

Sida's Support to the Agency for Cooperation and Research in Development (ACORD) to the HIV and AIDS Support and Advocacy Programme (HASAP) in Uganda

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Acronyms

AAPs	ACORD Area Programmes
ACORD	Agency for Co-Operation and Research in Development
AIC	AIDS Information Centre
AIDS	Acquired Immunodeficiency Syndrome
ARVs	Anti-retroviral Drugs
ASOs	AIDS Service Organizations
CAO	Chief Administrative Officer
CBOs	Community Based Organization
CSOs	Civil Service Organizations
DDHS	District Director of Health Services
DRB	Domestic Relations Bill
DRC	Democratic Republic of Congo
EAC	East African Community
FGDs	Focus Group Discussions
FM	Frequency Modulation
FY	Fiscal Year
GIPA	Greater Involvement of People living with HIV and AIDS
HASAP	HIV and AIDS Support and Advocacy Program
HIV	Human Immunodeficiency Virus
ICASA	International Conference on HIV and AIDS and STDs in Africa
ICCPR	International Convention on Economic and Political Rights
ICESCR	International Convention on Economic, Social and Cultural Rights
KI	Key Informant
LC	Local Council
M&E	Monitoring and Evaluation
M&E	Monitoring and Evaluation
MACA	Multi-sectoral Approach
MBADIFO	Mbarara District Forum for PLHAs
MIPA	Meaningful Involvement of People living with HIV and AIDS

MLWHAs	Men Living with HIV and AIDS
NAP	National AIDS Policy
NGOs	Non Governmental Organization
NMSSF	National Multi-Sectoral Strategic Framework on HIV and AIDS
NSF	National Strategic Framework for HIV and AIDS Activities
NSP	National Strategic Plan
NUMAT	Northern Uganda Malaria, AIDS and Tuberculosis Program
OVCs	Orphans and other Vulnerable Children
PC	Partnership Committee
PEAP	Poverty Eradication action Plan
PLHIV	People Living with HIV
PLHAs	People Living with HIV and AIDS
SAN	Stop AIDS Now
SCE	Self-coordinating Entity
SP	Strategic Plan
TASO	The AIDS Support Organization
TAWOLIHA	Tanzania Women living with HIV and AIDS
ToR	Terms of Reference
TRIPS	Trade-Related Aspects of Intellectual Property Rights
UAC	Uganda AIDS Commission
UDHR	Universal Declaration of Human Rights
UGANET	Uganda Network on Law, Ethics and HIV and AIDS
USAID	United States Agency for International Development
VCT	Voluntary Counseling and Testing
VSO	Voluntary Service Organizations

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Executive Summary

Introduction and Methodology

This Report presents the findings of the end of term evaluation of HASAP, which is one of the four Themes of ACORD that was conducted between August and October 2007. The evaluation provides an assessment of the extent to which HASAP implemented its Strategic Plan (SP) 2003–2007, identifies the strengths and constraints encountered, and delineates suggestions on possible areas for HASAP's next Strategic Plan 2008–2010. A qualitative methodology was used in undertaking this assessment in eight ACORD Area Programmes (AAPs) spread out in all the regions, HASAP in Kampala and ACORD Secretariat Nairobi.

Key Findings: Achievements

ACORD's HIV and AIDS thematic programme is spearheaded by HASAP based in Kampala, Uganda that was instituted in 2002; making it the oldest ACORD Theme. In executing this mandate, HASAP has ably registered considerable achievements in implementation of its four major functions of: providing technical support and capacity building to ACORD programmes and partners to mainstream HIV and AIDS; coordinating and facilitating research and advocacy; documentation and dissemination of relevant information and experiences; and acting as a nexus for networking and partnership building. The major highlights of HASAP's achievements include the following:

- Development of research and advocacy strategy for ACORD HIV and AIDS theme including methodologies for research and social action, and trainers within AAPs
- Implementation of capacity building activities to support AAPs and ACORD Themes to integrate and mainstream HIV and AIDS
- Development and dissemination of information about best practices and lessons learned both within and outside ACORD, facilitation of exchange visits and the web based knowledge management through KIC Portal
- Promotion of platforms for raising community voices through training and various advocacy initiatives with a wide spectrum of partner agencies including PLHAs and the media
- Promotion of networking and alliances with other agencies in seeking and enhancing strategic partnership to generate funds and engage in mutual activities
- Support to other organizations to mainstream HIV and AIDS in their work and enhance responsiveness to needs and concerns of organizational members
- Raising the profile of ACORD at regional, Pan African and Global level through research and publications, advocacy and partnerships.

Limitations in the realization of HASAP mandate and objectives

- Clear gaps are evident in the internal mainstreaming where work still needs to be done to popularize the workplace policy as well as sensitizing management and potential beneficiaries.
- Research for advocacy and policy lobbying is an ongoing process to suit the dynamism that characterise HIV and AIDS work. Although an appreciation of HASAP's performance in this area

was registered during this evaluation, clear calls for more work to be done in the various areas of advocacy and policy lobbying using evidence generated by research were encountered.

- Limited capacity of AAPs to engage meaningfully higher level partners including local and central governments, which makes ACORD as an organization often invisible at national levels and by implication HASAP.
- Interventions aimed at developing strategic partnerships for joint lobbying and advocacy and learning are largely limited scope and therefore require strengthening in order to have greater influence at national, regional and international levels.

Lessons—strengths and opportunities

One of the lessons learned which serves as strength of HASAP is in the area of research, which is central to ACORD's strategy and a tool for evidence base regarding programming and advocacy. The strong area of research has contributed greatly to HASAP's strength of resource mobilization outside ACORD.

Stability of HASAP's core team, commitment of staff, abundant will to work and to take a lead in programme design, capacity building through training, partnership building, documentation constitute a lesson to learn from and also doubles as the strength of the Theme.

HASAP enjoys relatively a level of goodwill of partners and donors and as a result benefits from support of external development partners, and indeed making a considerable headway in increasing the level of institutional funding.

Looking Forward: Consolidating the gains and addressing constraints

The evaluation findings have revealed that despite the achievements registered by HASAP, a number of constraints have also been faced. Addressing some of these constraints in the next planning phase will ensure that HASAP consolidates the gains so far registered. These include:

- Inadequate capacity of HASAP especially the human resource capacity compared to the wide area of operation
- Limited capacity of AAPs in terms of human and financial resources. For HASAP to be able to effectively execute its mandate, it requires AAPs with adequate capacity.
- Inadequate application of skills and knowledge imparted by HASAP to other partners
- Implementation of short-term projects that wind up before meaningful impact has been created
- Inadequate cross linkages between and among the four ACORD's themes.
- Communication barriers due to inadequate French and Portuguese literacy capacity in the core HASAP team

ACORD'S Work and Evolution of HIV and AIDS Issues in Africa

With 76% (according to latest UNAIDS Report) of people dying of HIV and AIDS related illnesses living in sub-Saharan Africa, galvanized efforts in the areas of prevention, care and treatment, psycho-social support and capacity building cannot be over-emphasized. Two-thirds (63%) of all adults and children with HIV globally live in sub-Saharan Africa. However, declines in national HIV prevalence are being observed in some sub-Saharan African countries, but such trends are currently neither strong

nor widespread enough to diminish the epidemics' overall impact in this region. Although the epidemic extends into the general populations, it remains highly concentrated around specific population groups—especially transient populations; people in conflict areas, fishermen, pastoralists etc.

It is noted that access to treatment and care using anti-retroviral drugs (ARVs) has greatly increased in recent years, albeit from a very low starting level in many countries coupled with inequitable accessibility and other obstacles to utilization and adherence such as lack of adequate food. There are also new demands for services for prevention of mother to child transmission (PMTCT), male circumcision, microbicide research and other vaccine trials as well as issues for rights promotion especially for PLHAs.

Suggested Areas for Strategic Plan 2008–2010

On the basis of the findings of this evaluation and evolution of HIV and AIDS in Africa, the following areas have been delineated to provide a basis for HASAP's future interventions:

Research, advocacy and lobbying: Research remains crucial and should underlie all the thematic areas undertaken. Research need to precede any intervention to gauge the magnitude of the problem, get a sense of appropriate interventions, provide benchmark data for monitoring and evaluation (M&E) purposes, and also for final evaluation of the impact.

Building strategic partnerships: Following up the old ones: There is no doubt that HASAP has tried to build strategic partnership with different agencies at all levels. HIV and AIDS work demands that these partnerships are nurtured and sustained overtime. For partners that HASAP has strengthened capacity need to be followed and guided further to ensure that the skills and knowledge acquired is put into practice.

HIV stigma and discrimination: Consolidation and targeting the elites:—HASAP and partners have done commendable work in this area, but this is not a one-off occasion. The one year project supported by Ford Foundation on stigma and discrimination helped in starting up the process and activities, which HASAP and partners can continue with so that the full benefits can be realized.

ART and food security: promoting ART adherence: In the ARV studies conducted by ACORD, HASAP in Tanzania, Mozambique and Burkina Faso, the issue of food as a motivator when available for people to seek ARVs and adhere was pronounced. This is an area that calls for advocacy and lobbying. HASAP can also play a role in providing skills to AAPs and partners working with communities on the different aspects that are relevant to food and ARV.

HIV and AIDS in conflict/post-conflict and pastoral situations: There is need for appropriate interventions that entail a symbiotic relationship and synergy among the various aspects of the epidemic—prevention, care and support, and mitigation of the socio-economic impact of HIV and AIDS among transient populations such as those in conflict/post-conflict and pastoral situations such as in Sahel where more work should be undertaken to support sectors in mainstreaming HIV and AIDS.

Cross-cutting activities: These are areas that have emerged in this evaluation, which HASAP will often grapple with. They include:

- Consolidation of achievements over the last five years, developing comprehensive and harmonized interventions to deliver on capacity building and technical support agenda so as to contribute to the ACORD's vision.
- Resource availability will continue to be a key determinant in the adequacy of capacity building, technical support and other interventions which HASAP shall opt to undertake in the next plan period.

- HASAP needs to explore with other thematic programmes interventions to profile highly ACORD's pan-African and international identity and outlook which requires integration with area programmes across Africa.
- Inculcate the spirit of intervention ownership of HASAP by AAPs and strengthening their will so as to contribute to their commitment and catalyze cross learning within the organization and beyond as isolated and scattered impacts are consolidated into sustained social action.
- HASAP's strategy to develop and popularize innovative methodologies which have been field-tested gave the programme its unique character. These methodologies are still important in the programme. HASAP should continue to tap into this knowledge and apply it for influencing the thinking and practice at national pan-African and global levels.

1. Introduction

1.1 Introduction

In August 2007 HASAP of ACORD engaged a team of consultants to undertake its end of term evaluation focusing on the implementation of its Strategic Plan (SP) 2003–2007. HASAP is one of the four Themes that constitute ACORD as an organization. The other three Themes are Gender, Conflict and Livelihoods. Although this evaluation was basically limited to HASAP, reference is made to the other themes as deduced from in-depth interviews with key informants *albeit* not widely. The rest of this Section presents the background and objectives to the evaluation, methodological approach, data collection and analysis procedures as well as the layout of the report.

1.2 Background to the Evaluation

Since the early 1990s ACORD has been working on HIV and AIDS, initially focused on the East African region¹. ACORD now has HIV and AIDS activities across sub-Saharan Africa. Under the ACORD SP 2002–2006, HIV and AIDS was identified as one of the four main thematic areas and strategic priorities for the organization. The key functions of thematic programmes include deepening understanding through research and analysis, enhance learning and sharing of best practices, provide support in methodologies, tools and capacity building, facilitate social action through working with marginalized people, capitalize, share broad experiences and work at different levels for changes in attitudes, policies and practices across Africa through a dynamic approach.

ACORD's approach to HIV and AIDS is based on recognizing the cross-cutting nature and inter-linkages between HIV and AIDS vulnerability and poverty, gender inequality, conflict and other forms of social disruption, and on recognition of the important role of good governance in effectively addressing the epidemic. Therefore, ACORD's overall HIV and AIDS mission is:

- To prevent the further spread of HIV and AIDS in Africa by addressing both the immediate and root causes.
- To mitigate the economic, social and psychological impact of HIV and AIDS on individuals and communities through the provision of effective care and support services.
- Promote equal access to information, services and treatment, and all human rights by challenging all forms of discrimination and social exclusion.

To realize her mission, ACORD through HASAP has implemented activities aimed at promoting and supporting community-led initiatives, through information-sharing, research, networking and advocacy, through partnerships with the public and private sectors and through promotion and support for broader social movements aimed at influencing thinking, policies and practices at all levels. HASAP is a thematic Programme that evolved from ACORD's East African Regional AIDS Program (EAF1), which was established in 1994 to improve responses to HIV and AIDS in 11 programmes in East Africa (ACORD, 2002). The need to transform EAF1 Programme into an organization wide thematic Programme was as a result of two factors; the increasing demand for support by countries outside the East Africa region, and the organizational restructuring of ACORD to shift or to emphasize less of operational focus to capacity support and strengthening, research, advocacy and learning. Two pan-African conferences of all countries involved and ACORD senior management were held in South Africa in July 2001 and in Kampala, Uganda in September 2002, which were aimed at scanning the environ-

¹ Defined here to include Uganda, Tanzania, Rwanda and Burundi,

ment of HASAP's operation, identifying areas of expertise and to position HASAP in areas where it had a niche. HASAP provides strategic coordination of research and advocacy, as well as technical guidance and support aimed at ensuring that HIV and AIDS issues and concerns are mainstreamed in the work of ACORD Area Programmes (AAPs), and to some extent other thematic programmes of gender, conflict and livelihoods. HASAP also works with field staff to identify best practices and disseminate lessons learnt, both within ACORD and with other external stakeholders.

