

JOINT PROGRAMME DOCUMENT

1. Cover Page

Country: Thailand

Programme Title: Stigma and Discrimination Prevention and AIDS Rights Protection

Joint Programme Outcome:

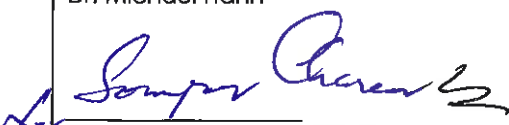

Enabling environment with better attitudes, policy and practices toward HIV/AIDS and human rights as well as stigma and discrimination

Programme Duration: <u>12 months</u>
Anticipated start/end dates: <u>July 2011-June 2012</u>
Fund Management Option(s): <u>Combination (Pooled and Parallel)</u>
Managing or Administrative Agent: <u>UNDP Thailand</u>

Total estimated budget*: <u>US\$ 147,050.00</u>
Out of which:
Pooled Funding: <u>US\$ 78,600.00</u>
Paralleled Funding: <u>US\$ 43,000.00</u>
Total Funded Budget: <u>US\$ 121,600.00</u>
Resource gap: <u>US\$ 25,450.00</u>
* Total estimated budget includes both programme costs and indirect support costs

Sources of funded budget:
Pooled Funding
<ul style="list-style-type: none"> • UNAIDS PAF B <u>US\$ 68,600.00*</u> • UNDP TH <u>US\$ 10,000.00</u>
Paralleled Funding
<ul style="list-style-type: none"> • UNFPA <u>US\$ 10,000.00</u> • UNESCO <u>US\$ 8,000.00</u> • UNICEF <u>US\$ 25,000.00</u>
*2% has already been deducted by the HQ.

Names and signatures of (sub) national counterparts and participating UN organizations

UN organizations	Implementing Partner
Dr. Michael Hahn  UNAIDS Country Coordinator, Thailand	Ms. Supatra Nacapew  Director, Foundation for AIDS Rights (FAR)
Date <u>24/06/2011</u>	Date <u>23 June 2011</u>

Joint Programme Stigma and Discrimination Prevention and AIDS Rights Protection

Mr. Yuxue Xue



UNDP Resident Representative, a.i

Date

24/06/2011

fr Mr. Gwang Jo-Kim



Director, UNESCO

Date

29-06-2011

Ms. Wassana Im-em



Officer in Charge, UNFPA

Date

27.6.11

Mr. Tomoo Hozumi



UNICEF Resident Representative

conty

Date

7 July 2011

Abbreviations

AIDS	<i>Acquired Immune Deficiency Syndrome</i>
BATS	<i>Bureau of AIDS TB and STI</i>
CPAP	<i>Country Program Action Plan</i>
CSO	<i>Civil Society Organization</i>
FAR	<i>Foundation for AIDS Rights</i>
GFATM	<i>Globalfund for AIDS, TB and Malaria</i>
HIV	<i>Human Immunodeficiency Virus</i>
IDU	<i>Injecting drug use/r</i>
IEC	<i>Information, Education, Communication</i>
JP	<i>Joint Program</i>
MOE	<i>Ministry of Education</i>
MOJ	<i>Ministry of Justice</i>
MOPH	<i>Ministry of Public Health</i>
MSDHS	<i>Ministry of Social Development and Human Security</i>
MSM	<i>Male having sex with males</i>
MSW	<i>Male sex workers</i>
NAMC	<i>National AIDS Management Center</i>
NAPAC	<i>National AIDS Prevention and Alleviation Committee</i>
NCPI	<i>National Composite Policy Index</i>
NSP	<i>National Strategic Plan</i>
PLHIV	<i>People Living with HIV</i>
RTG	<i>Royal Thai Government</i>
STI	<i>Sexually transmitted infection</i>
SW	<i>Sex workers</i>
TG	<i>Transgender People</i>
TNCA	<i>Thai NGO Network for AIDS</i>
TNP+	<i>Thai Network of People Living with AIDS</i>
UNAIDS	<i>Joint United Nations Programme on HIV and AIDS</i>
UNDP	<i>United Nation Development Program</i>
UNESCO	<i>United Nations Educational, Scientific, and Cultural Organization</i>
UNFPA	<i>United Nations Population Fund</i>
UNGGASS	<i>United Nations General Assembly Special Session on HIV/AIDS</i>
UNICEF	<i>United Nation Children Fund</i>
UNJTA	<i>United Nation Joint Team on AIDS</i>
UNPAF	<i>United Nation Partnership Assistance Framework</i>

2. Executive Summary

This joint programme is an initiative which aims to assist national partners and stakeholders in creating and strengthening mechanisms and systems to ensure access to justice and enable an environment in which stigma and discrimination would be no longer a barrier to block HIV prevention and care services. It purports to contribute to the joint programme outcome of enabling environment with better attitudes, policy and practices toward HIV and AIDS and human rights as well as stigma and discrimination.

The joint programme has four specific objectives, outlining the four interrelated result areas:

1. National and sub-national mechanisms on stigma-discrimination prevention and AIDS rights protection officially established and well functioning.
2. Key stakeholders in government sector, private business partners and CSOs mobilized and supporting stigma and discrimination prevention education services in pilot settings and groups
3. Improved legal hotline service/AIDS rights protection centers and call volume increased in pilot and neighbouring provinces
4. National data sets on HIV and human rights as well as stigma and discrimination are effectively used in the UNGASS's National Composite Policy Index (NCPI)

Based on the objectives, four strategies shall be used including advocacy, innovative service delivery, capacity development and strategic information. To achieve the expected results mentioned above, the following activities shall be implemented:

- a. Set up and provide supports for a national sub-committee on stigma and discrimination and development of provincial committees on AIDS rights
- b. Train and provide support to stigma prevention and AIDS rights protection teams at national and sub-national levels
- c. Document annual HIV and human rights situation in Thailand
- d. Develop stigma and discrimination curriculum focusing on workplace, healthcare facility setting and school that incorporates sex workers, male having sex with males and transgender people and injecting drug users issues
- e. Establish and train stigma prevention education core teams with at least 15 members in at least three pilot settings and provide stigma prevention education to workplace, health care and school setting
- f. Conduct of advocacy events/campaigns, sessions and dialogues to three target groups including local government organizations, uniformed services and media/press
- g. Provide training/coaching to staff and volunteers operating legal hotline / AIDS rights protection centers
- h. Provide facility supports for hotline centers and development of information, education, and communication (IEC) materials
- i. Provide consultation and technical supports to ensure long-term involvement of government and community partners including national and sub-national AIDS rights forums
- j. Develop stigma and discrimination section of the NCPI and organise consultative processes to validate and disseminate report.
- k. Document evidence based lessons learnt or cases to support the NCPI report.

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

The project targets national and local partners, and shall focus on certain settings, populations and interest groups to work with. Stigma and discrimination prevention education shall focus on workplace, healthcare facility and school integrating issues affecting most at risk populations including sex workers, male having sex with males and transgender people and injecting drug users. Advocacy initiatives shall target government officials, men in uniform and media practitioners. AIDS rights protection shall target people infected and affected by HIV.

The programme, jointly supported by UNAIDS, UNDP, UNESCO, UNFPA, and UNICEF shall be implemented for 12 months in seven regions, with significant number of activities to be organized in Bangkok. The target provinces are: Nan, Payao, Nakhorn Sawan, Srisaket, Chaiyaphum, Ubonratchathani and Ayuthaya. The Foundation for AIDS Rights (FAR) shall be the implementing partner, in collaboration with the Thai Network of People Living with HIV (TNP+) on certain activities. This joint programme under the pooled funding management shall be managed and coordinated by UNDP Thailand as a managing agent, whereas the parallel funding shall be done by UNESCO, UNFPA and UNICEF.

