

# **NATIONAL AIDS PROGRAMME MANAGEMENT**

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**INTRODUCTION**



**World Health  
Organization**

Regional Office for South-East Asia

# National AIDS Programme Management

## A Training Course

### Introduction



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Module 8 – Management systems for the AIDS programme

Module 9 – Strategic information

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# Introduction

## THE CHALLENGE OF HIV PREVENTION, CARE AND TREATMENT

Twenty-five years of responding to acquired immunodeficiency syndrome (AIDS) has provided many lessons. It is now clear that an effective AIDS response requires the cooperation of many levels of government and many sectors of society. It is also clear that there is no quick fix and that gains made in prevention and care can easily and quickly be lost if governments become complacent and wind down programmes.

All too often, several psychological, social, cultural and economic factors stand in the way of a rational approach to AIDS – the same factors that fuelled the pandemic in the first place. They include:

- denial by many individuals and societies that AIDS is relevant to them;
- complacency about the pandemic, especially where the problem is invisible;
- stigmatization of people who are infected with human immunodeficiency virus (HIV), or believed likely to become infected, which prevents them from seeking the help or information they need to protect themselves and others from infection;
- the inferior socioeconomic status of women which limits their ability to access education, to learn to protect themselves from sexual transmission and to act on this knowledge; and
- reluctance to discuss, or permit the discussion of, sexual matters.

This is a significant time in the global response to AIDS. The wider availability of affordable antiretroviral therapy (ART) and a significant increase in the global resources for AIDS, through the Global Fund, other multilateral and bilateral sources, and private foundations, provide an opportunity to gain control over the pandemic and reduce its impact. The “3 by 5” Initiative and the subsequent establishment of the goal of universal access to HIV prevention and care provide an opportunity for nations to set and achieve ambitious targets.

Responding to AIDS requires the following:

1. **Commitment** – Governments need to make HIV prevention, care and treatment a priority. Political leaders need to act on their commitment without delay and find

ways to accommodate clear prevention messages within the context of their country's social, cultural and religious norms.

2. **Involvement of all sectors of society** – AIDS programmes require action, support and resources not only from the Ministry of Health, but also from the Ministries of Youth, Women, Finance, Planning, Education, Information, Labour, Agriculture, and others. In addition, effective working relationships must be established with the private sector and community groups including nongovernmental organizations (NGOs).
3. **Giving priority to and providing resources for activities for the prevention of sexual transmission and transmission through injecting drug use** – This means promoting safer sex, including the use of condoms, especially among high-risk networks with frequent partner change. It also means providing early diagnosis and treatment of sexually transmitted infections (STIs) as these facilitate HIV transmission. It includes employing harm-reduction measures, increasing access to drug treatment and rehabilitation, and changing drug-using behaviours among injecting drug users (IDUs).
4. **Providing comprehensive care, support and treatment to people with HIV** – This includes expanded access to voluntary HIV counselling and testing, support for people living with HIV/AIDS (PLHA) and their partners and families, and access to the treatment of opportunistic infections (OIs) and ART for all who need these.
5. **Reinforcing efforts to counter discrimination against people with HIV** – All governments need to continue to find ways to ensure that responses of official authorities and individuals to AIDS are humanitarian and non-stigmatizing. Public health is undermined by mandatory HIV testing, by marginalization of people thought to be at greater risk of acquiring or transmitting HIV and by other discriminatory measures.
6. **Ensuring that people are well informed** – Clear prevention messages must reach all adolescents and adults so that they can protect themselves and others from HIV. Further, messages to counter misconceptions about HIV transmission need to be widely delivered and reinforced. Political leaders especially need to understand that action to strengthen the national AIDS programme cannot be delayed. Well-informed citizens and a well-planned and coordinated multisectoral response to AIDS are the keys to effective prevention, care and treatment.

## **AIMS OF THIS TRAINING COURSE**

The purpose of this course is to improve the management of national AIDS programmes by:

- presenting a systematic process for developing and managing a comprehensive national AIDS prevention, care and treatment programme; and
- providing an opportunity to increase the knowledge and practice skills needed to implement such a process.

The primary audience for this training is AIDS programme managers – individuals who have the authority and primary responsibility for managing national AIDS programmes. The secondary audience includes people who can influence decision-making about the programme. Among these may be people in the office of the head of state responsible for interministerial coordination of AIDS activities; people in the Ministry of Health responsible for prevention, health education and health care; staff of other ministries such as education and planning; members of national and provincial AIDS coordinating committees including PLHA group representatives; and people working at the national level in international organizations that support national programmes. This training course will be repeated periodically to take account of the turnover of people in these key positions. The training course will initially be provided at the regional level, and may then be tailored to national needs and provided within countries, for state or provincial AIDS programme managers.

Upon completion of this training course, participants' ability to plan, manage and evaluate a comprehensive national AIDS programme will be strengthened. The curriculum attempts to cover the breadth of information required for effective AIDS programme management. This training provides an overview and may need to be complemented by more intensive, focused training in specific technical and management areas.

