

The
AMICAALL
Toolkit

**Local Governance
and HIV/AIDS**

November 2005



AMICAALL/UN APP



The World Bank



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AMICAALL: Alliance of Mayors' Initiative for Community Action on AIDS at the Local Level

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FOREWORD

In many countries, an “implementation gap” exists between national HIV/AIDS strategies and plans on the one hand and actual implementation at the local level on the other. In order to bridge this gap and lead effective local responses to the epidemic, local government – as the level of government closest to people – is ideally placed.

Increasingly, mayors, municipal leaders and local government authorities are taking up the challenge to confront the HIV/AIDS epidemic. In Africa, the Alliance of Mayors and Municipal Leaders on HIV/AIDS is mobilizing local government authorities and working with national AIDS authorities, communities, the private sector and the international development community, to forge sustainable partnerships and build commitment and capacity to expand action on HIV/AIDS at local level.

Through the Alliance of Mayors’ Initiative for Community Action on AIDS at the Local Level (AMICAALL), a growing number of local government authorities in Africa have taken steps to mainstream HIV/AIDS within their municipal agendas and have initiated actions to deliver services within their communities. Much more needs to be done to support these initiatives and to ensure that more resources reach those most vulnerable to the spread and impact of the epidemic.

The AMICAALL Toolkit has been developed to help guide local authorities and their partners in their efforts to enhance collaboration and results on HIV and AIDS. In a spirit of collaboration and shared learning, this publication contains tools developed and used by AMICAALL partners in developing, implementing, monitoring and reporting on their programmes across a range of countries.

This Toolkit is the result of a joint effort by the Alliance and the UN AMICAALL Partnership Programme with UNAIDS, UNDP and the World Bank.



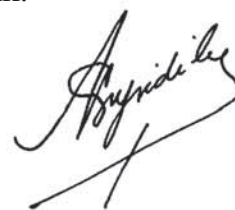
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LIST OF ACRONYMS AND ABBREVIATIONS

AIDS	Acquired Immunodeficiency Syndrome
AMICAALL	Alliance of Mayors' Initiative for Community Action on AIDS at the Local Level
CBO	Community-based Organization
HIV	Human Immunodeficiency Virus
NGO	Nongovernmental Organization
MHT	Municipal HIV/AIDS Team
OVC	Orphans and Vulnerable Children
PLWHA	Persons Living with HIV/AIDS
PwC	PricewaterhouseCoopers
SSA	Sub-Saharan Africa
UN APP	United Nations AMICAALL Partnership Programme
UNDP	United Nations Development Programme
UNAIDS	Joint United Nations Programme on HIV/AIDS
USAID	United States Agency for International Development
VCT	Voluntary Counselling and Testing
WV	World Vision

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Part one: Introduction

INTRODUCTION

The Purpose of the Toolkit

The purpose of this toolkit is to document and share guidance notes which have been developed in support of AMICAALL programme activities.

The Audience

The primary audience is those directly involved in the AMICAALL programmes and activities: AMICAALL National Coordinators and Technical Advisors, local authorities and their implementing partners.

Others to whom this toolkit may be of use or interest include those involved in strengthening the role of local government in response to HIV/AIDS, in supporting decentralized action on HIV, or in promoting the concept of partnership. The publication will also be of particular interest to those development agencies, which have supported AMICAALL since its inception, such as UNDP, UNAIDS, USAID and the Government of the Netherlands.

The document is a work in progress and feedback from readers is welcome.

The Alliance and AMICAALL

In 1998, mayors and municipal leaders from over a dozen African countries launched the Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa at the Africities Summit, with support from UNDP, UNAIDS, and other partners. The goal of the Alliance is to promote and support concrete actions that contribute to limiting the spread of HIV and alleviating the social and economic impact of the epidemic at the community level. The Alliance works in partnership with government, civil society organizations, the private sector and local communities.

With support from UNDP and UNAIDS, the Alliance developed a “road map”, the Alliance of Mayors’ Initiative for Community Action on AIDS at the Local Level—or AMICAALL. The strategy underpinning this initiative is based on good development practice: bring together key local government and community leaders; provide them with an opportunity to articulate their realities; and invest in developing their capacities to manage and facilitate an expanded, multisectoral response to the growing challenges of HIV in their cities and towns.

