NATIONAL AIDS PROGRAMME MANAGEMENT

MODULE 2
POLICY AND PLANNING

World Health Organization
Regional Office for South-East Asia

National AIDS Programme Management

A Training Course

Module 2

Policy and planning

World Health Organization

Regional Office for South-East Asia

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Module 2: Policy and planning

Policy and planning

LEARNING OBJECTIVES

After completing this module, participants will be able:

1. To describe the contribution that policy makes to create an enabling environment for HIV/AIDS programmes and the role of policy to reinforce that environment.

2. To describe the principles that guide the development of AIDS policy.

3. To identify the major issues for which a national AIDS policy needs to be established.

4. To assess the national policy environment, and identify any gaps in policy or conflicts between policies.

5. To outline the steps for developing a national AIDS policy.

6. To outline the steps for developing a national AIDS strategic plan.

INTRODUCTION

Policy plays an essential role in guiding an effective response to HIV and AIDS. Governments use policy to state their views on a particular issue and declare the approach they will take to resolve or respond to that issue. Organizations use policy to explain to their employees the modalities of executing their work as well as norms of behaviour. Community groups use policy to advocate for what the community needs.

Policy is simply an expression of what a group or organization thinks or believes about a particular issue. Laws are a formal expression of policy for a nation. They set out what is permissible and what is not. Governments and organizations disseminate written policies which aim to prescribe, explain and outline how particular issues will be dealt with. A national policy on HIV counselling and testing, for instance, sets out how counselling and testing will be conducted, and, more importantly, how it will not be conducted.

Some policy is not written in stand-alone documents, but contained in reports or other papers. Governments accept the recommendations of a review report, for instance, and these are then viewed as the government's opinion about or approach to a subject.
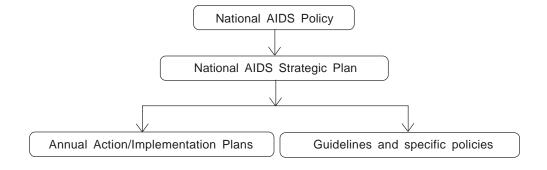
Sometimes governments find it difficult to express formal policy on a controversial issue or subject. In such cases, polices are "hidden" or implied in the manner the issue is dealt with in practice.

Although it is important to start developing policies early in the process of establishing or revising a national AIDS programme (NAP), not all policies are made at this stage. For example, some policies can only be developed after a programme has established its major priorities. Policy development and review is a dynamic process. Policies change according to the lessons learnt during the implementation of the programme. Sometimes policies set early in the development of a programme turn out to negatively affect implementation and need to be adjusted. Evidence and knowledge change over time. Policies, therefore, need to be able to respond to these changes.

This module examines the role of policy in creating and maintaining a supporting or enabling environment for AIDS programmes. It sets out some guiding principles for framing an AIDS policy and takes participants through the steps involved in developing policy. It provides an opportunity for participants to consider the range of HIV-related policies that are in place in their country, identify gaps and recognize opportunities for filling those gaps.

It also details the process for developing a national AIDS strategic plan (NASP) that can turn the policy into practice.

Different countries prepare their policy and strategy in different ways. The national AIDS policy is usually a single document that sets out how a country plans to respond to AIDS. It usually contains a set of guiding principles and a description of the context and extent of HIV and AIDS in the country. It describes how the response will be coordinated, who will be involved and what their respective roles will be. It summarizes the approaches to be adopted and the government's position on key issues such as HIV counselling and testing, access to care, support and treatment and the rights of people living with HIV/AIDS (PLHA). It is usually complemented by a NASP that contains details about priorities, objectives, strategies and resources. This is sometimes further supported by an annual action plan.

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                    │   National AIDS Policy    │
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  │ Annual Action/Implementation │  │ Guidelines and specific       │
  │            Plans             │  │          policies             │
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OBJECTIVE 1: To describe the contribution that policy makes to create an enabling environment for HIV/AIDS programmes and the role of policy to reinforce that environment

THE CONTRIBUTION OF POLICY TO THE ENABLING ENVIRONMENT

AIDS programmes do not exist in isolation. Policies and strategies may look good on paper but may be undermined or rendered ineffective by a range of external factors. For instance, a policy that aims to provide access to HIV counselling and testing for all who need it will be undermined by the prevalence of stigma and discrimination against PLHA. An outreach programme that seeks to target sex workers will find it difficult to reach the target population if, for example, police policies or practices keep sex workers on the move. Laws, policies and practices can work in tandem to create an enabling environment for AIDS programmes. Policy helps to establish and support this enabling environment.

