Southern African AIDS Trust (SAT) Commitment for a Coordinated Response to HIV and AIDS in Southern Africa

The Implementation of the “Three Ones”

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ABSTRACT

The “Three Ones” approach promotes one HIV and AIDS Action Framework, one AIDS coordinating authority and one monitoring and evaluation (M&E) system at the national level. Regional organizations operating across countries must ensure a delicate balance of working within the three ones of individual countries while preserving regional identity. Southern African AIDS Trust (SAT) is one such body that has programmes in Malawi, Mozambique, Tanzania, Zambia and Zimbabwe and its headquarters in South Africa.

To date, SAT has effectively operated within the three ones of each country. First, all SAT countries deliberately support organizations contributing towards outcomes set in National AIDS Plans. Second, the countries work closely with and within coordinating systems of those countries. The National AIDS Councils (NAC) are members of SAT Programme Advisory Committees in all SAT countries and the NAC is a regular participant at SAT Annual Partner Meetings in all SAT countries. Working within one M&E system has proven challenging due to not fully functioning national systems and competing M&E needs at the national, partner, SAT and donor levels. SAT country programmes, however, continue to make a deliberate effort to align and harmonize M&E requirements. Partners are encouraged to report data to government bodies such as the NAC, Ministry of Health and other departments. Partners are capacitated to identify their own data needs beyond those of SAT, donors and national M&E systems.

Key words: HIV; monitoring and evaluation

La traduction du résumé se trouve à la fin de l'article.

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technical capacity of countries. The recommendations of the Global Task Team guide the country-level implementation of the Three Ones principles.5,6

Many countries have established coordination mechanisms and strategic frameworks, and are in the process of establishing harmonized monitoring and evaluation systems. However, as analyzed and presented in the UNAIDS secretariat report “The Three Ones in Action”7 for the high-level meeting in London, the existence of these structures does not necessarily mean an effective multisectoral and participatory response to AIDS.

Many countries are struggling to muster sufficient human capacity and establish adequate disbursement and monitoring and evaluation systems to make the money work. The key to achievement of the set targets is adequate and timely support to the countries, including development of guidelines and tools for full implementation of each of the Three Ones, and for full civil society engagement. This is evidenced by the UNAIDS study8 which reveals that many countries, particularly in Africa, have faced tremendous difficulties in utilizing the increased funding currently available to scale up national programmes. Resources are not being utilized in a timely manner, allocated strategically to have the greatest impact, or disbursed efficiently at the community level.

At the country level, the National AIDS Councils (NAC) use the following criteria to assess whether or not an organization is within the three ones:
1. Whether it reports its programming data to NAC.
2. Whether the organization’s work is based on the National Action Framework.
3. Whether there is direct interaction between NAC and the partner.

HIV and AIDS in Southern Africa
According to UNAIDS, Southern Africa remains the epicentre of the global HIV epidemic. In 2006, almost two thirds (63%) of all those infected with HIV worldwide were living in sub-Saharan Africa and 34% of global HIV-related deaths occurred there.9

According to the SADC (Southern African Development Community) report (2006), the key drivers of the pandemic in the region include multiple concurrent partnerships by men and women with low consistent condom use, and low levels of male circumcision. Underlying these epidemic drivers are the social and structural factors, such as high population mobility, inequalities of wealth, cultural factors and gender inequalities.10

About Southern African AIDS Trust (SAT)
SAT11 is a regional organization that supports community responses to HIV and AIDS through in-depth partnerships with community groups in Southern Africa. SAT’s overall goal is to build the competence of communities to develop and manage effective, appropriate and sustainable responses to HIV and AIDS. This is achieved through partnerships, grant management, wider networking, skills exchange and lessons sharing. SAT funding and skills-building activities, through the School Without Walls model (SWW), support the capacity development of partners.

The Southern African AIDS Trust (SAT) was established in 1990 as “The Southern African AIDS Training Programme”, a project of the Canadian International Development Agency (CIDA) implemented by the Canadian Public Health Association (CPHA). In 2003, SAT became an independent regional organization and registered as a charitable Trust in Zimbabwe, whereupon it was renamed the “Southern African AIDS Trust”. SAT relocated its regional office to Johannesburg, South Africa and continues to operate in five Southern African countries (Malawi, Mozambique, Tanzania, Zambia, and Zimbabwe), all of which have decentralized SAT country programme offices.

To date, SAT has supported over 250 community-based organizations (CBOs) in Southern Africa.