Principles and Value Addition

AMICAALL embraces principles of inclusion, participation, partnership, accountability and gender sensitivity. Programmes develop partnerships between local government authorities, nongovernmental organizations, community-based organizations, the private sector and vulnerable populations, so that they can work together to find appropriate and sustainable solutions at the local level. AMICAALL action programmes encompass targeted capacity development of local stakeholders and collaboration across sectors and institutions (public and private) to work to expand services and support systems.

AMICAALL minimizes duplication and facilitates local-level coordination and action. The programmes provide added value to what already exists and promotes efficient and effective use of limited human, material, technical and financial resources. Priorities and needs are identified so that limited resources can be targeted where most required. With increased knowledge and better planning, municipalities, communities and other local partners are enabled to access additional resources from national governments, the private sector and the international development community. Local level resource mobilisation is also encouraged.

National Chapters of the Alliance have been launched and AMICAALL action programmes are in varying stages of implementation in 13 countries: Burkina Faso, Cameroon, Central African Republic, Côte d'Ivoire, Kenya, Malawi, Mali, Namibia, South Africa, Swaziland, Tanzania, Uganda and Zambia (as of October 2005). Requests for support to launch National Chapters of the Alliance and develop AMICAALL action programmes continue to be received from other countries.

Importance of Local Government

Most development partners, programme implementers and national governments now agree that HIV/AIDS is more than a health problem and requires a broad-based multisectoral approach to address the many facets of the epidemic; that HIV/AIDS is very much inter-linked with poverty, social and economic inequities between men and women and long-standing cultural behaviours and beliefs.

While there have been major advances in terms of prevention, treatment and care, efforts to scale up responses to HIV/AIDS significantly have, as yet, been inadequate and insufficient. A more systematic approach is needed in order to build local capacity to manage and sustain a comprehensive response to the epidemic. Local government has a key role to play within such a comprehensive response. Through efforts to create a more enabling environment for community-based and local government initiatives, foundations can be built to support the scaling up of responses to the epidemic.

Bridging the Implementation Gap

According to UNAIDS¹, most countries in Africa have now developed national multisectoral HIV/AIDS plans and strategies and a growing number of countries have national AIDS councils with representation from various sectors. National governments do have a role to play: developing policies and national strategies, advocating for HIV awareness and education and overseeing and monitoring collection of country-wide surveillance data, for example. Central governments, however, are not as well positioned to guide the implementation of programmes based on local needs and realities. This has resulted in an “implementation gap” between national HIV/AIDS strategies and plans, and on-the-ground action. To bridge this implementation gap, local government, as the level of government closest to the people, is ideally placed to spearhead an effective response to the epidemic at the local level; to promote and guide HIV/AIDS-related policy and services development through processes, which are socially inclusive and participatory.

Urbanization and Decentralization

There are also other factors that reinforce the argument that local governments are an appropriate venue for mobilizing an effective, multisectoral response to the effects of the AIDS epidemic. First is the rapid rate of urbanization that is occurring in Africa. As of 2000, about one third of people in sub-Saharan Africa lived in urban areas; this proportion is expected to increase to half the population by 2020. Therefore, urban leaders’ spheres of influence will inevitably grow as more and more people move to cities and towns. Secondly, there is increasing decentralization in sub-Saharan Africa as countries move to establish more viable democratic systems and good governance. Efforts are under way to shift more responsibility for programmes and services (and sometimes, but not always resources) to local authorities. More and more, local governments clearly have a mandate and are acknowledging their role in mainstreaming HIV/AIDS into municipal agendas.

The creation and rapid expansion of the Alliance and AMICAALL action programmes illustrate that mayors, municipal leaders and local authorities are committed and are ready to do more. The tools and guidance notes which follow have been developed in support of the continued development of AMICAALL action programmes and activities.

Overview of this Toolkit

Ten tools, or guidance notes, that have been compiled are presented here. The first tool addresses the process involved in launching a national chapter of the Alliance coupled with the planning and advocacy needed to initiate an AMICAALL programme. The next tools, numbers two to seven, cover specific activities undertaken as part of an AMICAALL programme and generally consider work that would be undertaken by a Municipal HIV/AIDS Team. This ranges from guidance on forming a Municipal HIV/AIDS Team, to

¹ Epidemic Update 2004, UNAIDS-WHO, 2004

preparing a municipal HIV/AIDS service directory, to monitoring AMICAALL small grants. Tool eight looks at how local government can be integrated into national HIV/AIDS planning. Tools nine and ten provide assistance with documentation and reporting through guidance on monitoring, reporting and preparing a case study. Last, there is a list of relevant references and website links that is included for additional information.