Expressing the country's approach to HIV and AIDS, through a national AIDS policy, or through detailed policies on specific areas such as counselling and testing and antiretroviral therapy (ART) access, and through the inclusion of attention to HIV in non-discriminatory and public health legislation can assist in creating stability and consistency across sectors and jurisdictions.

Policy makes the following contributions to create an enabling environment for AIDS programmes:

Authority, legitimacy and permission	The existence of a national AIDS policy, endorsed by the national government, gives the NAP a legitimate role and provides it with the power it needs to negotiate with other government departments and sectors. A multisectoral policy that identifies the need for all government departments and sectors to respond to HIV gives people working in those departments and sectors the legitimacy to raise HIV issues and to mobilize support and resources.
Stability	National and provincial governments change every few years. Ministers and senior bureaucrats come and go. A clear bipartisan policy can insulate the programme and protect it to some extent during periods of change when new personnel or governments bring new ideas and approaches.

Consistency	There is often considerable debate about the approach to be adopted to minimize HIV transmission. Having a clear policy in place that sets out the strategies to be used in HIV prevention, care and treatment can result in consistent approaches being taken from one jurisdiction to another. This minimizes to some degree the possibility of one province or one service adopting approaches or strategies that work against the goals of the entire programme.
Good practice	Services base their operating procedures on policy. Policy tells services what approach to take towards a particular group. An HIV counselling and testing policy, for example, shapes the practice that occurs in services that provide HIV testing. Anti-discriminatory laws and policies shape the practices of health workers and other service providers towards the people protected by these laws and policies.
Knowledge	Policy documents do not need to be merely lists of rules. They can also inform and educate people. A good infection control policy teaches the health staff how to keep their patients healthy and keep themselves safe. An organization's AIDS policy can teach people how HIV is transmitted, what they need to do to avoid HIV infection and what the organization is able to offer them if they test HIV-positive.
Consensus	The policy development process can provide an opportunity for all groups to come together to put forward their different views about the approaches that should be taken to reduce HIV transmission and improve care, and to reach a consensus on how to move forward. The process allows different groups to present their perspectives and learn from each other's knowledge and experience.
Collaboration and partnership	Having a common goal and approach, set out in policy, can provide an opportunity for different groups to work together in partnership. A policy that clearly sets out roles and allocates responsibilities and resources can increase collaboration between groups and sectors and reduce the competition for resources. AIDS polices that establish a clear role and resources for PLHA groups, for example, provide an opportunity for health services to work with PLHA groups to improve prevention and care.
Permission to speak	Having in place a national AIDS policy that raises and deals with difficult or taboo issues such as sex work, drug use and sex between men creates opportunities for these issues to be discussed and addressed in services and in communities. A policy that calls for communities to provide care and support for families affected by HIV acknowledges the fact that these families live within communities and need support. Having a President, a Prime Minister or a senior politician launch a national AIDS policy can help place the issue of AIDS on the agenda of a range of groups and organizations.

What priority elements of the programme should be addressed in policies? One way to identify these major issues is to think of how they will be used and when they will be useful. Some of the cases where policies prove to be useful are:

- when a clear statement of political commitment to priority elements of the programme will increase the likelihood of achieving the programme's objectives. For example, a policy statement recognizing HIV/AIDS as a critical public health problem with development consequences that deserve financial and political support will greatly improve the programme's ability to achieve its objectives.

- when there are options, and the most effective or practical choice is not obvious, a policy statement should make the programme's position clear. For example, a policy statement could state which level of health worker can provide ART for PLHA.

- when basic practices need to be described so that guidelines and activities can be developed to implement various interventions. For example, a policy on the need to increase condom use might make it clear that condoms will be promoted among all those who are sexually active, including youth.

