Republic of Namibia

MINISTRY OF HEALTH
AND SOCIAL SERVICES

HIV and AIDS
Mainstreaming Guideline
for Sector Responses
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<td>CACOC</td>
<td>Constituency AIDS Coordination Committee</td>
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<td>CSO</td>
<td>Civil Society Organisation</td>
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<td>DSP</td>
<td>Directorate of Special Programmes</td>
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<td>ILO</td>
<td>International Labour Organisation</td>
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<td>MOHSS</td>
<td>Ministry of Health and Social Services</td>
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<td>MWT</td>
<td>Ministry of Works and Transport</td>
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<td>MTP III</td>
<td>Third Medium Plan on HIV and AIDS (2004-2009)</td>
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<td>MTR</td>
<td>Mid-term Review 2013</td>
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<td>NAEC</td>
<td>National AIDS Executive Committee</td>
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<td>NaNaSo</td>
<td>Namibian Network of AIDS Service Organisations</td>
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<td>NSF</td>
<td>National Strategic Framework for HIV and AIDS Response in Namibia</td>
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<td>NDP 4</td>
<td>National Development Plan 4</td>
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<td>NPC</td>
<td>National Planning Commission</td>
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<td>RACOC</td>
<td>Regional AIDS Coordinating Committee</td>
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<td>SADC</td>
<td>Southern Africa Development Community</td>
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<td>SSC</td>
<td>Sector Steering Committee</td>
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<td>ToR</td>
<td>Terms of References</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNDP</td>
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<td>WHO</td>
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1. Introduction

The fight against HIV and AIDS is one of the eight Millennium Goals that were passed by the United Nations in 2000. Since then, countries around the globe have adopted multi-sectoral responses to HIV and AIDS involving political leaders, governmental and non-governmental institutions, private sectors and civil societies. Over the past 15 years, the international community has invested more than 187 billion US$ in the fight against the epidemic. Combined efforts in HIV financing, the strengthening of health systems, comprehensive HIV and AIDS service delivery and the provision of HIV and AIDS treatment at affordable prices could finally halt and reverse the epidemic. The UN reports a reduction of new HIV infections in 2015 by 30%, mortality rate has dropped by 40% and 15 million people receive treatment. Life expectancy increased from 36 years in 2000 to 55 years in 2015. With the Millennium Goals achieved in 2015, AIDS is now on the post-2015 agenda. The new goal is to stop AIDS by 2030. This, however, will require a strong and continued commitment from the international community.

According to the World Health Organisation (WHO), sub-Saharan Africa carries the biggest burden of the disease. Nearly 25 million people are infected with HIV, 90% of all HIV positive children worldwide live in this region. Namibia, like other members states of the Southern Africa Development Community (SADC), has put comprehensive, multi-sectoral strategies in place to tackle the epidemic. Though the country has experienced steady declines of HIV prevalence (from 18.2 % in 2010 to 16.9% in 2014), they are still high in certain areas, e.g., in Katima Mulilo, where it stands at 36.6% (2014 National HIV Sentinel Survey Report).
2. Scope and Purpose of the Guidelines

The involvement of non-health sectors in national HIV and AIDS strategies is appropriate to address the causes, drivers and effects of HIV. However, HIV and AIDS sector responses with the full participation of stakeholders have remained a challenge in Namibia.

Most sectors are largely unclear about the context of sector responses and their institutional and coordination structures.

A mid-term review of the National Strategic Framework (NSF) in 2014 has identified gaps:

- Only few sectors have developed HIV and AIDS policies, work plans and budgets.
- Most ministries have not identified dedicated staff at senior level that provide leadership to the sector response.
- Few sectors have active Sector Steering Committees (SSC).
- Regional coordination and participation of lead ministries and government agencies in Regional AIDS Coordinating Committees (RACOC) and Constituency AIDS Coordination Committees (CACOC) activities has been poor. Most of them are not aware about their role to serve on these committees.
- Regional operational plans are often not finalised and many RACOCs don’t utilise the resources they have been allocated.
- At constituency level, few meetings are held by CACOCs and they are not functional in most parts of the country.

In response to this, the Directorate of Special Programmes (DSP) of the Ministry of Health and Social Services (MOHSS) has highlighted the need to support sectors in developing their HIV and AIDS programmes. As a result, these guidelines, referred to as the “Guidelines”, have been produced. They are meant to assist sectors to initiate the process of sector response development, or check existing ones against the proposed approaches. The public works and transport sector, as well as the agriculture, water and forestry sector, are the two sectors that implement sector responses more systematically. Their experiences and practical examples have informed these Guidelines.
The Guidelines are kept broad allowing sectors to adapt them to their specific context, situations and needs. Potential users are:

- Staff and resource persons of DSP using the Guidelines as a resource for teaching purposes
- Planning and financial officials in all Lead Ministries
- Staff of RACOCs and CACOCs
- Ministry Focal Persons and staff of HIV and AIDS/Wellness Units
- Sector Steering Committee Members
- Private Sector and Civil Society
3. Benefits of Sector Responses

Initially, non-health sectors may not see the need to commit efforts, time and resources to address HIV in their sectors. Therefore, to start the sector response requires substantial lobbying and advocacy.

The following arguments can be used to convince senior officials in the lead ministry and stakeholder managers about the benefits of the sector response:

- Each sector can support the national multi-sectoral response in its own way, reaching populations which other sectors don’t.
- Mainstreaming HIV and AIDS into regular functions, strategic plans and annual budget cycles of sectors allow for a systematic, long-term planning of HIV and AIDS responses.
- Individual and collaborative initiatives in the sector can be consolidated into a systematic and coordinated approach. This also helps to avoid duplications and fragmentation of sector activities.
- Stakeholders with limited resources benefit from collaboration and sharing experiences and know-how. Even more so, if this is supported by regular capacity building as an integral part of the sector response.
- Sector response specific indicators allow for measuring progress, outcomes and impact at a broader scale.
- Sectors can use their unified position to negotiate with external funders to contribute to a single budget pool, rather than funding individual projects.

It is not necessary that every sector is involved in every aspect of the national multi-sectoral HIV response. Sectors can select their specific areas according to their comparative advantage. For example: the Ministry of Education implements HIV and AIDS programmes for teachers and students. The Ministry of Works and Transport reaches mobile populations, the Ministry of Gender and Child Welfare ensures that plans and programmes consider gender issues. Private companies can implement workplace programmes and the NGO sector can deliver prevention and care programmes.
4. National and International Commitments

The mandate for sector responses derives from a number of international and regional declarations, as well as from key national and sectoral development instruments and policies. The following chapter outlines main documents that make reference to the engagement of sectors in the fight against HIV and AIDS.

- **Maseru Declaration on HIV and AIDS 2003**

  Namibia is a signatory to the Maseru Declaration on HIV and AIDS, which prioritises the need to mainstream HIV and AIDS into the regional integration process and into its priority intervention areas, particularly trade liberalisation, infrastructure development, food security and social and human development.

- **SADC HIV and AIDS Strategic Framework 2010 – 2015**

  The HIV and AIDS Strategic Framework 2010 – 2015 of the Southern African Development Community (SADC) advocates for a multi-sectoral response that is driven by individual sector coordinating units in the different Members States. Sectors are mandated to integrate HIV into their sector functions and service delivery. They need to identify ways in which they can best contribute to HIV prevention, care and impact mitigation within their core activities, competencies and spheres of influence. In collaboration with the United National Development Fund (UNDP) East and Southern Africa, the SADC Secretariat developed HIV mainstreaming indicators for five sectors, namely Justice, Finance, Local Government, Infrastructure and Works, Planning and Economic Development. The indicators should be used at regional and national level, respectively.

- **National Development Plan 4 (NDP 4)**

  The NDP 4 acknowledges that a “healthy population is one of the core foundations for economic growth and development (NDP 4, p. 53)”. It states that “by 2017, all Namibians shall have access to a quality health system, both in terms of prevention, cure and rehabilitation, characterised by an improvement on healthy adjusted life expectancy (HALE) from baseline of 57 (2011) to 59 in 2017 (according to the World Health Organisation)”. For the achievement of this outcome, NDP4 calls for a multi-sectoral approach that does not only include the health sector, but also seeks improvements in the areas of poverty, education, sanitation and food security. It recognises that HIV remains a fundamental challenge and that the Government should focus on key epidemic drivers and the most at-risk population groups. NDP 4 emphasises the need for strong coordination across all stakeholders and for accountability mechanisms to reach the nation’s goals under the oversight of the National Planning Commission (NPC).
• The Revised National Strategic Framework for the HIV and AIDS Response in Namibia 2013 – 2017

The ‘National Strategic Framework for the multi-sectoral HIV and AIDS Response 2013 – 2017’ is aligned with the timeframe of the NDP 4. In respect of sectoral obligations, the NSF calls for the establishment of Sector Steering Committees (SSC). They are tasked with the promotion of sector coordination and implementation. Public sector institutions should integrate their HIV and AIDS interventions with the NDP 4 Annual Sectoral Executive Plans (ASEP) coordinated by the National Planning Commission as part of operationalising the NDP 4. Private institutions are expected to develop their individual operational plans that are aligned to the national priorities articulated in the NSF.  

The National Strategic Framework for HIV and AIDS Response in Namibia 2010/11 – 2015/17 identified 14 sectors which were closely aligned with the NDP 3 and the SADC sector classification. (Link: The different sector compositions can be found in section 5, Annexure 1 of the ‘Revised National Strategic Framework for the HIV and AIDS Response in Namibia 2013 – 2017’). Their multi-sectoral membership is drawn from government agencies, private sector companies, civil society organisations and development partners. The Mid-Term Review of 2013 recommended an alignment with the 17 sectors as identified by the current NDP 4. This may lead to redefining mandates, roles and responsibilities of sectors. In the context of the NSF, sectors will go beyond the public sector domain and include private sector and CSOs.  

• National Policy on HIV/AIDS, 2007

The National Policy on HIV/AIDS 2007 reaffirms the involvement of all stakeholders in the multi-sectoral response. It states that Government at national, regional and local level and partners shall ensure mainstreaming of HIV and AIDS into all policies and programmes.

*Figure 1. Selected key documents that link sector responses to the regional and national context*
5. Mandates of Sectors

- **Roles and Responsibilities**

The revised National Strategic Framework for the HIV and AIDS Response in Namibia 2013 – 2017 proposed the following Terms of Reference (ToRs) for sectors. They serve as guidance for those involved in the planning of a sector response:

- Appoint a sector coordinator and provide logistical support, including operational space and basic equipment to support sector coordination.
- In collaboration with the other sector members, mobilise resources for the sector coordination, sector level activities and networking.
- Convene sector coordination meetings and maintain records of such meetings. Facilitate joint planning and reviews of sectoral action plans for HIV and AIDS.
- Promote and support inter-sectoral collaboration and synergies.
- Identify and facilitate opportunities for sectoral capacity development.
- Coordinate sector research initiatives (including sector specific surveys) around HIV and AIDS, as proposed in the NSF, or suggested by the membership from time to time.
- Maintain a database of the sector membership, their activities and sector specific HIV and AIDS data.
- Coordinate development of sectoral reports for submission to the National AIDS Executive Committee (NAEC) and Cabinet.

