between UNDP and Global Fund created delay in contract signing with sub recipients allowing limited time to achieve the very steep targets.
- d. At time inefficient communication between the Local Fund Agent, Global Fund and UNDP has delayed some activities. For e.g. The Procurement Supply Managements Plan was submitted on 7th June 2007

but the feedback was received after more than eight months (on February 18th 2008). The last Progress Update and Disbursement Request of year 1 were submitted to LFA on 15th January 2008 which was forwarded to the Global Fund Secretariat almost after two months (11th March 2008).

I.D. - Lessons Learned

- 1. While working with vulnerable groups it is highly important to integrate livelihood program in order to support the behavior change process.
- 2. UNDP is implementing various projects on poverty reduction and it is important to build a strong partnership between the projects to provide a comprehensive support to the vulnerable groups.

Annual Work Plan

Award ID: 00046947
Award Title: Management Support to the National HIV/AIDS Programme
Year: 2007

Project ID	Output & Output	t Annual Target	Kev Artivities	Rosells resiret milastenas	% Completion	Summary of		Planned Budget	at a
,	indicators	0		AN SEARCH REGIONALS	Annual target	annual target	Fund	Budget	Expenditure
		1.1 Eight advocacy session for	1.1.1 Conduct orientation/sensitisation workshop with ministry, DACC and DDC as well as other line agencies <u>Milestenes/Defixenables</u> .				30000	17000	
		services and providing a supportive environment to access those services	Q1: 1 sensitivation workshop conducted per district in 2 districts	1 each sensitisation workshop conducted in Kathmandu and Dang	*100%	8 advocacy workshops were			313442
		conducted in 8 districts	Q2: 1 sensitisation workshop conducted per district in 6 districts	I each sensitisation workshop conducted in Accham, Doti, Banke, Jhapa, Rupandehi and Chitwan		conducted as per plan			
			1.2.1 increase awareness and knowledge on safer injecting and safer sex among IDUs, MSM, MSW, PLWHA and Migranits, increase access to preventive and care and support services						4090175
			1.2.1.1 Comprehensive Package for IDUs a) IDU/DU receiving Detox, Treatment, Counselling Services through Rehabilitation Centers (1200 IDU/DU detoxified)	1944 IDU/DU receiving Detox, Treatment, Counselling Services through Rehabilitation Centers			30000	638014	
			Mikstones/Deliverables;				-		
			Q1. 300 IDUs/Dus in each Quarter.	306 IDU received detox and treatment services					
			Q2.300 IDUs/Dus in each Quarter	394 IDU received detox and treatment services					
-			Q3.300 IDUsiDus in each Quarter	463 IDU received detox and treatment services					
			Q4. 300 IDUs/Dusis each Quarter	781 IDU received detox and treatment services					
			b) IDU receiving Continuous Harm Reduction Services	1674 IDU receiving Continuous Harm Reduction Services	•		30000	482655	
			Milestones/Deliverables;						-
			Q1. 100 IDUs	217 IDUs			-		
			Q2.1001DUs	485 IDUs					
			Q3. 150 IDUs	548 IDUs					
			£4. 30 100 8	\$4.4 IDUS	•				
			c) Increase political and community support for the	Only 3 discussion could be conducted. This			30000	75000	
		1.2 Comprehensive package	implementation of HR Programme	management issues with the implementing NGO			2	9990	
		for IDUs in 10 districts (Kailali, Thana, Parsa, Kaski, Sunsari,	Milestones/Deliverables;						
		Kathmandu, Rupandehi,	Q1. 1 advocacy panel discussion in electronic media	1panel discussion conducted					
	-	Chitwan, Lalitpur, Bhaktapur)		1panel discussion conducted					
		MSM and MSW in 7 cities	Q3. 1 advocacy panel discussion in electronic media	Ipanel discussion conducted					
		(Itahari, Bhairahawa, Pokhara,	(Itahari, Bhairahawa, Pokhara, Q4. 2 advoccy panel discussion in electronic media	No progress	80%				
		Kathmandu, Lalitpur, Nepalmini, Dhanisa)	1.2.1.2 21000 MSW & MSM receiving at least one	39029 MSW & MSM receiving at least one			30000	701748	
		PLWHA in 9 dist	Component of Comprehensive services Milestones/Definerables;	component of Comprehensive services	•				
			Q1: 3000 MSM, MSW	9892 MSM/MSW reached					
			Q2: 6000 MSN, MSW	7101 MSM/MSW reached					