The work under the “Three Ones”
At global, regional and national levels, SAT is highly committed to assuring an effective operationalization and implementation of the “Three Ones”. The Southern African Development Community (SADC)12 has prioritized HIV and AIDS. Their work is at the secretarial level led by the SADC’s HIV and AIDS Unit.

Even though this co-ordinating mechanism now exists, it is necessary for different subgroups of stakeholders to coordinate within themselves to further contribute to an effective response at the regional level. UNAIDS, UNDP HIV and AIDS Programme and a group of bilateral donor agencies have created an informal coordinating group of international cooperating partners (ICPs). In April 2007, SAT took the initiative to coordinate a similar informal group for non-governmental organization RAANGO (Regional African HIV and AIDS NGOs), i.e., NGOs working at the regional level and having their headquarters in Southern Africa. Organizations within RAANGO are now talking with one voice to SADC and have a two-hour slot as a standing feature in SADC Partnership Forums. This initiative is proving vital and effective and is boosting other mechanisms for mustering a regional coordinated response. Evidence can be drawn from the following examples:

- RAANGO participating organizations learn from each other’s comparative advantage and through collaborative efforts and division of labour achieve synergies leading to an improved response to HIV and AIDS.
- An initiative was recently initiated by SAT and SAfAIDS (Southern African AIDS Information and Dissemination Services)13 to contribute to scaling up HIV prevention in communities and integrating results from the Maseru Think Tank meeting on HIV prevention.
- Regional Psychosocial Initiative (REPSSI)14 is representing all organizations within RAANGO in the regional interagency task force on children.

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### TABLE I

The Implementation of the “Three Ones” in the Countries Where SAT Currently Operates

<table>
<thead>
<tr>
<th>Country</th>
<th>National AIDS Coordinating Authority</th>
<th>National HIV Framework</th>
<th>National M&amp;E System</th>
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<tbody>
<tr>
<td>Malawi</td>
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<td>Mozambique</td>
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<td>Tanzania</td>
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<td>Zimbabwe</td>
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SAT and SAtAIDS supported SANA-SO’s (Southern African Networks of AIDS Service Organizations) application to a membership in UNAIDS Programme Committee Board, which has given NGOs within RAANGO the first coordinated voice at the global level.

At the national level, the integration of SAT’s work within the “Three Ones” is equally visible. In Malawi, Mozambique, Zambia, Zimbabwe and Tanzania, SAT is considered a key representative of civil society organizations with strong and highly recognized expertise in capacity building of CBOs/NGOs:

- NAC (National AIDS Councils) and UNAIDS are SAT strategic partners and have been collaborating in many ways throughout the years. UNAIDS and NAC are members of the panel advisory committees in Zambia, Zimbabwe and Mozambique. NAC regularly participates in SAT partner annual meetings.
- SAT is a member of the international and national NGO Forums which aim at bringing together all NGOs working in HIV and AIDS so that they can coordinate and streamline their activities in support of the national response. The NGO forum in each country also aims at collectively collaborating with the NACs to influence effective HIV and AIDS programming.
- SAT Malawi is an alternate representative of the INGO Forum on the Malawi Global Fund Coordinating Committee, providing the opportunity to influence the planning, implementation and future of programming using Global Funds.
- SAT is a member of several partnership forums that serve to provide technical and strategic advice to the NAC Board for effective programming. Each Forum has several technical committees of which organizations are members. For example, SAT Mozambique is a member of the Research, Planning and M&E working group, and SAT Malawi is a member of the BCI (behaviour change interventions), Health (looking at the biomedical components of HIV and AIDS) and MEIS (Monitoring, evaluation, information systems) working group. SAT Zambia participated in the development of the National HIV and AIDS Strategic Framework for the period 2006-2010, and sits on NAC’s three thematic groups, namely, Prevention; Treatment; and Care, Support and Impact Mitigation.
- SAT served on various task forces related to national events, including the Candlelight Memorial Task Force, HTC* Week Task Force and National HIV and Prevention Strategy Task Force. In each of these, SAT is part of a national planning, executing and evaluation team of a major national exercise facilitated by the National AIDS Commission.
- The National AIDS Council considers SAT a strategic partner for reaching and working with communities. As a result, SAT is being invited by NAC to submit project proposals as an intermediary organization for capacity building of CBOs/NGOs.