OBJECTIVE 2: To describe the principles that guide the development of AIDS policy

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GUIDING PRINCIPLES

The guiding principles of an AIDS policy are an important declaration of the basic desires that the country believes should be consistently reflected in all AIDS policies. These are important because they tell the organizations and individuals involved in responding to HIV as to how they are expected to behave, what their approach to HIV should be based on, and what their policies and procedures should comply with. They are also important to PLHA and people affected by HIV as they are often used as key advocacy tools to assist them to fight stigma and discrimination and to access the services and support they need.

Each country formulates a different set of guiding principles that are particular to their needs. Some common themes that appear in guiding principles are:

- the need for leadership from politicians and religious and community leaders;
- the need to grant PLHA the same rights and access to services as to all other citizens;
- the premise that people will be encouraged to know their HIV status, protected from discrimination and provided with the information and means to protect themselves and others;
- the need for a multisectoral approach;
- the need to address issues of gender as a core part of the response so that the burden of disease and care on women will be reduced;
- that the approach will be based on evidence and will be sensitive to the culture of the country;
- that resources will be set aside to implement the response;
- that the communities will be encouraged and supported to take up a role in prevention and care.

OBJECTIVE 3: To identify the major issues for which a national AIDS policy needs to be established

Some of the key areas in which policy can guide the AIDS programme include

- Setting out how HIV counselling and testing will be conducted and promoted
- Access to treatment to prevent mother-to-child HIV transmission
- Access to ART for PLHA
- Condom promotion
- Involvement of nongovernmental organizations (NGOs) in the national AIDS policy
- Increasing the avenues of primary and secondary education for women
- Decriminalization of sex work or registration of sex work venues
- Determining the level of health-care providers who provide treatment for individuals with sexually transmitted infection (STI) and AIDS
- Availability of appropriate drugs
- Availability of STI services for youth
- AIDS and the workplace (employment)
- Insurance and HIV testing
- Refugees and HIV status
- Visa regulations for short-term entry and HIV status
- Securing the blood supply system

Study the list above and reflect on the policies that guide your national response.

OBJECTIVE 4: To assess the policy environment and identify any gaps in policy or conflicts between policies

Sometimes the country's approach to AIDS is presented in a specific policy, such as the HIV counselling and testing policy. In other cases, a specific reference to the needs of PLHA is included in general policies. For example:

- A general policy in India that covers the establishment and funding of women's self-help groups (SHGs) contains a clause that permits the establishment of such groups by women with HIV and guarantees them access to the funding which is available to other SHGs.
- Maternal and child health polices can contain specific reference to access to prevention of mother-to-child transmission (PMTCT) services and to ART for mothers and children with HIV.

EXERCISE A

(Country group work followed by intercountry group discussion)

In country groups, answer the following questions to assess the current policy environment in your country, and identify any gaps or policy conflicts.

1. List the current specific policies that guide the response to AIDS in your country.

2. List the major issues that are not covered adequately by the AIDS policies?

3. List some general policies that encompass various AIDS issues.

4. Identify some general policies that should make a reference to AIDS but currently do not.

5. Identify some policies that appear to be counterproductive or to weaken the enabling environment for the AIDS programme.

Inform your facilitator whezn you are ready for intercountry group discussions.

OBJECTIVE 5: To outline the steps for developing a national AIDS policy

STEPS FOR DEVELOPING A POLICY

Different policies require different processes depending on the level of complexity and controversy associated with them. It is relatively easy to formulate and promote policy on issues where there is broad agreement. In other areas, a complex process of participation and consultation is required to evolve policy. The complexity of the process depends to some extent on the change you are trying to bring about through the policy. If the people who are required to implement the policy are likely to resist the change – either because of ignorance or because they believe that the way they are currently doing things is better – then the policy process may not succeed unless you involve them from the start.

Gather information needed for studying policy options

Before setting national policy in an area of HIV prevention, care and treatment, it is important to know as much as possible about the problem that the policy is trying to solve, the people who will be affected by it and the efforts that have been made so far to address the issue. For each issue that the national AIDS policy will deal with, information is needed regarding:

- the target populations, if any, that will be affected by the policy and their characteristics, such as risk behaviours or geographical distribution, as well as existing policies on this issue.
- social, religious and cultural norms that affect the issue.