3. Background and Situation Analysis

HIV/AIDS is still a problem in Thailand given that the number of new infections has not significantly decreased. A trend of increasing spread of HIV is especially noted in adolescents and there is no indications of HIV prevalence declining at anytime yet, especially in most at risk populations (2008-2009 : UNGASS Report). In this case, the Asian Epidemic Model has projected that with an intensive and extensive prevention and care efforts, Thailand would still have about 17,000 new infections in 2010. In this paper, it is also found that the challenges Thailand has are not limited simply to medical field but much influenced by basic issues of human rights, social justice or protection and economic well-being. Thus, HIV/AIDS and human rights as well as stigma and discrimination have been a national priority issue under various plans, including the National Plan for Strategic and Integrated HIV and AIDS Prevention and Alleviation(NSP) for 2007-2011, the United Nations Partnership Framework(UNPAF) for 2007-2011. This joint programme prefaces the UNPAF 2012-2016. Indicative provisions in the new UNPAF where HIV/AIDS is a thematic area provide a strategic provision to address barriers to services, providing for *rights protection framework for key affected population*.

Under the NSP, especially under the strategy 3 on Rights Protection, there was clearly a need to strategically addressing HIV/AIDS and human rights as well as stigma and discrimination. The NSP goal was to reduce new infections by half, increase universal access to prevention, treatment, care and support and ensure at least 80% of social supports among those who are affected by HIV. In the meantime, Ministry of Public Health by Bureau of AIDS, TB and STIs(BATS) has recently commissioned Mahidol University's Public Health Collage to conduct a mid-term review of the said NSP. The review confirms that to achieve these NSP goal and results, especially ART and social supports, protection of AIDS rights has to be used as one of the key strategies. It was used especially under the UN Joint programme on **AIDS Rights Advocacy and Stigma-discrimination Index Development**, and that the programme was the only tool to address HIV/AIDS and human rights as well as stigma and discrimination initiated from a strong collaboration between UNAIDS Family and CSO partners. Despite the fact that the programme brought about vital results the BATS' review and the joint UN-CSO programme's on the stigma index survey confirms that stigma

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

and discrimination is still a big issue affecting the life of the people living with HIV and key affected people(e.g. MSM, IDU, sex worker etc.) throughout the country.

Stigma and discrimination index survey's key findings:

"There were still stigma and discrimination against the people living with HIV in Thai society, though responses to HIV and AIDS have been implemented for more than 25 years. Stigma and discrimination against various groups of population still remain no matter how difference they are: health, race, religion, culture, education etc. Stigma and discrimination against PLHAs is also a structural problem in association with other problems such as migration and drug."

"There were external factors and incidence causing restrictions and exclusion not allowing PLHAs to access to various services especially religious practice, employment and health services."

"Self stigma is a cause- effect behaviour performed by individual PLHA(also MARPs) leading to fears to participate in activities and access to services."

While the 2008-2009 UNGASS Country Progress Report highlighted that human rights related to AIDS did not receive optimal priority, it is also recognized that like gender, HIV/AIDS and human rights as well as stigma and discrimination have been recently used as a cross – cutting issue to mutually form a continuing platform to address the issues related to the so-called "AIDS Rights Protection" in changing dynamics with regard to national conventions, including 2009 National Human Development Report recommending that social injustice and imbalance be put on the national agenda ; 2010-2011 HIV and AIDS Acceleration Plan; the 2nd National Human Rights Plan(2009-2013) together with its operational framework addressing AIDS rights issues under public health component and other related components implemented and monitored by Ministry of Justice's Department of Right and Liberty Protection; the next(11th) National Social and Economic Development Plan(2009: Suwanee/NESDP), especially the section on Social Protection using community based approach; the 2007-2011 UN Partnership Framework (UNPAF) in which HIV and AIDS is one of the major sections, new UNPAF for 2012-2016 HIV and/or human rights are thematic issues under social empowerment and equality.

On the other hand, some national programmes have been also developed to partly address the AIDS rights related issues and their implementation have been recently started. These include the CHAMPION Programme funded by Global Fund to fight against AIDS, TB and Malaria(GF-ATM) Round 8 and the Acceleration Plan initiated by the National AIDS Management Center(NAMC). Both the CHAMPION programme and the acceleration plan are targeting the key MARPs populations, though the AIDS rights component of each programme are relatively limited in terms of programme scale with limited budgets and small sites. Both of them are still at an early stage of implementation.

According to the literatures rapidly reviewed above, it can be concluded that AIDS Rights and stigma and discrimination are still a national priority issue that could affect other programme interventions for HIV and AIDS prevention, treatment, care and support. In other words, it is the need to include supporting social services and a guarantee of fundamental rights and protection as the key supporting and enabling elements of any successful AIDS programmes. Some initiatives have started. A joint UN programme has been implemented for one year and brought about key successful results having built a good foundation for basic database, training capacity, legal service setting and supporting mechanisms. There

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

are also two major existing programmes addressing human right issues related to HIV and AIDS but both programmes are relatively new and small. The recent experiences also confirm that there is a need to do more by building from what they have done in terms of policy advocacy, attitude change and capacity building as well as enhancement of key mechanisms to ensure continuing and strong platforms to address HIV and human right related issues at all levels. Finally, there is a need to include the initiation and long- term use of data sets and indicators in the national monitoring and evaluation system.

UNAIDS Getting to Zero Strategy provides for "zero discrimination" as one of the three overarching goals. The UN family still recognizes HIV and human rights as well as stigma and discrimination as one of the strategic priority issues and support the implementation of the programme on AIDS rights protection and stigma-discrimination. However, it is important to review what role the UN family should play to strategically add value to the national AIDS response, especially to the AIDS rights protection system given that the UN has limited resources.

The Ministry of Justice's Department of Right and Liberty Protection is the lead agency in implementing and monitoring Thailand's Human Rights Plan which covers components on AIDS Rights. This project provides support to their operational framework by openly addressing human rights issues in HIV and AIDS context. The Ministry of Social Development and Human Security is also the lead agency in implementing social protection mechanisms in the country, including HIV-related social protection schemes. In the High Level Technical Consultation on HIV-Sensitive Social Protection for Impact Mitigation in Asia Pacific, Thailand identified stigma and discrimination as key barrier in the proper and effective implementation of social protection schemes. As a key agency who will implement the Globalfund Round 10 which shall focus on care and support for people infected and affected by HIV, this project provides a knowledge support to be able to draw in better frameworks implementations for the project.

In 2008-2009, the UN Joint Team on HIV/AIDS worked closely with CSO partners under the joint programme called AIDS Rights Advocacy and Stigma and Discrimination Index Development. The project focused on development of a stigma index and broader HIV/AIDS rights advocacy. Under this programme, there were key outcomes that have both confirmed the importance of continuing efforts to jointly and strategically address stigma and discrimination and building a working basis for all HIV and rights concerned government agencies and key stakeholders. The programme outcomes were, for example, stigma index survey findings showing the existence of types and causes of rights violations throughout the country. The study found that some of the people living with HIV who were also sex workers or men having sex with men (MSM) faced double or triple forms of stigmatization and discrimination. This presents an obvious barrier to access to counseling and testing services as well as treatment and care.

On the positive side, the programme brought about joint efforts between various sectors including the Department of Rights and Liberty Protection and key civil society organizations, especially the Foundation of AIDS Rights, Law society and TNP+ to address stigma and discrimination. In this regard, local AIDS right protection teams were recruited and trained and legal counseling units called "hotline centers" were established in selected provinces. These efforts will be sustained into the future by TNP+. This 2011-2012 joint initiative will be planned and implemented to ensure the continuation of joint efforts to intensively and extensively reduce and prevent stigma and discrimination in Thailand, protect the

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

rights of the people living with HIV/AIDS and MARPs as well as children and families. This current joint program aims at continuing the gains of the previous one, build on the structures, capacities, and lessons learned and expand the coverage to broader geographic reach.

4. Description of Proposed Joint Program and Strategies

There are four result areas for this joint programme, corresponding four major outcomes. The following are the result areas:

Component 1: AIDS Rights Mechanisms and System

1.1 *Under the National AIDS Committee, set up and provide support for a national sub-committee on stigma and discrimination.* The national sub-committees shall be set up to monitor the HIV and human rights related situations and programmes at various levels. The national sub-committee shall oversee the policy direction on HIV/AIDS and human rights in Thailand.