- **Frequency of Meetings**

Sectors should hold quarterly meetings to review progress in their respective sectors. They will be convened by the Sector Secretariat. Among other agenda items suggested by the membership, the meetings will review quarterly sector reports for submission to NAEC. Members can hold meetings more frequently as the need arises.
• **Inter-sectoral Planning**

Sector coordinators are expected to meet twice a year to review their respective programmes and identify best practices and areas of complementarity. The National Framework provides examples of what sectors could jointly organise, e.g. community mobilisation advocacy, campaigns on HIV counselling and testing, demand creation for circumcision, blood donation and behaviour change.

• **Reporting**

Lead agencies will report to NAEC and submit quarterly reports to the Directorate of Special Services (DSP). They will also provide feedback to their constituency.
6. Management Structures

The sector response management consists of the Sector Steering Committee (SSC) and its Sector Secretariat. The lead ministry provides the Secretariat with personnel, offices and logistics. The SSC represents the stakeholder community and gives guidance and direction to the sector response. The following steps outline how to establish the administrative and management structure for the sector response.

3 Steps to establish the institutional structure for the sector response:

STEP 1: Appoint the Sector Secretariat in the Lead Ministry

STEP 2: Analyse your stakeholder landscape

STEP 3: Elect your Sector Steering Committee (SSC)

STEP 1: Establish the Sector Secretariat in the Lead Ministry

When establishing the Sector Secretariat, the following should be considered:

- Managing a multi-stakeholder HIV and AIDS response requires substantial administrative, planning and coordination work, as well as communication with all parties involved (see Tool: ‘Communication for the Sector Response’, Annexure 1). The need for resources in terms of personnel, time and finances must be carefully negotiated with the respective lead ministry.

- Ideally, staff serving as the Sector Secretariat work exclusively for the sector response and cooperate closely with ministerial HIV and AIDS/Wellness divisions in charge of implementing HIV and AIDS workplace programmes for the ministry’s staff. In cases where the Sector Secretariat becomes simply an additional function of the ministerial HIV and AIDS/Wellness divisions, understaffing can become a critical issue.

The Ministry of Works and Transport (MWT) has a sub-division Employee Wellness tasked with the implementation of HIV and AIDS/Wellness programmes for its employees. The sub-division also serves partly as the Sector Secretariat to the public works and transport sector’s HIV and AIDS/Wellness response. It operationalises decisions taken by the Sector Steering Committee (SSC). The sector has closely aligned the Terms of References (ToR) for the Sector Secretariat and the Sector Steering Committee (SSC) with those provided by the NSF.
**STEP 2: Analyse the Stakeholder Landscape**

Once the Sector Secretariat is established, it can initiate the selection of SSC members who represent the sector stakeholders (Link: a list of stakeholders per sectors can be found in the NSF). Sector stakeholders can be policy makers, related institutions (e.g. regulatory), advocacy groups, professional associations, unions, interest groups, civil society, private sector, donors, affected populations such as women, men and young people living with HIV, key populations and local communities. They are directly affected or have a vested interest in addressing HIV and AIDS in the sector.

In many cases, ministries don’t have a single source available that determines the entire stakeholder landscape. This information may be available either from various departments of the ministry, from joint annual plans, or policies. Ideally, the Sector Secretariat commissions a stakeholder analysis that categorises them into various sub-sectors and outlines their relationships to each other. This should include the description of roles and functions of the stakeholders in the sector and the geographic locations of their regional/local offices. A stakeholder analysis delivers mainly the following information:

- Identification of key stakeholders and their interests, roles and functions in the HIV and AIDS sector response.
- Assessment of the influence/importance of each stakeholder in the sector and the level of impact of HIV may have upon each stakeholder.
- Identification of ways on how to best engage stakeholders.
- Exploration of the level of HIV and AIDS or other health activities in the sector

The stakeholder analysis can be visualised through mapping the stakeholder landscape.

**STEP 3: Establish the Sector Steering Committee (SSC)**

The stakeholder analysis gives an overview of the key stakeholders in the sector. On this basis, the SSC members who will represent the stakeholders can now be elected. The SSC gives overall policy advice and strategic direction to the sector response. It oversees and facilitates sector coordination. It is important to have a well-balanced representation of stakeholders in the SSC with a strong mandate. The establishment of the SSC should be discussed in an initial stakeholder workshop with a strong representation of the entire stakeholder community.
The following should be considered for the workshop:

- A high profile representation of the lead ministry should be secured to demonstrate commitment to the sector response.

- A background paper should be prepared that outlines key information about the sector, its vulnerability to HIV, its comparative advantage as well as the mandate, rationale and concept of the sector response and other relevant details. The background paper prepares stakeholders for the workshop, particularly those who have not yet been actively involved in HIV and AIDS initiatives.

- Prior to the workshop, an appraisal should be conducted to assess stakeholder’s expectations from the sector response. Results should be presented at the workshop.

- During the workshop, roles and responsibilities of the SSC and the Sector Secretariat should be clarified (See: revised National Strategic Framework for the HIV and AIDS Response in Namibia 2013 – 2017, ToRs for sectors).

- With this in place, SSC members can now be elected by the workshop participants. SSC members should represent the various sub-sectors of the ministry, unions, associations, interest groups, the private sector and civil society. The SSC should be chaired by a high ranking official from the lead ministry. This helps to make decisions faster and speeds up processes that require formal approvals or correspondence at senior level.

The SCC of the public works and transport sector is composed of representatives of each sub-sector namely rail, road, maritime and air. Additionally, the respective unions for public works as well as for transport ensure that employee’s interests are considered in the sector response. The civil society is represented by the Namibian Network of AIDS Service Organisations (NaNaSo), the business sector engaged in HIV and AIDS by the Healthworks Business Coalition. Currently, the SCC has 12 members and is chaired by one of the Deputy Permanent Secretaries of the MWT.
7. Guiding Principles

- **Leadership and Governance**

The ministry should promote an enabling environment for leadership to emerge at all levels of the sector stakeholder community. Effective leadership is critical for the implementation of sector response policy development, strategic planning, resource mobilisation, programme implementation, coordination and monitoring and evaluation.

- **Cooperation and Sharing**

The sector response requires substantial sectoral and inter-sectoral networking and co-operation with partners. Effective coordination of the different networks includes consultations, good communication and sharing of information (see Tool: ‘Communication for the Sector Response’, Annexure 1).

- **Capacity Building**

The SSC and the Sector Secretariat, as well as the broader stakeholder community, have to be empowered and enabled to fully contribute to the sector response, support its effective coordination and efficiently perform the required tasks. Capacity building should therefore be an integral part of the sector response, e.g. in the areas of how to manage multi-stakeholder approach, communication, resource mobilisation, monitoring and evaluation (see Tools, Annexure 1, 3 and 4).
8. Priority Areas of Sector Responses

The revised Coordinating Framework mandates sectors to implement activities in two key areas:

- Spearheading the scaling up of functional HIV and AIDS workplace programmes among stakeholders.
- Mainstreaming of HIV in organisational and sector programmes.

This means in practical terms:

- Sector stakeholders, including the Ministries, should have workplace programmes in place (internal mainstreaming).
- Ministries and individual stakeholders should mainstream HIV and AIDS into their core functions, policies, practices, processes and strategic plans (external mainstreaming).

The following chapter describes in brief key aspects of mainstreaming and splits it for better understanding into internal and external.

8.1 Internal Mainstreaming (Workplace Programmes)

HIV and AIDS workplace programmes address the vulnerability of employees to contract HIV. The programmes aim to mitigate the effects of morbidity and mortality on the performance of an organisation or company. Increasing the number of stakeholders who implement workplace programmes will positively impact on the sector’s overall health and its ability to deliver services to the public. (Note: Many workplaces have incorporated HIV and AIDS into the broader context of worksite health, which addresses the broader health risks of employees through Employee Wellness Programmes (EWP)).

The following chapter outlines major steps to support stakeholders in developing a workplace programme.
• **Staffing**
Workplaces need to employ staff dedicated and skilled staff tasked with the coordination of the workplace programme.

• **Organisational Analysis**
The programme coordinator should conduct a situational analysis that determines risk factors and behaviours likely to expose employees to HIV infection. The assessment should provide information on opportunities to respond to HIV and AIDS, as well as on the necessity for and availability of resources.

• **Workplace Policy**
Stakeholders should be encouraged to develop a workplace policy or make reference to the national or, if it exists, the sector policy. Staff health policies promote HIV and health education, prevention and the management of ill health, in line with national legal frameworks and good practices (See: ILO code of practice on HIV/AIDS and the world of work). The policy has to be aligned with other workplace policies, e.g. health and insurance policies.

The consultative process of policy development should be guided by a committee that consists of representatives of employers, staff and unions. The coordinator of the workplace programme should assign an expert for the development of the policy and review the final document.

• **Workplace Programme**
The workplace programme should cover the following key elements:

• Overall goal and objectives of the workplace programme in the areas of HIV and AIDS prevention, access to treatment, care and support; stakeholders who implement EWPs should outline the key areas of interventions and the respective activities.

• Costed annual operational plans.

• A monitoring and evaluation system with indicators to measure progress of the programme.

• Partners for implementation, e.g. DSP, OPM, NGOs, service providers.

• Available resources within the workplace; in case of limited resources, the sector response can support the establishment of cooperation networks between financially strong and weak stakeholders and explore the potential for resource sharing.

• Resource mobilisation plans outlining funding opportunities.
8.2 External Mainstreaming

The NSF tasks sectors and their stakeholders to mainstream HIV and AIDS into sectoral and organisational development plans. Mainstreaming focuses on the sectors or organisations external projects that serve its various target groups. Any project, regardless of its nature, addresses target groups who are potentially at risk, or whose members are already infected or affected by HIV and AIDS.

Key questions for external mainstreaming are:

- How do HIV and AIDS affect the sector or the organisation?
- Which negative implications do sector or organisational interventions have with regards to HIV and AIDS, and how can they be avoided?
- Where is the comparative advantage of the sector or organisation to reduce risks and vulnerabilities to HIV? How can the impact of the epidemic be mitigated?
- In which ways can the sector or organisation address the structural drivers such as poverty, gender and income inequalities?
9. Planning of Sector Response

With the SSC and the Secretariat being established, the planning of the sector response can start. The planning should be guided by evidence-based decision making, accountability for programme decisions, funding allocations and a broad participatory process.

The following 3 steps guide the planning of the sector response:

**STEP 1: Conduct a situational analysis**

For evidence and results based sector response planning, qualitative and quantitative data and information about the sector have to be generated. A situational analysis can be conducted that gathers information about HIV and AIDS in the sector. This includes epidemiological and behavioural data, e.g. prevalence in vulnerable groups and key populations, risky behaviours that are driving the epidemic etc. It should also cover health, socio-economic, cultural and other factors that contribute to the vulnerability of the sector to HIV, e.g. accessibility of health services, gender issues, migration as well as impacts of HIV on communities.

