UNICEF Somalia - GFATM HIV Grant 2015-2017

Programme Proposal

SUMMARY PROJECT OUTLINE

Applicant Organisation Name	United Nations Development Programme (UNDP) Somalia
Address:	UNDP Somalia UNON — Prefab D4 Gigiri P.O.Box 28832 00200 Nairobi Kenya
Key Contact Person	Catriona Byrne – HIV Programme Specialist
Program Proposal Name	 HIV Prevention Project Peer Education to support for Key Populations in Somalia Prevention with Positives (PwP) Mainstreaming HIV in Line Ministries Human Rights and medical ethics training for Health Providers Regional and District Sensitisation Mid-cycle Review of National Strategic Plan 2015-2019 and M & E Plan 2015-2019 World AIDS Day support Participation in International AIDS Conference Ministry of Health and National AIDS Commission exposure visit
Location of the Project	Somalia – Federal Level, Puntland and Somaliland
Duration of the project	20 months (1 st May 2016 – 31 st December 2017)
Amount of Funding Requested	\$681,200.40
Date of Submission	April 2016

1. Conduct a "Risk Assessment of the Key Population Programme in Somalia"

All governments have recognized that stigma, discrimination and violations of human rights are major barriers to effective national responses to HIV. Consequently, they have committed to protect the human rights of People Living with HIV (PLHIV), as well as the rights of women, children, and members of vulnerable and Key Populations in the context of HIV. This not only reduces personal suffering associated with HIV, but also helps to create social and legal environments that encourage people to take up and use HIV services. Such efforts are essential to achieve universal access to HIV prevention, treatment, care and support, and to halt and reverse the epidemic.

In order to support the rights of Key Populations most vulnerable to HIV infection in Somalia, UNDP will conduct a risk assessment of Key Populations, in collaboration with other UN agencies working on gender, governance, rule of law and human rights issues in Somalia. The risk assessment will take into account programmatic risks — risk to individuals, of exacerbating stigma, discrimination, possibility of being arrested and other risks as individuals, e.g. female sex workers and their clients, as a result of increased visibility of individuals seeking services. The Risk Assessment will make recommendations on how to mitigate risks and best support the rights of these marginalised groups. Recommendations from the study will feed into on-going advocacy and community mobilization/sensitization work, as well as activities with Uniformed Services and training carried out with Health Workers. Please see attached TOR for further information on this assignment.

Expected Deliverables.

The following are the expected deliverables for this study:

- i. Development of Technical Proposal and Work Plan (Consultancy)
- ii. Facilitate workshops to present and validate the results of the study.
- iii. Submission of Final Assessment Report with findings concerning eventual risks, lessons learnt and recommendations for policy and sustainable programme interventions to mitigate risks against Key Populations (KP) in Somalia.
- iv. Submission of Final Report of the consultancy.

2. <u>Provide Technical Assistance to strengthen the current Peer Education Programme for Key Populations in Somalia</u>

Background information

There is limited bio-behavioural surveillance data for Key Populations (KP) in Somalia. In 2008, a survey conducted amongst Female Sex Workers (FSW) in Hargeisa (Somaliland) reported prevalence rates of 5.2%. In 2014 a second study found that due to few interventions targeting KP, the HIV prevalence rates among FSW had not changed (National Strategic Plan for the Somali HIV and AIDS Response p.15). Indeed the 2014 survey found that there was a significant lack of comprehensive knowledge about HIV amongst

FSW, with only 11.1% of those surveyed able to correctly identify ways of preventing HIV transmission and rejecting major misconceptions.

Key Populations (KP) in Somalia are outlined in the National Strategic Plan for the Somali HIV and AIDS Response 2015-2019 (p.18), as all groups listed below. Each of these Key Population groups are identified as vulnerable populations or groups of people, that are particularly vulnerable to HIV infection due to certain situations or the context in which they work and live. Below is a list of Key Populations in Somalia that will be targeted through this initiative.