Information can be obtained from many sources, such as a review of records, a survey of the people directly affected by the policy, consultation with community or health workers, and operational research.

Assess existing policies

Before developing a new policy, it is important to determine whether the issue can be addressed by modification or better implementation of existing policies. People working at the ground level can get disillusioned if the national programme produces a set of policies that contradict each other, or cannot be practically implemented at the ground level. It is important to ascertain the exact nature of the problem that you are trying to

solve and to determine whether setting a policy is the most effective approach to solving it.

Develop a clear policy that addresses the issue

The policy developed needs to be clear and focused on solving the problem identified. Make sure that the people for whom the policy is intended can understand the exact meaning of the policy and will be able to apply it to the practical reality of their work.

Policy statements allow the public and other interested parties to understand how the NAP proposes to address the AIDS epidemic. The following examples suggest the kind of statement a programme might develop to summarize important policy decisions.

Examples

Increasing the avenues of primary and secondary education for women

Recognizing that women are extremely vulnerable to HIV infection, the NAP advocates for increasing the avenues of primary and secondary education for women. Education is a particularly critical and effective way of improving the ability of women to provide for their families, understand their own health needs, know how and when to seek appropriate health care, and make informed choices in their sexual activities that can protect themselves and their children from HIV. Existing laws requiring full primary schooling for all children will be enforced. The ratio of girls to boys attending school will be monitored and corrective action taken as needed.

Promote human rights of PLHA and avoid discrimination against them

Recognizing the dangers to the health of everyone posed by discriminatory behaviour against PLHA, the national AIDS policy calls for a broad multisectoral response to promote the human rights of PLHA and avoid discrimination against them. The national AIDS policy encourages those in a position of authority in the health, legal, welfare and social sectors to coordinate efforts and mobilize political support and action to limit discriminatory laws, regulations and practices. The national AIDS policy will first focus on laws regarding housing, employment and insurance. The national AIDS policy is committed to educating the public about HIV to remove unfounded fears about HIV and AIDS.

Access to treatment and prophylaxis for opportunistic infections and to ART

All PLHA who need it will have free access to opportunistic infection (OI) treatment and ART through primary health-care clinics.

Obtain formal approval for proposed policies

In most countries, the National AIDS Committee (NAC) is responsible for *drafting* proposed policies. These policies are then *approved* by higher levels (that is, the executive or legislative levels) of the government. Although the procedures for obtaining formal approval will vary in each country, here are some suggestions.

- First, policies are submitted to the relevant multisectoral national committee for its review, and are revised as needed. Committee members may make useful suggestions about issues that they know are important to the policy-makers who will approve the policies, or they may have a different perspective because of their familiarity with how another sector intends to deal with HIV.
- Next, rationales are developed to convince key policy-makers of the need for the policies. The reasons for suggesting certain policies will not always be clear to others, especially those without public health training. It is useful to explain why certain policies are recommended and how adoption of these policies will benefit the initiative to prevent HIV and/or treat PLHA. This is especially important for potentially controversial subjects such as condom promotion among youth, confidential testing, discrimination, commercial sex, homosexuality, and injecting drug use.
- Proposed policies are submitted to policy-makers who are responsible for granting formal approval. Policy-makers include both executive or administrative and legislative or parliamentary members of the government.
- Perhaps, most importantly, the process should be monitored to ensure that the policy is approved, implemented and evaluated.

EXERCISE B

(Individual work followed by country group discussion)

In this exercise you will develop a policy for your country in a particular area of HIV prevention or care, then consider difficulties you may have to face in getting the policy approved. Follow these steps:

1. Meet with the other participants from your country and share with them the lists of major issues you have developed for Question 2 of Exercise A in this module. Each participant in your group should select a different issue from these lists. This could be one for which a current policy does not exist, or one for which the current policy needs to be revised. Write your selected issue below.

2. List the factors that need to be considered when developing a policy for the issue you have selected (such as impact of the policy and conflict with other policies, people or groups that might support or oppose it).