The lead ministry can also conduct an impact assessment that will give information of internal and external impacts of HIV and AIDS. Internal impact means the extent and consequences of HIV and AIDS within the ministry, e.g. for every teacher infected, the education of a certain number of students will be affected. External impact relates to the impact of the sector’s operations, e.g. infrastructure projects may increase worker’s mobility, which in turn may increases the spread of HIV and AIDS.

Should comprehensive data not yet be available, interventions can initially be based on evidence obtained from existing research, e.g. from MOHSS, United Nations (UN).
The interventions should be continuously reviewed and adjusted as more sector specific research data becomes available.

**STEP 2: Response Assessment**

The response assessment includes an inventory of the main HIV and AIDS programmes and initiatives in the sector. It provides the following:

- Information on the quantity and quality of services provided within the sector and the identification of gaps; a baseline would provide information about the number of sector employees who have access to HIV and AIDS services at a specific time; a desirable target should be established against which progress in this area can be measured.
- Information about human resource policies and management practices.
- The sector’s capacity to deliver the necessary HIV and AIDS services in terms of infrastructure, logistics, skills and systems available.
- Information about entry points at sector and organisational level for mainstreaming HIV and AIDS in policies, operational plans and contracts.
- Best practices and their suitability for replication by other stakeholders.
- Available technical expertise and the role of service providers (Note: NPC has prepared a policy regarding the engagement of NGOs as partners and service providers through contracts with line ministries).
- The availability of public and private resources in the sector.
- Donor support to specific programmes.

The situational and the response analysis can either be done in-house if resources are available, or the Secretariat could commission external service providers to do it.
STEP 3: Developing the Sector Strategy and Operational Plan

- **Sector Strategy**

The sector strategy provides the overall framework for action and gives guidance and direction for implementation. The formulation of the sector strategy is informed by the results of the situational analysis and the response assessment, e.g. which existing sector initiatives are working and can be expanded, which are not working or need a new approach, and which are not relevant and should be dropped.

The sector strategy is developed in a consultative process by the SSC and its Secretariat and shared with the broader stakeholder community. It is important to obtain an agreement among stakeholders on the strategic approach the sector wants to take.

The sector strategy broadly outlines issues such as:

- Key objectives and interventions to increase mainstreaming within the sector (see chapter 7, Priority areas of sector responses).
- Identification of the sector’s key areas of interventions based on its ability to best contribute to national targets; e.g. in the area of HIV prevention (Note: sectors should seek guidance from DSP in the selection of their respective key areas of intervention).

Key stakeholders and their roles in the strategic plan as well as implementing partners and funding sources (Note: The DSP can provide guidance as to the identification of priority areas and the strategic orientation of the sector response).

The public works and transport sector has set its priority areas on HIV prevention. In practical terms, the sector applies a combination of high impact prevention interventions (as outlined in the UNAIDS Investment Framework). Other sectors may identify different key areas, depending on sector expertise and comparative advantage.

The agricultural, water and forestry sector has developed a sector strategy on HIV and AIDS which was officially launched in 2015.
• **Operational Plan**

The sector strategy informs the development of the operational plan which is prepared by the Sector Secretariat under the guidance of the SSC. The plan outlines activities based on available resources, e.g. time, funds and personnel. It will be shared with the broader stakeholder communities for agreement.

In line with the ToRs for sectors (see section 5, Mandate of the sector response), the operational plan should include:

- A timetable for the quarterly meetings, submission of reports to NAEC and reviews of sectoral plans and stakeholder activities.
- Capacity building measures to enable the SSC and staff of the Secretariat to plan, coordinate and oversee the sector response, e.g. quarterly SSC meetings include a capacity building session on relevant topics.
- Advocacy activities that promote the scaling-up of mainstreaming in the sector and platforms for knowledge sharing and stakeholder empowerment to implement mainstreaming activities.
- A matrix with joint sector activities.
- The development of a sector response logo and slogan to create a visual identity for the sector response, as well as the development of informative and promotional materials.
- Resource mobilisation activities to ensure funding and resource sharing, as well as making use of service providers that can contribute through own funding (See Tool: Resource Mobilisation for the Sector Response, Annexure 3).

*The NSF makes only reference to HIV and AIDS. If sectors want to incorporate HIV and AIDS programmes into the broader context of Wellness, they can embark upon a healthy lifestyle through campaigns or linkages to health days of MOHSS or OPM.*
10. Coordination and Implementation

The implementation of the operational plan requires substantial coordination at different levels: the overall coordination of the sector response is conducted at national level, the actual implementation happens at regional level. This requires a clear allocation of roles and responsibilities for the SSC and the Secretariat at national level, as well as for the regional ministerial and stakeholder offices involved in the regional coordination and implementation. The illustration below shows the cooperation network within the national strategy:

*Institutional Arrangements for the Implementation of the NSF National Coordination Framework:*

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<th>REVISED COORDINATION FRAMEWORK</th>
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<td>National AIDS Council (NAC)</td>
<td>The Cabinet</td>
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<td>National AIDS Executive Committee (NAEC)</td>
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</tr>
<tr>
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<td>Permanent Task Force for OVC</td>
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</tbody>
</table>
• **Role of SSC and Sector Secretariat (National Level)**

At national level, the SSS and the Sector Secretariat are tasked with coordination, networking, joint planning and resource mobilisation, sector capacity development, the organisation of inter-sectoral collaboration as well as reporting to the National AIDS Executive Committee (NAEC). The SSC and the Secretariat support the regions in organising regional partnerships and collaboration and in the creation of regional networks for the implementation of joint actions. Furthermore, they establish functional feedback, reporting and decentralised Monitoring and Evaluation (M&E) systems.

• **Role of Lead Ministry and Stakeholders in Regional Implementation**

Shifting implementation responsibilities to the regional offices is an intensive process and needs substantial capacity building. First and foremost, the lead ministry has to step-up in employing additional HIV and AIDS coordinators in all regions with a decentralised budget for sector activities. If ministries are not able to appoint regional coordinators, peer educators can be mandated with the tasks. They have to be specially trained to understand their roles in the regional implementation process. At the same time, stakeholders need to avail staff, e.g. peer educators or, if not available, other trained focal persons, to support the regional offices with programme implementation.

• **Regional Coordinators and Office Managers**

The regional offices of the lead ministries, together with their sector stakeholders, have a critical function in the implementation of the sector response activities. They liaise with regional networks and committees such as RACOCs, CACOCs, local authorities, NGOs, the private sector and development partners, civil society organisations and service providers. RACOCs are important partners for sectors as they are tasked with the coordination of activities and have budgets for joint regional activities. Regional sector coordinators should be represented at the RACOCS. For smart resource sharing, they should cooperate with DSP and other governmental and non-governmental partners (See Tool: Resource Mobilisation for the Sector Response, Annexure 3).

*Figure 3. Coordination of sector response at national and regional level:*

![Diagram showing national and regional level coordination](image-url)
11. Monitoring, Evaluation and Reporting

A monitoring and evaluation (M&E) system should be developed by the SSC and the Sector Secretariat that enables the systematic collection, collation, processing and analysis of data as a basis for adjustments and improvements to the strategic and policy framework. Often the weakest part in programming, M&E is critical to understand how the sector response performs. Within the sector, M&E should monitor the level of progress in mainstreaming.

The SSC has to report to the National AIDS Executive Committee (NAEC). DSP is in the process of finalising strategic indicators that measure sector contributions to the national targets (See Tool: Monitoring the Sector Response, Annexure 4).
12. Conclusion

Sector responses are important instruments to achieve national targets and objectives in the fight against HIV and AIDS. They are embedded in regional and international declarations and linked to overarching commitments. The nature of the multi-stakeholder approach calls for collaborative partnerships inside and outside the sector and the ability to jointly plan, coordinate and implement sector strategies.

To date, only few sectors in Namibia implement systematic HIV and AIDS responses. As collaborative initiatives, they need the commitment of stakeholders, the allocation of financial and human resources, the establishment of functioning administrative and management structures and skilled personnel able to plan and coordinate complex multi-stakeholder programmes. These guidelines, supported by the different tools, outline key elements and steps in the development of sector responses.

Documents for Further References

- Guide to HIV and AIDS Mainstreaming 2008
- ILO Code of practice on HIV and AIDS and the world of work
- Maseru Declaration on HIV and AIDS of 2003
- Namibia Fourth National Development Plan 4, 2010/13 to 2016/17
- Namibia Vision 2030
- National Policy on HIV and AIDS, 2007 (currently revised)
- National Strategic Framework for HIV and AIDS Response in Namibia, 2010/11 – 2015/16
- SADC Code of Conduct on HIV and AIDS and Employment
- SADC HIV and AIDS Strategic Framework 2010 – 2015
- The Investment Case, July 2014
- WHO and UNAIDS 2007 AIDS Epidemic Update
**Annexure 1: Communication for the Sector Response**

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Glossary

DSP  Directorate of Special Programmes
HCT  HIV Counselling and Testing
MOHSS  Ministry of Health and Social Services
NAEC  National AIDS Executive Committee
NCF  National Coordination Framework for the Multi-Sectoral HIV and AIDS Response 2010/11 -2015/16
OPM  Office of the Prime Minister
RACOC  Regional AIDS Coordinating Committee
SSC  Sector Steering Committee
ToR  Terms of Reference
TWG  Technical Working Groups
1. Introduction

The sector response requires substantial communication between the people involved in administration, planning, coordination and implementation of the multi-stakeholder programme. They have to agree on common goals, objectives, strategies and joint actions, engage with different partners and ensure that the services of the sector response are delivered timely to the target groups. This requires an effective communication system that organises the flow of information.

2. Purpose of the Tool

This communication tool, herein referred to as the “Tool”, outlines the different communication needs, tasks and methods required for the effective implementation of the sector response. The Tool is kept broad, so that it can be applied to the specific contexts and needs of other sectors. It is an Appendix to the “Guidelines on the Development of HIV and AIDS Sector Responses in Namibia & Supportive Tools”, thus addressing the same target groups.

3. Principles of Communication

- For effective communication, all parties involved need a functioning infrastructure and logistics such as access to internet, email, fax and phone, and a vehicle for field visits that may be necessary from time to time.
- All correspondence must be clear, concise and outline what is expected from the receiver, e.g. reviews of documents, minutes or responses to requests. Timelines for feedback must be communicated clearly.
- Email messages should state the purpose and intent of the correspondence. Follow-ups should be conducted when a response or a certain action is requested from the receiver.
- Communication is not a one-way process. Responding timeously to requests saves the sender time and efforts and supports the smooth and consistent flow of information. There should be no ‘open ends’ in the communication.
4. **Suitable Tools for Communication**

- Most communication today is done via email. This medium is immediate, can reach a larger audience quickly, and provide information in writing.
- Telephone is quick and suitable for follow-ups or issues that need instant clarification, or if receivers don’t have access to the internet.
- Telefax is lesser used, but still relevant for forwarding important documents to people who don’t have access to the internet or where coverage is poor, e.g. in the rural areas.
- Face-to-face conversation is suitable for communication that needs in-depth discussions.