SAT’s work fits into the National Response Frameworks, guided by the National NAC Strategic Plans. In terms of thematic areas, SAT contributes directly to i) mainstreaming of HIV and AIDS; ii) partnership and capacity building; iii) research; and iv) advocacy. Through its work, SAT:

- Provides capacity building for institutional development and programme delivery to 100 CBOs/NGOs located in the five countries. Most of these partners have access to NAC funding.
- Provides capacity building for institutional development and programme delivery for 30 advocacy and networking organizations, linking issues of gender, human and children’s rights, and reproductive health and sexual rights.
- Has developed strategic partnerships with like-minded organizations including NOVOC, MPHA, VSO-RAISA, AED, Terre des hommes Germany, UNICEF (see footnote for full titles of organizations).
- Fosters increased partnership and networking among HIV and AIDS stakeholders through School Without Walls activities, that offer opportunities for exchange of experiences and learning among the partner organizations.

* Acronyms: HTC = HIV Testing and Counselling; NOVOC = Capacity building for network of organizations of orphan and vulnerable children (Malawi-based NGO); MPHA = Malawin Public Health Association; VSO-RAISA = Volunteers Service Overseas - Regional AIDS Initiative for Southern Africa; AED = Academy for Educational Development
SAT AND “THREE ONES”

Promoting community protection of Children Affected by AIDS (CABA)

SAT – a SAT partner based in Chibuto, Gaza province, Mozambique – is a community-based organization mainstreaming HIV and AIDS into the agriculture sector. This organization is assisting orphans and people living with HIV and AIDS. Chibuto is one of the communities most affected by HIV and AIDS, due to migratory labour, premature marriages and gender inequities.

ADS had successfully established a Day Centre for CABA aged 5 to 12 years old. The centre was built with support from Save the Children and is located 15 km from Chibuto Vila. SAT has worked with ADS since 2004, providing funding for overhead, programming and skills-building costs. The centre receives 120 children per day, all of whom either are HIV-positive or have lost their parents to AIDS. Children are cared for in the centre by a group of 5 women volunteers from the community who offer their love and time.

Children are taught how to sing, dance and socialize. They receive two daily meals obtained through SAT funding and from the ADS farm.

criteria to promote funding absorption by smaller and emerging CBOs. SAT will continue to provide capacity building to CBOs/ NGOs so that they can be actively involved in the “Three Ones”.

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CONCLUSION

SAT has been successful in working within the “Three Ones”. This provides an opportunity to shape and influence global, regional and national HIV and AIDS policies and programmes.

SAT’s work is qualitatively and quantitatively shaping the regional and country level actions towards the effective implementation of the “Three Ones”. There are still some areas for improvement, such as continued advocacy for the relevance of the community competence approach (including advocating for contributions to overhead costs to the CBOs). SAT should strengthen collaboration to avoid duplication and to ensure effective use of all resources, and advocate for flexible funding

RÉSUMÉ

L’approche dite des « Trois principes » prévoit un cadre d’action contre le VIH et le sida, un organisme national de coordination de la lutte contre le sida et un système de suivi et d’évaluation à l’échelon pays. Les organismes régionaux ont tout à faire pour conjuguer ces Trois principes dans chacun des pays avec lesquels ils travaillent tout en respectant leur mandat régional. La Fiducie au profit de la lutte contre le sida en Afrique australe (SAT) est l’un de ces organismes; le SAT mène des programmes au Malawi, au Mozambique, en Tanzanie, en Zambie et au Zimbabwe à partir de son siège situé en Afrique du Sud.

Jusqu’à maintenant, le SAT a réussi à fonctionner conformément aux Trois principes dans chaque pays. Premièrement, tous les pays où il est présent soutiennent volontairement les organismes qui contribuent à l’atteinte des résultats visés dans les plans anti-sida nationaux. Deuxièmement, ces pays travaillent en étroite collaboration avec les systèmes de coordination nationaux et au sein de ces systèmes. Leurs Conseils nationaux du sida (CNS) sont membres des comités consultatifs des programmes du SAT dans tous les pays où le SAT est présent, et chaque CNS participe régulièrement à l’assemblée annuelle des partenaires du SAT dans son pays. La collaboration avec un seul système de suivi-évaluation s’est avérée difficile du fait que les systèmes nationaux ne sont pas encore fonctionnels, et que le gouvernement national, les partenaires, le SAT et les donateurs ont des besoins de suivi-évaluation différents. Les programmes nationaux du SAT, cependant, font consciemment l’effort d’harmoniser les besoins en matière de suivi-évaluation. On encourage les partenaires à diffuser leurs données aux organismes gouvernementaux comme le CNS, le ministère de la Santé et les autres ministères. Les partenaires sont habilités à définir les données dont ils ont besoin en plus de celles du SAT, des donateurs et des systèmes de suivi-évaluation nationaux.

Mots clés : VIH; suivi et évaluation
Overcoming the bottlenecks in national resource flows in Kenya, Swaziland and Uganda. 2007.