## **HOW THIS COURSE IS ORGANIZED**

This is a working course that requires the active participation of the people who attend it. Rather than presenting a series of passive lectures, participants are required to work through a set of workbooks, individually and in groups, under the supervision and assistance of experienced facilitators. The curriculum is divided into modules that contain information on how to effectively plan and manage a national AIDS programme and exercises designed to give participants practice in applying that information. The modules are presented in plain language and during the course participants are given adequate time to work at their own pace. Participants read the information in the modules and complete the exercises, either individually or in small groups, according to the instructions in the module. Each small group is assisted by one or two experienced facilitators.

In the regional training course, participants from the same country are assigned to the same group while in the national training course, participants from the same province/district are assigned to the same group.

There are several ways to work through exercises with the facilitator. Participants in the regional training course are asked to work on some exercises individually. In others, participants are expected to work with other participants from the same country. Some



exercises require both individual and country group work. Facilitators will assist participants as needed in individual work and will facilitate small group discussions based on the modules and exercises.

The role of the facilitator in each small group is to spend time with individuals or with the groups, going through the content and assisting with the completion of the tables or questions in the exercises. A deliberate choice has been made in the design of this training course to move away from presentations and to focus on discussion, problem-solving, coaching and shared learning.

The content is balanced between programme management and technical information. The course is designed to cover around ten training days. The time allocated for each module can be adjusted to meet the needs of the participants. For a group that requires less technical updating, the time allocated for the modules on programme management can be extended and the technical modules can be used more as background resources.

## **COURSE MATERIALS**

This course consists of an introduction and nine modules. Each module addresses a major aspect of AIDS programme development and contains exercises for the participants to practise what is learned. The list of the modules is as follows.