5. **Levels of Communication**

- The administration, management, coordination and implementation requires communication a) within the established sector response structures at national and regional level, as well as b) with partners outside the sector who provide advice, guidance and support to the coordination and implementation of the sector response.
- External communication needs arise for knowledge and information sharing with other sectors (inter-sectoral exchange), and for promotional purposes informing the public and media about the sector response.

6. **Communication in the Sector Response Management, Coordination and Implementation Structure**

The sector response is administered, managed and coordinated at national (lead) and implemented at regional level. The communication process has to be organised within each level (horizontally), as well as between the different levels (vertically).
Parties involved in the communication process:

**At national level:**

Within the sector response structure:

- The Sector Secretariat
- Sector Steering Committee (SSC) members
- Lead ministry management and ministerial HIV and AIDS/wellness committees

Outside the sector:

- Ministry of Health and Social Services (MOHSS)
- Office of the Prime Minister (OPM)
- Regional AIDS Coordinating Committees (RACOC)
- National bodies for reporting, e.g. with the National AIDS Executive Committee (NAEC), see Appendix 4 Tool on Monitoring, Evaluation and Reporting
- Inter-sectoral committees

**At regional level:**

Within the sector response structure:

- Regional office staff of the lead ministry and stakeholders involved in the regional coordination and implementation of the sector response

Outside the sector:

- Regional AIDS Coordinating Committee (RACOCs) and Constituency AIDS Coordinating Committees (CACOCs)
- NGOs, private sector, service providers
Figure 1. Internal communication flow for response administration, management, coordination and implementation:

National level: Planning and coordination

Regional Level: Implementation

6.1. Role of the Sector Secretariat

The Terms of Reference (ToRs) of the National Strategic Framework for the HIV and AIDS Response 2010/11-2015/17 (NSF) provide a key role for the Sector Secretariat (See Sector Guidelines) in administering, planning, coordinating, monitoring and reporting the sector response. The Secretariat receives guidance from the SSC in fulfilling these tasks. At this level, the Sector Secretariat communicates mainly at national level, but liaises with the regional offices. The following outlines broadly the communication needs and methods flowing from the main tasks of the Sector Secretariat.
<table>
<thead>
<tr>
<th>Tasks</th>
<th>Communication Activity</th>
<th>Communication Method</th>
</tr>
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<tbody>
<tr>
<td><strong>1. Meetings / Networking</strong></td>
<td>SSC members need to be timely informed about the date and venue of the meetings. The Secretariat circulates the agenda and minutes ensuring that all points raised by the SSC are considered. For more effectiveness, the Secretariat forwards an annual meeting schedule at the beginning of the response programme cycle.</td>
<td>Usage of email and tight follow-ups for attendance and approvals of agendas and minutes. Approval for the meeting calendar from SSC.</td>
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<td></td>
<td>As part of networking and liaison with the National AIDS Executive Committee (NAEC), the Directorate of Special Programmes (DSP) of MOHSS, the Office of the Prime Minister (OPM) and for inter-sectoral exchange, the Secretariat may have to call and attend meetings from time to time.</td>
<td>Emails and telephonic follow-ups on attendance. In cases where receivers don’t respond in a timely fashion, follow-ups should be made.</td>
</tr>
<tr>
<td>2. Planning</td>
<td>The Sector Secretariat has to facilitate the development of important sector response documents such as policies, strategies and annual operational plans. These are usually discussed during the SSC meetings. The preparation of the documents may involve the use of external service providers and experts. The Secretariat involves identified regional focal persons, (e.g. heads, coordinators or peer educators), to include their input in the planning process and the development of strategies and operational plans. Regional Councils/RACOCs coordinate regional activities and need to be involved in the planning process.</td>
<td>In case document production is outsourced, the Secretariat has to communicate all relevant information to service providers and keep the SSC closely informed about the status. Planned regional activities should be communicated to Regional Councils/RACOCs by the regional ministerial offices. Final documents are circulated among SSC members and the regional focal persons for comments. Emails and follow-ups until the process of planning and document development is finalised.</td>
</tr>
<tr>
<td>3. Coordination</td>
<td>Once the planning process is finalised, activities identified in the annual operational plans are shared with the regional ministerial offices. They are key in the implementation process, in particular since many sectors have ministerial representation in 14 Namibian regions. Regional Councils/RACOCs are an important partner in the coordination process and need to be involved by the regional ministerial offices. The planned sector activities as outlined in the operational plans have to be communicated to the ministerial regional heads and their focal persons. This includes the nature of the activities, the type of input and resources required from the regional offices. A better method would be an annual workshop with all 14 regional heads and their sector response focal persons to introduce the annual operational plan and clarify expectations, roles and responsibilities at central and regional level at this forum. The communication with the regions can be done via emails, but would need telephonic follow-ups for more in-depth communication. Where regional offices have no access to the internet or computers, the documents can be faxed. In certain cases, field visits might be necessary to clarify the roles of the regions in the implementation process. The workshop with regional heads and focal persons has to be communicated internally to the lead ministry to obtain approval and budgets. This requires timely communication to all invited participants, at least 4 weeks prior to the event. This includes the communication of the workshop details including the agenda. Follow-ups on participation have to be conducted close to the event.</td>
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</table>
4. **Knowledge sharing**

Stakeholder benefit from exchange of skills and experience. Sharing of information and knowledge is therefore a key strategy of the sector response. Jointly developed sector documents can be used as reference guides by stakeholders which avoids duplication and ensures that stakeholders share common goals and visions. For example: a joint HIV and AIDS sector policy can be used by stakeholders who don’t have the means to develop individual policies.

The Sector Secretariat should keep a list of all relevant documents such as stakeholder contacts, sector policies, strategies, annual operational plans, workplace programmes, and a calendar with activities of SSC members, monthly reporting forms and official requests. This includes drafts that allow for the reconstruction and evolution of policies and programmes. Internal and external correspondence with Secretariat and SSC members/stakeholders that resulted in decision-making, actions being taken, implementation processes, or which contains important information, e.g. new developments and relevant research, should be kept.

A database with all relevant documents such as stakeholder contacts, sector policies, strategies, annual operational plans, workplace programmes, overview of activities of SSC members, monthly reporting forms and official requests should be developed and maintained by the Sector Secretariat, stored at a central place and be readily available to all SSC members. This is a time consuming task; outsourcing this to an external service provider should therefore be considered by the Secretariat and the SSC (depending on the budget).

A joint sector response website could be established that contains information about partners, structures and staffing as well as background information, documents, articles, videos, an image gallery, contacts and options to subscribe to a newsletter. Links to websites of partner Ministries, development partners, implementing partners and other stakeholders should be created.

Note: Storing important documents is also part of knowledge management and should be a matter of importance.
6.2. **Role of the Sector Steering Committee (SSC)**

The SSC has a dual function: it provides advice and guidance to the Sector Secretariat in planning and coordination and members participate in smaller technical working groups (TWG). At the same time, SSC members represent their respective organisations, associations and companies and need to communicate all relevant aspects of the sector response to their workplaces. The following outlines broadly the tasks, communication activities and methods for the SSC.

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Communication Activity</th>
<th>Communication Method</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Guidance and Approvals</strong></td>
<td>The SSC provides timely information to the Secretariat about important points that need to be put on the agenda. It requests information and documents from the Secretariat needed to provide the necessary guidance.</td>
<td>The SSC needs to be proactive in its correspondence and respond timeously to requests from the Secretariat. The communication happens via email, telephonic correspondence and at quarterly meetings.</td>
</tr>
<tr>
<td>The SSC attends quarterly meetings organised by the Sector Secretariat. These are the main platforms for the SSC to provide advice to the Secretariat on its respective tasks and to decide on joint actions.</td>
<td>SSC members participate in consultative processes organised by the Secretariat for the production and approval of sector documents.</td>
<td>The SSC should also call in meetings with the Secretariat as need arises and important issues have to be discussed.</td>
</tr>
<tr>
<td><strong>2. Planning and Coordination</strong></td>
<td>The SSC will agree jointly with the Secretariat on the need to establish a TWG as well as agree on outcomes and timeframes for their work. The TWGs can be permanent or dissolve once the task is completed.</td>
<td>The TWGs select a leader and a Secretariat and communicate internally via emails to agree on meetings, share information, documents and outcomes of the tasks. Minutes are taken by the TWG Secretariat and circulated to the all SSC members and the SSC Secretariat. A reporting system is organised between the TWG team leader and the SSC/SSC Secretariat to share documents and other important information.</td>
</tr>
<tr>
<td>The planning and coordination of the sector response may at times require the formation of Technical Working Groups (TWG). For example, if joint sector activities are planned for World AIDS Day. The TWGs consist of representatives of the SSC and other experts if need be. It should consist of members who bring the best expertise, network and resources to the task.</td>
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<tr>
<td><strong>3. Stakeholder Information</strong></td>
<td>SSC members should regularly summarise key outcomes of the sector response for presentation to their managers. They should negotiate with management to get a slot for presentations at management meetings.</td>
<td>A presentation of about 10 - 15 minutes should be a recurrent item on senior management meetings.</td>
</tr>
<tr>
<td>The SSC members represent a broad spectrum of the stakeholder landscape. They need to keep their managers informed about decisions taken at sector level and input required from the individual stakeholders.</td>
<td>SSC members are mostly HIV and AIDS/Wellness Coordinators of their respective organisations or companies. They need to ensure that their workforce understands the sector response and the services provided through the programme.</td>
<td>Regular information slots in peer education trainings</td>
</tr>
<tr>
<td>SSC members should inform their peer educators about the progress and services of the sector response. This creates a sense of ownership in the workforce as being part of a larger sector initiative.</td>
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</table>
6.3. Communication Needs for Implementation

The sector response is mandated to scale up HIV and AIDS workplace programmes within the sector and to facilitate mainstreaming of HIV and AIDS into sectoral programmes. This requires substantial advocacy efforts with management of stakeholders as well as resource mobilisation for sector activities. These mandates are outlined in the Terms of References (ToR) of the National Strategic Framework on HIV and AIDS (see Sector Guidelines). The following chapter outlines the various tasks, the parties involved and the need for communication to support the achievement of the respective outcomes.