1.2 *Provide support to and consultations for the establishment of provincial committees on HIV/AIDS rights in order to ensure AIDS rights advocacy at local levels.* The provincial committees shall be set up to address HIV/AIDS and human rights related issues in local context. A provincial roadmap shall be developed by the committee to respond to key issues on AIDS rights at their level serving as blueprint of their actions.

1.3 *Train and provide support to stigma and discrimination prevention and AIDS rights protection teams at sub-national levels.* These will be in form of basic and advance training on AIDS rights and series of consultations to strengthen AIDS rights teams in seven provinces. Targeted provinces are Nan, Payao, Nakhorn Sawan, Srisaket, Chaiyaphum, Ubonratchathani and Ayuthaya .

1.4 *Document annual HIV and human rights situation in Thailand.* A consultant shall be engaged to review HIV and human rights situation in Thailand and the report shall be disseminated and used as an advocacy platform by national and sub-national committees on AIDS rights.

Component 2: Stigma and Discrimination Prevention

2.1 *Develop stigma and discrimination education curriculum focusing on workplace, health facility and school that incorporates MSM, TG, sex work and injecting drug use issues.* A consultant shall be engaged to develop the curriculum together with representatives from CSOs working on human rights and MARPs. One curriculum package with three sub-sets: workplace, health facility and school shall be produced.

2.2. *Establish and train stigma prevention education core teams in at least three key pilot settings.* The education core team shall be composed of 5 selected facilitators from MSM, /TG, sex work and injecting drug use networks (also other TNCA networks like children affected by AIDS) and from the AIDS rights protection team where interventions will be implemented: workplace, health facilities and school. It is expected that about 2-3 trainers on law from the existing AIDs Rights Protection Team and 2-3 learning facilitators from various MARPs groups in the target provinces shall be utilized.

2.3. *Provide support for stigma and discrimination prevention education programmes in key pilot settings: workplace, health facility and school.* The core team of educators shall implement the

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

stigma and discrimination prevention curriculum in workplace, health facility and schools through appropriate sessions.

2.4. *Support development and implementation of advocacy packages for local government officials, uniformed services, media/press practitioners that incorporate MSM, TG, sex work and injecting drug use issues.* An advocacy plan shall be developed together with core educators team and AIDS rights team, and shall be implemented to three target groups: local government officials, men in uniform service and media practitioners.

Component 3. AIDS Rights Protection

3.1 *Provide facility supports and training/coaching to staff and volunteers operating legal hotline / AIDS rights protection centers in seven provinces.* This shall include organizing coaching and orientation sessions, installing telephone lines, setting up filing systems, and setting up referral systems. Some of these hotline legal service centers have been established and merely need to be further enhanced in terms of training of volunteers and upgrading of facilities. Seven sets of IEC materials shall be developed to support operations of the legal hotline and AIDS Rights protection centers. Proposed provinces are Nan, Payao, Nakhorn Sawan, Srisaket, Chaiyaphum, Ubonratchathani and Ayuthaya. The program is open to inputs by NAMC if adjustment to provinces is necessary.

3.2 *Provide consultation and technical supports to ensure long-term involvement of government and community partners including national and sub-national AIDS rights forums.* The project shall invite leaders and stakeholders to national and sub-national forums and consultations from government agencies and communities, including provincial/local law enforcement officers and local government organizations as well as community based organizations, including law society. The forums are intended to update and discuss with the government, CSOs and private sector of the situations and issues on AIDS Rights within their areas and continuously engage their participation in the AIDS rights agenda and initiatives.

Component 4. Strategic Information

4.1. *Develop stigma and discrimination section of the NCPI and organize consultative processes to validate and disseminate report.* The current NCPI is virtually silent on stigma and discrimination. Following the NCPI design, a section on stigma and discrimination shall be developed and incorporated in the existing NCPI questionnaire that is regularly generated as part of UNGASS. A consultant shall be engaged to develop the NCPI stigma and discrimination tool, pilot-test the tool, and eventually gather data through a survey alongside the rest of the NCPI sections. A series of consultation shall be organized to discuss and validate the data and a report shall be made and disseminated as a final product.

4.2 *Document evidence based lessons learnt or cases to support the NCPI report on stigma and discrimination .* A narrative of lessons learnt or cases shall be developed to support development of an in-depth report on rights violations on stigmatized and discriminated cases so that its qualitative results will support contents of the stigma and discrimination report. Case studies should represent PLHIV, MSM, SW, IDU and children infected/affected by HIV.

As easy reference, the following table summarizes what has been discussed illustrating results and activities.

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Table 1. Result and Responsible Partners

Programme Outcomes	Programme Outputs	Programme Activities	Responsible Partners
Joint Programme Outcome: Enabling environment with better attitudes, policy and practices toward HIV/AIDS and human rights as well as stigma and discrimination			
Component 1: AIDS Rights Mechanisms and System National and sub-national mechanisms on stigma-discrimination prevention and AIDS rights protection officially established and well functioning.	A national sub-committee on stigma and discrimination set up as part of NAPAC.	Under the NAPAC, set up and provide supports for a national sub-committee on stigma and discrimination	UNAIDS TH UNDP TH
	Seven provincial committees on AIDS rights protection teams developed. - 1 provincial roadmap for the committee to respond to key issues on AIDS rights	Provide support to and consultations for the establishment of provincial committees on AIDS rights in order to ensure AIDS rights advocacy at local levels	UNAIDS TH UNDP TH
	At least seven provincial committees on stigma and discrimination prevention and AIDS rights team are trained and effectively functioning.	Conduct training on and provide support for stigma and discrimination prevention and AIDS Rights teams at national and sub-national levels	UNAIDS TH UNDP TH
	One report on the HIV and human rights situation in Thailand	Document annual HIV and rights situation in Thailand	UNFPA-Lead UNAIDS TH
Component 2: Stigma and Discrimination Prevention Key stakeholders in government sector, private business partners and CSOs mobilized and supporting stigma and discrimination prevention education services in key pilot settings and groups	Improved skills of educators and advocates to provide stigma and discrimination prevention education services and advocacy packages in three key pilot settings.	Develop stigma and discrimination curriculum focusing on workplace, health facility and school settings that incorporates MSM, TG, sex work and injecting drug use issues Establish and train stigma-discrimination prevention educators teams with at least 15 members in at least 3 key pilot settings: workplace, health facility and school.	UNESCO-Lead UNDP TH- Co Lead UNAIDS TH
	Three stigma and discrimination prevention education model developed and piloted in three settings.	Pilot site selection and develop MOU with partners in workplace, health facility and school Conduct of prevention education sessions	UNAIDS TH UNDP TH
	Three stigma and discrimination prevention advocacy packages developed and piloted among key groups	Conduct of advocacy events/campaigns, sessions and dialogues to three target groups including local government organization, uniformed services and media/press incorporating MSM/TG, sex work and injecting drug use issues.	UNAIDS TH UNDP TH

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Programme Outcomes	Programme Outputs	Programme Activities	Responsible Partners
Component 3. AIDS Rights Protection Improved legal hotline /AIDS rights protection service centers and increased call volume in pilot and neighbouring provinces	Human resources and services properly in place in AIDS Rights protection centers in seven major provinces.	Provide training/coaching to staff and volunteers operating legal hotline / AIDS protection centers Provide facility supports for hotline centers Develop of 7 sets of IEC materials	UNAIDS TH UNDP TH
	Sustained government involvement and community partners to AIDS rights protection in major provinces	Provide consultation and technical supports to ensure long-term involvement of government and community partners including national and sub-national AIDS rights forums	UNAIDS TH UNDP TH
Component 4. Strategic Information National data sets on HIV and human rights as well as stigma and discrimination effectively used in the UNGASS's national composite policy index	One section on stigma and discrimination incorporated in NCPI report	Develop stigma and discrimination section of the NCPI and organize consultative processes to validate and disseminate report	UNAIDS TH UNICEF TH
	Documented five cases and lessons learned as an accompanying document to the NCPI report on stigma and discrimination <i>(5 lessons/cases: PLHIV, IDU MSM, SW, & children)</i>	Document evidence based lessons learnt or cases to support the NCPI report on stigma and discrimination	UNAIDS TH UNICEF TH

While UNDP Thailand as managing agent for pooled funding shall ensure that all components and activities under pooled funding are carried out with close coordination of UNAIDS Thailand, other UN agencies shall lead and assure that certain components and activities are implemented as indicated in this joint project document. UNFPA Thailand shall lead in documenting annual HIV and rights situation report (Activity 1.4). UNESCO shall lead in developing stigma and discrimination curriculum focusing on workplace, health setting and school that incorporates MSM, TG, sex work and injecting drug use issues (Activity 2.1). Under component 4 on strategic information, UNICEF Thailand and UNAIDS Thailand shall provide technical leadership under this component.