Part two: **Tools**

Tool 1

Launching an Alliance Chapter

Purpose

Establishing a National Chapter of the Alliance is an important part of the broader process of engaging and supporting local government leadership in response to HIV/AIDS and establishing operational frameworks for collaboration with central government, nongovernmental partners and community-based organizations.

The public launch of a National Chapter is an important statement of commitment by local government to address the HIV/AIDS in their communities.

This tool, based upon experiences and lessons learned in several countries, is designed to facilitate the process of launching a National Chapter of the Alliance.

Summary

Successful launches involve a considerable amount of preparation. This can be broken down in the following key elements and phases:

- Engagement of a suitable ‘lead organization’
- Preparatory consultations and sensitization workshops with key stakeholders
- Articulating added value
- Drafting a declaration
- Creating a taskforce
- High-profile public event
- Follow-up

LAUNCHING AN ALLIANCE CHAPTER

Background

Local government represents the closest link between national government, its citizens and civil society. National plans and programmes cannot be effectively implemented from the centre if they do not reflect local needs and realities and involve local stakeholders. However, until very recently, local governments have been largely overlooked in the response to HIV/AIDS in sub-Saharan Africa. Growing urbanization and increasing support for decentralized governance in sub-Saharan Africa reinforce the need for greater involvement of local governments in the overall response to the epidemic.

Local leaders have begun to take action. Seeing first-hand the devastation caused by HIV/AIDS in their communities, African leaders came together and formed the Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa in 1998. The goal of the Alliance is to promote actions that contribute to limiting the spread of HIV and alleviating the social and economic impact of the epidemic on communities in Africa. Activities are carried out in partnership with government at all levels, civil society organizations, the private sector and local communities.

With support from UNDP and UNAIDS, the Alliance developed a ‘road map’ for local government leadership and action on HIV/AIDS: the Alliance of Mayors’ Initiative for Community Action on AIDS at the Local Level, or AMICAALL.

Thanks to country-based AMICAALL programmes, local government authorities, civil society organizations, communities and national and international development partners work together to identify appropriate solutions and practical actions that can be implemented in cities and towns to respond to the HIV/AIDS epidemic. Leadership and political commitment are the foundation of the programme.

These guidelines have been developed to assist local authorities, mayors and municipal leaders in countries where interest has been expressed to launch a National Chapter of the Alliance. It must be emphasised that this is just one step in a larger process of engaging and supporting local government leadership in the response to HIV/AIDS. A list of resources is provided at the end of this guide that includes additional information on the Alliance and AMICAALL.

Pre-Launch Preparatory Activities

The pre-launch process begins with designation of a national lead organization/focal point to facilitate advocacy and mobilization of political commitment. In most instances the association of local government authorities (e.g. mayors and councillors) and where present, the association of professional municipal workers (e.g. town clerks, city managers, chief executive officers, etc.) are best placed to spearhead preparatory activities leading to the launch of a national chapter of the Alliance.

The lead organization should have:

- Ability to mobilize mayors, municipal leaders and key stakeholders.
- Adequate staff and administrative capacity (e.g. to manage funds).
- Capacity to organize preparatory activities and launch.
- Ability to collaborate effectively with other supporting organizations and groups.

The lead organization/focal point can access information and other support from the Alliance Secretariat and the UN-AMICAALL Partnership Programme.

Consultations and Sensitization Workshops

Consultations need to be undertaken with key stakeholders in the country including national and local government, nongovernmental and community-based organizations, associations of people living with HIV, local communities, international agencies and development partners. This is done to gather information on the current response to HIV/AIDS in the country, identify gaps and opportunities and to initiate a dialogue on the added value of local government in the overall response to the epidemic.

This consultation process includes sensitization workshops. The number of workshops has varied from one in smaller countries to several in larger countries. Some countries have chosen to combine the sensitization workshops with the national launch where funding has been limited, holding the sensitization workshop one day before the launch. However, experience shows that it is more effective to hold the preparatory/sensitization workshops prior to the launch if resources permit. Participants include mayors, local authority officials, nongovernmental organizations, associations of people living with HIV, private sector, development partners and other partners. Workshops can range from one to three days, depending on issues to be covered and planned activities.