6.3.1. Advocacy and Lobbying

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<tr>
<th>Tasks</th>
<th>Communication Activity</th>
<th>Communication Method</th>
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</thead>
<tbody>
<tr>
<td>1. Advocacy for the sector Response</td>
<td>Lobbying at this stage involves getting support from stakeholder managers for the sector response and its mandates. They may, however, not see the immediate benefit of the sector response. In particular, if they already invest in individual worksite health programmes. The Secretariat and the SSC members need to spend time in advocating for the sector response with their respective managers. They need to have the arguments ready to convince stakeholder managers of the benefits of the sector response (some can be found in the Sector Guidelines).</td>
<td>The Secretariat and SSC members should schedule presentations with management for advocacy purposes. Key target groups are the top-management in the ministries and the stakeholder workplaces. Well formulated PowerPoint presentation outlining the key elements of the sector response, its services, benefits and resources needed as well as the role of the stakeholders. DSP as a guest speaker could assist in clarifying roles and expectations from the government.</td>
</tr>
<tr>
<td>2. Advocate for HIV and AIDS Mainstreaming</td>
<td>The sector response is tasked to increase the number of workplace programmes in the sector and facilitate mainstreaming HIV and AIDS into sector development plans and project cycles.</td>
<td>This task needs substantial lobby and advocacy work with top management both of the Lead Ministry and the stakeholder management. SSC members and the Secretariat should schedule meetings with management and invite guest speakers that inform about the costs and savings of workplace programmes. For external mainstreaming, specialists should be invited that explain how sectors can address HIV and AIDS in their development plans and project cycles. Meeting agendas should be well prepared, guest speakers timeously invited, their presentations should be collected ahead of the meeting. The desired outcome of the presentations should be discussed with the guest speakers. Best practices of stakeholders who have implemented successful workplace programmes can be presented. Guest speakers could be the DSP, HealthWorks, Walvis Bay Corridor Group. The outcome of the presentations should be communicated to the SSC members and the Secretariat.</td>
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</tbody>
</table>
6.3.2. Regional Networking and Activities

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<tr>
<th>Tasks</th>
<th>Communication Activity</th>
<th>Communication Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Regional Networking</td>
<td>Regional heads and focal persons attend regular meetings with RACOCs, who coordinate regional activities and have budgets available. They inform RACOCs about sector activities and discuss local networking and resource sharing.</td>
<td>Attending meetings in committees and other fora, face-to-face meetings, and email correspondence. Stay in contact even in times where sector activities don’t take place. This keeps the network alive.</td>
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<td></td>
<td>The regional ministerial offices need to develop an information exchange network with the regional stakeholders (see Sector Guidelines ‘Stakeholder Landscape’). They should meet periodically to establish a work culture for joint implementation.</td>
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<td></td>
<td>Unless there are strong stakeholders in the regions, it will be most probably the ministerial regional offices that implement activities jointly with the Regional Councils/RACOCs.</td>
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<td></td>
<td>Staff at the regional offices organise peer education meetings and are the local contact for centrally planned sector activities, e.g. health screenings. They will also implement external mainstreaming activities.</td>
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<td></td>
<td>The regional focal persons communicate the type of activities to the regional heads and agree on timelines.</td>
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<td></td>
<td>The regional focal persons are the ones that reach out to the target groups, e.g. workplace employees, communities and projects that need external mainstreaming. They will cooperate closely with RACOCs who can provide support, the network and resources.</td>
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<td></td>
<td>Regional focal persons submit an activity plan to the SSC Secretariat and their regional heads with time and personnel allocations for approval.</td>
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<tr>
<td></td>
<td>Communication with RACOCs is done through regular meetings, via email and face-to-face, if the need arises.</td>
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<td></td>
<td>Useful tools for communication with target groups of the sector response depend on their accessibility. Communication tools cover workshops, training sessions, email correspondence. Where internet access is not available, field visits should be scheduled, in particular to remote areas.</td>
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6.4. Supportive communication materials

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<tr>
<th>Tasks</th>
<th>Communication Activity</th>
<th>Communication Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Print Materials</td>
<td>The implementers of the sector response activities need to communicate with different target groups in different languages. Supportive materials can help to facilitate this process.</td>
<td>The SSC members and the Secretariat assign the development of a sector logo, slogans and other communication and marketing tools for the development of a joint identity. The logo appears on flyers, brochures and teaching aids. The materials should be produced in vernacular languages.</td>
</tr>
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<td></td>
</tr>
<tr>
<td>2. Electronic materials</td>
<td>Regional offices can make use of local radios for announcements and to convey messages. This should be consulted with the Secretariat and the SSC members, who support regional offices in their radio appearances.</td>
<td>Announcements and interviews at local radio stations by regional heads and focal persons. This should be done in cooperation with the RACOCs.</td>
</tr>
<tr>
<td></td>
<td>Regional offices can make use of local radios for announcements and to convey messages. This should be consulted with the Secretariat and the SSC members, who support regional offices in their radio appearances.</td>
<td>Announcements and interviews at local radio stations by regional heads and focal persons. This should be done in cooperation with the RACOCs.</td>
</tr>
<tr>
<td></td>
<td>Cellphone coverage, the usage of social media, billboards and TV are communication tools for urban and rural areas. The usage of radio in local languages together with community meetings is the most effective method to reach rural areas that have no access to internet and with poor literacy rates. These should be considered for announcements, campaigns and other activities.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cellphone coverage, the usage of social media, billboards and TV are communication tools for urban and rural areas. The usage of radio in local languages together with community meetings is the most effective method to reach rural areas that have no access to internet and with poor literacy rates. These should be considered for announcements, campaigns and other activities.</td>
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</tbody>
</table>
7. External Communication for Promotion

The achievements of the sector response should be communicated to the broader stakeholder community that is not represented in the SSC, as well as to partners, donors and the broader public via the media. Budgets in the sector response for promotional purposes might be small. However, there are a number of opportunities to make the sector response known to a larger community.

**Radio:** Radio is suitable to reach a larger audience. Some radio stations offer formats free of charge that can be used to announce events like sector activities for World AIDS Day, or sector motivational and awareness campaigns.

**Print Materials:** A flyer for promotional purposes should be produced that outlines the key elements of the sector response. It should be distributed at national health days, events such as trade fairs, at workshops and all other opportunities to promote the sector response. Booklets with best practices can illustrate how the joint initiative benefits its stakeholder.

**Newspapers:** Articles should be placed in the newspapers at special events and when new developments arise that are of public interest.

**Open Days:** An exhibition of the sector response activities at the lead ministry or at stakeholder offices are a good opportunity to promote the sector response to other stakeholders in the sector. Images taken at workshops, trainings and other events are for free and can be used as visual elements for the exhibition.

**Websites:** A page on the website should be established with links to sector stakeholders. It outlines key milestones and achievements of the sector response illustrated with visuals and quotes.

**Social Media:** Facebook, twitter and other social networking sites are well suited for rapid dissemination of information and amplification of content. Social media provide the possibility to share information with others and lead informal conversations. They can be used for short updates, longer text pieces, links, images, audio and video files and publications.

**Figure 2. External communication flow for promotion and information:**
Annexure 2: Steering and Coordinating a Joint Sector Activity - Using the Example of the Public Works and Transport Sector

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Glossary:

DSP  Directorate of Special Programmes
HCT  HIV Counselling and Testing
MOHSS Ministry of Health and Social Services
OPM  Office of the Prime Minister
RACOC Regional AIDS Coordinating Committee
SSC  Sector Steering Committee
TWG  Technical Working Group
1. Introduction

The implementation of the sector response requires substantial coordination and steering skills, in particular from the Sector Secretariat, the Sector Steering Committee (SSC) and the regional stakeholder office staff, mainly of the lead ministry, who are concerned with regional coordination and implementation. The sector response implementation requires that from time to time stakeholders will work together as a group to undertake a specific task, share responsibilities, resources and benefits.

2. Purpose of the Tool

“Steering and Coordinating a Joint Sector Activity”, herein referred to as the “Tool”, attempts to support sector stakeholders in understanding the steps involved in coordination and steering of joint activities. Presented in a generalised way, the Tool is based on the experience of the public works and transport sector who jointly implemented a national HIV counselling and testing (HCT) campaign for the World AIDS Day in 2014. The example illustrates how the sector pooled the necessary expertise, managed the planning and implementation processes and secured the required resources and support structures. The example can be adapted to different scenarios where coordination and steering is needed for collaborative action. The Tool is kept broad, so that it can be applied to the specific contexts and needs of other sectors. The Tool is an Appendix to the ‘Guidelines on the Development of HIV and AIDS Sector Responses & Supportive Tools in Namibia’, thus addressing the same target groups.

3. Steps for Successful Coordination and Steering of Joint Sector Activities

Coordination and steering are integral parts of the sector response management and implementation – from the adoption of joint policies and strategies, the development of operational plans, the conduction of stakeholder meetings to the engagement of service providers and agreements with partners. Generally, good coordination always requires:

- The preparedness to work together as a group, accommodate different views and be able to come to joint decisions
- The establishment of clear mandates, roles and accountabilities
- The willingness to share information and responsibilities
- A good communication system
3.1. Establishing the Technical Working Group (TWG)

Step 1: Selecting the activity

The tool illustrates how the public works and transport sector implemented a HCT campaign as a joint stakeholder activity at national level. The SSC selected the activity because it combined a number of benefits:

- It contributed to national efforts in celebrating World AIDS of 2014 as a sector.
- It illustrated the commitment of the sector to the fight against HIV and AIDS.
- It supported the promotion of HIV testing in the public as an instrument for HIV prevention.
- It increased the visibility of the sector in the public awareness.

Step 2: Assigning the Task

The SSC, together with the Sector Secretariat, is tasked with the overall coordination and steering of the sector response at national level. Members convene quarterly to give direction, develop and approve important sector documents, develop operational plans and support the regional coordination and implementation. The implementation of sector activities is organised at regional level through the respective offices of the lead ministry and regional stakeholder staff.

The sector operational plan should foresee a number of annual joint stakeholder activities at national or regional level, e.g. at World AIDS Days. A good method is if the SSC assigns them to smaller technical working groups. TWGs come together for a specific purpose, convene as often as necessary and dissolve once the task is completed. They can decide, plan and act quicker and more focused than the SSC with its broad membership. They also bring skills together needed for the task.

Figure 1. Levels of coordination for joint stakeholder activities:

- The SSC coordinates the overall sector response.
- As per operational plan, the SSC plans joint activities and puts together technical working groups for their implementation.
- The technical working is tasked with the detailed planning and implementation of the activity.
Step 3: Selecting the TWG Members

Members of the TWG should be chosen based on the value that they can add to the specific task. Ideally, the SSC assigns them according to their skills, expertise, experience, networks and resources that are required for the task. The SSC will then decide who within their membership or the broader stakeholder community could serve best on the TWG.

Figure 2. Some criteria for the selection of TWG members:

- Who is the leading stakeholder on the topic and can be a key actor?
- Who is committed, reliable and has experience with the management of a project?
- Who brings specific know-how to the task and can provide technical input?
- Who can contribute resources e.g. personnel, funds, time, materials, networks?

The key question is whether the sector activity is planned as an activity of the stakeholders alone, or whether the contributions of partners, e.g. ministries, donors, NGOs, civil society, private sector or media are needed. For example, if an activity is planned in a region, the respective Regional AIDS Coordinating Committee (RACOC) should be part of the TWG. RACOC’s can provide resources, create links to regional service providers and help with necessary follow-ups. External experts or advisors, e.g. from the Directorate of Special Programmes (DSP) of the MOHSS, the Office of the Prime Minister (OPM) bring additional expertise to the activity. However, the group should be as small as possible to be able to decide and act quickly. In the example of the HCT campaign, the cooperation of the MOHSS and the media was needed.