Aligned with four result areas, there are essentially four strategies. The joint programme shall use the following strategies to achieve the results outlined above.

Advocacy platform: The national and sub-national committees on stigma and discrimination shall be created as the focal advocacy group to advise policies and implement actions and monitor HIV and human rights situations in Thailand and other provinces. In related outcomes, there shall be three studies to be done under this joint programme, and key findings and recommendations from these shall be used for further dissemination at many forums, workshops and meetings at different levels. These shall be led by the national and sub-national committees on stigma and discrimination. Such forums, workshops and meetings shall be organized to provide public space as a way to raise awareness, influence policies and challenge practices. Public dissemination shall also be an opportunity to validate information generated by the studies. Advocacy package to targeted populations shall be designed and implemented among local government officials, men in uniform and media practitioners.

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Capacity development: The joint programme necessitates to enhance capacity of the CSO partners, including field staff and volunteers, and committees formed who shall help implement activities. Several types of capacity development methodologies shall be used including training, mentoring and coaching. Training and mentoring shall be done among (1) AIDS Rights team members, (2) Stigma and discrimination prevention core team members. The capacity of staff and volunteers managing and operating the legal hotline shall be enhanced. Appropriate curriculum shall first be developed based on the existing literature. Training programmes shall be planned and implemented particularly to individuals who are going to conduct stigma-discrimination prevention education and individuals who shall implement advocacy plan.

Innovative service delivery: There are two types of services that need to be delivered. First, stigma and discrimination prevention education to three settings: workplace, health facility, and schools. It shall be conducted by stigma and discrimination core team educators. The second type of service is legal hotline services and other AIDS rights protection related services including case management, referrals and education. This shall be done in seven major provinces.

Strategic information: The programme is designed to obtain data and information from three studies: (1) the HIV and human rights situation in Thailand, (2) stigma and discrimination situation (policies) in Thailand as a section of NCPI and (3) documentation of lessons learned and cases. All the studies correlate and support each other, combining both quantitative and qualitative methodologies. In terms of dissemination of study results, besides dissemination of each of the reports to the general public through key institutions, the findings and recommendations will be strategically used for policy advocacy and public awareness initiatives.

Gender dimensions shall also be taken into account when forming the project advisory committee, the working group, the research team, as well as selecting trainees for the training on stigma and discrimination prevention core team and the workers on rights protection. Gender shall be taken into consideration when developing the curriculum and implementing the training activities as a major underpinning theme in under this programme.

Sustainability of results:

The joint programme shall set up national sub-committee on stigma and discrimination as part of the National AIDS Prevention and Alleviation Committee and this committee shall continue to monitoring HIV and human rights situation in Thailand even well beyond the project cycle. This committee is expected to continue functioning like all other committees under NAPAC, with substantive secretariat support from NAMC and FAR. The same goes for the provincial stigma and discrimination and AIDS rights committees where the committees functions shall be integrated as part of the existing PCMs where it is available or other provincial bodies that coordinate AIDS response within the province. Part of the regular advocacy meetings like dialogues with the government counterpart shall aim at integration of this committee to existing coordinating mechanism in the country and provinces. The capacities of people who will be part of these committees and core groups of educators and advocates shall be strengthened, serving as a pool of skilled people and volunteers to continue advocacies and stigma and discrimination education in Thailand in the future.

The curriculum for HIV/AIDS stigma and discrimination prevention for workplace, health care facilities and school shall be the first to be piloted in Thailand and can be useful to other provinces and organizations who may like to access the curriculum and implement it within their area of work. The same goes for piloting advocacy packages for stigma and

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

discrimination prevention among local government officials, men in uniform services, and media practitioners. These are also pioneering— models and methodologies of these advocacy packages can be replicated in other provinces.

5. Results Framework

Outlining the outcome, outputs, activities and some relevant information, the following table illustrates the results framework.

Table 2: Results Framework

UNPAF Outcome: By 2011, Thailand ensures increased access to and utilization of comprehensive HIV prevention, treatment, care and support services. Country programme outcome (3.1): a more inclusive rights-based national response to HIV infection is adequately resourced and effectively implemented.										
Joint Programme Outcomes: Enabling environment with better attitudes, policy and practices toward HIV/AIDS and human rights as well as stigma and discrimination.										
JP Outputs	Participating UN organization-specific Outputs	Participating UN organization	Participating UN organization corporate priority	Implementing Partner	Indicative activities for each output	Resource allocation and indicative time frame*				
						Jul-Sep 2011 Q1	Oct-Dec 2011 Q2	Jan-Mar 2012 Q3	Apr-Jun 2012 Q4	Total (USD)
Component 1: AIDS Rights Mechanisms and System National and sub-national mechanisms on stigma-discrimination prevention and AIDS rights protection officially established and well functioning.										
1.1. A national sub-committee on stigma and discrimination set up as part of NAPAC.	As referred in previous column	UNAIDS TH UNDP TH	Rights-based approach	FAR	Under the NAPAC, set up and provide supports for a national sub-committee on stigma and discrimination	X	X			5,976
1.2. Seven sub-national teams on AIDS rights protection teams developed. - 1 provincial roadmap for the committee to respond to key issues on AIDS rights		UNAIDS TH UNDP TH		FAR	Provide supports to and consultations for the establishment of provincial committees on AIDS rights in order to ensure AIDS rights advocacy at local levels	X	X			6,384
1.3. At least seven provincial committees on stigma and discrimination prevention and AIDS rights team are trained and effectively functioning.		UNAIDS TH UNDP TH		FAR	Conduct training on and provide support for stigma and discrimination prevention and AIDS rights teams at national and sub-national levels		X	X	X	21,675
1.4. One report on the HIV and human rights situation in Thailand disseminated		UNFPA TH UNAIDS TH		FAR	Document annual HIV and rights situation in Thailand Launching of the Report	X	X			10,000

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Component 2: Stigma and Discrimination Prevention										
Key stakeholders in government sector, private business partners and CSOs mobilized and supporting stigma and discrimination prevention education services in key pilot settings and groups										
2.1. Improved skills of educators and advocates to provide stigma and discrimination prevention education services and advocacy packages in three key settings.		UNESCO UNAIDS TH UNDP TH	Rights-based approach	FAR	Develop stigma and discrimination curriculum focusing on workplace, health facility and school settings that incorporates MSM, TG, sex work and injecting drug use issues Establish three core teams for stigma and discrimination prevention education in three pilot settings Train stigma prevention education core teams with at least 15 members in three pilot settings	X	X			12,100
2.2. Three stigma and discrimination prevention education model developed and piloted in three key settings		UNAIDS TH UNDP TH		FAR	Pilot site selection and develop MOU with partners in workplace, health facility and school Conduct of prevention education sessions		X	X	X	15,000
2.3. Three stigma and discrimination prevention advocacy packages developed and piloted among key groups		UNAIDS TH UNDP TH		FAR	Conduct of advocacy events/campaigns, sessions and dialogues to three target groups including local government organization, uniformed services and media/press that incorporates MSM/TG, sex work and injecting drug use issues			X	X	10,500
Component 3: AIDS Rights Protection										
Improved legal hotline /AIDS rights protection service centers and call volume increased in pilot and neighbouring provinces										
3.1. Human resources and services properly in place in AIDS rights protection centers in seven major provinces.		UNAIDS TH UNDP TH	Rights-based approach	FAR	Provide training/coaching to staff and volunteers operating legal hotline / AIDS rights protection centers Provide facility supports for hotline centers Develop of 7 sets of IEC materials	X X				14,000