- i. Female Sex Workers
- ii. Truckers
- iii. Uniformed Personnel
- iv. Fishermen
- v. Port Workers
- vi. Khat Sellers
- vii. Migrants

UNDP has over eight years' experience implementing HIV Behaviour Change Communication (BCC) initiatives in Somalia, and to date has reached well over 20,000 people through this work. UNDP therefore has a strong understanding of the main strengths, weaknesses and challenges of implementing BCC activities in Somalia. HIV BCC work undertaken by UNDP to date includes developing a BCC Toolkit – *Let's Talk about STIs and HIV* (2008), carrying out BCC training for Key Populations in Somalia (Uniformed Services, Truck Drivers and Khat Sellers), rolling out Community Conversations on HIV in various areas identified as HIV Hotspots in Somalia, supporting Leadership and 'Knowing Your Rights' training for People Living with HIV, as well as working with the Media to air thousands of messages about HIV. Recognising this expertise and experience, UNDP is well placed to undertake this critical piece of work, to help strengthen HIV BCC work in Somalia.

The HIV Project at UNDP will also work in close collaboration with the UNDP Police Project to take this project to scale and reach a significant number of Uniformed Service Personnel (one of the high risk groups in Somalia). In addition we will work with UNDP's Access to Justice Project, to ensure that those who make and enforce laws help ensure that individuals living with and vulnerable to HIV can access HIV services and lead full and dignified lives, free from discrimination, violence, extortion, harassment and arbitrary arrest and detention. UNDP will also support marginalised groups such as Female Sex Workers (FSW) to have access to Legal Aid when required, and will ensure that critical gender issues such as Sexual Gender Based Violence (SGBV) are addressed and integrated into this project, by working in close collaboration with UNDP's Gender Project.

In order to ensure grant performance, the HIV Specialist at UNDP will provide Technical Assistance to carry out all activities and strengthen the current Peer Education programme for Key Populations (KP) in Somalia. This will include building the capacity of eight local NGOs responsible for implementing this project. NGOs and participants for this training will be selected in close consultation with the PR. The training for all regions will take place in Hargeisa, where each NGO will be requested to send two participants. For more information on this work please see attached TOR for this assignment attached.

Expected Deliverables.

i. Development of a comprehensive strategy, operational plan and M&E plan to support Peer Education programmes for Key Populations (KP) linking BCC activities with gender issues including

- Gender Based Violence (GBV) and according to the findings from the risk assessment
- ii. Revise and translate into Somali the BCC Toolkit, training materials and job aids to include GBV and gender components and in line with findings from the risk assessment
- iii. Develop guidelines and support package for Key Populations including on GBV and other gender issues, as well as by addressing the findings from the risk assessment
- iv. Facilitate a 5 day Training Of Trainers (TOT) programme to support 16 social workers from local NGO's, who will subsequently work with to carry out BCC training and activities for Key Populations in Somalia. Each NGO selected will be requested to send two (2) participants to this training.
- v. Submit a report outlining findings (from the assessment of the current BCC activities targeting KP (vulnerable women and clients and uniformed personnel) and with recommendations on immediate and future actions for a sustainable and coordinated Peer Education programme for Key Populations managed by local NGOs in Somalia.

3. Technical Assistance to develop a Prevention with Positives (PwP) intervention package for Somalia

In order to support the rights of People Living with HIV in Somalia, and strengthen their engagement in the HIV response, as well as increase access and uptake of HIV services, in support of *UNAIDS 90-90-90 Strategy 2016-2021* (where by 2020, 90% of all People Living with HIV know their HIV Status, 90% of all people diagnosed with HIV receive sustained antiretroviral therapy and 90% of people receiving ART have viral suppression), Technical Assistance is required to develop a comprehensive PLHIV intervention package which includes PLHIV Peer Counsellor training on Positive Self-Management Program for HIV (PSMP) and the development of job aids to support this work.

Recognising UNDP's mandate and experience in supporting projects that protect the human rights of people affected by AIDS, mitigate gender-related vulnerability, and address the impact of AIDS on women and girls, UNDP Somalia is well placed to take the lead and develop a Prevention With Positives (PwP) Strategy for Somalia.