Step 4: Selecting the Team Leader

The TWG should select a dynamic, pro-active leader with good facilitation skills among its group. Supported by the Secretariat, the team leader coordinates the activity and moves the project and the people involved in the right direction.
Step 5: Establishing Administrative Functions within the TWG

If possible, a member of the SSC Sector Secretariat\(^1\) should be part of the TWG providing administrative support. Alternatively, a team member of TWG could be appointed for minute taking, the organisation of meetings and communication to the SSC.

Step 6: Conceptualising the Activity

Led by the team leader, the TWG needs to have a common understanding of the objective of the activity, its intention and expected results. Linkages to the sector strategy/policy and other national and regional strategies should be clarified. The TWG should develop a rough concept of the project with the defined objectives, the expected outcome, resources needed or additional costs that may occur and have not been budgeted for. This concept should be kept in writing and submitted to the SSC for approval. Once agreed upon, the implementation plan can then be drawn from the concept paper.

For the HCT campaign, the TWG developed a concept paper at its first meeting. It outlined the duration of the campaign, the slogan, the various target groups and the appropriate media. The TWG agreed on the following:

- The campaign will run over a week.
- Flyers will be developed and distributed by TWG and SSC members during the campaign week.
- Strategic locations for the distribution would be taxi ranks, bus stops and sector stakeholders offices
- Reminder cards for HCT will be developed and provided to target groups.
- Presentations on the radio will run in the campaign week; a representative of the TWG with experience in presenting on radio will introduce the HCT campaign on national radio, together with representatives of MOHSS.
- Stakeholder companies and organisations are encouraged to conduct staff awareness sessions on HCT during the campaign week. They should place the key messages of the campaign on their websites and in the social media.
- A newspaper article or advertisement will be placed to support visibility of the campaign.

\(^1\) The Sector Secretariat of the public works and transport sector consists of two officers. They support the SSC and deliver administrative and support services to TWGs when joint activities are planned.
Step 3: Defining the role of Each TWG Member

Based on the agreed concept the team leader defines the roles and responsibilities for each TWG member and allocates specific tasks. This will be based on the individual expertise, access to different networks and possible contributions to the project. In some cases, an external expert should be invited to add additional technical expertise to the project.

Step 4: Organising Communication and Reporting

The team leader keeps the SSC informed about the progress of the project. He consults with the SSC if important decisions have to be taken, or issues arise that need attention from the broader SSC. Reporting timelines are agreed upon between the SSC and the TWG team leader at the onset of the project cycle.

Depending on the nature of the task, internal meetings of the TWG should be kept to a minimum and should be mainly set up to monitor progress of the implementation. Timelines should allow for ad-hoc meetings when the need arises. Communication between TWG members and feedback to the team leader is done via email and telephone. The facilitation of this communication process will be the task of the Secretariat to the TWG. During the implementation of the HCT campaign, the TWG met three times: for the division of tasks and the allocation of timelines within the project cycle, for more detailed briefings of TWG members about their tasks, and to monitor the progress.

3.2. Planning and Implementation

With the concept at hand and roles and responsibilities clarified, the TWG can now draw the detailed implementation plan with tasks allocated to each member. They should be captured in a matrix and made available to each TWG member. Columns need to specify progress of tasks, outstanding issues, any need for follow-ups. This helps the team leader to track the progress of the entire project.

- Each task for the TWG members needs to be specific with timelines and feedback modalities. In the HCT campaign, it clarified who contacts the radio, who develops, who is responsible for logistics in the distribution process, etc.
- The plan details which external supports will be contacted and who manages the process.

In the HCT campaign, the TWG team leader detailed every step in the implementation plan. One TWG member was responsible for contacting the radio and to organise the media presentations. Another was in charge of outsourcing the conceptualising, production and printing of the flyer. TWG members contacted SSC members to volunteer in the distribution of the flyers and reminder cards at strategic
locations on a specific day. The TWG secretariat ensured that the materials were ready and could be collected timeously from their office.

It is most important that all TWG members know exactly what they have to do, when and how. The team leader has synchronised the tasks well to ensure timely completion. The leader of the TWG is mandated to follow up on the tasks directly with the respective members.

4. Monitoring and Evaluation

The HCT campaign was linked to the indicator in the public works and transport sector strategy, namely to contribute to the “reduction of HIV incidence of 50% by 2015/16” as outlined in the National Strategic Framework for HIV and AIDS. The specific indicator for the HCT campaign was to “promote regular HIV and wellness testing to sector stakeholders and the general public”. The outcome of the campaign was measured on an output basis, e.g. numbers of reminder cards provided, HCT sector flyers and other materials distributed to employees and at hot spots, border posts, road blocks, taxi ranks, as well as a number of sessions held on HCT/wellness screenings at workplaces.

The HCT campaign was effective reaching a broad audience in the rural and urban areas, it was cost effective by using free slots in the national radio and developing a simple, two-page flyer. At the same time, the campaign was a good promotion for the sector response.

5. Conclusion and Recommendations

Summary:

The following key steps have proven to be effective in the coordination and steering of joint sector stakeholder activities and can be summarised as follows:

- The SSC decides on a joint sector stakeholder activity based on the operational plan.
- The SSC assigns a technical working group to plan, coordinate and implement the joint activity. Members of the TWG are composed according to how they can contribute best to the activity. The SSC and the TWG team leader agree on a reporting procedure during the planning and implementation phase of the project.
- The coordination within the TWG requires a person who serves as the Secretariat (ideally a member of the SSC Secretariat) for minute making, facilitation of communication among members and other administrative and supportive tasks. A team leader is selected who plans
and coordinates the implementation process and keeps track of the progress.

- The TWG develops a brief concept of the activity that outlines the objective, expected results, resources needed and where they can be secured. A monitoring sheet should be developed that captured the results.

- Based on the concept, the TWG develops a detailed implementation plan with detailed tasks for each TWG member.

- The TWG team leader keeps track of the status of the activities and reports back to the SSC on progress.

**Recommendations:**

- Inter-sectoral exchange fora serve as a forum where sectors can share their experiences and know-how.

- Inter-sectoral collaboration should be further encouraged by DSP and OPM for sharing resources.

- Sectors should be encouraged to capture good practices and experiences in writing for sharing with other sectors.

- A central location could be established by OPM and DSP where good practices are stored and can be accessed by sectors for learning.
Annexure 3: HIV and AIDS Sector Response Resource Mobilisation Strategy

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Glossary

DSP  Directorate of Special Programmes  
HCT  HIV Counselling and Testing  
MOHSS  Ministry of Health and Social Services  
NCF  National Coordination Framework for HIV and AIDS Response in Namibia 2010/11-2015/16  
OPM  Office of the Prime Minister  
RACOC  Regional AIDS Coordinating Committee  
SSC  Sector Steering Committee  
ToR  Terms of Reference
1. Introduction

The “National Coordination Framework for HIV and AIDS Response in Namibia 2010/11-2016/17 (NCF)” mandates Line Ministries and their stakeholders to jointly address HIV and AIDS in their sectors. The framework provides the Terms of Reference (ToR) for the Sector Steering Committees (SSC) and the Sector Secretariats. With the decrease of donor funds, sectors have to source their own funding for the sector response. Resource mobilisation for financial planning is therefore the key for sectors to start, maintain and scale up their programmes.

2. Purpose of the Tool

This resource mobilisation tool, herein referred to as the “Tool”, is designed in a generic manner to assist sectors to raise the necessary funds for the development of sustainable and effective sector responses. The Tool is kept broad, so that it can be applied to the specific contexts and needs of other sectors. It is an Appendix to the “Guidelines on the Development of HIV and AIDS Sector Responses in Namibia”, thus addressing the same target groups.

3. The need for Resource Mobilisation

Joint HIV and AIDS responses are a new endeavour for most sectors. The majority have not yet made financial provisions to accommodate sector responses. Sourcing the respective funds is difficult, for two reasons mainly:

- Cuts in public spending force lead ministries to prioritise their expenditure in HIV and AIDS programmes. Most likely, they direct the larger part of available funds to their internal workplace programmes rather than to sector responses.
- Namibia has been rated as a middle income country, which has led to a substantial reduction in donor funding. Further, the observable trend is that external funding for HIV and AIDS has increasingly been directed towards bio-medical interventions (‘test and treat’). This creates funding gaps for non-health sectors which usually focus on prevention.
3.1 Sector Response Management, Coordination and Implementation

Funding needs for sector responses emerge at two levels: at national level for planning, coordination and steering, and at regional level for the coordination and implementation of activities.

3.1.1 Response Administration and Management (National/Lead Level)

- **The Sector Secretariat** is the institutional body that administers the sector response under the guidance of the Sector Steering Committee (SSC). The lead ministries are mandated to provide and finance the personnel, offices and logistics for the Secretariat. Financing the Secretariat via ministerial budgets ensures the continuity of the response administration and management.

- **The Sector Steering Committee (SSC)** convenes regularly to plan, steer and coordinate the sector response. Expenses are covered by the stakeholders who second representatives to serve on the SSC. Costs for coordination would arise from personnel costs for stakeholders to serve on the SSC; this includes e.g. time for quarterly meetings, internal correspondence, reviewing documents and spending time to attend to technical working groups when the need arises, as well as travel costs.

*Figure 1 Required contributions for sector response management:*

3.1.2 Coordination and Implementation (Regional Level)

The SSC develops overall annual action plans which have to be implemented by the regions. This requires dedicated regional staff of the Lead Ministries and its stakeholders. The regional staffs
usually works through the Regional AIDS Coordinating Committees (RACOC), who are a platform for joint regional planning and resource sharing with other representatives from the public and private sector, NGOs, civil society and service providers. Costs arise from availing time and travel expenses of regional office staff and from supporting the implementation of sector response activities, e.g. conduction awareness sessions, distribution of materials.

**Figure 2. Required contributions to regional coordination and implementation:**

- **Parties involved in regional coordination of sector response:**
  - Regional Offices of Lead Ministry
  - Regional Stakeholders Offices

- **Lead Ministry:**
  - Contribution in terms of regional staff, time, travel costs, materials, logistics

- **Stakeholders:**
  - Contribution in terms of regional staff, time, travel costs, materials, logistics

**Figure 3. Funding of regional implementation:**

- **Resource Mobilisation Opportunities**

  - **At regional level, the following sources could be approached for funds:**
    - Regional AIDS Coordinating Committees (RACOCs), regional MOHSS offices, NGOs, private sector through CSR funds, service providers, individual donations, e.g. from companies for smaller regional activities

  - **At national level, the following sources could be approached for funding:**
    - SADC initiatives, government, donors (Global Fund, PEPFAR), private sector through Corporate Social Responsibility Funds, Foundations, co-operations with service providers who have own funds for implementation
Figure 4. Resource network for regional implementation:

4. Smart Resource Sharing – an Example from the Public Works and Transport Sector

The public works and transport sector has implemented a sector response since 2012. As a major joint sector activity, it conducted a ‘Public Works and Transport Sector Condom Awareness/Sexually Transmitted Infections (STI) Awareness Week’ in Katima Mulilo in October 2013. The event was organised by MWT and sector stakeholders together with officials from the Zambezi Region, the Ministry of Health and Social Services (MOHSS), service providers as well as community based organisations and cultural groups.\(^1\) 46 different institutions, organisations and community groups were involved in the planning and implementation.