The main goal of HASAP is to promote learning both within and outside ACORD in order to improve responses to HIV and AIDS, and strengthen ACORD's capacity to develop effective partnerships with communities in order to influence thinking, policies and practices at the local, national and international levels.

The specific objectives of HASAP are to:

1. Enhance capacity both within and outside ACORD to integrate and mainstream HIV and AIDS in programme activities and in the workplace
2. Promote research in order to deepen ACORD's and partners' understanding of the social, economic, and political dynamics of the epidemic in development.
3. Promote platforms for community voices at local, national and international levels.
4. Increase sharing of information and experiences on good practices within and outside ACORD.

1.3 Objectives of the Evaluation

1.3.1 General objective

The broad objective of this evaluation is to provide an assessment of the strengths, lessons and gaps that will input into HASAP's New Strategic Plan (SP)—2008–2010. Further, the evaluation aims at providing an opportunity to assess the extent to which HASAP's core functions and methodologies were executed in the last five years, and whether they still remained relevant within the context of ACORD's programming priorities and approaches.

1.3.2 Specific objectives

The specific objectives of this evaluation are spelt out in the terms of reference (ToR) shown in Appendix 3. These include the following:

1. To analyze the extent to which HASAP enhanced the capacity both within and outside ACORD to integrate and mainstream HIV and AIDS in programme activities and in the workplace
2. To assess how HASAP promoted research in order to deepen ACORD's and partners' understanding of the social, economic, and political dynamics of the epidemic in development.
3. To document the extent HASAP promoted platforms for community voices at local, national and international levels.
4. To find out the extent HASAP contributed to increased sharing of information and experiences on good practices within and outside ACORD.

1.4 Methodology

1.4.1 Overall approach

A qualitative approach was employed to assess the extent to which HASAP's set objectives have been achieved during the last five years of implementing the SP 2003–2007. The perspective of ACORD

staff in selected AAPs, staff at the Secretariat, partners within and outside Uganda provided the basis for this assessment. Review of key documents such as the HASAP Strategic Plan 2003–2007, HASAP documents and reports (See Appendix 1) was undertaken and findings triangulated to address the key issues of investigation in the evaluation as provided in the terms of reference.

To gain a deeper understanding of HASAP and ACORD in general the evaluation team worked very closely with HASAP staff in Kampala and Nairobi who, apart from on-spot and ongoing clarification, made a tremendous effort in co-ordinating this exercise especially in ensuring that self-administered questionnaires were delivered and telephone interviews were conducted. HASAP Kampala also provided the translation services for the questionnaires that were returned in French.

1.4.2 Study area and selection of informants

An attempt was made to cover all AAPs by the consultant either through physical visits, self-administered questionnaire and by telephone interview. In consideration of time within which the evaluation was to be accomplished and logistical concerns, field visits were made to the AAPs of Uganda, Tanzania and ACORD Secretariat in Nairobi. Within the AAPs discussions were conducted with staff of ACORD, and focus group discussions (FGDs) held with partners of ACORD. See Appendix 2 for the list of informants, partners and AAPs that responded to this evaluation. A total of six AAPs responded to the mailed self-administered questionnaire while one telephone interview was conducted.

1.4.3 Data collection techniques

Data was collected using qualitative methods that included in-depth interviewing, FGDs, telephone interviews, self-administered questionnaire and desk review of key documents. A desk review formed the basis of in-depth discussions by providing the initial impression to the evaluation team into the activities of HASAP in the last five years, achievements, challenges, gaps and lessons.

1.5 Data Management

Data processing and analysis were conducted simultaneously with information gathering/data collection. Interviews and discussions were verified, compared and contrasted to discern popular emerging content and themes. Processing of data proceeded as follows:

- Review of transcripts to delineate aspects directly relevant to the research questions and objectives of the study
- Preparation of an Analysis Grid showing the major key issues of investigation against the group classification
- Reviewing of data for each specific issue of investigation to extract key quotations, insights, explanations and interpretations
- Using the extracted responses on the specific issues in the Analysis Grid, narrating the findings to develop a summary report, making use of key quotations, cases and explanations.

1.6 Report Layout

This Report is structured under Seven Sections along the evaluation objectives as provided in the ToR. Section 1.0 is the Introduction to the evaluation that outlines, among others, the methodological approach adopted by the evaluation team. Sections 2.0 to 5.0 provide the detailed results of this evaluation; Section 2.0 focuses on Capacity Enhancement for Integration and Mainstreaming HIV and AIDS among AAPs, other Themes and Partners. Section 3.0 presents the evaluation results on Research Promotion as a basis for Advocacy and Policy Lobbying, while Section 4.0 discusses the results on the extent HASAP Promoted Platforms for Community Voices and development of Strategic

Partnerships. Results on Sharing of Information and Experiences on Good Practices are presented in Section 5.0.

Sections 6.0 is a synthesis of Constraints or Challenges faced by HASAP in implementing Strategic Plan 2003–2007 and also picks on Sustainability Issues and Lessons Learned. The final Section i.e., 7.0 is the Conclusion to the Evaluation, and above all in the Section a delineation of possible thematic areas in SP 2008–2010 is made.

2. Capacity Enhancement for Integration and Mainstreaming HIV and AIDS

2.1 Introduction

During the plan period under review—2003–2007, HASAP identified technical support and capacity building for integration and mainstreaming HIV and AIDS, among its core functions. The specific areas of support include training in a variety of skills that combine programming and use of the methodologies that are consistent with ACORD's overall objectives and underlying principles. Emphasis was given in the plan to promoting understanding and increased programming expertise in ACORD's four key thematic areas of livelihood, gender, conflict and, HIV and AIDS. This Section of the report presents an assessment of the extent to which HASAP achieved the above.

2.2 HASAP's Capacity to Strengthen AAPs, ACORD Themes and Partners to Integrate and Mainstream HIV and AIDS

2.2.1 Capacity Building Support to AAPs

Over the planning period, there is evidence of significant progress registered by HASAP in building capacities to integrate and mainstream HIV and AIDS within AAPs, ACORD themes and with partners. During the plan period, HASAP, among others, provided input into the following:

- Burundi's proposal on support for community initiatives to address HIV and AIDS, Gender and social exclusion
- DRC's proposal to develop an HIV and AIDS education programme
- Rwanda in its efforts to develop a project 'The Lost Child Project' in partnership with the David Glass Ensemble Project.
- Strategic planning process for Mozambique in which HIV and AIDS was prioritized as a key theme
- Mbarara programme in Uganda in elaboration of strategies to mainstream HIV and AIDS in the Lake Victoria Area Programme
- Northern Uganda area programme to review progress and devise strategies of consolidating existing work, develop new initiatives

HASAP provided technical support to mainstream HIV and AIDS issues in existing and new interventions in a number of AAPs such Northern and South-western Uganda, Burkina Faso, Ethiopia, Rwanda, Burundi, Angola and Sudan.

In the area of capacity building, HASAP organized a meeting in Kampala to review progress on internal mainstreaming at the workplace. Other items included the review of the Personnel Policy to align it towards HIV and AIDS. There was a meeting organized by HASAP and Stop AIDS Now (SAN) to review best practices in mainstreaming of HIV and AIDS.....this was a moment to share experiences from each other, and review our methodologies (*Technical Advisor, HIV and AIDS, Northern Uganda*)

HASAP provided both technical and methodological support to AAPs on strategic planning, research planning and design, funding applications and other programme reports through on-site field visits, e-mail and/or telephone contact, workshops, guidelines development and the distribution of relevant information. Similar support has been extended to the Sahel 1 since 2005.

I think HASAP has significantly contributed to programme support, I would say it has covered up to 60% of the work (*Area Programme Coordinator ACORD Mwanza*).

One achievement during the planning period is the production of a set of generic Training Guidelines on HIV and AIDS Mainstreaming, first piloted in Eritrea and completing a process of developing a Trainer's Handbook for use with the Training Guidelines.

2.2.2 Support of HASAP to other ACORD Themes

HASAP staff participated in processes for reviewing the ACORD Strategic Plan, defining key priorities for the next strategic plan, and identifying entry points for the different themes, and how they feed into the bigger framework of the Pan Africa Programme. HASAP has played a role in further defining ACORD's Pan Africa Programme on food security and food sovereignty. Notable are two training events on mainstreaming HIV and AIDS into the Food Security and Sovereignty Programme.

HASAP has contributed towards the formulation of the PAP which, within ACORD is the flag bearer and provided a framework for thematic programs to assess the impact of HIV and AIDS on gender and conflict and so on (*ACORD Secretariat, Nairobi*).

In its bid to define the relationship between conflict, HIV and AIDS as well as gender, the ACORD Guinea Program focused its different conflict prevention and management interventions to take into consideration issues of HIV and AIDS in a post conflict environment. The results are reflected in the program's contribution to national efforts and initiatives relating HIV and AIDS and conflict. Uganda and Angola have registered progress in this area as well:

HASAP organized a meeting on conflict; we were able to share the challenges in vulnerability in conflict situation. But we have not yet put in action things/lessons picked (*Key Informant, AAP-Northern Uganda*).

By organizing a "mainstreaming" workshop in Tanzania, HASAP helped the Angola AAP to provide technical incentives to partners and sectors of government to integrate and mainstream HIV and AIDS (*Key Informant, Angola AAP*)

HASAP has helped our area program to see HIV and AIDS as a development problem and mainstream it in all of the program themes. The manager of HASAP during his visit to Ethiopia visited two of our project areas and reminded the project staff including the Senior Management Team to see HIV and AIDS in broader terms and consider HIV and AIDS in the strategy design, implementation and monitoring and evaluation activities of each theme. The HASAP theme has contributed in reviewing our HIV and AIDS strategy (*AAP, Ethiopia*).

2.3 Capacity of AAPs, Themes and Partners to Integrate and Mainstream HIV and AIDS

In countries that have benefited from HASAP's capacity building initiatives since inception of Strategic Plan 2003–2007 considerable work has been achieved as reflected in their own capacity to integrate and mainstream HIV and AIDS.

HASAP facilitated regional workshops on HIV/AIDS mainstreaming in West Africa, targeting ACORD programs and partners in Burkina Faso, Nigeria, Cameroon, and Chad. In the Southern Africa region, the workshop was held targeting Angola and Mozambique staff and partners. This has resulted in the development of trained and skilled cadres within the programs that will facilitate cross-program exchanges and mentoring (*HASAP Team*).

Internal mainstreaming is evident...the policy on internal mainstreaming has been adopted, the only challenge is on keeping the practices vibrant and active...people forget, sometimes when you ask for a report that is when they remember about mainstreaming activities (*Key Informant AAP, Mwanza*).

The capacity building support provided to partner agencies involved in HIV and AIDS has contributed to the technical and institutional capacities of local partners to respond to HIV and AIDS. This is reflected in the greater involvement of the institutions in HIV and AIDS prevention and mitigation and in the effectiveness of their work. Most visible outcomes are evident in Dire Dawa, in Shashemene Ethiopia, Sudan and in Burundi. Depending on own needs, initiatives have focussed on improving capacities in fundraising techniques, leadership skills, project planning and management training, HIV and AIDS communication and information management training as well as advocacy, negotiation and lobbying techniques.

HASAP has strengthened our capacity in terms of mainstreaming to the extent that we have often been approached to act as resource persons to organizations in South-western Uganda that are grappling with the issue of HIV and AIDS mainstreaming (*Key Informant, AAP-Mbarara, Uganda*).

In order to effectively address stigma, the Change Project's Anti-Stigma Tool Kit has been widely adapted by ACORD programmes and partner organizations

Mainstreaming of HIV and AIDS by sector bureaus in Ethiopia and Advocacy work in partnership with CBOs can be attributed to HASAP work. We also are the first to start organizing workshops on issues of workplace policy to labour associations and management members of factories. Now the issue is picked by many organization and labour associations. We also have shared the different manuals prepared by HASAP to partners and consultants and are considered as valuable inputs by many of them (*AAP Ethiopia*).

2.4 Integration and Mainstreaming of HIV and AIDS in AAPs and in the Workplace

2.4.1 Developments towards integration and mainstreaming

Through the plan period HASAP facilitated the process of developing and implementing the organizational workplace policy on HIV and AIDS as well as supporting and inspiring AAPs including Rwanda and Mozambique to start implementing some aspects of the policy. Rolling out the HIV workplace

policy is more evident in Tanzania, Angola and Uganda since 2005. HASAP has also organized forums on HIV and AIDS at the workplace for its staff and provided technical support to other agencies such as The Uganda Catholic Secretariat in developing its policy framework on HIV and AIDS mainstreaming.

There was a workshop which HASAP organized in June last year (2006) in Kampala for focal persons.....I learnt so much from that workshop. I even got information on the different projects HASAP is engaged in (*Key Informant, ACORD Secretariat, Nairobi*).

The year 2006 saw a major landmark, the ACORD HIV and AIDS workplace policy was finally approved by the Board of Directors. Since then, workshops have been conducted for rolling out the organizational HIV and AIDS work place policy currently being implemented in most of the ACORD programs². The SAN project on managing HIV and AIDS in the workplace, targeting 76 NGO in Uganda is one landmark, which has been coordinated by HASAP. Over the last 2 years, 35 NGOs have developed workplace policy guidelines and 10% of these are functional.