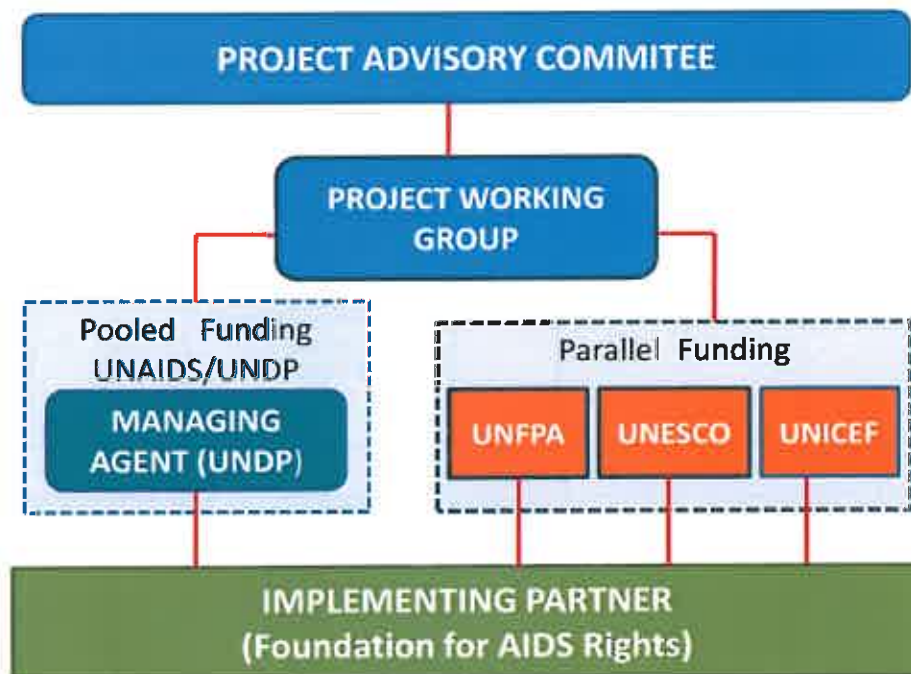
Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

3.2. Sustained government involvement and community partners to AIDS rights protection in major provinces		UNAIDS TH UNDP TH		FAR	Provide consultation and technical supports to ensure long-term involvement of government and community partners including national and sub-national AIDS rights forums			X	X	11,640
Component 4. Strategic Information										
National data sets on HIV and human rights as well as stigma and discrimination effectively used in the UNGASS's national composite policy index										
4.1. One section on stigma and discrimination incorporated in NCPI report		UNAIDS TH UNICEF TH	Rights-based approach	FAR	Develop stigma and discrimination section of the NCPI and organise consultative processes to validate and disseminate report			X	X	17,600
4.2. Documented five cases and lessons learned as an accompanying document to the NCPI report on stigma and discrimination (5 lessons/cases: PLHIV, IDU MSM, SW, & children)		UNAIDS TH UNICEF TH		FAR	Document evidence based lessons learnt or cases to support the NCPI report on stigma and discrimination Present results/ findings at sub-national and national levels				X X	7,400
Project Monitoring and Evaluation										
One evaluation/ assessment disseminated to project stakeholders		UNDP TH		FAR	Engage an independent consultant and develop evaluation/ assessment design. Conduct Data gathering, consolidation and validation Present evaluation/ assesment				X	5,250
Project assurance/ monitoring		UNDP TH		UNDP TH	Monitoring Visits	X	X	X	X	2,900
Project Management		UNDP TH		UNDP TH	Finance and admin, audit	X	X	X	X	7,075

6. Management and Coordination Arrangements

This joint programme was built on what was achieved during the AIDS Rights Advocacy and Stigma and Discrimination Index Development Project. Members of the UNJTA Thailand, including UNAIDS, UNDP, UNICEF, UNFPA, and UNESCO initially organized a series discussions. Subsequently, UNAIDS, UNDP and UNICEF organized series of consultations with FAR and TNP+ that finally conceptualized this project. Based on previous working modalities, the following is identified as the management and coordination arrangement for this joint programme.

Figure 1. Management and Coordination Arrangements



Project advisory committee: This committee shall be composed of representatives from partner organizations and networks among UN agencies, government agencies including MOPH, MOJ and MSDHS, academic institutions, and CSOs led by FAR and TNP+. Other prominent members of HIV and AIDS community in Thailand shall also be invited. The committee shall meet at least twice a year and/or as deemed necessary. This Committee shall provide overall guidance, oversee the implementation, monitoring and assessment of the project and policy directions to the programme component, and to approve the activities under the joint programme document and their corresponding budgets for each year.

The Committee shall be chaired by the Department of Rights and Liberty Protection, Ministry of Justice. The Committee shall meet at least twice a year and/ or subject to necessity to review the progress and approve work plans, and make recommendations, when necessary, to improve the joint programme. Decisions of the Committee are made through necessary arrangements for assurance function. (See Appendix B)

Project working group: The project shall set up a working group in order to closely support implementation and monitor the project activities. The working group shall be a small team composed of working level persons from UN agencies, FAR, TNP+ and representatives from MARPs and human rights network.

The project working group is composed of:

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

1. Ms. Supatra Nacapew, Director of FAR and Chairperson of TNCA
2. Chairperson of TNP+
3. UN agencies involved led by UNAIDS, UNDP, UNICEF, UNFPA, UNESCO
4. One from network on human rights
5. Organization that works with MARPs

Executing Agency: UNDP Thailand shall administratively manage the pooled project funding.

Implementing Agency: FAR shall be the implementing agency responsible for project implementation. FAR shall collaborate with TNP+ and other CSOs in selected activities.

PAF funds from UNAIDS shall be managed and coordinated by UNDP Thailand as a managing agent, whereas the parallel funding will be done by UNFPA Thailand, UNESCO and UNICEF Thailand. Therefore, on a day-to-day basis, UNESCO, UNFPA Thailand and UNICEF Thailand shall be required to manage its own respective activities under this joint programme document. FAR shall be responsible for the overall day-to-day management of the entire project.

7. Fund Management Arrangements

Under this joint programme, UNESCO, UNFPA Thailand and UNICEF Thailand have agreed to use the parallel funding management whereas UNAIDS Thailand and UNDP Thailand have agreed to use the pooled funding management with UNDP Thailand as the managing agent who shall be responsible for the common work plan management of pooled funding. A combination of parallel funding management for UNFPA Thailand, UNESCO and UNICEF Thailand and pooled funding management for UNAIDS Thailand (PAF B) and UNDP Thailand shall be applied.

Pooled funding management. Under this project with the pooled funding management, UNAIDS Thailand and UNDP Thailand agreed to enter into pooled funding management. UNDP Thailand, as the managing agent for UNAIDS Thailand will establish a Project Advisory Committee. Members of the Project Advisory Committee include representatives from partner organizations and networks among UN agencies in Thailand including UNAIDS, UNDP, UNESCO, UNFPA and UNICEF, government agencies including MOPH, MOJ and MSDHS, academic institutions, and CSOs led by FAR and TNP+.

FAR, as the project implementing partner, shall operate the overall day-to-day management of the project and coordinate the preparation of semi-annual progress reports which are to be submitted to the members of the Project Advisory Committee for review and guidance. FAR shall also coordinate directly with the Development Strategy and Advocacy Unit of UNDP Thailand, who shall subsequently report to the Deputy Resident Representative of UNDP Thailand.