\(^1\) For more information: Ministry of Works and Transport, Public Works and Transport Sector STI/Condom Awareness Week, 21-25 October 2013; booklet available at the MWT
About 5700 people could be reached directly with the different activities and more than 120 000 male condoms, 7000 female condoms and about 77 475 IEC materials were distributed. Each partner contributed individually to the success of the event:

<table>
<thead>
<tr>
<th>Organisations</th>
<th>Activities</th>
<th>Contributions</th>
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</thead>
<tbody>
<tr>
<td>MWT, members of the Sector Steering Committee (SSC), RACOC, Regional Council Zambesi, Katima Town Council and Community Based Organisations</td>
<td>Planned the event in several SSC and task force meetings</td>
<td>MWT and GIZ facilitated meetings; SSC members allocated time and travel costs</td>
</tr>
<tr>
<td>MWT regional offices in Katima</td>
<td>Organised and set up the venue at the Katima Open Market</td>
<td>MWT allocated time for staff</td>
</tr>
<tr>
<td>MOHSS in Windhoek, Ministry of Information and Broadcasting through the IEC Warehouse in Windhoek, Namibia Planned Parenthood Association (NAPPA), National Social Marketing Programme (NaSoMa), Positive Vibes and Walvis Bay Corridor Group (WBCG)</td>
<td>Provided Information, Education and Communication Materials, as well as male and female condoms</td>
<td>Materials provided for free</td>
</tr>
<tr>
<td>MWT, NaSoMa and WBCG</td>
<td>Set up stands to display materials</td>
<td>Stakeholders provided staff and covered their travel/accommodation costs</td>
</tr>
<tr>
<td>Regional Governor/Dep PS of MWT</td>
<td>Officially opened the event; ensured high level attendance</td>
<td>No costs</td>
</tr>
<tr>
<td>Sector employees and Community Based Organisations</td>
<td>March through town with about 250 participants</td>
<td>GIZ provided banners, T-shirts and caps</td>
</tr>
<tr>
<td>Cultural groups and DJs</td>
<td>Entertainment/Performances</td>
<td>GIZ paid for performances</td>
</tr>
<tr>
<td>Road Contractor Company (RCC)</td>
<td>(RCC) arranged for awareness training sessions at construction sites within the area</td>
<td>RCC provided staff and for their travel/accommodation</td>
</tr>
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</table>
5. The Resource Mobilisation Strategy

The following chapter outlines important steps in the resource mobilisation and can serve as a blueprint for the technical working groups (TEAM) to develop their own specific approach.

<table>
<thead>
<tr>
<th>Task</th>
<th>Activity</th>
<th>Methodological approach</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Establishing the resource mobilisation team</td>
<td>The resource mobilisation team comprises of members of the SSC, supported by a member of the Sector Secretariat or a team member who assists with administrative work. The SSC and the team agree on a person in the team who serves as the leader of the team. Ideally, members should have already access to different funding networks. They should have sector knowledge, understanding of funding requirements for health programmes and should be familiar with proposal writing. Alternatively and if the funds are available, resource mobilisation can be outsourced to external experts. Unlike a technical working group (TEAM), the team should be a permanent appointment supporting the SSC with resource mobilisation. Meetings will depend on a needs basis.</td>
<td>The Sector Secretariat develops Terms of Reference for the resource mobilisation team that outline the required skills, the activities involved and the expected outcomes. The team reports regularly to the SSC on progress and the funding status.</td>
</tr>
</tbody>
</table>
| Establishment of resource mobilisation team    | The resource mobilisation team should be supported with capacity building measures, e.g. on the following topics:  
   - Understanding of the sector response strategy’s short- and long-term targets  
   - Lobby and advocate at stakeholder workplaces for sector response contributions  
   - Identification of resource needs and funding gaps based on operational plans and long-term strategies  
   - Understanding funding mechanisms of donors  
   - Proposal writing and financial and grants management  
   - Communication and presentation skills  
   - Networking and management of relationships with funders | Regular capacity building measures should be a standard item in the wellness budget. They should ensure that the mobilisation team is trained in identification of funding needs, proposal writing in different formats, development of funding matrixes and tracking instruments. For lobbying purposes, stakeholders should present the benefits of the sector response to their managers. Focal persons can also enquire at their respective workplaces about possible funding through Corporate Social Responsibility Funds (CSR). They can inquire about the respective funding policy, eligibility criteria, budgets and application procedures. |
2. **Research & Documentation**

**Developing a funding matrix**

The resource mobilisation team should research the different requirements of potential funders, e.g. government, donors. They all have different project funding cycles, some require submissions of proposals on a long-term basis, and others can be approached with short-term requests. A list should be developed that outlines:

- Potential donors, type of projects they fund and likely contributions
- Funding mechanisms
- Eligibility criteria
- Requirements for proposal writing
- Timeframes

Operational plans should outline activities for which budgets are available. Un-budgeted activities should be marked as funding gaps, e.g.:

- Activities which need long-term funding strategy
- Funds that can be accessed on a short-term basis, e.g. through Foundations, CSR
- Regional activities that can be financed through RACOCs, regional private sector CSR funds, co-operations with service providers etc.

**Storing of important funding documents**

Public and private funders and donors require certain documents which should be readily available in order react quickly when calls for proposals are published or an emergency need for funding arises.

The documentation needed for funding requests should be stored at a place with easy access. All correspondence, requests, proposals etc. should be placed at this location.

3. **Establishing a Resource Partner Network**

A network with potential funders and partners who could provide monetary and in-kind contributions should be established and managed.

The team should assess possibilities for representation in important meetings and committees where funding issues are discussed. They are a good opportunity to keep track of developments and to be engaged in the discussions.

4. **Operational Plan and Funding Assessment**

**Funding needs for administrative and operational costs**

There are two different funding needs:

**Administrative costs for sector response administration and management**: These costs are ongoing and will most likely be a contribution of the lead Ministry and sector stakeholders (see figure 1. and 2. above).

**Activity costs may require a funding mix**:

Each activity in the operational plan needs a column with funds available for specific activities, e.g. from ministerial budgets, stakeholder contributions or external funders, and in-kind contributions. Another column indicates activities where funding still needs to be secured and which funders could be approached to fill the gap. Regional implementation plans should identify opportunities for regional/local sourcing of funds.

**Administrative costs**: The long-term financing of the response management staff should be negotiated with the lead ministry and stakeholders.

**Activity costs**: The ‘Combination Prevention Strategy (CPS)’ (*the model can be found on websites of UNAIDS and Centres of Disease Control*) outlines which combinations of prevention activities have proven effects and are cost effective. The Directorate of Special Programmes at MOHSS provides support in identifying the best combination prevention strategies for the respective sector responses.

Activities should be selected that lend themselves to smart cost sharing. For example, MOHSS can support a HIV testing campaign with informative materials, and national radio has free slots available. Sector stakeholders can assist with presentations on the radio and the distribution of materials.
### 5. Resource Mobilisation Plan and Fundraising

**Development of a resource mobilisation plan**

The Sector Secretariat develops a resource mobilisation plan that outlines amounts needed, donors to be approached, tasks, responsibilities and timelines.

The sector response administration and management which are tasked with the coordination of the sector implementation (national and regional level) require long-term funding strategies. Here, commitment of the lead ministry and stakeholders is important. The implementation of sector activities, undertaken mainly at regional level, needs funding at two levels:

- Sector activities that appear annually in the operational plan, e.g. the celebration of World AIDS Day, need ongoing funding strategies
- The resource mobilisation plan should make provisions to accommodate activities that are planned spontaneously. This allows some flexibility in the operational plan and to react to needs that arise during the implementation of the sector response.

The plan should be presented to the management of the Lead Ministry and stakeholders for support. Ministry and stakeholders should inform the Secretariat timeously about their contributions to the sector response. This has to happen in considerations of respective budget cycles. The contributions should be formalised, e.g. in the form of a Memorandum of Understanding between the Sector Secretariat and stakeholders.

**Present and submit your funding requests to external donors**

A presentation should be produced and be readily available that targets external funders. It outlines the overall elements of the sector response and its objective, the activities that need funding and the financial management capacity.

Based on the respective requirements, a funding proposal should be developed for submission to the identified donors. For motivation, it could highlight outcomes and successes of previous funded activities.

Presentations form part of the resource mobilisation package and should be readily available.

### 6. Agreements and Financial Management

**Agreements and fund management**

Once the fund request has been approved, an agreement or Memorandum of Understanding (MoU) will be signed with the funder.

Funding models such as a basket fund allow more flexibility in the disbursement. The establishment of such a model is complex and needs extensive consultation with sector stakeholders and donors.

**Administration of funding**

The funds need to be spent according to the agreement signed with the funder. The Sector Secretariat administers the funding while the financial oversight will be with the Lead Ministry or any other arrangement agreed upon with all parties.
6. Communication, Reporting and Monitoring

6.1. Internal Communication

The need for communication arises at the following levels:

- The SSC Secretariat develops Terms of Reference (ToR) for the resource mobilisation team that outline how communication and reporting is organised between the SSC, the Secretariat and the team, and how progress is monitored. This includes the reporting requirements in terms of format, frequency and content of what should be captured in the report.

- All documents developed by the team (e.g. presentations, lists of funders, funding requirements, proposals, operational plans with budgets, resource mobilisation plans) are stored at a place (electronically, as well as hard copies of important documents such as contracts, financial agreements, reports to donors) which is easily accessible by the SSC, the Sector Secretariat and the team members.

6.2. External Communication

Contact with government, donors, funding committees, private sector meetings and other platforms important for resource mobilisation can be established via email and by attending the relevant meetings. The SSC together with the resource mobilisation team leader should keep the funders in the country informed about progress of the sector response by sending out sector policies and strategies, overviews of sector response activities, and by sharing success stories. This keeps the sector response in the awareness of potential funders.

7. Monitoring

A template as a tracking tool should be prepared by the resource mobilisation team that helps to keep record, for example, of funding applications (pending or submitted), the actual status of funding, the potential for future contributions, and other important information. The team Secretariat should regularly update the tracking tool for submission to the SSC as part of the reporting. The tracking tool helps to identify emerging funding gaps and redirect mobilisation efforts. The expected results of the resource mobilisation activities should be outlined in resource mobilisation plan which makes measuring progress against funding needs easier.
Annexure 4: Proposed Indicators for HIV and AIDS Sector Response Monitoring, Evaluation and Reporting

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# Glossary

<table>
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<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>DSP</td>
<td>Directorate of Special Services</td>
</tr>
<tr>
<td>M&amp;E</td>
<td>Monitoring &amp; Evaluation</td>
</tr>
<tr>
<td>MOHSS</td>
<td>Ministry of Health and Social Services</td>
</tr>
<tr>
<td>NAEC</td>
<td>National AIDS Executive Committee</td>
</tr>
<tr>
<td>NSF</td>
<td>National Strategic Framework for HIV and AIDS Response in Namibia 2010/11 – 2015/16</td>
</tr>
<tr>
<td>SSC</td>
<td>Sector Steering Committee</td>
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</tbody>
</table>
1. Introduction

The engagement of sectors in HIV and AIDS programmes is crucial for the achievement of national health targets. Together with their stakeholders, sectors are able to use their comparative advantage to reach a diversity of target groups. Systematic monitoring and evaluating (M&E) of sector responses are key for quality assurance. The current “National HIV and AIDS Multi-Sectoral Response Monitoring and Evaluation Framework 2013/14 – 2016/17” collects data and information. However, the national monitoring and evaluation framework does not provide specific sector indicators. To fill this gap, this document proposes a set of strategic indicators for sectors to monitor their progress and achievements.