Indeed, UNDP has significant experience of helping to build and strengthen the three Networks of People Living with HIV in Somalia. For example, for over 7 years UNDP has supported Talawadaag Network of People Living with HIV in Somaliland which supports over 500 People Living with HIV (PLHIV). Support provided has included training on 'Knowing Your Rights' for several hundred People Living with HIV in Somaliland, where PLHIV receive information on the provision of Legal Aid Services available free of charge through Legal Aid Clinics supported by UNDP. UNDP also supported an Income Generating Project for 240 People Living with HIV in collaboration with our Poverty Reduction and Environment Programme (PREP), and has provided on-going institutional support to help build and strengthen the capacity of the three Networks of People Living with HIV. As a result of the support provided by UNDP, Talawadaag Network of People Living with HIV has become a strong NGO that is making a meaningful difference to the lives of hundreds of People Living with HIV in Somaliland.

In December 2015, in efforts to help build the capacity of the Network of People Living with HIV in Mogadishu and Puntland, UNDP organized for the Executive Director of Talawadaag Network of People Living with HIV to facilitate a workshop to share their experience of setting up a successful Network to support People Living with HIV (PLHIV) in Hargeisa, with members of the Network of People Living with HIV in Mogadishu and Puntland. The main objective of these workshops was to share lessons learnt, identify strengths and weakness of each Network as well as see how each Network could better support their members. UNDP is therefore well placed to undertake this assignment to develop a comprehensive

strategy, operational plan and M&E plan to better support the rights of People Living with HIV in Somalia.

In order to ensure grant performance, the HIV Specialist at UNDP will provide Technical Assistance to carry out all deliverables outlined below. All related costs will be covered under the respective budget line. For more information on this work please see attached TOR for this work.

Expected Deliverables.

- i. Develop a comprehensive strategy, operational plan and M&E plan for PLHIV
- ii. Adapt and translate into Somali of relevant training materials (i.e. "promotion of client self-management")
- iii. Develop job aids for PLHIV Peer Education
- iv. Facilitate Training for 9 Training Of Trainers on the above training curriculum
- v. Development of Peer Education guidelines and support package for PLHIV including managing stress; healthy eating and understanding medications and their side effects
- vi. Submit report with findings from the assessment of the current strategy for PLHIV in Somalia and with recommendations
- 4. Adapt, translate and print PLWHIV Peer Counsellor training manual and job aids, BCC Tool Kit

To strengthen HIV Behaviour Change Communication Programmes for Key Populations (KP) and support Prevention With Positives (PwP) work in Somalia, once all activities outlined above have been completed the revised PLHIV package, strategy, training curricula, job aids as well as the revised BCC toolkit will be translated into Somali, printed and distributed to relevant audiences to assist them to better support these marginalised groups in Somalia.

Expected Deliverables.

- i. 200 copies of adapted, translated PLWHIV Peer Counsellor Training Manual, job aids and revised BCC toolkit printed.
- 5. Orientation of line ministries on HIV mainstreaming and coordination and enhancing the multisectoral response to HIV including education, gender, transport, etc.

In order to support and ensure the long term sustainability of HIV work in Somalia, and recognizing that UNDP is the Lead Agency expected to support HIV & AIDS and development, governance, <u>mainstreaming</u>, human rights and gender (UNAIDS Division of Labour), the HIV Specialist at UNDP, in collaboration with UNDP colleagues working with other key UNDP projects will ensure that HIV is mainstreamed into the work of a minimum of 9 Key Ministries in each region in 2016 and 2017.

The HIV Specialist at UNDP, in close collaboration with the PR, will work with the three AIDS Commissions to ensure that HIV is mainstreamed into 9 Key Ministries. This will include but not be limited to working with the following sectors in each region:

- I. Ministry of Planning, to ensure that HIV is mainstreamed in the National Development Plan (2017-2019) currently being developed at the Federal Level. The development of the National Development Plan will take place in 2016, and it will take over from the Compact as the leading framework to support a development agenda in Somalia. Recognising the cuts in the HIV Global Fund grant for Somalia and the need to increase domestic contributions for HIV, this will provide an opportunity to try and raise domestic revenue to support HIV work in Somalia.
- II. Ministry of Justice. This initiative will seek to inform and sensitize those who make the laws (parliamentarians) and those who enforce them (Ministers of Interior and Justice, police, prosecutors, judges, lawyers, traditional and religious leaders) about the important role of the law in the response to HIV, e.g. to protect those affected by HIV against discrimination and violence and to support access to HIV prevention, treatment, care and support. This will help ensure that individuals living with and vulnerable to HIV can access HIV services and lead full and dignified lives, free from discrimination, violence, extortion, harassment and arbitrary arrest and detention.