Paralleled funding management. As the project implementing partner, FAR shall implement some activities as per work plan through paralleled funding management. Such management shall include the activities under the funds of USD 8,000 from UNESCO, USD 10,000 from UNFPA Thailand and USD 25,000 from UNICEF Thailand. Thus, FAR shall be required to manage these activities as per work plan in liaison with UNESCO, UNFPA Thailand and UNICEF Thailand.

In parallel funding, the agencies shall enter into a separate contract with the implementing agencies using this joint programme document as a technical basis for the contract.

Transfer of cash to national Implementing Partners: Cash transfer modalities, the size and frequency of disbursements, and the scope and frequency of monitoring, reporting, assurance and audit will be agreed prior to programme implementation, taking into consideration the capacity of implementing partners, and can be adjusted in its course in accordance with applicable policies, processes and procedures of the participating UN organizations. For the ExCom agencies, the provisions required under

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

the Harmonized Approach to Cash Transfers (HACT) as detailed in their CPAPs or in other agreements covering cash transfers will apply.

8. Monitoring, Evaluation and Reporting

Monitoring: The project shall be monitored through two key mechanisms: 1) The Project Advisory Committee that is expected to meet twice a year and/or as necessary; and 2) The Project technical working group shall meet every month and on a special-request basis to ensure project service delivery and take comments from the project advisory committee into actions in order to improve the project implementation.

Besides the project structure mentioned above and as this project has been jointly initiated by many UN agencies that are the key members of the UN Joint Team on AIDS (UNJTA) as well as this project shall be under the execution of UNDP Thailand as part of the UN joint programming modality, this project shall be also monitored through the monthly meetings of the UNJTA.

Field visits will also be done to monitor field actions and activities.

Table 3: Joint Programme Monitoring Framework (JPMF)

Expected Results (Outcomes & outputs)	Indicators (with baselines & Indicative timeframe)	Means of verification	Collection methods (with indicative time frame & frequency)	Responsibilities	Risks & assumptions
OUTCOME Enabling environment with better attitudes, policy and practices toward HIV/AIDS and human rights as well as stigma and discrimination					
OUTPUT: National and sub-national mechanisms on stigma-discrimination prevention and AIDS rights protection officially established and well functioning.					
1.1 A national sub-committee on stigma and discrimination set up as part of NAPAC	By the end of the project, Indicator 1: # of national sub-committee on stigma and discrimination set up under NAPAC Baseline: Ad hoc group has started discussing about coming up with national sub-committee on stigma and discrimination set up under NAPAC Target: One national sub-committee on stigma and discrimination set up under NAPAC	Progress Report	Quarter 1 & 2 Jul-Dec 2011	UNDP TH UNAIDS TH	Assumption: There is a growing consensus among HIV/AIDS stakeholders in Thailand of the need to set up mechanisms to focus on stigma and discrimination in our work
1.2. Seven provincial committees on AIDS rights protection teams developed	Indicator 2: # of provincial committees on AIDS rights consistently receiving targeted technical support Baseline: Initial work on stigma and discrimination on 7 seven provinces has been built through local networks. Similar interventions has been previously piloted in other provinces.	Progress Report Provincial Roadmap	Qtr 1 & 2 Jul-Dec 2011	UNDP TH UNAIDS TH	Risk: Lack of support from some stakeholders

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Expected Results (Outcomes & outputs)	Indicators (with baselines & indicative timeframe)	Means of verification	Collection methods (with indicative time frame & frequency)	Responsibilities	Risks & assumptions
	-No existing provincial roadmaps to plan AIDS rights actions Target: 7 provincial committees on AIDS rights consistently receiving targeted technical support -- 1 provincial roadmap for the committee to respond to key issues on AIDS rights				who may find the issue of human rights and HIV challenging some status quo
1.3. At least seven provincial committees on stigma and discrimination prevention and AIDS rights team are trained and effectively functioning.	Indicator 3: # of training on AIDS rights promotion and protection conducted Baseline: Consultations and orientations were done to key people in targeted provinces Target: 7 full training on AIDS rights promotion and protection conducted -- 255 people trained	Progress Report Training Report	Qtr 3 & 4 Jan-Jun 2012	UNDP TH UNAIDS TH	
1.4. One report on the HIV and human rights situation in Thailand disseminated	Indicator 4: # of new generation of strategic information on HIV and human rights and/or stigma and discrimination in Thailand available Baseline: One report in 2009 of HIV and human rights in Thailand Target: 1 national report on HIV and human rights situation in Thailand published -- One national forum conducted	Final Report	Qtr 1 & 2 Jul-Dec 2011	UNFPA TH UNAIDS TH	
Output: Key stakeholders in government sector, private business partners and CSOs mobilized and supporting stigma and discrimination prevention education services in 3 pilot provinces					
2.1. Improved skills of educators and advocates to provide stigma and discrimination prevention education services and advocacy packages in three key pilot settings	Indicator 5: # curriculum on HIV stigma and discrimination prevention in workplace, health facilities and school that incorporates MSM, TG, sex work and injecting drug use issues Baseline: No existing curriculum on stigma and discrimination prevention in workplace, health setting and school localized to Thailand Target: One curriculum on stigma and discrimination with subsets on workplace, health setting and school is available Indicator 6: # of training on HIV stigma and discrimination conducted Baseline: No existing educators on HIV stigma and discrimination prevention in workplace, health setting and school Target: 3 core teams trained on HIV stigma and discrimination :	Curriculum Progress Report Progress Report Training Report	Qtr 1 & 2 Jul-Dec 2011 Qtr 2 Oct-Dec 2011	UNESCO UNDP TH UNAIDS TH UNDP TH UNAIDS TH	Assumption: There are technical professional who can develop curriculum and conduct quality training Risk: Resistance from local government officials, school and men in uniform Poor quality of curriculum development

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Expected Results (Outcomes & outputs)	Indicators (with baselines & indicative timeframe)	Means of verification	Collection methods (with indicative time frame & frequency)	Responsibilities	Risks & assumptions
	workplace, health setting, school -- 15 people trained				
2.2. Three stigma and discrimination prevention education model developed and piloted in three key settings	<p>Indicator 7: # of targeted HIV stigma and discrimination prevention education package implemented at least one in workplace, health facilities and school</p> <p>Baseline: No existing HIV stigma and discrimination prevention work in workplace, health facility and school</p> <p>Target: 3 HIV stigma and discrimination prevention education package implemented in at least one in workplace, health setting and school</p>	Progress Report	Qtr 2 -4 Oct 2011-Mar 2012	UNDP TH UNAIDS TH	
2.3. Three stigma and discrimination prevention advocacy packages developed and piloted among key groups	<p>Indicator 8: # of targeted HIV stigma and discrimination advocacy package implemented in at least one among men in uniform, local government officials and media that incorporates MSM, TG, sex work and injecting drug use issues</p> <p>Baseline: AIDS outreach work, but not on stigma and discrimination, are done among local government officials, police and media in Thailand</p> <p>Target: 3 targeted HIV stigma and discrimination advocacy package implemented in at least one among men in uniform, local government officials and media -- 3 advocacy plans are developed</p>	Progress Report Advocacy Plan	Qtr 3 -4 Jan-Jun 2012	UNDP TH UNAIDS TH	
Output: Improved legal hotline service/AIDS rights protection centers and call volume increased in pilot and neighbouring provinces					
3.1. Human resources and services properly in place in AIDS Rights protection centers in 7 major provinces	<p>Indicator 9: # of hotline centers provided comprehensive training on AIDS rights protection and response</p> <p>Baseline: There are existing hotline/ AIDS Rights protection centers operating to pattern the interventions but are not well trained</p> <p>Target: 7 AIDS Rights protection centers provided comprehensive training on AIDS rights protection and response --- 244 staff and volunteers are trained/mentored</p>	Progress Report Training Report	Qtr 1&2 Jul-Dec 2011	UNAIDS TH UNDP TH	<p>Assumption: There are existing hotlines to pattern the support.</p> <p>Risk: Lack of good response from government officials</p>
3.2. Sustained government involvement and community partners	<p>Indicator 10: # of national and sub-national forums that address partnership in AIDS rights protection</p> <p>Baseline: There are limited number of people from government and community in 7 provinces supporting existing AIDS rights protection teams</p>	Progress Report Forum Report	Qtr 3 &4 Jan-Jun 2012	UNAIDS TH UNDP TH	