3. Write your new policy statement to summarize the government's position or approach in this area.

4. Briefly describe any difficulties you may encounter in your attempt to get this policy approved in your country.

> **Inform your facilitator when you are ready for country group discussions.**

OBJECTIVE 6: To outline the steps for developing a national AIDS strategic plan

The national policy is usually complemented by a national strategic plan that sets out the goal, objectives and strategies that will bring about the desired changes. The strategic plan generally identifies the priorities for action and allocates time frames, targets and indicators. Sometimes the national policy and strategic plan are contained in a single document. The national strategic plan is often backed by detailed annual action or implementation plans that set out exactly what is to be done, by whom, and in what time frame. Guidelines and policies on specific issues – such as policies on HIV counselling and testing and access to ART and guidelines on how and when to use ART, how to prevent nosocomial infections, and so on – back up the main policy and strategic plan. Different countries have different approaches to this, but the main elements generally remain the same.

The strategic planning process begins with obtaining a consensus and commitment from all the concerned sectors including donors. The role of programme management staff is to stimulate and coordinate multisectoral involvement in the development of NAP activities and to ensure that the plans meet the objectives of the NAP and emphasize on priority interventions.

The process of assembling relevant information for preparing and revising the draft of the national strategic plan provides an opportunity for the NAP and the multisectoral NAC to review and coordinate all the activities planned for reducing the spread of HIV infection, and for providing care and support for PLHA. During the drafting of the strategic plan, other plans for major activities can be assessed for their consistency with overall programme policies and objectives. Programme and activity targets can be assessed to determine whether sufficient resources will be available to meet them. If not, modifications can be made or additional funding sought for those parts of the plan that have not yet been funded.

When the final draft of the strategic plan is completed, all those involved in the planning process will have a unified view of the NAP's response to AIDS. The plan can be reviewed by the NAC for its approval and endorsement. The completed document is used to communicate to the general public the NAP's planned response to AIDS in order to enlist its support and confidence.

Purpose of a national AIDS strategic plan

The purpose of an NASP is to provide a framework so that programme management staff will know what will be done, when, and by whom. The plan also serves as a basis for funding. Multisectoral participation is essential throughout the planning process. One outcome of the process is a written document, or national plan.

The written document should provide a broad outline of priority interventions and activities for the NAP. It should present a summary of the current AIDS situation, and the planned multisectoral response to the problem. While the NAP is usually responsible for preparing the final written plan, those funding and implementing the plan will have an opportunity to review and endorse the written document when it is presented to the NAC. The following sections describe how to assemble and prepare a national strategic plan.

Steps suggested for developing a national AIDS strategic plan

1. Preparation phase:
    (a) project proposal for formulating a national strategy to be developed in consultation with key partners, identifying the objectives, conceptual framework, methodology, activities, time frames, budgetary requirements and sources of funds, responsible agencies and their respective roles;
    (b) informal consultation with governmental organizations (GOs) and NGOs, PLHA groups, United Nations (UN) and international agencies;
    (c) project proposal submitted to a national authority for approval;
    (d) NAP to set up a steering committee to provide direction and to oversee the development process of the strategic plan. The committee should be multisectoral in nature and chaired by the director-general (DG) or a person of higher position;
    (e) the NAP manager plays a leadership role and coordinates the entire process with the support of the UN system. He/she will act as secretary of the steering committee and convener of the national core group (NCG);
    (f) NAP to appoint an NCG comprising a team of one local expert, one international expert and writer(s) to prepare the background paper including introduction, vision, goals and objectives of the HIV/AIDS prevention and control medium-term programme. Other members can include: focal point from NAP and focal point from UN (with secretarial and office assistance) with regular consultation with others as and when necessary (Terms of reference for the NCG, local and international experts to be set up);
    (g) appoint preparatory working groups to develop background papers on different areas, e.g.:

- epidemiology (provide estimated prevention and care needs based on status and trends of HIV and related epidemics, and provide recommendation on the surveillance system)
- prevention among most at-risk populations (sex workers, men who have sex with men (MSM), IDUs and other groups; define a specific package of interventions and mechanisms for scaling up)
- other means of prevention (awareness, school education, condom promotion, mass media)
- care and treatment – ART, other vulnerable children (OVC), community-based centres (CBC)
- health services (STIs, blood safety, voluntary counselling and testing [VCT], PMTCT, TB/HIV)
- institutional arrangements and structures (coordination, human resources, capacity building, budgeting, planning, monitoring and evaluation).