Training will focus on sensitization sessions for personnel of Ministries of Justice and Interior, judges, prosecutors, lawyers, and traditional and religious leaders on the legal, health and human rights aspects of HIV and on relevant national laws and the implications for enforcement, investigations and court proceedings.

UNDP will work with colleagues working with the UNDP Rule of Law Project, to help ensure that HIV is mainstreamed in the work plans of the Ministry of Justice. This will include ensuring that HIV is integrated into all training for Judges and Lawyers, to help address the high levels of stigma and discrimination faced by People Living with HIV (PLHIV) and other high risk groups.

ii. Ministry of Interior::

- a. Police Project: UNDP will work with the Ministry of Interior, in collaboration with colleagues working with UNDP's Police Project to help ensure the sensitization of police regarding HIV and how it is and is not transmitted; the importance of reaching out to and accessing populations at risk; the importance of appropriately addressing domestic and sexual violence cases in the context of HIV; and the negative consequences of illegal police activity on justice and on the HIV response.
- b. Joint Programme for Local Governance (JPLG): UNDP will advocate for HIV to be included in all District Development Plans supported by the UN JPLG Programme. In 2015, the HIV Project together with the Somaliland AIDS Commission (SOLNAC) was successful in getting 5 Districts to include HIV activities in their District Development Plans.
- III. Ministry of Gender, Women and Children: Recognising that women are particularly vulnerable to HIV infection, the HIV Specialist will work with UNDP's Gender Project as well as the Ministry of Women, to ensure that HIV is mainstreamed in their strategy and action plans.

Expected Deliverables.

- One Orientation session of line ministries per region per year;
- ii. Nine (9) ministries (minimum) mainstream HIV into their strategy and action plans

6. CSS - Convene Regional and District sensitization meetings with political, religious, community and traditional leaders to advocate for a more enabling environment and improved regional responses to HIV.

For over five years, UNDP has carried out HIV training for political, religious, community and traditional leaders in areas identified as HIV 'Hot Spots', in efforts to reduce stigma associated with HIV and create a more supportive enabling environment for all HIV work in Somalia.

The main objectives of this work include the following:

- a. Encourage local leaders (including government authorities, religious and traditional leaders) to play a more pro-active role in the response to HIV in their communities.
- b. Reduce stigma and discrimination associated with HIV, which prevents people from using HIV services and remains one of the greatest challenges for all HIV work in Somalia.
- c. Intensify and promote meaningful community participation to help reduce HIV transmission in Somalia.
- d. Reach a significant number of women and men in Somalia with correct information about HIV, and encourage them to make use of HIV services available in their community.
- e. Strengthen the rights of People Living with HIV in Somalia.

In 2015, UNDP engaged a Third Party Monitoring (TPM) group to undertake monitoring visits and verify whether activities implemented achieved quality outputs. In this regard the Third Party Monitoring group reported the following positive findings on this initiative:

- 100% of beneficiaries confirmed this project had increased their knowledge on HIV & AIDS.
- ii. 90% of beneficiaries believed people in their area are more likely to get tested for HIV after attending this training
- 95% of beneficiaries believed that people will be more aware of the rights of people living with HIV after this training, and treat them in a positive manner as a result
- iv. HIV activities were also mainstreamed into 5 District Development Plans in Somaliland as a result of this work.

UNDP's HIV project will work closely with the UNDP Gender project to help ensure that critical gender issues such as FGM, GBV and other cultural practices that make women particularly vulnerable to HIV infection, are included and discussed as part of this initiative.

Expected Deliverables.