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Expected Results (Outcomes & outputs)	Indicators (with baselines & Indicative timeframe)	Means of verification	Collection methods (with indicative time frame & frequency)	Responsibilities	Risks & assumptions
	<p>Target: One national and seven -sub national forums that address partnership in AIDS rights protection conducted.</p> <p>--- 100 individuals national forum and 490 individuals in local forum</p>				
Output: National data sets on HIV and human rights as well as stigma and discrimination are effectively used in the UNGASS's national composite policy index and M&E system					
<p>4.1. One section on stigma and discrimination incorporated in NCPI report</p> <p>4.2. Documented five cases and lessons learned as an accompanying document to the NCPI report on stigma and discrimination (5 lessons/cases: PLHIV, IDU MSM, SW, & children)</p>	<p>Indicator 4: (same as 1.4) # of new generation of strategic information HIV and human rights and/or stigma and discrimination in Thailand available</p> <p>Baseline: NCPI report in 2009 is silent on stigma and discrimination; however there is the 2009 Report on stigma and discrimination as part of the regional SD index.</p> <p>Target. One section on stigma and discrimination incorporated in 2012 NCPI</p> <p>Target: One report documenting cases and lessons learned on stigma and discrimination as an accompanying document to the NCPI</p>	<p>NCPI Report</p> <p>Case Studies Report</p>	<p>Qtr 3 & 4</p> <p>Jan-Jun 2012</p>	<p>UNICEF TH</p> <p>UNAIDS TH</p>	<p>Assumption: NCPI will be developed by NAC on 2011-12</p> <p>Risk: lack of quality researchers</p>

Evaluation: The project will be assessed/evaluated at the end of the project implementation. An independent consultant shall be contracted who will design and implement evaluation/assessment of the project.

Reporting: The programme has set out arrangements for progress reporting on the joint programme results twice a year at the meeting of the Project Advisory Committee which is the governing body of the programme.

9. Legal Context or Basis of Relationship

The Royal Thai Government and the United Nations Special Funds have entered into the Agreement to govern assistance from the Special Fund to Thailand, which was signed by both parties on 04 June 1960. Pending the finalization of the Standard Basic Assistance Agreement (SBAA) between UNDP and the Government, the Agreement will govern the technical assistance provided by UNDP Thailand under the Country Programme Action Plan (CPAP), which was signed between the Government and UNDP Thailand on 10 January 2007.

On UNDP managed pooled funding, the responsibility for the safety and security of the implementing partner and its personnel and property, and of UNDP's property in the implementing partner's custody, rests with the implementing partner in accordance with the aforementioned Agreement between the UN Special Fund and the Government of Thailand concerning Assistance from the Special Fund 1960.

The implementing partner shall:

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

- put in place an appropriate security plan and maintain the security plan, taking into account the security situation in the country where the Programme is being carried;
- assume all risks and liabilities related to the implementing partner's security, and the full implementation of the security plan.

UNDP as managing agent of pooled funding reserves the right to verify whether such a plan is in place, and to suggest modifications to the plan when necessary. Failure to maintain and implement an appropriate security plan as required hereunder shall be deemed a breach of this agreement.

The implementing partner agrees to undertake all reasonable efforts to ensure that none of the UNDP funds received pursuant to the joint programme document are used to provide support to individuals or entities associated with terrorism and that the recipients of any amounts provided by UNDP hereunder do not appear on the list maintained by the Security Council Committee established pursuant to resolution 1267 (1999). The list can be accessed via <http://www.un.org/Docs/sc/committees/1267/1267ListEng.htm>. This provision must be included in all sub-contracts or sub-agreements entered into under this joint programme document.

Funding channelled through parallel funding modality shall be governed by existing relationships between their agencies and the Thai Royal Government.

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Appendix A. Project Work Plan for: Stigma and discrimination prevention and AIDS rights protection
Period: 12 months

JP Outcomes: Enabling environment with better attitudes, policy and practices toward HIV/AIDS and human rights as well as stigma and discrimination											
UN organization-specific Annual targets	UN organization	Activities	TIME FRAME				Implementing Partner	PLANNED BUDGET		Amount	
			Jul-Sep '11 Q1	Oct-Dec '11 Q2	Jan-Mar '12 Q3	Apr-Jun '12 Q4		Source of Funds	Budget Description		
JP Output 1: AIDS Rights Mechanism and System											
1.1. A national sub-committee on stigma and discrimination set up as part of NAPAC	UNAIDS UNDP	Under the NAPAC, set up and provide supports for a national sub-committee on stigma and discrimination	X	X			FAR	UNDP TH	Workshops/Training	5,976	
1.2. Seven provincial committees on stigma and discrimination prevention and AIDS rights protection set up and effectively functioning. - 1 provincial roadmap for the committee to respond to key issues on AIDS rights	UNAIDS/ UNDP	Provide supports to and consultations for the establishment of provincial committees on AIDS rights in order to ensure AIDS rights advocacy at local levels Develop roadmap on human rights and HIV/AIDS	X	X			FAR	UNDP TH UNAIDS TH PAF B	Workshops/Training Miscellaneous	6,384	
1.3. Strengthened sub-national teams on AIDS rights protection teams	UNAIDS UNDP	Provide support and training to strengthen AIDS rights protection teams		X	X	X	FAR	UNAIDS TH PAF B 7,865 (available)	Workshops/Training Miscellaneous	21,675*	
1.4. One report on the HIV and human rights situation in Thailand disseminated	UNAIDS UNFPA	Document annual HIV and rights situation in Thailand Launch the HIV and human rights report	X	X			FAR	UNFPA TH	Local Consultants Audio Visual & Printing Production Costs	10,000	
JP Output 2: Stigma and Discrimination Prevention											

Joint Programme _ Stigma and Discrimination Prevention and AIDS Rights Protection

<p>2.1. Improved skills of educators and advocates to provide stigma and discrimination prevention education services and advocacy packages in three key settings and pilot provinces</p>	<p>UNESCO UNAIDS UNDP</p>	<p>Develop stigma and discrimination prevention curriculum package with 3 subsets: workplace, health setting and school that incorporates MSM, TG, sex work and injecting drug use issues</p>	<p>X</p>	<p>X</p>	<p></p>	<p></p>	<p>UNESCO UNAIDS TH PAF B</p>	<p>Local Consultants Audio Visual & Printing Miscellaneous Expenses</p>	<p>12,100</p>
<p>2.2. Stigma and discrimination prevention education services piloted in three settings: workplace, health setting, school</p>	<p>UNAIDS UNDP</p>	<p>Pilot site selection and develop MOU with partners in pilot sites</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNAIDS TH PAF B</p>	<p>Local Consultants Contractual Services- Companies Miscellaneous Expenses</p>	<p>15,000</p>
<p>2.3. Advocacy packages piloted focused on local, government officials, men in uniform, media practitioners</p>	<p>UNAIDS UNDP</p>	<p>Conduct of advocacy events/campaigns, sessions and dialogues to three pilot areas including local government organization, uniformed services and media/press that incorporates MSM, TG, sex work and injecting drug use issues</p>	<p></p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNAIDS TH PAF B</p>	<p>Meetings/Workshop Miscellaneous Expenses</p>	<p>10,050</p>
<p>JP Output 3: AIDS Rights Protection</p>									
<p>3.1. Human resources and services properly in place in AIDS Rights protection centers in 7 major provinces</p>	<p>UNAIDS UNDP</p>	<p>Provide training/coaching to staff and volunteers operating legal hotline / AIDS Rights protection centers</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>UNAIDS TH PAF B</p>	<p>Meetings/Workshop Training/Workshop Miscellaneous Expenses</p>	<p>14,000</p>
<p>Provide facility supports for hotline centers</p>		<p>Develop of 7 sets of IEC materials</p>	<p>X</p>	<p>X</p>	<p>X</p>	<p>X</p>			