2.4.2 Indicators of integration and mainstreaming

Since 2003, there is increased participation of ACORD staff in decisions affecting their welfare and more AIDS competence³. More sections of the organization are now giving HIV and AIDS related issues a thought at individual and program level.

We sometimes organize internal meetings, staff get-togethers where staff talk about or share whatever knowledge they have about HIV and AIDS (*Key Informant, ACORD Secretariat, Nairobi*).

Indicators of mainstreaming of HIV and AIDS in ACORD activities are equally evident at community level; communities that have been reached show more consciousness and AIDS competence. Similarly, there is demand for ACORD's support on mainstreaming of HIV and AIDS into institutional programmes and local government authorities. A case in point is ACORD Tanzania, where the programme has provided support to local governments and partners of Oxfam affiliates.

Local governments have integrated issues of HIV and AIDS in their 3 years development plans. This is evident in the 7 districts we have worked in..... (*Key Informant, AAP-Tanzania*).

Strategic plans of AAPs include an analysis of HIV/AIDS as part of contextual analysis and quite a number make efforts to develop appropriate interventions to address the issues, it was observed.

2.5 HIV and AIDS Integration and Mainstreaming: Constraints and Gaps

There are still gaps in this area which require a more deliberate intervention of the overall leadership of ACORD to streamline and harmonize linkages among ACORD themes. Presently, the support between and across themes remains partly ad hoc, and is based on the interest of the leadership for each theme.

Linkages between programmes are weak.....I think it was a mistake from the beginning to assume that thematic areas would just happen.....it does not just happen (*Key Informant, ACORD Secretariat, Nairobi*).

² Meetings have been held in Kampala for the East and Horn of Africa, Maputo for the southern Africa regional and Djamena for the West Africa region

³ AIDS competence refers to the ability of all sections of the agency or community to recognize the reality of HIV and AIDS, analyze its causes and consequences, and take appropriate actions to prevent its spread and mitigate its effects

I think in terms of strategic planning and direction, each theme is doing its own thing. The closest we came to having some kind of alignment in terms of themes was one time when the strategic managers decided to sit together and say ‘we need to figure out where we are going as a team’ (*Key Informant, ACORD Secretariat, Nairobi*).

The challenge to realize effective organizational synergies is largely an issue for the Secretariat to handle. It was however, suggested that deliberate arrangements for formal institutional alignment be put in place to replace current practice.

Building a civil society in Africa is a long process; we need to have a plan. It is time now we think more strategically. It is not only the centre to support the theme but the theme is part of the centre (*Key Informant, ACORD Secretariat, Nairobi*).

A number of other gaps in extent of integration and mainstreaming were revealed in this evaluation. For instance, some AAPs consider their interaction with HASAP in capacity building to have been inadequate. Some of the activities in this area were confined to a few partner agencies in the AAPs. This accounts for the wide differentials in levels of integration and mainstreaming within AAPs and among partner organizations.

The Sahel Region has really lagged behind especially with regard to mainstreaming, although now they appreciate the need to mainstream HIV and AIDS given the pastoralist nature of the communities in the region (*Key Informant, HASAP Kampala*).

The fact is that Sahel has not yet undertaken substantial work including advocacy efforts. The previous operational system made it difficult to implement the themes, but a new organizational structure has been enforced (*Key Informant, Sahel 1*).

In terms of internal mainstreaming, work still needs to be done to popularize the policy, sensitize potential beneficiaries at different levels of ACORD. Partly, lack of sufficient staff capacity at HASAP is blamed for some of the gaps in full attainment of objectives. As mentioned elsewhere the human resource of HASAP is considered inadequate as some informants argued that same person has to travel to Burkina Faso and Mozambique and at the same time s/he is looking at what is happening in East Africa, West Africa etc. in terms of government policy. The above is coupled with financial difficulties especially when resources for specific short-term projects run out.

3. Research Promotion as a Basis for Advocacy and Policy Lobbying

3.1 Introduction

HASAP planned to tap into and build on ACORD’s technical expertise to promote research as a basis for advocacy work, to strengthen the evidence base for program work and policy lobbying at national, pan-African and other levels with other actors in this process. Research and advocacy work was to be shared both within and outside ACORD. This Section presents an assessment of how HASAP promoted research in order to deepen ACORD’s and partners’ understanding of the social, economic, and political dynamics of the epidemic in development, contribution in generating new knowledge as well as constraints to the attainment of this objective.

3.2 HASAP's Implementation of its Research Agenda

Throughout the five year planning period, HASAP has undertaken deliberate steps to promote research as a tool for advocacy and policy change. There is evidence of an advocacy mapping exercise, research and advocacy strategy, an internal ACORD staff survey and feedback from staff about what they regard as the key priorities for ACORD's policy.

Specifically, there was a case study commissioned on mainstreaming basing on ACORD Tanzania's experiences, documented and circulated widely, including its presentation at the International Conference on HIV and AIDS and STDs in Africa (ICASA) in a satellite meeting co-hosted with SafAids and Voluntary Service Organization (VSO). At field level, is a social study on stigma and discrimination with the Northern Uganda Area Programme. The findings have since been used for advocacy at the district level, and into debates at higher levels.

ACORD Botswana, with input from HASAP, developed a proposal and later executed a study for assessing the extent to which Government's ARVs intervention had been accessed by people living with HIV and AIDS (PLHAs), and how it could be rolled out⁴. HASAP in 2004 also published a research study on "Unraveling the dynamics of HIV and AIDS related stigma and discrimination, basing on research conducted in Burundi and Northern Uganda Area programs". This publication was launched in Bangkok, Thailand in July 2004 during the 15th International Conference on HIV and AIDS, in a satellite meeting organized by AMREF. HASAP also supported ACORD Tanzania to conduct a KAPB baseline research as part of a new initiative to start HIV and AIDS activities among the Masai Pastoralists in Ngorongoro District, Tanzania.

In Tanzania we have been doing a lot of training in Action Research.....we conduct studies in the communities, share and disseminate our findings at all levels to obtain feedback and contribution of various players after which we use the information to influence policies (*Key Informant, AAP Tanzania*).

Other research projects developed and supported by HASAP which targeted members of poor and marginalized groups and communities, such as the pastoralists in Namibe province in South Angola, displaced people in Gulu Northern Uganda, HIV and AIDS widows and poor agriculturalists in Mwanza Tanzania were successfully executed.

During 2005 and 2006 comprehensive studies on ARVs were undertaken in Burkina Faso, Tanzania and Mozambique respectively. During 2007 the three studies were published into a Compendium Report. Largely therefore HASAP has made considerable strides towards fulfilling its research agenda.

3.3 Contribution of Research to Advocacy and Programming work of ACORD

Foremost, understanding and addressing HIV and AIDS-related stigma and discrimination constituted one of the main focuses of HASAP's research and advocacy activities. Notable outcomes include the increased awareness and recognition among communities, policy-makers, formal and traditional health workers and other service-providers in Uganda, Tanzania, Burkinana Faso, Burundi and elsewhere of the existence of stigma and discrimination. There have also been increased understanding of the adverse social, economic and psychological impact on PLHAs.

The work on "gender and HIV and AIDS" specifically focusing on the use of 'stepping stones' methodology is promising. A number of positive changes have been noticed in this evaluation. For example, domestic violence against women declined in Angola and among the Lukobe community on the

⁴ ACORD Botswana's research on "Assessing the implementation of prevention of mother to child transmission (PMTCT) and anti retroviral (ARV) services: the role of NGOs" was completed and disseminated.

outskirts of Mwanza in Tanzania; condom use increased among the youth in all participating countries; demand for voluntary counselling and testing (VCT) services went up; PLHAs have gained more confidence to go public in Tanzania. Also, the demand for more training in stepping stones for community facilitators is evident. Other cases of success are also cited elsewhere.

The achievements derived from the study on knowledge, attitudes, practices and behaviours are evident. The research was relevant for project implementation and has been a basis for some government institutions such as the health sector to promote condom use as well as the Ministry of Family and Promotion of Women (*Key Informant, Angola, AAP*)

Sahel1 carried out a research on the access to ARVs in Burkina Faso. The results of this research were shared in international meetings and large posters were produced. The project being implemented on the decentralization of services and the promotion of rights of PLHAs through the media in the provinces of Kadiogo (Ouagadougou) and Nahouri (Pô) is following up on the results of this research. After the pilot phase, we will look into how to roll out these experiences (*Interview Extract, Sahel 1*)

HASAP has used research findings to do advocacy at various international forums such as ICASA in Nairobi and Nigeria; Bangkok and Toronto international AIDS conferences.

3.4 Contribution of Research into Programme Development and Organizational Learning

The studies conducted under HASAP have had noticeable contribution within AAPs in programme development. In particular, studies on understanding the dynamics, challenges, barriers and lessons in providing ARVs and others conducted in Burkina Faso, Tanzania and Mozambique have generated important lessons for organizational learning. The studies serve as awareness raising tools in the populations concerned, and beyond, and also as evidence for any prospective HIV and AIDS interventions in the different contexts.

Results of several studies have guided programming and advocacy in the different ACORD programmes. For instance, results of studies conducted by ACORD in Sudan, focused on prisoners, female sex workers, truck drivers, and tea sellers were disseminated during a partner and policy makers' meeting in Khartoum. The outcome was that a commendable cooperation between ACORD and the Sudanese health authorities was developed and the latter are now more open to engage with ACORD in HIV and AIDS activities. Elsewhere, training of facilitators on the prevention of AIDS is one of the main achievements in most of AAPs.

The research on stigma and discrimination conducted in Burundi, Uganda and Tanzania informed the multi-country project on empowering PLHAs to advocate for their rights, and in particular fight stigma and discrimination.

3.5 HASAP's Contribution in Generating New Knowledge and Methodologies in the Global HIV and AIDS Sector

Since 2004, use of participatory methodologies like the *Stepping Stones*⁵ and *Social Exclusion Analysis* as well as the adaptation of rights based approaches to working with communities has improved the community's understanding of HIV and AIDS-related problems. For instance, in Mozambique, the involvement of men as community activists indicates this change.

Good practices were documented on AIDS Competence in the work place (ACORD Northern Uganda and Concern's experiences in Uganda). The final report was published and posted on the ACORD website as well as being distributed widely to ACORD programmes and partners. INTRAC also posted this publication on their website (HASAP Team).

The plan period also saw the completion of the Comic Relief funded pilot project on integrating gender into community based responses using the *Stepping Stones* approach, which was implemented in Uganda, Tanzania and Angola. Overall, the project demonstrated that it is possible to change gender dynamics associated with increased susceptibility and vulnerability to HIV and AIDS, especially for women, all consistent with ACORD's broad principles and approach

Stepping stones community has taught me about the dangers of living a reckless lifestyle..... (*Stepping Stones community – Lukobe, Mwanza, Tanzania*)

The involvement of the community leaders in the Stepping Stones advocacy committees has resulted into a situation where concerns of communities in target areas come to be known by those who hold power of decision-making (Key Informant, Angola, AAP)

We came together formed CARPP to promote stepping stones.....as CARPP we have trained 84 new members and they have formed their own groups to train others in stepping stones skills. We were trained by ACORD, and partners to gain skills in communicating to communities on arising issues especially HIV and AIDS.....the training helped us see the HIV and AIDS problem in a wider perspective; it helped promote behavior change.

Because of skills from stepping stones, we now have skills to counsel and refer people to hospitals for HIV testing. We do this in 4 sub-counties. We also offer IEC materials like Straight Talk, Young Talk, Parents' Talk, we distribute condoms to those in need. Stepping stones has given us skills of talking to people. ACORD is our lead NGO, it gives us trainings, supports us in all ways, they do most of the lobbying for us; most the proposal writing is done by ACORD (Members of Community AIDS Resource Persons of Pabo (CARPP), Gulu Uganda)

The *stepping stones* methodology has now been absorbed by local trainers, activists, teachers and others in several AAPs.

3.6 Research for Advocacy and Policy Lobbying: Constraints and Gaps

There are calls for more work to be done in the various areas of advocacy and policy lobbying. Arguments have been made that HASAP needs to raise its visibility much more in this endeavor, cut its niche as a programme taking a lead in challenging any policies, programmes and practices that infringe on the rights of marginalized and poor people.

⁵ "Stepping Stones Methodology" is a participatory method which seeks to transform gender roles and create more gender-equitable relations and equip users with communication skills to deal with sensitive issues such as sex, death, and HIV AND AIDS.

At regional and Pan African level, we are looking at the question of financing of HIV and AIDS programs. This is why some of our advocacy we have done has focused on the protocols signed at Pan-African level under the aegis of the African Union (*ACORD Secretariat, Nairobi*)

HASAP should be seen to strengthen its evidence base in challenging governments and other actors, and making a strong case for reform. Participants in this evaluation argued that research to inform policy is not sufficient, but recognized that HASAP had done a lot in terms of action research but not going beyond to tackle issues of policy research in order to do effective advocacy work

HASAP has done a lot of research especially to enhance the capacity at national level, and to publish and disseminate as a continuum of advocacy to influence policy.....this has gone on well. The gap remaining is to be more active to influence policy at national level because it is not enough to simply publish and disseminate (*ACORD Secretariat, Nairobi*).