The objective(s) of these sensitization workshops usually include the following: introduce the Alliance and AMICAALL approach; contribute to a greater understanding of HIV/AIDS and implications for development; explore the added value of local government leadership to the overall response in a country; and build a consensus on the role and contribution of local government to the national response to HIV/AIDS.

Specific activities typically include: review and agree on a process for preparing and launching a National Chapter of the Alliance (including preparation of Alliance chapter declaration); and agree on what mayors and municipal leaders can do following the workshop to sensitize and mobilize their Councils and communities. These workshops also provide a good opportunity to mobilize support among a broad range of stakeholders at the national level, and development partners.

Defining Added Value

Defining the added value of local government leadership and action should be part of this preparatory process. Below are some issues that can be explored. This is by no means an exhaustive list but simply serves to illustrate the range of issues that local government authorities are exploring in a number of countries.

- How does it complement existing efforts to expand and scale up responses to HIV/AIDS in the country?
- How does it fill gaps in the response to HIV/AIDS in urban centres? (taking into account growing urbanization)
- How does it build on the respect and attention that local leaders command?
- How does it relate to increasing responsibilities linked to decentralization?
- How does it contribute to making a broad-based, multisectoral response to HIV/AIDS a reality at the local level?
- How does it promote locally driven processes of policy dialogue?
- How does it draw upon local human resources and enhance local capacity?
- How does it create mechanisms for sharing lessons and good practices?
- How does it support scaled up and enhanced availability of services that address community needs and realities?

Launch of National Chapter of the Alliance

With preparatory activities completed, preparations for the launch of the National Chapter of the Alliance can be undertaken. The launch represents a visible, public statement of commitment by local authorities to the principles of the Alliance (contained in the Abidjan Declaration).

Draft a local authority declaration on HIV/AIDS.

The declaration is usually prepared by the national association of local authorities in consultation with its constituents. It should be a consensus document that is agreed upon before the launch. At the launch, it is presented publicly and often signed at the official

launch ceremony. The declaration should include these key elements:

- Statement of the problem, which outlines the crisis, threat and impact of the HIV/AIDS epidemic on urban areas and communities.
- Commitment of municipal leaders and mayors to take a lead in addressing HIV/AIDS in their local communities and how this will be achieved.
- Support for people living with HIV, and the organizations or groups that support them.
- Commitment to transparency and accountability.
- Endorsement of mayors and municipal leaders consisting of names, municipality affiliation and usually signatures.

Create a Task Force or Working Committee.

This group assigns specific individuals to work on the preparatory activities, launch ceremony and follow-on AMICAALL activities. Members usually include mayors, local authority association staff and other key partners, such as the Ministry of Urban Development (or its equivalent), National AIDS Programme and UN organizations, such as UNDP or UNAIDS.

Hold a highly visible public launch of the National Chapter of the Alliance.

This should include participation from: the head of state or other high-level representative; range of government officials; all mayors and municipal leaders; AIDS service organizations; religious and traditional leaders; people living with HIV and AIDS; youth groups; civil society and nongovernmental organizations; Alliance representatives from other countries; UNAIDS; other UN organizations; bilateral agencies; and the general public. The launch may include the following:

- A symbolic march by mayors and municipal leaders to spread the message to people in the streets and neighbourhoods.
- Guest speakers and motivational addresses.
- Entertainment, such as youth choir or dancing, to encourage hope and a positive message in coming together and addressing the epidemic.
- Keynote address by a prominent political figure to set the stage, highlight the importance of the event and to formally launch the Chapter.
- Invite media who should be briefed and provided with information and a press release.

The national launch should stimulate mayors to conduct similar local launches in their towns and cities and move forward with the planning and development of an AMICAALL action programme.

Follow up.

In some countries, local authorities and key stakeholders have held a planning workshop in conjunction with the launch. This planning activity provides an opportunity to further develop next steps, including the identification of key actions that can be taken in preparation for the development of an AMICAALL action plan.

Annexes.

A resource list and examples of a sensitization workshop agenda, national chapter launch checklist, national chapter launch ceremony programme and national launch declarations are included in the annexes.

ANNEX I

Resource List

Written and visual materials on the Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa and AMICAALL are distributed at the sensitization workshops and the launch. This includes:

- Alliance kits
- Background documents
- Abidjan Declaration
- Posters
- Videos
- Alliance newsletters.