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### Introduction

Module 1: Situation analysis

Module 2: Policy and planning

Module 3: Determining programme priorities and approaches

Module 4: Targeted HIV prevention and care interventions

Module 5: Setting coverage targets and choosing key outcome indicators

Module 6: Implementation of HIV prevention, care and treatment strategies

6.1 Minimizing sexual transmission of HIV and other STIs

6.2 HIV prevention and care among drug users

6.3 HIV counselling and testing

6.4 The continuum of care for people living with HIV/AIDS and access to antiretroviral therapy

6.5 Prevention of mother-to-child transmission

6.6 Prevention of HIV transmission through blood

Module 7: Managing the AIDS programme

Module 8: Management systems for the AIDS programme

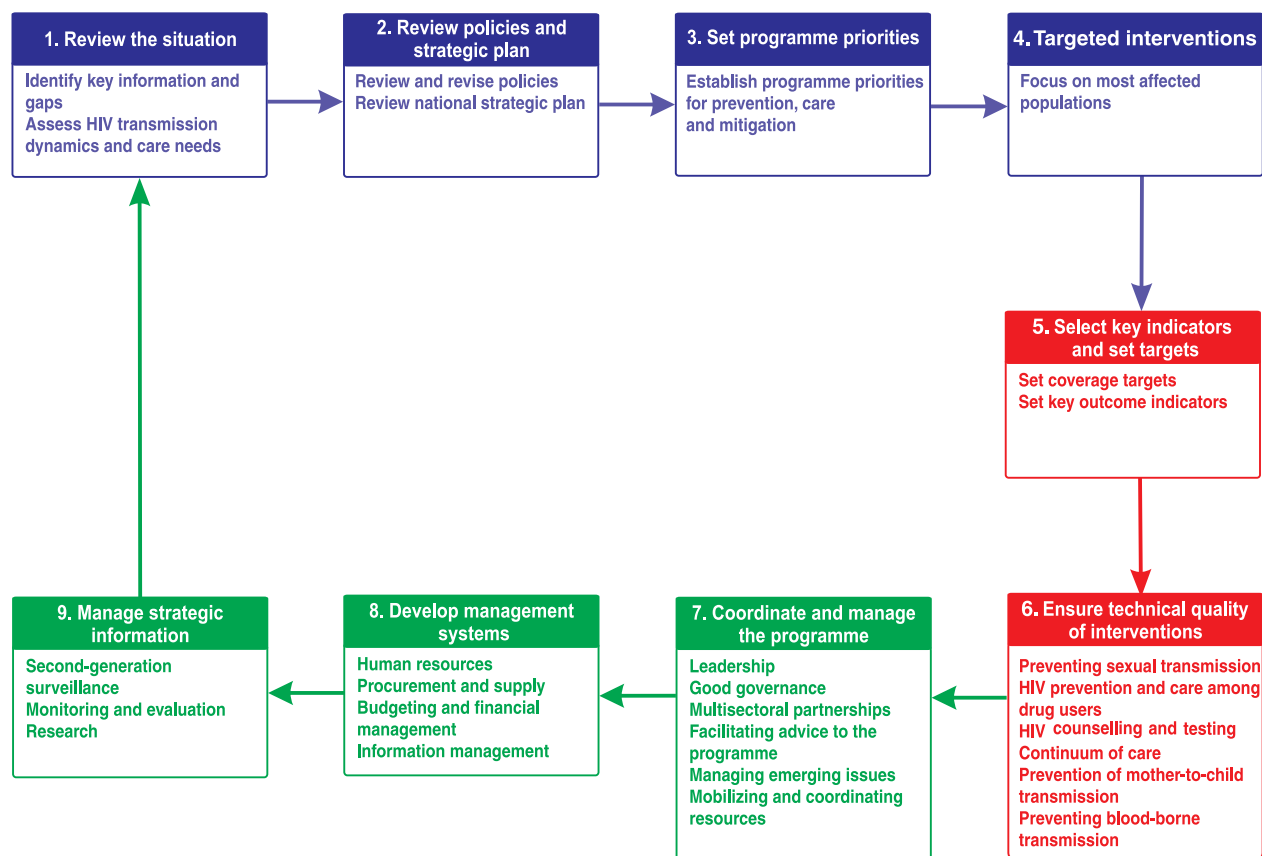
Module 9: Strategic information

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## COURSE THEMES AND THE PROGRAMME MANAGEMENT FLOWCHART

The course modules are divided into three broad themes. The first three training days assist participants to examine the current AIDS situation in their country, using the data and information available to them, and to set priorities, targets and indicators for the programme. The next four days examine the range of prevention and care interventions that are available to programmes and assist participants to adapt what is known about successful interventions to their setting. The final three days focus on the skills and systems required to manage, monitor and evaluate the programme.

This logical sequence is set out in the AIDS programme management flowchart below, and the modules are derived from this flowchart.



**Figure 1.** AIDS programme management flowchart

The AIDS programme management flowchart forms the backbone of the training. Each stage in the management of AIDS programmes is presented as a training module. The flowchart is a continuous cycle – strategic information informs planning policy development; this leads to priorities, approach and target setting, which guides

implementation. Systems are put in place to manage the programme. These assist in monitoring and evaluation, and in the generation of up-to-date information that is fed back into planning. In real life, AIDS programme management is not always in order and many of these processes are happening at the same time in different parts of the programme. This flowchart provides AIDS programme managers with an opportunity to see how these processes can fit together to improve the consistency, quality and effectiveness of programmes.

## DRAFT PROGRAMME

This training course is designed to be delivered over ten training days. Time is set aside at the beginning for a briefing of the group facilitators, usually experienced programme managers from the Region, to familiarize themselves with the materials and to develop a consistent approach to the supervision and mentoring they will provide throughout the training.

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### Facilitator briefing

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Prep Day 1

Prep Day 2

Prep Day 3

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### Week 1: **Training**

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<b>Day 1</b>	08:30–11:00	Official opening Introduction of participants and facilitators Overview of the training
	11:30–01:00	Module: Introduction Establishment of intercountry groups Explanation of training process
	02:00–03:30	Module 1: Situation analysis
	04:00–05:30	
<b>Day 2</b>	08:30–11:00	Module 2: Policy and planning
	11:30–01:00	
	02:00–03:30	Module 3: Determining programme priorities and approaches
	04:00–05:30	
<b>Day 3</b>	08:30–11:00	Module 4: Targeted HIV prevention and care interventions
	11:30–01:00	
	02:00–03:30	Module 5: Setting coverage targets and choosing key outcome indicators
	04:00–05:30	

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<b>Day 4</b>	08:30–11:00	Module 6.1: Minimizing sexual transmission of HIV and other STIs
	11:30–01:00	
	02:00–03:30	Module 6.2: HIV prevention and care among drug users
	04:00–05:30	Site visits
<b>Day 5</b>	08:30–11:00	Module 6.3: HIV counselling and testing
	11:30–01:00	
	02:00–03:30	Module 6.4: The continuum of care for people living with HIV/AIDS and ART
	04:00–05:30	
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<b>Week 2:</b>	<b>Training</b>	
<b>Day 1</b>	08:30–11:00	Module 6.4: The continuum of care for people living with HIV/AIDS and ART (cont.)
	11:30–1:00	
	02:00–03:30	Module 6.5: Prevention of mother-to-child transmission
	04:00–05:30	Module 6.6: Prevention of HIV through blood
<b>Day 2</b>	08:30–11:00	
	11:30–01:00	
	02:00–03:30	Module 7: Managing the AIDS programme
	04:00–05:30	
<b>Day 3</b>	08:30–11:00	
	11:30–01:00	
	02:00–03:30	Module 8: Management systems for the AIDS programme
	04:00–05:30	
<b>Day 4</b>	08:30–11:00	
	11:30–01:00	
	02:00–03:30	
	04:00–05:30	
<b>Day 5</b>	08:30–11:00	Module 9: Strategic information
	11:30–01:00	
	02:00–03:30	Evaluation, planning for country workshops, closing
	04:00–05:30	

Tea/coffee break: 10:30 am to 11:00 am and 3:30 pm to 4:00 pm

Lunch break : 12:30 pm to 1:30 pm



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