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	310357							480000	357528	20000	25000						175275						119650						64888						15865						58425		
	30000							30000	30000	30000	30000						30000						30000						30000						30000						30000		
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6942 MSM/MSW reached 15094 MSM/MSW reached	2502 PLWHA accessing crisis care services		346 PLWHA acressed crisis care	488 PLWHA accessed crisis care	610 PLWHA accessed crisis care	1058 PLWHA accessed crisis care			519639 Migrants receiving services through	outreach and information centers			34,444 migrants & families reached	77,082 migrants & families reached	97983 migrants & families reached	116,552 migrants & families reached	6287 People tested for HIV utilising VCT services	:	654 people tested	1167 people tested	1631 people tested	2027 people tested	682 teachers trained (Due to delay in contract with UNICEF the set target could not be reached)		0	0	0	682 teachers trained	1165 peer educators trained to conduct peer	8	0	0	280 teachers trained	885 teachers trained	10449 youths received services through the YFISC		1912 youths received services	2016 youths received services	6521 youth received services	1300 youths received services	2289 uniformed personnel tested		254 uniformed services tested
Q3: 6000 MSM, MSW Q4: 6000 MSM, MSW	1.2.1.3 750 PLWHA accessing crisis care services	Milestonasi Deliverables:	QI: 150 PLWHA	Q2: 200 PLWHA	Q3: 200 PLWHA	Q4: 200 PLWHA	1.2.1.4 Comprehensive package for Migrants & their families		a) Migrants receiving services through outreach and	information centers		Milestones/Deliverables;	Q1. 70,500 Migrants & Families	Q2. 70500 Migrants & Families	Q3. 70500 Migrants & Families	Q4. 70500 Migrants & Families	b) People tested for HIV utilising VCT services	Milestones/Deliverables:	Q1. 1,632 people tested	Q2. 1,632 people tested	Q3.1632 people tested	Q4. 1632 people tested	1.3.1 Train 960 teachers from 32 districts on life skills and H1V/A1DS	MilestonesiDeliverables;	Q1. 240 teachers trained	Q2. 240 teadiers trained	Q3. 240 teachers trained	Q4, 240 teachers trained	1.3.2 Conduct peer education program among out of school youth and other vulnerable groups	Milestones/Deliverables;	Q1. 300 trained PE mobilised	Q2. 300 trained PE mobilised	Q3. 300 trained PE mobilised	Q4. 300 trained PE mobilised	youth friendly service center	Milestones(I) eliperables;	Q1. 1000 youth receiving services through the center & outreach	Q2. 1000 youth receiving services through the center & outreach	Q3. 1000 youth receiving services through the center & outreach	Q4. 1000 youth receiving services through the center & outreach	1.5.1 Conduct VCT/STI services in uniformed services		Q1. 300 personnel tested
																										1.3 Support towards	integratation of HIV/AtDS, STI	and life skills in high school	curricula provided in 32 districts						1.4 Provide Information and counseling to 4000 young	people in one district through	center (YFSC)				- Andrewson and	1.5 Provide counseling and	resting services to 1200
		Output 1: To	Reduce FILV/AILUS	amone voline	neorle aved 10-24	labor migrants.	MSW, MSM, IDUs	through the	provision of	preventative	scrvices																								<u> </u>		· · ·				<u> </u>		<u> </u>
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	%0		į	100%	100%	100%	100%	100%	100%	100%	100%		100%	
232 uniformed personnel tested 497 uniformed personnel tested 1306 uniformed personnel tested	Due to the delay in contract signing with FPAN, this activity could not be initiated in 2007		1344 patients on ART			Drugs were procured as per plan		Kits procured as per plan		Supplies and reagents procured as per plan	2 CD4 machines procured Procured as per plan		44 CBOs supported	
Q2.300 personnel tested Q3.300 personnel tested O3.300 personnel tested O3.300 personnel tested	1.6.1 Hotline services Mikstones[Delicerables.	Qt. 1000 persons accessing hottine services Q2. 1000 persons accessing hottine services Q3. 1000 persons accessing hottine services Q4. 1000 persons accessing hultine services	2.1.1 Procurement of ART for 1200 PLWHAs Misstones/Deliverables Q1.300 patients on ART	Q2.300 patients on ART Q3.300 patients on ART Q4.300 patients on ART	2.1.2 Procutement of STI/OIs Drugs Milestones/Deliverabiles. As per National Procurement and Suprly Manaugement Plan	2.1.3 Procurement of ART drugs and other essential medical supplies for 60 Childrens MilestonesiDelies: AffectonesiDelies: As per National Procurement and Supply Manangement Plan As per National Procurement and Supply Manangement Plan	2.1.4 Procurement of HIV test kits and commodities required for National Public Health Lab and other 7 districts and 28 VCT sites Milestaus/Elbeitscrables: As per National Procurement and Suprly Manangement Plan	2.1.5 Procurement of Test Kits for PMTCT Mitestones/Debicorables: As per National Procurement and Supply Monongenent Plan	2.1.6 Procurement of STI test Kits Milestones/Deliverables; As per National Procurement and Supply Management Plan	2.1.7 Procurement of RT- PCR- Machine (Viral Load), Training & Supplies, Reagents and Human Resources Milestons/Deliperables: As per National Procurement and Supply Menangement Plan	2.1.8 Procurement of CD4 Machine and Reagents Milestons/Deliverables: 2.04 Machine 2.1.9 Procurement of Harm Reduction Supplies	Milestones/Deliverables. For 500 Regular Clients	2.2.1 Support to community organisation to assist PLWHA	Mitestonus/Delityrables; Q1.9 GEOs supported Q2.9 GEOs supported Q3.9 GEOs supported Q3.9 GEOS supported
the VCT centre Q3.300 personnel tested Q3.300 personnel tested Q4.300 personnel tested Q4.300 personnel tested	1.6 Provide information and counselling on HIV/AIDS to	4000 individual through hotline services					2.1 Procure Drugs and Lab Supplies to support the	national procureinent plan						z.z.create opportunites for provision of care, support and treatment for PLWHA by supporting 39 CBOs
							Output 2: Bstablish	a	inroughout a continuum from health facilities to home and	community				