One way to take on this endeavour more strongly is to build the internal resource capacity for the challenge, but HASAP's limitations embedded in its human resource capacity were often cited as a critical issue if HASAP were to deliver to expectations.

Conducting research for purposes of policy advocacy is a key aspect for which ACORD is known. This role lies more with the HIV and AIDS thematic area; however in the past Strategic Plan, Nairobi Secretariat observed that research has been externally sourced and executed and hence the need for ACORD to boost its research capacity. Whereas this is a valid observation, it has to be recognized that what is more critical is the ability and competence of the organization to conceptualize priority research areas and apply the research findings to further the organization's mandate but not necessarily to conduct the research itself. From the interactions between the evaluators and HASAP staff, we conclude that the current HASAP staff has adequate capacity to conceptualize the kind of required priority research, the methodologies to be applied, to review and make sense of research reports, and finally to apply the research results. We need to also add that organizations involved in development work often do outsource researchers in the spirit of partnership, but more fundamentally to free the organizations' staff for more strategic thinking and implementation of activities instead of getting bogged down in data collection, its management and analysis as well as report writing. Nonetheless, this does not imply that initiative should not be taken to maximize on available competences across other themes within ACORD to fill any gaps in the area of research. The alternative is to bring in more competences within the theme itself.

We expect HASAP to be very good research and advocacy body and to have the capacity to build on those four programs, the people, and the focal points in our programs and to partner at program levels. If we do not have people inside with capacity building, then we need research and advocacy building (*ACORD Secretariat Nairobi*)

We need to point out also that other voices in corroboration with evaluators' assessment were less critical of HASAP on this, instead calling for partnerships with different institutions with the capacity to mutually reinforce the work of ACORD in the spirit of collaboration as long as the research agenda is internally conceptualized and results from research are fully owned and utilized to bring the necessary policy and practice changes spearheaded by ACORD.

On advocacy, however, there are strong opinions that HASAP has not underpinned research and advocacy as an area of institutional capacity. A lot of research has been done but is needs to be underpinned as well as an institutional tool, less as simply part of a program.

4. Promotion of Platforms for Community Voices and Developing Strategic Partnerships

4.1 Introduction

Building and promoting platforms for community voices at local, national and international levels has been (and remains) a core function of HASAP since its inception. HASAP intended to strengthen the capacity of individuals and communities infected and affected by HIV and AIDS to articulate their needs, demand for services and hold actors accountable. Partnership building at strategic levels with agencies including associations and networks of PLHAs, government, civil society including the media were earmarked as key entry points. This Section presents an assessment of the progress and achievements in this endeavour.

4.2 Enhancement of Social Action by HASAP's Work

Since its inception, HASAP has made efforts to promote platforms for community voices in advocating for more responsive programmes and policy at different levels.

ACORD has given us platform to speak; we used to be voiceless, even myself, I could not speak out in public until they invited me here.....the district used not to know us but now we are considered as important people (*Gulu Network of PLHAs, Uganda*).

As part of the World AIDS Day campaign HASAP facilitated ACORD Mozambique in collaboration with Kuyakana (the women's PLHA association in Mozambique), to hold a live television talk show where views about stigma and discrimination were shared (*HASAP Team*).

In raising voices, HASAP has registered salient achievements. For instance, since 2006, ACORD Tanzania's advocacy interventions at district level have been linked to national level advocacy through ACORD's participation in the Working Groups of National NGO Policy Forum, and Mwanza Policy Initiative (MPI). The Tanzania program has also given support to advocacy work of associations of PLHAs such as TAWOLIHA and SHDEPHA through facilitating them to attend national events as well as PLHAs network planning workshops.

ACORD has linked us to very many places from within and outside.....we are now well known. Because of that exposure, we are now getting money from Global Fund (*Key Informant, TAWOLIHA*).

A review of Policies and Legal Provisions relevant to fighting Stigma and Discrimination against People Living with HIV and AIDS in Uganda was carried out in 2006. KABP study findings as well as the stigma and discrimination reports were disseminated in the communities where the research was carried out, a process that consequently enabled the community members and their leaders to engage in discussions on how best to address HIV and AIDS related stigma and discrimination (*HASAP Team*).

The networks of PLHAs have been strengthened and others revived for better advocacy of rights of PLHAs. HASAP and partners have reported stimulation of discussion and interest in national HIV and AIDS policies by PLHAs, civil society and members of the public. Exchange programs have been carried out between the networks of PLHAs in some places

Efforts to create a platform are evident.....people are coming up with an organization for advocacy to advocate for the rights of the people living with HIV and AIDS

(Key Informant, AAP-Tanzania)

HASAP has participated in various international Workshops and conferences in which senior officials from health sectors and local and international NGOs working in Ethiopia have attended. In these workshops/conferences HASAP has got chances to voice its concerns. Currently we have observed the growing interest of GOs and NGOs to engage the community in designing policies and guidelines as well as giving space for the community in their prevention and mitigation programs. The platforms are valuable to community voices *(AAP Ethiopia)*.

HASAP has partnered with the media, not as commercial entity but as a constituency that is also affected by HIV and AIDS, and getting them to buy in the agenda of addressing the epidemic. It has worked quite well; airtime is given to several AAPs *(ACORD Secretariat, Nairobi)*.

In Northern and Western Uganda, and in Tanzania, involvement of the media in joint training with PLHAs led to the developing of a relationship between two actors that were previous adversaries. This led to the media being used as a tool and forum for sensitization of the public on HIV and AIDS stigma and discrimination.

ACORD gave us the idea of forming a journalist club where we would specifically focus on issues of HIV and AIDS as our day to day reporting.....the aim was to remind everyone that HIV and AIDS is here for all of us to fight from all corners *(Key Informant, Mwanza Press Club, Tanzania)*.

As part of policy lobbying, important links have also been established with different media houses, especially in Uganda, Tanzania, Mozambique and Burkina Faso so that they can begin to work with PLHAs to raise their voices, especially in advocating for their rights and creating an appropriate legal and policy environment that guarantees the rights of PLHAs *(HASAP Team)*.

There is evidence of a strengthened role of the civil society in facilitating thinking, policy and practice changes in different countries.

In the past, they used to plan without involving us and including our issues of HIV and AIDS, this has changed, we are included and when you write a proposal and it involves people living with HIV and AIDS, it is respected very much *(Key Informant, TAWOLIHA)*.

At regional level, the East African Community has approached us as a partner and we have participated in designing their strategic plan for the five countries in the region. We are also spearheading the development of the East African network of PLHAs, we are coordinating efforts and shall be taking five PLHIV to the East Africa secretariat *(ACORD Secretariat, Nairobi)*.

ACORD partners, including PLHA associations are active in challenging policies and laws in countries like Tanzania and Burundi such as those on intentional spreading of HIV by an infected party. Reports at HASAP show in Sudan as elsewhere, ACORD's advocacy efforts for more sensitive HIV and AIDS policies have led to an improvement in the political commitment by leaders to deal with the epidemic.

HASAP has created space and opportunities for PLHAs to participate in forums for raising their voices, for instance Maputo Pan Africa conference in 2005; World Social Forum in Nairobi 2006; Experiential learning visit to Treatment Action Campaign (TAC) in South Africa in September 2007; recent engagement with the EAC in Arusha–October 2007.

4.3 Contribution of ACORD's Advocacy and Lobbying Activities

There might not be tangible policy that has emerged but we have signs that our advocacy has yielded results.... issues have been highlighted, people have listened and the media has picked some issues and made them their own and followed up even without the direct involvement of ACORD or PLHAs. This has happened in Uganda, Tanzania, Mozambique, Sudan and Burkina Faso (*ACORD secretariat, Nairobi*).

There is evidence of HASAP's contribution in this area. PLHAs have increasingly become visible in a number of advocacy events/processes. Largely from HASAP's work, in a number of communities such as Kingabwa Region in DRC, there is an increase in the number of registered PLHAs. Due to ACORD Burundi and civil societies' advocacy efforts, a committee was appointed to look into a law involving the protection of PLHAs who are also represented. This is nearly the case elsewhere:

We have been to three sub-counties giving oral testimonies about HIV and AIDS..... we also recorded some which we played on Radio Mega for communities to know that the problem is still with us (*Gulu Network of PLHAs, Uganda*).

In various area programmes in Mozambique, Uganda and Tanzania, ACORD organized training sessions for the leaders of decentralized governance structures as well as with partners from the civil society in order to exchange views on the scourge of HIV and AIDS..

I have attended some training on good governance.....good governance is related to policy making (*Key Informant, Mwanza City Council, Tanzania*).

As revealed in Tanzania and Sudan, working in partnership with city council and local government authorities and linking associations of PLHAs to various levels of government has led to more genuine representation of marginalized groups and promoted dialogue on HIV and AIDS responses at local, district and even national level. Support to AIDS CSO networks at different level has contributed to strengthening CSO advocacy capacities.

Capacity of CSOs has been built through training.....CSOs have been trained on how a network works and how it can be strengthened (*Key Informant, Mwanza City Council, Tanzania*).

In the implementation of water irrigation project the donor imposed the use of the foot bombs for the water catchments from the sources in order to fill the tanks. However, ACORD argued that a good number of the beneficiaries were PLHAs who could not have enough energy and physical strength needed to fill the tanks. The donor reconsidered this and installed some water tanks in all project sites. This way, it ensured that the project beneficiaries' health was not degraded as a way of having to make a physical effort to fill the tanks, which allowed them to water the gardens (*AAP, Mozambique*).

Use of ART is one of the issues the CBOs took part and were able to convince the government authorities to its free distribution. Another outcome of the advocacy work in the mitigation program is UN agencies like WFP and UNICEF are providing support to PLWHA and OVC through CBOs. This idea of engaging the community in prevention and mitigation programs were partially the initiatives of HASAP (*AAP Ethiopia*).

As a result of advocacy, there has been evidence of rethinking of policies that address or impact on HIV and AIDS including appointment of ministerial committees formulated by authorities at state level to work on HIV and AIDS in Tanzania.

As part of the ACORD Global programme and a major focus on increasing access to treatment services for PLHAs, HASAP has already started its advocacy process for the Food Sovereignty Program with research conducted in three regions in Africa (*HASAP Team*).

At Global level, we have worked with UNAIDS and UNICEF to launch a campaign for an HIV free generation to underline the need to ensure that countries develop policies that will match the challenge that is actually a development one.....and to ensure that policies across development agencies globally are in tandem with policies being made in the Africa to deal with HIV/AIDS (*ACORD secretariat, Nairobi*).

4.4 Contribution of ACORD's work in Promoting the Quality of Life for PLWHA

4.4.1 The role of ACORD in fighting stigma and non-discrimination

Among the landmarks of HASAP's work in promoting the quality of life for PLHAs is the initiation of a project for empowering PLHAs to advocate and fight for their rights, and in particular fight stigma and discrimination. This was a one year pilot project funded by the Ford Foundation in 2006, and implemented in Uganda and Tanzania, Sudan, Burkina Faso and Mozambique.

Whenever there is training, they call us to attend.....we are still a young organization, they have called us to train for every new thing we need to learn (*Key Informant, TAWOLIHA*).

With support from HASAP, we lobbied the media to dedicate some air time for the Stigma and Discrimination project in five community radios. An open space was left in order to allow the public to dialogue with the PLHAs and in most cases the listeners declared not believing in the testimonies by the members of ACORD partner Associations of the PLHAs that were the figures in the Radio and Television (*Key Informant, AAP Mozambique*)

4.4.2 Promoting PLHAs equitable accessibility to services including ARVs

HASAP has done work in raising understanding of the dynamics, challenges, barriers and lessons in providing ARVs. Research studies conducted in Burkina Faso, Tanzania and Mozambique are being used as basis for advocating for equitable ARV provisioning in respective countries. From the lessons drawn from this study, HASAP has embarked on advocacy efforts to demonstrate that it is imperative that ARV programmes in Africa.⁶

As ACORD Gulu, we do advocacy to ensure that PLHAs are linked to nutritional support and that they remain on the list of beneficiaries, we also push for establishment of many food distribution centres as a way of reducing the vast distances PLHAs have to travel (*Key Informant, AAP – Northern Uganda*).

ACORD brought together the Community Leaders, Officers from the Ministry of Health, Journalists, with the members of the Associations of the PLHAs to debate the basic legislation that protects the fundamental rights of the PLHAs. (*Interview Extract from AAP, Mozambique*)

⁶ see *Free ARV Programme in Tanzania: The Teething Challenges* an ACORD HASAP release

4.4.3 ACORD's role in mitigation of the social and economic impact of HIV and AIDS

As a direct result of ACORD's interventions in various country programmes, there is notable contribution in income generating activities (IGAs) and thereby an improvement in the livelihoods of people affected or infected by HIV and AIDS. Clear examples of this exist among orphans through their associations (POCAs) in Mbarara, Uganda. ACORD Uganda area program has supported AIDS affected orphans to access educational services, providing them with uniforms, school bags, books, pens and mathematical sets. Other OVC have been trained and supported in building and construction, tailoring, driving, carpentry and joinery.

Whereas communities that have benefited from HASAP's programmes are appreciative of the program's contribution, they would like to have more support, perhaps focused on economic empowerment for mitigating the effects of the epidemic among affected communities:

The support we are getting from ACORD so far is limited to advice; training on stigma and discrimination... we get knowledge only (*Key Informant, HIPWA – Association of women living with HIV and AIDS, Mwanza, Tanzania*).