- A minimum of 30 Regional and District sensitization meetings with political, religious, community and traditional leaders take place (10 per region 6 in each region in 2016, and 4 per region in 2017). Each meeting will reach a minimum of 40 people
- II. In total a minimum of 1,200 people will be reached and benefit from this initiative by the end of 2017

7. Training to health providers on human rights and medical ethics related to HIV

This human rights and ethics training for health care providers will focuses on two objectives as outlined below.

- 1. Ensure that health care providers know about their own human rights to health (HIV prevention and treatment, universal precautions) and to non-discrimination in the context of HIV.
- 2. Reduce stigmatizing attitudes in health care settings and provide health care providers with the skills and tools necessary to ensure patients' rights to informed consent, confidentiality, treatment and non-discrimination.

Noting the above this Human rights and ethics training will address the following:

- Review Individual health care providers awareness of their own human rights in the context of HIV, and the negative impact that stigma, breaches of confidentiality and neglect of informed consent in health care settings have on patients' lives, as well as to address fears and misconceptions about HIV transmission and to promote understanding, compassion and professionalism
- II. Health care administrators: ensure that health care institutions provide the information, supplies and equipment necessary to make sure health care workers have access to HIV prevention (including the universal precautions needed for prevention of occupational transmission of HIV) and treatment and are protected against discrimination
- III. Ensure Health Workers support the implementation of policies to protect the rights of People Living with HIV (including maintaining confidentiality) under their care.

In order to ensure grant performance, the HIV Specialist at UNDP will provide all necessary Technical Assistance and support to achieve all deliverables outlined below.

Expected Deliverables.

- I. A minimum of 9 training events will take place: 2 training workshops in each region n year 1, 1 training per region in year 2. Each training event will be 3 days and will benefit 20 participants.
- II. A minimum of 180 health providers will be reached by this initiative by the end of 2017

8. MOH and NACs exposure visit

In order to build the capacity of the Ministry of Health and the National AIDS Commissions in Somalia, UNDP will arrange and plan an exposure visit for HIV Focal Points working with the AIDS Commissions and the Ministry Of Health (MOH) to visit the Kenya National AIDS Commission and MOH HIV Department in Nairobi (budget for 7 days) to see what lessons can be learnt to help strengthen the role of the National AIDS Commissions (NACs) and the MOH in Somalia. If however there are difficulties in obtaining visas for all participants to travel to Nairobi, the location of this exposure visit may be change to an alternative country such as Djibouti, Ethiopia or Uganda.

Expected Deliverables.

I. Exposure visit for AIDS Commission and Ministry of Health arranged to help strengthen their capacity

9. Contribution to the celebration of the AIDS day in the three zones

UNDP will make a small contribution to support each AIDS Commission to raise awareness about key HIV Services (e.g. VCT services) available in their region on World AIDS Day.

Expected Deliverables.

i. HIV Advocacy activities supported and World AIDS Day report shared.

10. Participation to International AIDS Conferences

In order to share and learn best practices to help address HIV in fragile states, UNDP will support key personnel from the AIDS Commission and the Ministry of Health to present and participate in one International AIDS Conference in 2016/7. Participants that attend the conference will be agreed upon in close collaboration with the PR.

Expected Deliverables

6 key leaders in the Somali AIDS response will be supported to participate in one international AIDS
Conference.

11. Mid Cycle Review of National HIV Strategy and M & E Plan

UNDP will facilitate a mid-cycle review of the National HIV Strategy and M & E plan 2015-2019, to identify key achievements, weaknesses, lessons learnt, challenges and recommendations of all work undertaken by HIV Stakeholders in Somalia, to support the National Strategic Plan for the Somali HIV and AIDS response 2015-2019. This will result in a revised action plan being developed to guide the implementation of the HIV response in Somalia for the final two years of the National HIV Strategy 2015-2019. The findings of this review will contribute to the development of the next HIV Concept Note and Proposal for Somalia post 2017 when the current HIV Global Fund grant comes to an end.

In order to ensure grant performance, the HIV Specialist at UNDP will provide all necessary Technical Assistance and support to achieve all deliverables outlined below.

Expected Deliverables.