2. Importance of Monitoring and Evaluation (M&E)

In general terms, M&E is the systematic collection and analysis of information to track progress of a policy or programme implementation against pre-set objectives and targets. It answers the question: did we deliver what was intended? M&E is an important instrument to keep track of gaps and achievements and identify deviations from key objectives. It helps programme managers to identify what works and what not and to make the necessary adjustments and changes. This helps to continuously improve the programme.

Definitions of M&E:

- Monitoring provides records of activities and results. It gives information where a programme stands at a given time in relation to the respective targets.
- Evaluation estimates the impact of an intervention and is conducted at periodic intervals, e.g. annually, at the end of a phase of a programme and at the end of the programme.

3. Levels of indicators

The sector response needs to be regularly monitored to track progress and identify gaps and needs for capacity building; Response monitoring is also a requirement for sectors to report to NAEC. Sector contributions to address HIV and AIDS can be measured at different levels:

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• **Sectors to the national level**: Indicators measure the performance of sectors in contributing to the achievement of the national strategy on HIV and AIDS. These indicators are broad and strategic and measure in how far sectors fulfil their mandates to scale up and improve internal and external mainstreaming in the sector, e.g. number of sectors that implement HIV and AIDS programme or that have budgets available (see Guidelines on the Development of HIV and AIDS Sector Responses in Namibia & Supportive, Mandate of Sectors). The proposed indicators in this document provide sector indicators at this level.

• **Stakeholders to the sectoral level**: Sectors have to develop an internal M&E system that measures the contributions of individual stakeholders to the achievement of sectoral objectives and targets as outlined in sector policies and strategies. The development of an internal M&E system is the task of each individual sector. Like at the national level, these indicators are strategic, e.g. measuring the number of stakeholders who implement workplace programme or address HIV and AIDS through external mainstreaming. They can also be programmatic measuring achievements of specific activities of stakeholders.

• **Sectors at programmatic level**: sectors engage periodically in joint activities, e.g. awareness campaigns or offering HIV counselling and testing services to target groups. To avoid double reporting, these data will be captured in the sector for internal use, but will be reported to the national M&E system by the service providers.

4. **The SMART approach**

The proposed sector indicators are kept simple following the SMART approach which has become a best practice in developing indicators for M&E. SMART criteria are applicable to programme monitoring and are relevant for output indicators.

SMART stands for:

• **Specific**: the indicator is precisely formulated.

• **Measurable**: the indicator can be quantified and objectively verified.

• **Attainable**: the target attached to the indicator should be achievable; the required data and information collection should be possible.

• **Relevant**: the indicator is valid and related to the larger outcome.

• **Time-framed**: the indicator is attached to a timeframe to allow comparison over time.
5. Proposed 10 strategic sector indicators

The proposed strategic sector indicators measure the performance of sectors in 9 key areas that are relevant for sectors to fulfil their mandates, e.g. in the areas of sector administration and the establishment of institutional structures, response management, coordination and implementation of mainstreaming activities.

*Figure 1: 9 key areas for sector indicators*

<table>
<thead>
<tr>
<th>Indicators for 9 Key Areas (Strategic Level)</th>
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<tbody>
<tr>
<td>1. Participation and Advocacy</td>
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<td>2. Financing and Resource Mobilisation</td>
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<td>3. Response management</td>
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<td>4. Coordination</td>
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<td>7. Networking, Information Sharing and Partnerships</td>
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<td>8. Research</td>
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<td>9. Monitoring and Evaluation</td>
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### Proposed strategic indicators for sectors

<table>
<thead>
<tr>
<th>Key Areas</th>
<th>Objective</th>
<th>Expected Results</th>
<th>Indicators</th>
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</thead>
</table>
| **1. Participation and Advocacy**   | Sector plans, coordinates and implements HIV and AIDS responses           | Scaling up of sector response contributes to the achievement of national HIV and AIDS targets | • Number of advocacy sessions conducted  
• No of current participating stakeholders |
|                                     | Sector stakeholders increasingly participate in sector responses          | Relevance of sector responses due to broad representation of the different needs and interests of stakeholders | • No of successfully completed activities according to sector work plans |
| **2. Financing and Resource Mobilisation** | Sector allocates budgets and has long-term funding scenarios              | Sustainability of sector response ensured through internal and external funding and long-term sustainability plans | • Sector (SSC) has quantified financial resource needs annually (budget per annum)  
• % of resource needs met annually  
• contributions to SSC by Lead Ministry, stakeholders and external sources (% per annual sector budget, as above) |
| **3. Response Management**          | Sector Secretariats have clear mandates and dedicated staffing            | Effective and efficient overall performance of sector response management         | • No of dedicated staff and job descriptions that reflect tasks (baseline and % staff increase) for Sector Secretariat |
|                                     | Sector response is guided by Steering Committees (SSCs)                  | Effective and efficient service delivery of sector responses through well-established coordination and steering processes | • SSC established  
• Availability of sector policy & strategy, aligned with national HIV and AIDS policies and strategies  
• No of sector stakeholder representation in SSC (baseline and % increase)  
• No of meetings held with sector stakeholder representation per annum |
|                                     | Sector Senior managers (such as Permanent Secretaries, CEO) participate in steering processes and decision making | Effectiveness of sector responses through fast decision making                     | • No senior sector managers active in SSC (baseline and % increase) |
| Sectors improve response management capacity | Effective and efficient coordination and implementation of sector response | • No and type of capacity building measures for SSC and Sector Secretariat in relevant fields e.g. coordination of multi-stakeholder programmes, internal and external mainstreaming, M&E, (baseline and % increase of stakeholders per sector) |
| 4. Coordination | Policy formulation, alignment and development | SSC and Secretariat are a reference point for the formulation of harmonised sector policies and programmes that facilitate access to prevention, treatment and care services | • No of sector stakeholder policies harmonised and aligned with sector policies & strategies (baseline and % increase) |
| Facilitation of national coordination | Effective coordination through well organised communication among response management and stakeholders at national and regional level | • No of SSC / Secretariat planning & coordination meetings (baseline and % increase) | • No of thematic technical working group meetings, (baseline and % increase) |
| Facilitation of regional coordination | Cost-effective regional implementation through regional partnerships, networks, information and resource sharing | • Availability of sector communication plan to facilitate coordination and steering processes among stakeholders and institutional structures | • No of meetings sector participated in with Regional AIDS Coordination Committees (RACOCs), (baseline and % increase) |
| Framework for regional implementation | Regional implementations deliver effective services to target groups: outreach ensured to remote areas | • Availability of regional implementation plans | • No of planning meetings between regional ministerial and stakeholder offices, (baseline and % increase) |
| 5. Implementation |  | • No of SSC members participating in regional activities | • No of joint regional activities (specify region), (baseline and % increase) |
| 6. Mainstreaming | Scaling up of mainstreaming in the sector | Increased number of sector employees access HIV and AIDS services which contributes to the achievement of national targets in prevention, treatment, care and support | • No of sector stakeholders implementing workplace policies and programmes in the areas of prevention, treatment, care and support, (baseline and % increase)  
• No of advocacy sessions conducted on mainstreaming by SSC |
| External mainstreaming mitigates the impact of sector operations on the spread of HIV and AIDS | • No of sectoral programmes and projects where HIV and AIDS are addressed (no and % increase)  
• No of activities that address HIV and AIDS in sector specific hot spots (specify), (baseline and % increase) |
| 7. Networking, information sharing and partnerships | Sectors facilitate networking, knowledge sharing and partnerships | Quality assurance and effectiveness of sector response through exchange of information, increased sectoral knowledge and inter-sectoral collaboration | • No of annual internal meetings and conferences held with sector stakeholders, (baseline and % increase)  
• No of guidelines and best practices (specify type) developed by sector (baseline and % increase)  
• No of partnerships created with other sectors |
| 8. Research | Sector facilitates research relevant in specific, sector-relevant areas | Improved quality and target-group relevance of sector response | • No of baseline research conducted (baseline and % increase) |
| 9. Monitoring & Evaluation & Reporting | Sector has a M&E framework to measure sector response progress (templates for reporting by stakeholders to be developed); this contributes to national data monitoring | Improved understanding of the status of the national multi-stakeholder HIV and AIDS response through the availability of comprehensive sectoral M&E data | • Sector submits quarterly report to the National AIDS Executive Committee (NAEC).  
• No of supervisory support visits to the regions (specify regions)  
• No of sector stakeholders at national level who submit regular reports on progress to the Sector Secretariat, (baseline and % increase)  
• No of capacity building activities M&E conducted for SSC members at all levels for data collection, analysis, synthesis and quality assessments |
**Areas of key interventions**

| Service delivery through sector response in the areas of prevention, care and support and impact mitigation |

**Prevention services:**
- Condoms distributed in the sector
- Information and awareness campaigns, behaviour change communication activities conducted
- Peer educators trained
- Mother-to-Child transmission addressed

**Most at risk populations:**
- Sector populations that have received HCT in the past 12 months and were given results Number/percentage of persons diagnosed with STIs

**Treatment, care and Support Services**
- People in the sector receiving antiretroviral treatment, home-based care and support to people living with HIV

**Impact Mitigation**
- Measures to address poverty and support orphans and vulnerable children
- Data available on key populations reached through sector response external mainstreaming measures; e.g. number of sector programmes and projects that have mainstreamed HIV and AIDS

*Note: These data will also be collected by other stakeholders in the national multi-sectoral HIV and AIDS response, e.g. services providers, NGOs,*

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**Sectors will from time to time implement joint sector activities (see above section 5 implementation). These activities will capture data in the key areas of prevention, treatment, care and support – depending on the priorities of the sector. They will be reported by the respective services providers and will therefore not be subject of reporting by sectors to NAEC.**
6. Reporting and Communication

**National level:** The Sector Secretariat keeps records of all relevant information that measure progress of the sector response. It reports quarterly to NAEC on progress of the sector response and on the agreed strategic indicators. Formats and procedures will have to be discussed with the Directorate of Special Services (DSP) of the Ministry of Health and Social Services (MOHSS).

**Sectoral level:** The Sector Secretariat develops a template to collect data and information from stakeholders for the internal M&E system that each sector has to develop. SSC members collect this information from their offices and forward the completed forms to the Sector Secretariat. All data are consolidated by the Secretariat and included in the respective reports. Close follow ups are needed to establish a strong M&E feedback system.