We have been empowered enough to speak out; what is remaining now is economic empowerment, our people know how to live positively, advocate for their rights but they are poor (*Gulu Network of PLHAs, Uganda*).

4.5 Visibility of ACORD in HIV and AIDS Related Advocacy at Regional, Pan Africa and International Levels

Available reports show that since the beginning of the Strategic Plan period, HASAP's activities have gained more visibility at different levels. During 2003, HASAP worked with the UK Consortium on AIDS and International Development and contributed to the Consortium's Advocacy Forum. ACORD also attended and contributed to various events organized by the UK-wide STOP AIDS Campaign; signed up to the global microbicides campaign and submitted its views; and signed up to the ARVs access campaign for Southern Africa. HASAP also contributed to a publication "Working Positively: A Guide for NGOs managing HIV and AIDS in the workplace", which was coordinated by the UK Consortium on AIDS and International Development.

From 2003, HASAP developed links with the Oxfam International on common issues of interest, for learning and advocacy. A partnership framework was developed beginning with documentation of ACORD experience on mainstreaming as a starting point. The period also witnessed development of relationships with organizations in the Netherlands such as Stop AIDS Now, Royal Tropical Institute, CordAid, and ICCO. Earlier, HASAP had co-facilitated a workshop for Stop AIDS Now partners in Sudan and participated in the Netherlands World AIDS Congress. Links with new organizations including Cordaid partners in Uganda and Tanzania, and Concern Worldwide are on record too.

4.6 Strategic Partnerships with pan-African and Other Key Actors Globally

There is evidence of links with other organizations in Africa, UK and the Netherlands, and efforts to establish links with new organizations. Some earlier mentioned include the UK NGOs Consortium on AIDS and International Development, Stop AIDS Now in the Netherlands, Cordaid partners in Uganda and Tanzania, and Concern Worldwide.

For most of 2005, HASAP made efforts to execute its mandate in a context characterized by an increasing global epidemic, increasing recognition of HIV and AIDS as a development issue, integrated in a number of global initiatives such as the Africa Commission, and campaigns such as Make Poverty History; and enhanced efforts to provide care and treatment, including ARVs treatment for PLHAs, in line with the 3 by 5 initiative.

4.7 Contribution of Partnerships in Profiling ACORD Externally

HASAP contributed ACORD's experience with external mainstreaming to the inter agency book on "Mainstreaming AIDS on the Agenda: Adapting Development and Humanitarian programs to meet the challenges of HIV AIDS". The book was published by Oxfam GB, Save the Children's Fund UK, and ActionAid. HASAP also wrote a case study on the process that ACORD has so far gone through to formulate a workplace policy, highlighting the lessons learnt and challenges involved.

HASAP has helped ACORD get known.....they keep organizing sharing sessions in different countries... it helps us get together and share experiences (*Key Informant, AAP – Northern Uganda*).

Similarly, the UK Consortium on AIDS and International Development coordinated a process of documenting experiences from NGOs and the private sector that have developed workplace policies, and ACORD was part of this process. A publication entitled 'Working Positively: a Guide for NGOs managing HIV and AIDS in the Workplace' was produced.. Such initiatives opened doors for other Kinds of collaboration with the other agencies involved including, Oxfam, SCF, VSO, Amref, UNICEF, Cafod, ActionAid and the HIV and AIDS Alliance. Notable has been the development and implementation of institutional partnership between HASAP and Sida, The International HIV and AIDS Alliance and SAN, and the East African Community (EAC).

HASAP has continued to collaborate with Oxfam International, The Salvation Army, PSI, the International HIV/AIDS Alliance, ICCO, Kit (Netherlands), Concern Worldwide, Terre Des Hommes, REPSSI, Actionaid UK, Christian Aid, VSO, IPPF, Action Aid Great Lakes regional programme and Cordaid partners in Uganda and Ethiopia, CIDA, UK AIDS Consortium, Ford Foundation, and others. Links were developed with national and international PLHA associations e.g. ICW, NZP+, REGIPV, and others. (*HASAP Team*).

4.8 Developing Strategic Partnerships: Constraints and Gaps

The major criticism relates to the small scope of interventions, covering one or two communities with little influence at national and broader levels. Internally within ACORD, there have also been concerns about HASAP's work in relation to other thematic areas, and the extent to which the work of HASAP falls within the overall framework and strategic vision and direction of ACORD as a whole, although not everybody concurred with these sentiments:

There could be much criticism about HASAP which is not helpful.....if we do not learn from HASAP's experience, other themes of gender, and conflict may not pick up. So HIV and AIDS still remain very fundamental, we need to give it more attention in terms of resources (*Key Informant, AAP – Tanzania*).

Other participants, especially the local communities that have interacted with and benefited from HASAP suggested to the Evaluation Team that HASAP should devise ways of scaling up her programmes, best practices and methodologies to benefit wider communities and partner organizations:

ACORD should visit us at least after every one month so that we talk and discuss our problems, then they advise us (*Key Informant, HIPWA – Association of women living with HIV and AIDS, Mwanza, Tanzania*).

ACORD should always support us in a situation where our district is not giving us any support. We can for instance be helped to write funding proposals by ACORD so that we generate our own funds to disseminate HIV and AIDS messages and provide support to our members (*Key Informant, Mbarara Forum for PLHAs*).

It is not about HASAP going out side talking about HIV and AIDS, but about building a momentum internally in ACORD in all those programs, other respondents during this evaluation argued. The idea is to generate the voice of the people affected with HIV to be able to act. HASAP has got a rational role to create the capacity to build a bigger momentum level at PAN Africa level.

5. Sharing of Information and Experiences on Good Practices

5.1 Introduction

During the five year period, HASAP planned to provide guidance in the promotion of sound organization policies and practices as they relate to HIV and AIDS which include production of good practice guidelines, developing training guidelines on HIV and AIDS, organizing training workshops, conducting annual visits to programs developing special briefings, preparing of position papers, developing organizational policies, and developing a resource pack, as well as annual pan Africa forums to share lessons and experiences. In this section, an assessment is made to document the extent HASAP promoted platforms for community voices at local, national and international levels.

5.2 Good Practices and Lessons Learned in ACORD's HIV and AIDS Work

Since 2003, HASAP has developed a synopsis for programmes' HIV and AIDS work. HASAP has continued to provide relevant literature and publications on HIV and AIDS to programmes, and circulated newsletters from partner organizations as a way of contributing to the knowledge base of the staff on HIV and AIDS.

In 2004, HASAP presented ACORD's approach to HIV/AIDS mainstreaming for members of UK Consortium on AIDS and International Development. ACORD's HIV and AIDS mainstreaming approach was also shared with Oxfam International (OI) partners in Nairobi in the same year (*HASAP Team*).

HASAP is one of the thematic programmes that shares a lot of information.....
despite their distance from the Secretariat, they extensively share information
(*Key Informant, ACORD Secretariat, Nairobi*).

A number of good practices and lessons learned have been shared in various ways and forums beyond reports and publications, through cross learning visits, electronic and print media. Recently sharing has been optimized with the establishment of an online interactive site focusing on stigma and discrimination through the Oxfam KIC Portal⁷.

⁷ This is a multi-sectoral virtual learning network to share best practices, interrogate bad practices and develop adaptable approaches to combat stigma in AIDS interventions in the private sector, government institutions and the civil society. It is hosted at Oxfam as www.oxfamkic.org. The community on stigma and discrimination for Uganda and Tanzania is coordinated and moderated at HASAP

The KIC portal as a learning platform envisages establishing and maintaining a networking framework for experiential learning on stigma amongst ACORD and Oxfam partners in Tanzania and Uganda. The initiative provides space for community-learned knowledge on AIDS related stigma and its consequences on response to AIDS communicated and applied in specific contexts in the region through “a learning-sharing and feed back” cycle. The initiative provides opportunities for interactive learning amongst public and civil society organisations including associations of PLHAs and the media. It also provides space for cross-learning amongst participating organizations on the ways they have coped and or combated stigma in their HIV and AIDS programmes or even in their relationship with the infected and affected. Sharing experiences through innovative joint learning strategies to understand what works and what does not is expected to remove the barriers that insulate the region from learning with other interventions confronting stigma.

It is anticipated that a strong regional network of PLHAs organizations shall emerge with the requisite capacity to engage in mutual learning, joint lobbying and interaction with key stakeholders through advocacy on issues touching on stigma and the general best practices for an effective HIV and AIDS intervention

5.3 Contribution of HASAP in documentation of Key Lessons and Experiences

Since the beginning of the strategic plan period, HASAP has made contribution in documenting experiences and lessons mostly in form of publications for instance, a case study on mainstreaming using the community-led rights based approach in ACORD Tanzania, the bi-annual newsletter and flyers such as, “Responding to HIV and AIDS: Listening to communities”. HASAP further contributed to an inter agency publication on mainstreaming, a joint publication for Oxfam, Save the Children Fund (UK), and Action Aid.

I wrote a story in May of this year on stigma.....I was surprised an official from the Ministry of Health wanted to challenge me, so I gave him the source of the reports as ACORD. I linked him to ACORD, he got the report and later thanked me for letting the public know that we still have a problem (*Key Informant, Mwanza Press Club, Tanzania*).

Various other publications, training guidelines, magazines and posters have been circulated by HASAP to date.

The HASAP team communicates with us in all relevant works and requests for what kind of support we require. HASAP shares reports, manuals, guidelines and any other materials ... prepare newsletter which allows area programs to participate and share accordingly. We clearly know for what HASAP is there to do (*Key Informant, AAP Ethiopia*).

5.4 Dissemination, Popularization and Utilization of Lessons and Experiences generated by ACORD internally and externally

Reports show that some of the ACORD programmes have developed effective strategies of mainstreaming HIV and AIDS in their work. Both the Newsletters and the Stigma Booklets are posted on ACORD's website. The Stigma booklet is also linked with the UNAIDS Global Coalition on Women and AIDS. The campaign for World AIDS Day based on the theme “Women, girls, HIV and AIDS” is notable.

Central to ACORD's work is the information sharing process as well as sharing of experiences and good practices. A networking workshop with Akaki Kality 6th Youth Networking Forum is one example as is the support to an Anti HIV and AIDS association in Akaki (Tesfa Ethiopia Mahber). Burundi has continued to use the media (both publicly and privately owned media houses), and facilitating and

editing of informative reports that contain expressed views and experiences of PLHAs to be shared amongst partners. In Ethiopia, is a project focused on dissemination of information to the community through supporting youth groups.

Other accomplishments in the area of documentation and information sharing include a number of publications developed from research and programming experiences such as: the experience of ACORD and Concern Uganda in internal mainstreaming; POCA in Mbarara; Hope to Live (ARVs research in Burkina); and Joining Hands publication on the stepping stones project implemented in Uganda, Tanzania and Angola.

5.5 Constraints and Gaps in Sharing Information and Experiences

Two major challenges are noted in efforts of HASAP to document, synthesize and share information and experiences, namely resource capacity problems which limit development, publication and wider dissemination of information, coupled with the small number of staff that constitutes the core HASAP team.

HASAP is not able to frequently visit programs therefore there is limited opportunity to physically observe project activities and recommend ideas. This is mainly linked with few staff in HASAP due to shortage of funds within the organization in general
(Key Informant, AAP, Ethiopia)

From ACORD Mozambique point of view, I believe that the major challenge that HASAP will have consists of the need of the physical presence of their officers to participate in monitoring the project implementation in order to ensure that our work is following the appropriate path *(Key Informant, AAP Mozambique)*.

Constraints in information sharing which the HASAP team has identified include the following:

- Not all the data for information sharing is readily available in all ACORD's three working languages and has to be translated which causes some programmes to receive information faster than other programmes.
- Some programmes do not respond on time which makes the process of feedback a bit lengthy
- In a few instances some programmes have not communicated changes in their physical addresses which has led to delays in these programmes receiving publications or other documents sent to them by post.

6. Lessons, Turning Back and Looking Forward: Constraints in implementation, Sustainability Issues

6.1 Introduction

This Section presents a synthesized assessment of HASAP SP 2003–2007 and focuses on the strengths and opportunities during the reviewed period, which can nevertheless be seized on during the next planning period—2008–2010. Instead of the usual five years, the next SP for HASAP will end in 2010 so as to be aligned with the overall ACORD International Strategic Plan that ends in 2010. The challenges and/or constraints HASAP has faced are presented to draw lessons for the new thinking, to prepare for ways of mitigation of such challenges in future planning. In this Section, issues of sustainability are also presented to further underpin the observations and conclusions of this Evaluation.

6.2 Lessons from HASAP's Perspective

The following lessons are drawn from the recent annual progress reports of HASAP

- Adoption of an HIV and AIDS mainstreaming approach to development processes is no longer an issue of debate but a mandatory prerequisite to understanding and challenging the epidemic. Due to its ability to generate the underlying issues to be addressed by development workers, HIV and AIDS mainstreaming has over the years gained recognition in development realm.
- Research plays a major role in providing a better understanding of what lies beneath the trends associated with the epidemic among the affected categories of the population. Specifically qualitative action research processes have provided plausible explanations of the constraints and obstacles to progress towards effective response to the epidemic.
- Participation and active involvement of the affected communities continues to be a major prerequisite to developing effective policy and practice responses. However in reality meaningful involvement of the affected community groups like the PLHAs has often been hampered by stigma and discrimination. Their enormous potential contribution in reversing the epidemic trends as persons directly affected needs to be recognized and harnessed.
- Focusing responses at all levels: Addressing the increasing effects of the HIV and AIDS epidemic requires strategies developed at all levels. This provides an opportunity for those affected by the epidemic in all walks of life to understand their predicament but also contribute to finding lasting solutions to their challenges. ACORD emphasizes this focus on all levels by building capacity for communities to analyze, internalize and challenge situations that make them vulnerable to HIV infection.