- i. Mid Cycle Review of National HIV Strategy 20215-2019 takes place
- ii. Revised Action Plan to guide the implementation of the last 2 years (2018-2019) of the National Strategic Plan for the Somalia HIV and AIDS Response 2015-2019 developed and agreed to by all key HIV stakeholders in Somalia.

Signatories

Please ensure that the authorised representatives complete signatory details, and stamp where appropriate, below. If further signatory blocks are required, please copy and paste below.

Signature:	Digitally signed by George Conway DN: cn=George Conway, o=UNDP Somalia, ou=UNDP, email=george.conway@undp.org, c=US Date: 2016.05.15 10:46:42 +03'00'
Name:	George Conway
Organisation:	UNDP Somalia
Title:	Country Director
Date:	

Attachments:

ANNEX 1: Detailed Budget, Work Plan and Targets

Annex 1 Proposed activities to be implemented by UNDP

Budget Lme No	Activity Description	Y2 (2016) Fotal C ash (USD)	Y3 (2017) Iotel Cash (USD)	12-13 Total Cash (USD)	Expected Delverables	Activities Description
320	Conduct a "Risk Assessment of the Key Population Programme in Somalia"	21,442 00	00'0	21,442 00	The following are the expected deliverables for the study: 1. Development of the consultancy technical proposal and work plan 2. Faultistion of workshops to present and validate the results of the study. 3. Submission of Final Assessment Report with findings concerning eventual risks, lessons learnt and recommendations for policy and sustainable programme interventions to mitigate risk against key population in Somalia. 4. Submission of Final Report of the consultancy.	Conduct a risk assessment in collaboration with other UN agencies already working on gender, governance, rule of law and human right issues. The risk assessment should take into account programmatic risks — risk to individuals, of exacerbating stigma, discrimination, possibility of being arrested and other risks as individuals, e.g. female sex workers and their clients, as a result of increased visibility of individuals seeking services. The Risk assessment will make recommendations to how to mitigate risks. Recommendations from this study will feed into on-going advocaey and community mobilization/sensitization work, as well as activities with Uniformed Services and training carried out with Health Workers. More details in TOR.
40s	Techinal Assistance to strengthen the current prer education programme for KP in Somalia (55 days)	41,821,00	90 0	41,821.00	1. Development of a comprehensive strategy, operational plan and M&E plan for peer education programs for KP linking the BCC activities with gender and Gender Based Violence (GBV) and according to the findings from the risk assessment assessment. 2. Revision and translation in Somali of BCC toolkit, training material and job aids to include GBV and gender components and in line with findings from the risk assessment. 3. Development of guidelines and support package for KP including GBV and gender components and findings from the risk assessment. 4. Submit report with findings from the assessment of the current BCC activities targeting KP (vulberable women and clients and uniformed personnel) and with recommendations on immediate and future actions for a sustainable and coordinated peer education programme for KP managed by local NGOs in Somalia.	In order to ensure grant performance in the BCC programme for KP and build the capacity of the local NGOs, Technical Assistance is needed to strengthen the current peer education programme for KP in Somalia. More details in TOR.
8	Training of trainers for 16 social workers for KPs programme	23,812.00	0.00	23,812.00	16 social workers from LNGOs trained as TOT for the KPs programme (participants to be selected in consunitation with PR)	training of 16 social workers from LNGO carrying out BCC activities to become Trainers-Of-Trainers (TOT) for the RPs outreaches activities. 2 participants from each LNGO (see attached list). Training of 5 days in Hargeisa for 16 participants from all the zones (see training breakdown)
40P	Technical Assistance to develop a Prevention with Positives (PwP) intervention for Somalia	61'181'21	99 0	47,151.19	1. Development of a comprehensive strategy, operational plan and M&E plan for PLHIV 2. Adapt and translation in Somali of relevant training materials (i.e., "promotion of client self-management") 3. Development of job aids for PLHIV peer education 4. Training of PTOTs on the above training curricula 5. Development of peer education guidelines and support package for PLHIV including managing stress; healthy eating and understanding medications and their side effects 6. Submit report with findings from the assessment of the current strategy for PLHIV in Somalia and with recommendations on immediate and future actions for a sustainable and coordinated engagement of PLHIV in the HIV response in Somalia.	In order to strengthening the engagement of PLHIV in the HIV response in Somalia and to increase access to HIV services a technical assistance is needed to develop a PLHIV intervention package including PLHIV peer counsellor training on Positive Self-Management Program for HIV (PSMP) and job aids. More details in TOR.
230	Adapt, translate and print PLWH/A peer counsellor training manualand job aids, BCC tool kit	8,000.00	00 0	8,000.03	200 copies of adapted, translated PLWH/A peer counsellor training manual, job aids and revised BCC toolkit	as a result of the two consultancies on KP and PwP, the revised PLHIV package, strategy, training curricula and job aids as well as the revised BCC toolkit will be translated in Somali, printed and distributed to the relevant audience.