Joint Programme Stigma and Discrimination Prevention and AIDS Rights Protection

3.2. Sustained government involvement and community partners to AIDS rights protection in major provinces	UNAIDS UNDP	Provide consultation and technical supports to ensure long-term involvement of government and community partners including national and sub-national AIDS rights forums			X	X	FAR	TBC	Meetings/Workshop Miscellaneous Expenses	11,640*
JP Output 4: Strategic Information										
4.1. One section on stigma and discrimination incorporated in NCPI report	UNICEF UNAIDS	Develop stigma and discrimination section of the NCPI and organise consultative processes to validate and disseminate report			X	X	FAR	UNICEF TH	Local Consultants Meeting/workshop Miscellaneous Expenses	17,600
4.2. Documented five cases and lessons learned as an accompanying document to the NCPI report on stigma and discrimination (5 lessons/cases: PLHIV, IDU/MSM, SW, & children)	UNICEF UNAIDS	Document evidence based lessons learnt or cases to support the NCPI report on stigma and discrimination Present results/ findings at sub-national and national levels			X	X	FAR	UNICEF TH	Local Consultants Audio Visual & Printing Miscellaneous Audio Visual & Printing Miscellaneous Expenses	7,400
Monitoring and Evaluation										
5.1. Project evaluated/ assessed	UNDP	Engage a consultant, design research/survey				X	FAR	UNAIDS TH PAF B	Local Consultants	5,250
5.2. Project Monitoring	UNDP	Conduct of project evaluation and regular monitoring visit Monitoring Visits	X	X	X	X	UNDP	UNAIDS TH PAF B		2,900
Implementation Support Service cost (estimate at 2% of Programme Costs of UNAIDS TH PAF B: US\$68,600 + UNDP TH: US\$ 10,000)										
Total programme cost										
Indirect Support Cost (estimate at 7% of UNAIDS TH PAF B: US\$ 68,600 + UNDP TH: US \$ 10,000)										
Total estimated budget										
Total UNAIDS TH PAF B										
Total UNDP TH										
Total UNESCO										
Total UNFPA TH										
Total UNICEF TH										
147,050										
68,600										
10,000										
3,000										
10,000										
25,000										


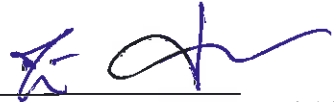



* With resource gap

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

10. Work plans and budgets

Please see Appendix A

Signatures:

UN organizations	Implementing Partner
<p>Dr. Michael Hahn</p> <p></p> <p>UNAIDS Country Coordinator, Thailand</p> <p>Date</p> <p>_____</p>	<p>Ms. Supatra Nacapew</p> <p></p> <p>Director, Foundation for AIDS Rights (FAR)</p> <p>Date</p> <p><u>23 June 2011</u></p>
<p>Mr. Yuxue Xue</p> <p></p> <p>UNDP Resident Representative, a.i</p> <p>Date</p> <p><u>24/06/2011</u></p>	
<p>Mr. Gwang Jo-Kim</p> <p></p> <p>Director, UNESCO</p> <p>Date</p> <p><u>29.06.2011</u></p>	
<p>Ms. Wassana Im-em</p> <p></p> <p>Officer in Charge, UNFPA</p> <p>Date</p> <p><u>27.6.11</u></p>	

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

Mr. Tomoo Hozumi



UNICEF Resident Representative

Country

Date

7 July 2011

Appendix B: Project Advisory Committee (PAC): Terms of Reference

The Project Advisory Committee is the governing structure of the Joint Programme entitled Stigma and Discrimination Prevention and AIDS Rights Protection, the main body for monitoring of the programme execution, expenditure control and strategic decisions about the Joint Programme.

Composition of the Project Advisory Committee. The Project Advisory Committee shall be composed of:

1. Director-General, Department of Rights and Liberty Protection, Ministry of Justice
2. Director-General, Department of Disease Control, Ministry of Public Health
3. Director, National AIDS Management Center
4. A Representative from Ministry of Social Development and Human Security
5. A Representative from Ministry of Education
6. Director-General, Thailand International Development Cooperation Agency, Ministry of Foreign Affairs
7. Ms. Sureerat Treemanka, member of Policy Committee, Thai PBS
8. A representative from Mahidol University
9. Chairperson of TNP+
10. Ms. Supatra Nacapew, Director of FAR and Chairperson of TNCA
11. A representative from the Office of the National Human Rights Commission of Thailand
12. A Representative from UNDP Thailand
13. A representative from UNAIDS Thailand
14. A representative from UNICEF Thailand
15. A representative from UNESCO
16. A representative from UNFPA Thailand
17. A representative from CSO working among SW and MSM/TG
18. A representative from CSO working among IDU

The Director –General of the Department of Rights and Liberty Protection, Ministry of Justice shall be the Chairman of the Project Advisory Committee. In his/her absence, he/she shall appoint a Chairman in his/her behalf.

Membership of the Board is established by appointment at the beginning of the Programme. The membership of the PAC is ceased by a) completion of the Programme; b) Disengagement by the authority, that appointed a member; c) resignation. Membership of the PAC is voluntary and honorary. Membership is not remunerated.

Role and responsibility:

- The PAC is responsible for strategic decisions making by consensus, including the approval of programme revisions (i.e. changes in the programme document);
- The PAC will approve workplans and visibility strategy, if any;
- The PAC will approve quarterly and annual reports. The minimum requirements of the quarterly and annual reports will be defined by the PAC;
- The PAC ensures continuous networking with partners;

Joint Programme _Stigma and Discrimination Prevention and AIDS Rights Protection

- The PAC will meet at least twice a year to review the programme strategy, management risks and most relevant issues;
- In addition the PAC will meet, during the running of a programme or as necessary, when raised by the Implementing Partner, Managing Agent or the Advisory Committee;
- The PAC is consulted by the Programme Manager for decisions when programme management tolerances (in terms of time and budget as per work plan) have been exceeded.
- The meeting of the PAC can be held also virtually – via teleconference, videoconference, and email discussion. Quarterly programme report can be approved by the Board also through email exchange.

Board Meetings:

1. Meetings of the PAC are convened and chaired by the Chairman.
2. The PAC shall meet as necessary at least twice a year to review the programme strategy, management risks and the most important issues. The PAC shall meet during the programme implementation or if necessary, upon the call of the Implementing Partner and Managing Agent.
3. Chairman is responsible for managing the PAC activities.
4. The Managing Agent as the Board Secretary is responsible for preparing the meetings agenda and documents and distributing them to the members of the Board in electronic form, not later than 5 days prior to the meeting.
5. The Managing Agent is responsible for preparing minutes of the PAC meetings and its distribution to the participants no later than 10 days after the meeting.
7. The PAC may, if necessary or based on proposal of the PAC members, invite to the meetings other experts, particularly members of the PAC, if the agenda of the Board meeting includes addressing the specific technical issues of the programme implementation.
8. PAC Meetings may be held as well virtually - through teleconferences, videoconferences and e-mail discussions.
12. The PAC member may authorize other staff member of the organization the PAC member represents, to participate and vote at the PAC meeting.
14. The delegation of the mandate shall be applicable for the joint meeting of the PAC, videoconferencing and teleconferencing. It shall not apply in case of the email procedures.
15. PAC resolutions must comply with the applicable UNDP regulations, rules and policies that govern the implementation of the Programme. In accordance with them, UNDP makes final decisions on programme implementation.

Final Provision. Changes and amendments to the TOR are approved by consensus of the Board. Any change and/or amendment must be carried out in writing.

Appendix C: Project Working Group

1. Ms. Supatra Nacapew, Director of FAR and Chairperson of TNCA
2. Chairperson of TNP+
3. UN agencies involved led by UNAIDS, UNDP, UNICEF, UNFPA, UNESCO
4. One from network on human rights
5. Organization that works with MARPs