One major lesson learnt from ACORD's work over the years is the need to be innovative, inclusive and vigilant in addressing the multi dimensional challenges associated with the epidemic. Through our work, a number of aspects have emerged as major building blocks essential for strengthening and sustaining the response to the HIV and AIDS epidemic (*HASAP Team*).

6.3 Lessons and Turning Back: HASAP's Strengths and Ppportunities

One of the major strengths that has characterized HASAP in the last five years is the area of research. Research is a central part of ACORD's strategy and aims at fulfilling inter-related functions to improve the effectiveness of interventions and generate lessons learned and raise issues for shaping advocacy and policy influencing. Using research as a tool to strengthen the evidence base for programming and advocacy will nevertheless continue in the next planning period to provide evidence and to justify existence of HASAP, which is also the mandate of ACORD as an organization.

All informants pointed to the strength of HASAP in resource mobilization outside ACORD. HASAP has succeeded in remaining afloat and growing in scope in some areas as a result of the resources it is able to generate from partners. It is possibly because of this factor and given the fact that HASAP of all themes is the oldest, that it is claimed by AAPs to have been more visible compared to other ACORD Themes. However, this also makes AAPs have unqualified expectations of perceiving HASAP as a donor organ of ACORD.

Of all the four themes, it is only HASAP that has been more visible in as far as we are concerned here. We have implemented activities supported by HASAP...staff of HASAP pay monitoring visits to our areas of implementation, have supported research activities, management of HASAP has provided prompt technical support whenever we request especially when putting together our funding proposals unlike other themes *(Key Informant, AAP Mbarara, Uganda)*.

Although ACORD DRC does not have a concrete programme with HASAP apart from sharing information and documentation, HASAP is a dynamic programme that is well known for its efforts in fighting HIV and AIDS in Africa *(Key Informant, AAP DRC)*

HASAP is a good mobilizer of resources whenever one programme ends another is starting *(Key Informant, AAP – Northern Uganda)*.

Apart from being able to mobilize resources, there were instances where HASAP has either strengthened the capacities of AAPs to write fundable proposals or helped in lobbying for funding of some projects of AAPs. This was more vivid in Mbarara, Uganda.

We are about to secure funding from the Ministry of Gender, Labour and Social Development to implement an orphans and other vulnerable children (OVC). This was largely made possible by HASAP, Kampala for the technical input into the proposal and the personal lobbying by the Programme Manager, HASAP *(Key Informant, AAP Mbarara, Uganda)*.

In general, analysis of the data further reveals that participants in the evaluation considered staff at HASAP to be a team of committed members. They have a will to work and to take a lead in program design, capacity building through training, partnership building, documentation and various other areas. Despite the difficulties currently faced by HASAP, the present team presents an example of excellence and a learning point. Although this evaluation did not cover other themes, it was evidently clear that one of the edges that HASAP has enjoyed compared to others is that of relative stability in terms of staffing, which allows continuity and sustainability of program operations.

It is also important to note that HASAP has enjoyed relatively a sense of goodwill of partners and donors. The program has benefited from support extended by external programming institutions. During this plan period, HASAP made considerable headway in increasing the level of institutional funding for its work, in particular from Cordaid and also laid the groundwork for a long-term institutional funding arrangement with Swedish International Development Agency (Sida). Doubtless,

HASAP, like ACORD itself, enjoys wide recognition within the countries of operation and internationally.

6.4 Lessons and Looking Forward: Consolidating the Gains and Addressing Constraining Factors

6.4.1 General factors

Despite the registered achievements, strengths and opportunities, a number of factors pose considerable challenges to HASAP. During the Mid-Term Review (MTR) of this strategic plan some critical constraints were identified. These rotated around capacity building which included an apparent lack of commitment within programmes to work on HIV and AIDS issues, failure of AAPs to involve HASAP in recruitment of HIV and AIDS Focal Officers, poor access to communication and a culture of non-response, and accessibility to such staff solely through Country Programme Managers.

Other constraints included the serious resource constraints experienced that limit the programme from meeting demands. Many of these challenges are still evident amidst the wide problem of HIV and AIDS that HASAP is dealing with. The analysis of data from various sources for this end-of-term evaluation reveals more specific areas that ACORD in general, and HASAP in particular need to focus on in the next planning period in order to consolidate the gains so far achieved while implementing other planned activities some of which are suggested in Section 7.

6.4.2 Capacity of HASAP

As earlier noted HASAP has got a committed and competent staff but the number seems to be rather thin compared to the wide-area of operation. The recruitment of the Policy and Advocacy officer based in Nairobi last year was a move towards addressing this challenge, but still as one informant put it a little more could be done:

Although these people at HASAP are extremely hard working I still feel that they are overstretched with spending a substantial amount of time traversing the different AAPs ... may be by having competent focal officers can help (*Key Informant, AAP – Uganda*)

The socio-cultural context of each area program being different and the various levels of development of the pandemic from one region to another, the support requirements for research as well as the number of partners are enormous, but HASAP does not always have the human and financial capacity and means to provide this kind of support (*Key Informant, Sahel 1*)

6.4.3 Capacity of AAPs

The visibility of HASAP and implementation of planned activities is largely dependent on its partners and especially the AAPs. For instance, advocacy work at various national levels is the mandate of AAPs, but their capacities have been limited to the extent that these have largely remained at the community level. Exceptional cases are, however, notable such as ACORD Tanzania, Sudan, Burundi, Ethiopia and Rwanda where the AAPs have tried to engage both the central and local governments. It apparently appears that this problem is historical as one informant put it:

AAPs were originally locally based...working in communities, which made them almost detached from the national level...even after the restructuring AAPs have not transcended the community boundaries except in few cases such as that of Tanzania (*HASAP, Key Informant Kampala*).

Becoming more visible at national level by AAPs does not only facilitate the implementation of planned activities by HASAP such as advocacy, but makes them more relevant. This can be used to mobilize and tap resources locally if their role is appreciated by national governments and AIDS Commissions

especially when the need and demands for ACORD's interventions in areas such as HIV and AIDS, conflict and post-conflict situations such as in Northern Uganda, Southern Sudan, Democratic Republic of Congo, Burundi and Angola are evident. It should, however, be appreciated that visibility of AAPs is in a way constrained by lack of capacity—human, technical and financial to engage other level players such as national governments and development partners.

6.4.4 Inadequate application of skills and knowledge by other partners

Strengthening capacities of other partners dealing with HIV and AIDS such as associations of PLHAs has been one of visible areas that HASAP has tackled over the last planning period. However, the evaluation findings revealed that often partners do not easily translate the skills and knowledge acquired into practice. This is also not helped by the almost cutting off relationship between HASAP and such partners once the project has wound up especially short-term projects.

6.4.5 Abundant needs/demands and short-term projects: but limited resources

The demand for programmes pursued by HASAP is still big; the problem of HIV and AIDS in areas covered by ACORD area programmes and countries is itself enormous. For instance, whereas HASAP is advocating for equitable and universal accessibility to anti-retroviral drugs (ARVs), it still remains a big challenge in all the countries ACORD is operating (Refer to ARV Studies in Mozambique, Burkina Faso and Tanzania). HIV and AIDS has been recognised by ACORD as having a “devastating effect on human development” and thus has maintained its mandate to mitigate the impact of the epidemic in a context characterized by poverty, conflict, gender inequality and other developmental deterrents. There are, however, gaps in the specific areas HASAP has supported due to limited resources and possibly implementing short-term projects that do not result into visible impact.

HASAP has thus at times faced challenges in getting long term funding to implement its Five (5)-year strategic plan. Balancing the demands of core programming and support work against the need to secure an adequate funding base remained an ongoing challenge for the programme. Most of the funding secured has been for short-term projects such as the Ford Foundation supported “discrimination and stigma” project. With short-term projects most of the initial time is spent in preparation and organizing ground for implementation, which implies that at times the project abruptly ends when it should for practical purposes be starting.

The short duration of the projects' life span notwithstanding, it is important to note as revealed in this evaluation that for the particular “stigma and discrimination” project there were fruitful endeavours, but still a huge hurdle still remains to have these sustained and even reach some sections of the population. What is evidently clear is that the interventions aimed at fighting stigma have tended to benefit the low carder category of society and are yet to reach the “elite” in society. This evidenced by the fact that most of the partners of HASAP—associations of PLHAs comprise of ordinary community members with a conspicuous predominance of women. The challenge remains for HASAP to penetrate the world of the “elite” and bring men on board in big numbers such as those of women. Related with the above, gender inequalities are a noted challenge faced by many programmes which usually affects the knowledge levels of women concerning issues of HIV and AIDS as well as violence of all types towards women.

6.4.6 Inadequate cross-thematic linkages and institutional building

An area that drew consensus was the inadequate cross-thematic linkages within ACORD. Although the Secretariat exists to ensure this cross-thematic linkage that would be a catalyst for internal synergy, it appears that this has not adequately been done—at times leaving HASAP to be synonymous with ACORD while leaving the rest of the theme programmes in almost total oblivion as one informant put it:

Here people only know ACORD to be dealing only with HIV and AIDS because of HASAP's presence in terms of activities and support and yet there are other thematic programmes but we are yet to see their presence in our area programme (*Key Informant, AAP – Mbarara, Uganda*)

While the above is the case for AAPs which run a number of activities through direct HASAP work, other AAPs do not feel the presence of HASAP the same way. This strengthens the call for better synergy to be explored in the next strategic plan; how each theme should feed into and benefit from the other themes. The current picture seems to be that of isolation of HASAP from others as the rest of the Secretariat at Nairobi argued in this evaluation.

6.4.7 Past operations in conflict areas and new needs in post-conflict situations

Working in conflict areas has been very challenging especially with regard to managing staff risks. In Northern Uganda, Eastern DRC, recently Southern Sudan and Burundi the conflict situation greatly interfered with the implementation of planned activities as well as affecting staff morale. Further, factors related to the political process in some of the countries affected HASAP. For instance, in Dire Dawa, Ethiopia, there were tensions and fears after national election of 2005. Dealing with governance and civil society issues has been sensitive because of the political tension in Ethiopia in general, and in Dire Dawa in particular. Conflict and post conflict zones have and continue to experience various other challenges which include the increased traffic of military personnel as well as IDPs—all of which exacerbate the spread of HIV and AIDS coupled with a dire need of interventions not only aimed at stemming the spread of HIV, but also mitigation of socio-economic impacts, stigma and discrimination.

6.4.8 Communication barriers

An ongoing challenge relates to communication difficulties, partly due to the fact that HASAP in particular operates in Anglo and Franco-phone zones as well as the Portuguese one. The language barriers constitute a challenge in terms of communication within programmes owing to inadequate French and Portuguese literacy capacity in the HASAP team. Although deliberate efforts have been made to recruit a French speaking officer at HASAP, Kampala the need to focus further in this direction through support to staff training in French could help in addressing the imbalance. Also noted is lack of reliable e-mail communication channels in some countries where ACORD programmes are located.

6.4.9 More work in mainstreaming

Mainstreaming of HIV and AIDS into non-HIV and AIDS specialist organisations and local governments is still a big challenge, although not usually prioritized by decision makers. As earlier revealed much more work on mainstreaming has to be done especially in Sahel Region where an appreciation of HIV and AIDS in light of the pastoralist nature of the population is beginning to emerge. But also internally, ACORD needs to stand out in implementing HIV and AIDS workplace policy to claim legitimacy and moral ground as a champion of mainstreaming.

6.4.10 National bureaucratic systems

External challenges include bureaucratic processes within countries where ACORD operates which cause delays in securing clearance for some of the major activities like research. A case of Mozambique during the conducting of the ARV study serves as a compelling example of such bureaucratic rigidities that potentially affect implementation of activities in a timely manner.

6.5 Sustainability of ACORD HASAP's Work during the Last Five Years

6.5.1 Opportunities for sustainability

As a central support unit for providing learning and exchange among programmes and across themes, HASAP carried on with its task of providing technical support to HIV and AIDS Focal Officers and Coordinators to ensure that they gain different skills in the areas of research and advocacy. It was anticipated that acquiring these skills would allow AAPs to develop and implement their context specific research and advocacy.

ACORD helped us get funding from UPHOLD and Comic Relief.....they have given us technical skills; we get technical advice on how to consult people.....these are skills which we shall not loose (*Stepping stones community, Gulu, Uganda*).

HASAP also made efforts to facilitate the process of building alliances and networks for programmes at the local, national and international level. By so doing the programmes would effectively sustain the various strategies and partnerships. Through exchange visits, staff from different programmes are able to learn from one another and to establish sources of trainers and facilitators that are resident in the different programmes.

HASAP's technical and methodological support to programmes is helping to enhance staff capacities within programmes, in particular, with respect to mainstreaming HIV and AIDS in their work. The sustainability of HASAP's inputs in this area has also been enhanced by the development of generic mainstreaming guidelines that can be applied in programmes and shared with partners in communities. The HIV Workplace Policy is expected to enhance the level of care and support provided for staff throughout ACORD and the development of management guidelines will contribute towards enhancing organizational capacity to implement the policy, even in the absence of HASAP.