125	Orientation of line ministries on HIV mainstreaming and coordination and enhancing the multi-sectoral response to HIV including education, gender, transport, etc.	23,310,00	23,310,00	46,620.00	Targets: 1) one Orientation sessions of line ministries per zone per year; 2) Nine (9) ministries (minimum) mainstream HIV into their strategy and action plans	The HIV Specialist at UNDP will provide TA to carry out this work.
319	CSS - Convene regional and district sensitization meetings with political, religious, community and traditional leaders to advocate for a more enabling environment and improved regional responses to HIV	23,324.00	26,655,00	49.98n DO	total of 30 (10 x zone) regional and district sensitization meetings with political, religious, community and traditional leaders. 6 x zone in first year and 4 x zone in second year, reaching 1,200 people by end 2017	1 meeting (1,666 USD) of 1 day with 40 participants
628	Contribution to the celebration of the AIDS day in the three zones	32,000 00	32,000 00	64,000.00	WAD report	
323	Training to health providers on human rights and medical ethics related to HIV	26,610 00	21,288 00	47,898.00	9 training in total: 2 training per zone in year 1, 1 training per zone in year 2, reaching 180 health providers	training of 3 days for 20 participants
631	Technical Assistance for "Strengthening Implementation of National M&E plan" in order to support the mid-cycle review of NSP & M&E Plan in 2017	090	31.745.96	31,747 00	Revised Acian Plan to gride the analementation of the law 2 years (2018-2019) of the Nancaral Strategic Plan for the Somalia HIV and AIDS Resyonse 2015-2019 deschoped and agreed to by all key HIV stakenolders in Somalia	The HIV Specialist at UNDP will provide TA to earry out this work.
632	TRAINING for "Strengthening Implementation of National M&E plan" in order to support the mid-cycle review of NSP & M&E Plan in 2017	80%	12,240,00	13,240,00	Review of the National Strategic Plan for the Somali HIV and AIDS response The HIV Specialist at UNDP will provide TA to carry out this work.	The HIV Specialist at UNDP will provide TA to carry out this work.
635	Participation to International AIDS Conferences	21,456.00	21,456.00	42,912.00	6 relevant people among key HIV stakeholders and PLHIV network participated to the AIDS comference per year. AIDS conference report submitted.	The HIV Specialist at UNDP will provide TA to carry out this work.
639	MOH and NACs exposure visit	21,216.00	0.60	21,216 00	6 people (3 MOH and 3 NACs) exposure visit	Plan is to bring the MOH FP and AIDS Commission to visit the Kenya National AIDS Commission and MOH HIV Department in Nairobi (budget for 7 days) in order learn more and define the role of 7 AC and MOH in, but we want
	HIV Technical Assistance (TA)	30,006 en	24,765-08	00 Stari ⁻ 104	Recognising the weak capacity of HIV partners in Somalia, Technical Assistance is required to help build the capacity of partners and provide ongoing technical support to ensure the successful implementation of all activities included in this proposal.	The HIV Specialist at UNDP will provide Technical Assistance to carry out all bedget inc.
	Fotal activities	T0,147 IV	99 659 to 1	562,839,19		
	OH 7%	29.322.17	15,242.33	14,564.50		
	Direct Project Costs (Security, M & E, Communication, Operations)	45,246.40	25,050 61			
	Grand Total	448,210,46	232,989.94	681,200,48		