These groups prepare background papers for brainstorming workshops. The papers should include a brief review of the current work, achievements, major gaps, weaknesses and challenges along with possible solutions, alternative options and new approaches. They should also address the issues of policy advocacy, capacity building, monitoring and coordination.

2. Brainstorming workshops to draft national strategies for HIV prevention, care and treatment
   – NAP to conduct a three-day brainstorming workshop for participants from within and outside the government and from various fields of work such as behavioural science, epidemiology, education, social welfare, uniformed personnel, medicine and the other disciplines required to address the HIV epidemic, including community-based organizations (CBOs), state and local health departments, members of infected and affected groups and international agencies (non-health departments). These participants will examine a situation analysis of the current epidemic, as well as a response analysis of current activities. They will then discuss and develop prioritized objectives and strategies to address each of the goals identified for HIV prevention, care and treatment.

3. Drafting of the NASP completed by the NCG
   – The NCG drafts the NASP using information from the national workshops and small groups.

4. National seminar held to receive feedback (public opinion) on the draft plan
   – Participants from various sectors throughout the country are invited to attend a seminar to consider the draft NASP and provide feedback for the revision and finalization of the draft NASP.

5. Submission of the final strategic plan to the NAC for endorsement
   – The NCG finalizes the draft NASP and submits it to the national authority for concurrence. The NASP is then to be submitted to the NAC for endorsement. In some cases, it will be further submitted to the National Health Committee to be included in the National Health Plan.

6. Dissemination of the NASP
   – The NASP is published and copies disseminated to all GOs, NGOs and other partners.

Sample chapter headings of a national AIDS strategic plan

A. Introduction
   1. Country demographic data: population size, age distribution, etc.
   2. Overall health situation: infant mortality rates, etc.
   3. NAP management·
      • Staffing and lines of responsibility for the NAP
      • Organizational structure of NAC
      • Technical Advisory Committees
      • NAP management structure including
         – organizational relationship within NAP and with other sectors
         – collaboration with other sectors
         – research activities
         – reporting and information-gathering procedures
         – how the programme will be funded

B. HIV/AIDS problem, control activities and target populations
   1. Current HIV prevalence including plans for surveillance
   2. Number of current and future PLHA needing care
   3. Current STI prevalence and incidence
   4. Number of current and projected deaths from HIV/AIDS
   5. Number of current and future AIDS orphans
   6. Current activities for HIV prevention, care and treatment
   7. Description of populations at risk

C. Objectives, strategies and interventions

D. Programme policies and guidelines
   1. List of programme policies, for example, policies about promoting human rights of PLHA and avoiding discrimination against them, about promoting condom use and

      ensuring their availability, ensuring availability of adequate quantities of appropriate drugs, etc.

    2. List of topics on which standard guidelines will be developed, for example, clinical management of STI, ART, rational use of blood, universal precautions, etc.

E. Programme prevention priorities and targets
    1. Major prevention priorities of NAP (target populations and interventions)
    2. Programme targets

F. Plans for activities
    1. List of major activities, activity indicators and targets, and individuals or organizations responsible for following through each major activity
    2. Plans for monitoring key performances and outputs

G. Plans for evaluating the programme
    1. Priority programme indicators, programme and activity targets
    2. Plans for surveillance of the incidence and prevalence of HIV and STI
    3. Plans for a comprehensive programme review

H. Timetable: Summary timetable of major activities. For detailed workplan timetables for each activity and task, refer to Item J.

I. Budget

J. Detailed workplans: Include the detailed workplans – such as those developed for the NASP. For each task and its related steps, include information such as who is responsible for the task, its time frame and output indicators.

RESOURCES

1. *Towards universal access by 2010,* WHO 2006 (http://www.who.int/hiv/pub/advocacy/ towardsuniversalaccess.pdf).
2. *UNAIDS policy positions* (http://www.unaids.org/en/Policies/).
3. *Ensuring equitable access to ART for women*, WHO/ UNAIDS Policy Statement, 2004.