Through the promotion of participatory innovative methodologies, poor and marginalized groups have been empowered to critically examine traditional customs and practices and to demand greater accountability from leadership structures. The research project on 'Integration of gender into HIV and AIDS interventions', for instance, triggered active dialogue and debate within communities. These and other initiatives have far reaching impacts likely to continue beyond the lifetime of the project.

6.5.2 Challenges for sustainability

A number of issues related to sustainability were raised in this evaluation. Some, including representatives of PLHAs called for more capacity building in such areas as fundraising, proposal development, project planning and management, among others:

The problem we have here is that we are on our own without some sporadic support by organizations such as ACORD and we are not a matter of priority to the district local government to be minimally funded by them. We have tried to write proposals so that we can generate funds to reach the communities where we think we can help in addressing issues of stigma, but we have not succeeded in securing funding... (*FGD, Members of Mbarara Forum for PLHAs*).

ACORD should teach us how to make money and not giving us money all the time because it is not sustainable.....it is not possible to keep on giving us money (*Key Informant, HIPWA – Association of women living with HIV/AIDS, Mwanza, Tanzania*).

The way forward is to strengthen networks of people living with HIV and AIDS and CSO in terms of proposal writing, record keeping and general management of themselves (*Key Informant, AAP Tanzania*).

Other participants were particularly concerned about lack of timely release of funds for programme activities which affects their response to the problems being addressed and fears about the future:

Funding from HASAP is normally short lived; most of the projects they support are on a pilot basis and when the pilots end, nothing happens after. Partners are complaining that we never get to implement full phases of projects we stop at piloting (*Key Informant, AAP Northern Uganda*).

Challenges of sustainability will always confront any development work and especially when dealing with local communities and at times with undue expectations. These are some of the issues that development organizations must contend with especially to ensure that the capacity, which is built or strengthened, is put to practical purposes.

In the case of HASAP, it is suggested that all efforts be made to maximize available resources better. The way to achieve this is for HASAP to integrate programming work better so that themes do not work like stand alone entities, rather draw from existing institutional resources.

6.6 ACORD's Work and Evolution of HIV and AIDS Issues in Africa

The trends, magnitude and current dynamics of HIV and AIDS epidemic in Africa present to HASAP and ACORD in general critical areas for consideration in the process of rethinking the HIV and AIDS Theme of ACORD for the coming years.

Worldwide the number of people infected with the AIDS virus is estimated at 33.2 million. The latest AIDS epidemic update from UNAIDS, says 2.5-million people became infected with HIV this year, and 2.1-million people died from AIDS-related illnesses, 76% of them in sub-Saharan Africa. Whereas some progress has been realized, Peter Piot still warns "But with more than 6,800 new infections and over 5,700 deaths each day due to AIDS we must expand our efforts in order to significantly reduce the impact of AIDS worldwide,"

Sub-Saharan Africa continues to bear the brunt of the global epidemic. Two thirds (63%) of all adults and children with HIV globally live in sub-Saharan Africa, with its epicentre in southern Africa. Declines in national HIV prevalence are being observed in some sub-Saharan African countries, but such trends are currently neither strong nor widespread enough to diminish the epidemics' overall impact in this region. In sub-Saharan Africa, for every ten adult men living with HIV, there are about 14 adult women who are infected with the virus. Across all age groups, 59% of people living with HIV in sub-Saharan Africa in 2006 were women. Although the epidemic also extends into the general populations of countries, they remain highly concentrated around specific population groups. This highlights the need to focus prevention, treatment and care strategies effectively on population groups that are most at risk of HIV infection. Attempts to address its spread and mitigation of its impact on vulnerable populations have met serious challenges associated with its multi faceted nature. HIV prevention programs are failing to reach those that are most vulnerable to the epidemic

A possible erosion of the gains Uganda made against AIDS in the 1990s has been reported as is the sudden increase in infection levels among pregnant women in Burundi. West and Central Africa's smaller epidemics show divergent trends. There are signs of declining HIV prevalence in urban parts of Burkina Faso, Côte d'Ivoire and Ghana, but in Mali the HIV epidemic appears to be growing. Trends and current progress indicate an increasing need for contextualization of the programs for HIV and AIDS, new methodologies and other innovations, and sharing of experiences and best practices regarding what works and what does not.

Access to treatment and care has greatly increased in recent years, albeit from a very low starting level in many countries. Some countries have made great strides in expanding access to treatment, but are

currently making little progress in bringing HIV prevention programs to a wider scale. There are also new demands for services for PMTCT, male circumcision, microbicide research and other vaccine trials as well as issues for rights promotion especially for PLHAs. The level of awareness and response to HIV and AIDS related stigma and discrimination is still low in many countries and this does affect the level of access to care and treatment services where they are provided. Work is still required to change policies and practices, and promote best practices at all levels for a more effective response at national and broader levels.

Overall, the momentum for a social movement to deal effectively with HIV and AIDS is yet to be built. Actors still have the daunting task to mobilize resources, build partnerships at global and lower levels and galvanize all efforts to address the epidemic especially among hard hit communities in Sub-Saharan Africa. Agencies such as ACORD which stand for social justice have their work cut out. The need for a stronger theme on HIV and AIDS within ACORD can therefore not be overemphasized.

7. Conclusion and Suggestions for HASAP's Strategic Plan 2008–2010

7.1 Introduction

This Section presents a synopsis of the overall assessment of HASAP in execution of its Strategic Plan 2003–2007, highlighting the milestones in rather broad terms and in addition to what has been presented in the preceding Section delineates some of the important considerations for the programme to take into account as HASAP moves into the next plan period—2008–2010.

7.2 Conclusions

Overall, the end of term evaluation findings have revealed that HASAP has provided the strategic leadership and co-ordination of the organization's HIV and AIDS thematic Programme. As a key result of the capacity building processes initiated by HASAP, ACORD programs and partners continue to demonstrate increased understanding of HIV and AIDS, both externally and internally through their programme documents as well as the programmes. In using research as a tool for raising voices, stimulating sharing of knowledge and experiences among partners, and building alliances for policy lobbying, HASAP has continued to raise ACORD's profile in HIV and AIDS work at national, pan-African and global levels.

HASAP's main role with regard to organization development has been to ensure that HIV and AIDS is mainstreamed throughout ACORD's work and within the organization structures and policies. The main activities carried out incorporate participatory methodologies to promote understanding of HIV and AIDS mainstreaming within ACORD, involving ACORD and AAPs in development and piloting practical tools and guidelines and in advocacy work. The results of these processes have been impressive although more needs to be done in line with ACORD's overarching strategic framework and values as well as to attend to a number of challenges/constraints identified in this evaluation.

There is need to concentrate efforts in the next planning period on streamlining the thematic alignment and application. Furthermore, effort should be geared towards strengthening the linkage between and across themes. In the new arrangement, it is suggested that the HIV and AIDS theme could designate program managers/focal point persons in the various regions of Africa to ease coordination of programmes and activities in the AAPs.

7.3 Suggested HASAP's Thematic Areas for SP 2008–2010

This evaluation has implications for future implementation of the HASAP within ACORD's strategic planning approach which provides the framework within which HASAP should work. The following constitute some of the Thematic Areas in the next planning period:

7.3.1 Research, advocacy and lobbying

Research will always remain crucial and should ideally precede any given intervention to allow the implementer gauge the magnitude of the problem, get a sense of appropriate interventions, provide benchmark data for M&E purposes, and also for final evaluation of the impact. Research conducted using appropriate qualitative and quantitative methodologies provide evidence of the existence of the need or issue to be addressed, and provides legitimate platform for advocacy and lobbying policy at relevant levels. The capacity within the themes of ACORD should be exploited to the full and build partnerships with other institutions in research and academia.

7.3.2 Building strategic partnerships: Following up the old ones

There is no doubt that HASAP has tried to build strategic partnerships with different agencies at all levels. HIV and AIDS work demands that these partnerships are nurtured and sustained overtime. For partners that HASAP has strengthened capacity need to be followed and guided further to ensure that the skills and knowledge acquired is put into practice—the theoretical skills and knowledge need to be transformed into concrete actions on the ground. Strategic partnerships should be enhanced further to harness confidence among development partners and new opportunities for funding should be explored with strong support of the ACORD Secretariat. Working with other thematic programmes and partners also offers a wider window for pulling together the required technological, human and financial resources in a synergistic fashion.

7.3.3 HIV stigma and discrimination: Consolidation and targeting the elites.

HASAP and partners have done commendable work in this area, but this is not a one-off occasion. The one year project supported by Ford Foundation on stigma and discrimination helped in starting up the process and activities, which HASAP and partners can continue with so that the full benefits can be realized. And more importantly is that such interventions have tended to focus on the poor ordinary members of society and especially women. The challenge in the next planning period is for HASAP to devise means of reaching the elites or affluent members of society. Small scale pilot projects in institutions of higher learning such as the universities and tertiary institutions could be one way of trying to reach the elites.

7.3.4 ART and food security: promoting ART adherence

In the ARV studies conducted by ACORD, HASAP in Tanzania, Mozambique and Burkina Faso, the issue of food as a motivator when available for people to seek ARVs and adhere or militating against seeking ARVs when not available was pronounced. This is an area where with available evidence ACORD can engage national governments, regional governments; bi-lateral and multi-lateral agencies to support food production and provisioning among HIV and AIDS affected households and communities. Although this evaluation does not propose that HASAP should get sucked up in mobilizing funds to provide food rations to people on ARVs, it can still play a role in providing skills to AAPs and partners working with communities on the different aspects that are relevant to food and ARVs; issues of appropriate, affordable and available local food stuffs that constitute a nutritious diet for a person on ARVs.

7.3.5 HIV and AIDS in conflict and post-conflict situations

In the preceding Section HIV and AIDS in conflict and post conflict situations was revealed as a pertinent problem in such areas and yet limited HIV and AIDS interventions are implemented to cope with the challenges. This is more so in post-conflict situations that are characterized by resettlement of the populations in their original homes or decongestion of internally displaced peoples' camps such as

in Northern Uganda. These fluid situations can exacerbate the spread of HIV and AIDS while making coping mechanisms an illusion. This calls for ACORD in general and HASAP in particular to come out with interventions in the areas where operations have been taking place not only to consolidate whatever gains could have been achieved, but also to initiate programmes that will have a symbiotic relationship and synergy among the various aspects of the epidemic—prevention, care and support, and then mitigation of the socio-economic impact of HIV and AIDS.

7.3.6 HIV and AIDS: A silent problem in pastoralist communities

Pastoralist communities have often posed difficulties to players involved in HIV and AIDS, but yet tend to be more at risk of HIV and AIDS like any other group that is transient. The Sahel region where HASAP operates comprises largely of pastoralist communities, and yet it still lags behind in terms of mainstreaming compared to other regions. Deliberate interventions to continue advocating for mainstreaming of HIV and AIDS in all sectors in the Sahel region present an area where HASAP can make an impact.

7.3.7 Cross-cutting activities/issues

There are or issues that have emerged in this evaluation that HASAP will at all times have to grapple with and do not necessarily fall in any of the above proposed thematic areas. These are outlined below.

- Overall, HASAP needs to consolidate its achievements over the last five years, develop comprehensive and harmonized interventions to deliver on their capacity building and technical support agenda and contribute to the ACORD's vision.
- Resource availability will continue to be a key determinant in the adequacy of capacity building, technical support and other interventions which HASAP shall opt to undertake in the next plan period.
- HASAP needs to explore with other thematic programmes interventions to profile highly ACORD's pan-African and international identity and outlook which requires integration with area programmes across Africa. By expanding its programmes especially in countries hitherto insufficiently reached by HASAP activities, both the visibility of HASAP and ACORD in general shall be enhanced.
- As observed at MTR, ownership of HASAP by AAPs and strengthening their will contributes to their commitment to catalyzing cross learning within the organization and beyond as isolated and scattered impacts are consolidated into sustained social action.
- HASAP's strategy to develop and popularize innovative methodologies which have been field-tested gave the programme its unique character. These methodologies are still important in the programme. These methods reflect ACORD's work on HIV and AIDS for over a decade and the immense knowledge and experience on what works. HASAP should continue to tap into this knowledge and apply it for influencing the thinking and practice at national, pan-African and global levels.
- Pleas have been made among communities that benefited from activities in Strategic Plan 2003–2007 for continued interaction and program work with HASAP. Partners such as networks of PLHAs require more capacity building opportunities especially in generating and managing resources, planning and organizational development (OD), monitoring and evaluation, among others. ACORD considers the initiative to work with people who have been denied the chance or do not have the voice and one of these are the people with HIV, to be able to talk with confidence and knowledge. HASAP should make sure that the people living with HIV have the knowledge about all issues affecting them.
- The HIV and AIDS theme should benefit from regular internal reviews and feedback. There should also be a provision in the institutional arrangements mandating management to provide feedback to the themes.

Overall, HASAP's core functions and methodologies are still relevant. However some modification should be made within the context of ACORD's programming priorities and approaches as defined in the ACORD Strategic Plan 2007–10. Since the challenge of thematic alignment is not a one time event, the need is to focus on capacity building for the institution, and approach this challenge with an open mind.