15022												
44289						33000						100000
30000						30000						30000
. 70%						100%						100%
29 persons supported most representing civil society for attending conference and capacity building						4 Networks supported		2 Network supported	0	0	2 Network supported	Quality management training received by 30 technical personnel phlebotomist trained on blood grouping
3.1.1 Participation in National & International conference and capacity building and technical support conference	Milestones/Deliverables;	Q1.1 participant attented national and international conference	Q2. I participant attended national and international conference	Q3. 2 participant attended national and international conference	Q4.3 participant ettended national and international conference	3.1.2 Provide Financial and technical support to networks	Milestones/Deliverables	Q1.1 Network supported	Q2.1 Network supported	Q3.1 Network supported	Q4.1 Network supported	3.3.1 Training and infrastructure (equipment) support for strongthening national blood bank
				strengthening of 3.1 Capacity entanced of 4 capacities in ational networks, 60 partner	organisation and NGOs and 7 PMU staffs							3.3 Provide support to Safe blood Supply
			Output 3:	strengthening of	organisation and	monitoring & supervision of	HIV/AIDS	programme.				

Risk Log

Award ID: Award Title:

00046947 Management Support to the National HIV/AIDS Programme

2007

Year:

			-				
Status							
Last Update	31/07/2007			31/07/2007		70007207	1002/10/10
Date Identified	31/07/2007 31/07/2007			31/07/2007 31/07/2007		7000/2018	21/01/2001
Author	M&E Officer	M&E Officer	·		M&E Officer		
Ожие	РМ	PM			PM		
Countermeasures / Management Owner Response	HIV/AIDS PMU will help all the PM inbrecipients to develop proper and take over mechanism.	Regular meetings are conducted with the government officials.	Simonthly meetings are conducted with the team of the National	Centre For AIDS and STD Control.	Develop contingency plan for operating services in the situation	of conflict and strikes jointly with tub recipients.	
Impact & Probability	7 % 7 4					- W	
Category	Operational	Political			Security		
SN Description	Frequent changes in the management of key project partners including the NGO partners.		Frequent changes in the government and	bureaucracy may hinder understanding of the issues and interpretation of policies	3 implementation of the project activities due to	conflict and prolonged strikes and bandhs (closures) in the country	()
Z		2			6,		

Issues Log

Author PM7/4/2008 PM Change Date 17/10/2007 Status With the introduction of stock reporting format and timeline, prepared and shared with sub service delivery point and the stock with limited shelf life is recipients which has resulted UNDP has provided on the solved. Two months buffer used immediately to avoid Timeline and template for stock maintained at every in regular supply to drugs this issue has been largely ob orientation to NGOs consumption report was submitting the STI drug expiry of drugs Status Sub recipienets are not regularly sending the STI drug consumption report Limited management capacity of the sub Date Identified Description and Comments Unigold and capillus expiry Management Support to the National HIV/AIDS Programme recipients 31/07/2007 31/07/2007 31/07/2007 Problem 00046947 Problem Other 2002 0 Award Title: Award ID: Year:

		Communic	Communication and Monitoring Plan	g Plan
Award ID:	00046947		Var.	
Award 11ue: Year:	Management Suppo 2007	Management Support to the National HIV/AIDS Programme 2007	DS Programme	
Type of Action	Stakeholders	Due By	Completed On	Status Details
1st Trimester report to GFATM		15/05/2007	15/05/2007	1st trimester report for 2007 was submitted to the Global Fund on time.
Semi Annual Progress Report to DFID		31/07/2007	31/07 2007	Report was submitted on time
2nd Trimester report to GFATM		15/09/2007	15/09/2007	Report was submitted on time