Appendix 1: Sources of Secondary Data/List of Documents

1. ACORD Draft advocacy framework –November 2002
2. ACORD HIV & AIDS Thematic Programme Synthesis Report for 2004
3. ACORD HIV & AIDS Thematic Programme Synthesis Report for 2005
4. ACORD HIV & AIDS Thematic Programme Synthesis Report for 2006
5. ACORD HIV and AIDS Workplace Policy Document 2006
6. ACORD HIV and AIDS Support and Advocacy programme (HASAP) Annual Report 2003
7. ACORD HIV and AIDS Support and Advocacy programme (HASAP) Annual Report 2004
8. ACORD HIV and AIDS Support and Advocacy programme (HASAP) Annual Report 2005
9. ACORD HIV and AIDS Support and Advocacy programme (HASAP) Annual Report 2006
10. ACORD HIV and AIDS Support and Advocacy programme (HASAP) Annual Report 2002
11. ACORD report for the Work Place Policy implementation (December 2006–May 2007)
12. ACORD Rwanda 2003–2006 Promotion of social forums against poverty
13. ACORD's HIV and AIDS Support and Advocacy Programme, "ARVs accessibility and implications in selected sites: a study of communities' perspective and policy environment in Tanzania"
14. ACORD's HIV and AIDS Support and Advocacy Programme, "Nothing About Us Without Us!", Report on a Workshop on HIV and AIDS Related Stigma and Discrimination
15. ACORD's HIV and AIDS Support and Advocacy Programme, Evaluation Report on POCA's (Parish Orphans Care Associations), 2006
16. ACORD's HIV and AIDS Support and Advocacy Programme, Generic Training Guide on HIV and AIDS Mainstreaming, Oct 2005
17. ACORD's HIV and AIDS Support and Advocacy Programme, Inside Out: AIDS Competence in the Workplace: ACORD and CONCERN Experiences in Uganda, 2006
18. ACORD's HIV and AIDS Support and Advocacy Programme, Looking Back, Thinking Forward! Advocating for the rights of PLHAs: Addressing stigma and discrimination, 2007
19. ACORD's HIV and AIDS Support and Advocacy Programme, Trainers' Handbook on HIV & AIDS Mainstreaming, 2005
20. Advocacy and peace building support program for local institutions in Gambella, Feb 2007
21. Angela Hadjipateras and Angele Diello with Omer Bouda. Hope and Life: Access to ARVs in a Community Context: Rural-Urban Experiences in Burkina Faso, May 2006
22. Angela Hadjipateras with Sunday Abwola and Harriet Akullu, Addressing Stigma in Implementing HIV and AIDS Workplace Policy: The ACORD experience in Uganda, Feb 2006
23. Angela Hadjipateras, Unravelling the Dynamics of HIV and AIDS-related Stigma and Discrimination: The Role of Community-based Research, case studies of Northern Uganda and Burundi, June 2004
24. Angola Relatsrio Annual Para 2006
25. HASAP News: Issue 5: Stop AIDS: Keep the promise: Position Paper on Stop AIDS Now: Keep the promise, focusing on internal mainstreaming
26. HASAP News: Issue no. 1: HIV Crisis. Making a Difference, June 2003

27. HASAP News: Issue no. 2: Mainstreaming HIV and AIDS in development interventions, February 2004
28. HASAP News: Issue no. 3: Unravelling HIV and AIDS related stigma, August 2004
29. HASAP News: Issue no. 4: Women, Girls and HIV and AIDS, May 2005
30. HASAP News: Issue no. 5: Keep the promise to stop AIDS!, December 2005
31. HASAP News: Issue no. 6: Time to Deliver, July 2006
32. HIV and AIDS Workplace Policy Recommendations
33. If we fail to stop AIDS, AIDS will not fail to wipe us out, Advocacy Leaflet
34. Namakula Proscovia, NAFOPHANU: A report about the exchange visit to TAC-South Africa, June 2007
35. Oxfam Novib ACORD Ethiopia Integrated Annual progress Report 2006
36. Position Paper on Women, Girls and HIV and AIDS
37. Programme De Consolidation De La Paix Sociale Au Burundi Rapport Annuel 2006
38. Rapport Annuel 2006 ACORD Guinee
39. Rapport Annuel d'activites 2006 ACORD RDC Janvier–décembre 2006
40. Report on research on access to ARVs among rural and urban communities in Burkina Faso; special focus on marginalized communities and the implications for individuals, households and specific groups within them.
41. Socio economic re-integration of children heads of households, Annual report March 2007
42. Sudan HIV and AIDS Capacity building Workshop report (Khartoum 13–15 October 2003)
43. Susan Amoaten, Mainstreaming HIV and AIDS using a community-led rights-based approach, a case study of ACORD Tanzania, 2003
44. Unravelling the Dynamics of HIV and AIDS related Stigma and Discrimination: The role of Community Based Research: A Case of Burundi and Northern Uganda.
45. Wasai J. Nanjakululu: Policy and Advocacy Officer at the Agency for Cooperation and Research in Development (ACORD), UNAIDS and the AIDS response in Africa: on track or on trash?

Appendix 2: Sources of Primary Data—Personal Interviews, Telephone and Mail Questionnaires

2. AAP Angola
3. AAP Ethiopia
4. AAP Mozambique
5. AAP Mwanza, Tanzania
6. AAP Sahel 1
7. AAP Southwestern Uganda
8. AAP, Northern Uganda
9. AAP Democratic Republic of Congo
10. AAP Rwanda
11. ACORD Secretariat staff, Nairobi, Kenya
12. Gulu Network of PLHAs, Uganda
13. HASAP Staff, ACORD Secretariat, Nairobi, Kenya
14. HASAP Staff, Kampala, Uganda
15. HIPWA-Association of women living with HIV and AIDS, Mwanza, Tanzania
16. Mbarara Forum for PLHAs, Uganda
17. Mwanza City Council, Tanzania
18. Mwanza Press Club, Tanzania
19. National Organization of Legal Assistance, Tanzania
20. Stepping Stones Community, Gulu, Northern Uganda
21. Stepping Stones Community, Lukobe, Mwanza, Tanzania
22. Tanzania Women Living with HIV and AIDS TAWOLIHA, Tanzania

Appendix 3: Terms of Reference

Revised Terms of Reference (TOR) for the External evaluation of the ACORD HIV and AIDS Support and Advocacy Programme (HASAP)

Background

ACORD has been working on HIV and AIDS since the early nineties. Initially focused on the East African region (Uganda, Tanzania, Rwanda and Burundi), ACORD now has HIV and AIDS activities across sub-Saharan Africa. Moreover, under the ACORD Strategic Plan 2002–2006, HIV and AIDS was identified as one of the four main thematic areas and strategic priorities for the organization. The key functions of thematic programmes include deepening understanding through research and analysis, enhance learning and sharing and best practices, provide support in methodologies and tools and capacity building, facilitate social action through working with marginalized people, capitalize and share broadly experiences and work at different levels for changes in attitudes, policies and practices across Africa.

ACORD's approach to HIV and AIDS is based on recognizing the inter-linkages between HIV and AIDS vulnerability and poverty, gender inequality, conflict and other forms of social disruption, and on recognition of the important role of good governance in effectively addressing the epidemic. ACORD's overall HIV and AIDS mission is:

- To prevent the further spread of HIV and AIDS in Africa by addressing both the immediate and root causes.
- To mitigate the economic, social and psychological impact of HIV and AIDS on individuals and communities through the provision of effective care and support services.
- Promote equal access to information, services and treatment, and all human rights by challenging all forms of discrimination and social exclusion.

ACORD is working towards this mission by promoting and supporting community-led initiatives, through information-sharing, research, networking and advocacy, through partnerships with the public and private sectors and through promotion and support for broader social movements aimed at influencing thinking, policies and practices at all levels.

This work is supported by HASAP which provides strategic coordination of research and advocacy, as well as technical guidance and support aimed at ensuring that HIV and AIDS issues and concerns are mainstreamed in the work of ACORD area programmes, and to some extent other thematic programmes of gender, conflict and livelihoods. HASAP also works with field staff to identify best practices and disseminate lessons learnt, both within ACORD and with other external stakeholders.

The main goal of HASAP is to promote learning both within and outside ACORD in order to improve responses to HIV and AIDS, and strengthen ACORD's capacity to develop effective partnerships with communities in order to influence thinking, policies and practices at the local, national and international levels.

The specific objectives of HASAP are to;

- Enhance capacity both within and outside ACORD to integrate and mainstream HIV and AIDS in programme activities and in the workplace

- Promote research in order to deepen ACORD's and partners' understanding of the social, economic, and political dynamics of the epidemic in development.
- Promote platforms for community voices at local, national and international levels.
- Increase sharing of information and experiences on good practices within and outside ACORD.

Rationale

The operationalization of the above objectives has been guided by a HASAP strategic plan (2003–2007) that was jointly developed in 2002 by HASAP and the ACORD country programmes, with some input from our partners. As this strategy ends in 2007, there is need to evaluate the extent to which HASAP's mandate was executed over the 5 years period. It is anticipated that results from this evaluation will feed into the process of developing a new strategy for the period 2008–2010.

Overall objective of the Evaluation

The broad objective of this evaluation is to assess the extent to which the set objectives have been achieved within the 5 years framework, and what has been HASAP contribution in generating new knowledge and methodologies in the global HIV/AIDS sector.

This evaluation is also an opportunity to assess the extent to which HASAP's core functions and methodologies were executed, and whether they are still relevant within the context of ACORD's programming priorities and approaches as defined in the strategic plan for 2007–2010. It is anticipated that this evaluation exercise, apart from measuring the impact of ACORD's work on HIV and AIDS, will help to generate lessons and insights that will inform the next strategic plan for HASAP.

The evaluation should help in addressing the following questions related to the objectives of the 2002–2007 strategic plan.

(Enhanced Capacity to integrate and mainstream HIV and AIDS)

- To what extent has HASAP strengthened the capacity of ACORD Area Programmes and other themes, and other partners, to integrate and mainstream HIV and AIDS in their strategies, programme activities and in the workplace?

(Research)

- To what extent has HASAP implemented its research agenda? How did this research contribute to advocacy and programming work of ACORD?
- To what extent has HASAP supported area programmes to deliver on their research agenda?
- Assess the extent to which research is informing programme development and organizational learning within ACORD and with partners across Africa;
- what has been HASAP contribution in generating new knowledge and methodologies in the global HIV/AIDS sector.

(Advocacy)

- To what extent has HASAP's work enhanced Social Action (i.e. enabling people to come together, understand, challenge and change the root causes for the spread of HIV and AIDS)?
- To what extent has ACORD's work on HIV & AIDS provided a platform for the voices of communities directly and indirectly affected by HIV and AIDS to be heard by policy makers at all levels and enable them to generate social action?
- To what extent has ACORD engaged in HIV & AIDS related advocacy at Regional, Pan Africa and international levels?

- To what extent has ACORD's work on HIV & AIDS contributed to influence changes in policies and practices at local, national, regional, Pan Africa and international levels, and mainly in terms of affirming and achieving the rights of PLHAs to ARVs, non discrimination for work opportunities and other rights, including fighting stigma?

(Sharing and Learning)

- What lessons have been learnt in ACORD's HIV and AIDS work?
- What has been the contribution of HASAP in documentation of key lessons and experiences, and how have these been disseminated, popularized and utilized internally and externally?

(Impact)

- To what extent has the work of HASAP contributed to produce a positive impact in the quality of life of PLHAs and their communities?
- To what extent has HASAP developed strategic partnerships with pan-African and other key actors globally, and how has this contributed to profiling ACORD externally?
- To what extent can ACORD HASAP's work during the last 5 years be considered sustainable? What positive changes/dynamics would continue if HASAP was to stop now? What wouldn't continue?

Programme perspectives

- What are the main strengths, weaknesses, opportunities and threats of HASAP?
- What has been the main evolution in the HIV/AIDS issues in Africa?
- Based on these evolution and What would the evaluators recommend as main orientations for the new strategic plan

Methodology

- Review of the strategic plan of HASAP (2003–2007) vis-à-vis the context globally and within the context of the strategic plan of ACORD and more specifically within the framework of thematic programming
- Review of all key documentation of HASAP such as the Programme document, mid term review report, Research reports, Workshop reports, narrative reports, field visit reports, etc.
- Discussion with key secretariat staff in Nairobi
- Visit and discuss with HASAP staff
- Visit and discuss with selected ACORD area programmes
- Visit and discuss with selected partners at different levels, (including at least one PLWHA association, one peer NGO/network and one donor)
- First draft report to be provided to ACORD for comments;
- Presentation of key findings and recommendations in a one day workshop to stakeholders;
- Final report

Process

The overall process will be coordinated by HASAP together with the ACORD Monitoring and Evaluation and Knowledge Management Coordinator, but will include stages where various stakeholders including program, secretariat and partners will be involved. The evaluation will be done by external consultants together with an ACORD team member.

Duration

The duration of the evaluation is proposed to be two months (July and August 2007) and may involve travel to some programmes and Nairobi. It is anticipated that field work would be completed in a period of one month; and another month will be spent on processing and analyzing the data, producing the draft report, collecting feedback from ACORD and stakeholders and integrating it in the final report. However, ACORD will only pay for a maximum of 30 working days for this evaluation exercise.

External evaluators profile:

The *External evaluators* should have competence in evaluation and programming at advanced level with experience in linking the local and global issues. Experience in HIV and AIDS mainstreaming concepts, research, as well as proven experience in programme development for responding to the HIV and AIDS epidemic will be important criteria for selection.

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