Additional information can be found via the Internet at: www.amicaall.org

ANNEX II

Mayors' Sensitization Workshop Sample Agenda

- 1 - Objectives of the preparatory workshop.
- 2 - Presentation on global situation and development dimensions of HIV/AIDS (*UNAIDS or UN Theme Group on HIV/AIDS representative*).
- 3 - Presentation on national HIV/AIDS strategies and multisectoral response (*National AIDS Programme or Ministry of Health representative*).
- 4 - Presentation on the impact of HIV/AIDS at the municipal level, governance issues, multisectoral response and strategies and community mobilization, etc. (*local governance specialist*).
- 5 - Presentation on the Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa (*Alliance coordinator or representative*).
- 6 - Presentation on the AMICAALL strategy and programme of action (*UN-AMICAALL Partnership Programme representative*).
- 7 - Presentation/s on other AMICAALL Programmes, such as Burkina Faso, Mali, Namibia, Swaziland and Uganda (*National Coordinators*).
- 8 - Presentation on civil society role in the response to AIDS (*national AIDS service organization representative*).
- 9 - Other presentations as appropriate. (Topics could include social and cultural issues, stigma and discrimination, orphans and vulnerable children, workplace interventions, impact assessments, greater involvement of People Living with HIV/AIDS, policy and advocacy or resource mobilization.)
- 10 - Discussion session on presentations.
- 11 - Consideration of national local authority declaration on HIV/AIDS, including presentation of draft document.
- 12 - Plenary discussion of the draft declaration.
- 13 - Adoption of the national declaration by mayors and municipal leaders.
- 14 - Preparatory arrangements for launch of national chapter, including appointment of a Working Committee.
- 15 - Outline future strategies and next steps for AMICAALL national programme and/or other priorities.
- 16 - Note of thanks.

Notes: The exact format will depend on the number of participants and venue. It is important to make this as participatory as possible and build consensus and support for the Alliance and the follow-on AMICAALL activities. Next steps should be agreed upon and clearly laid out, then assigned to the working group and specific individuals.

How many preparatory workshops are needed depends on the size of the country and number of mayors and municipal leaders. If it is a large country and the resources are available, then mayors and municipal leaders could meet on a regional basis and then come together for a general meeting. The objective (however done) should be to ensure an inclusive national local government response and an environment for active participation of all local authorities--large and small.

ANNEX III**National Chapter Launch Checklist**

Activity	Responsibility	Deadline	Comments
Choose date and venue			
Draft national declaration			
Develop media strategy			
Prepare launch budget			
Solicit sponsorships – development partners, private sector, etc.			
Finalise Programme – keynote address, speakers, master of ceremonies, guests of honours, order activities etc.			
Invite head of state or other keynote person			
Print invitations			
Send invitations to all mayors, city and town councils			
Send invitations to international guests			
Send invitations to official guests – partners, NGOs, international organisations, govt. sponsors, private sector, etc.			
Invite schools, NGOs, communities, media, etc.			
Arrange and brief speakers			
Send out press release (print and TV/ Radio) and electronic media			
Media briefing - hold press conference (print and TV/Radio)			
Print programme			
Print posters			
Print declarations			
Order banners			
Order t-shirts			
Order decorations/flowers			
Organise flags – national, host city, local authority association, UN, etc.			
Secure venue			
Arrange accommodations for guests			
Organise transport – mayors, guests, etc.			
Arrange catering and refreshments for ceremony			
Arrange venue logistics – tent, chairs, tables, podium, etc.			

Activity	Responsibility	Deadline	Comments
Arrange/rent public address system			
Arrange for national anthem			
Organize entertainment—singers, dancers, video etc.			
Organize march—route, mayors’ participation, band, drum majorettes, school children, banners, police escorts, etc.			
Confirm protocol – for international guests and local dignitaries			
Make seating arrangements			
Organize ushers/volunteers			
Make traffic control provisions			
Confirm security			
Enlist secretarial support (e.g. mayors office or local authority association)			
Arrange help—set up, refreshments, clean up etc.			
Arrange transport—participants and equipment			
Arrange/hire photographer and/or video maker to cover event			
Get gifts for guest of honour, international guests, etc.			
Organize reception for visitors and guests			
Make list of contact/focal persons—Alliance, local authority association or equivalent, host city mayor’s office, etc.			
Trouble-shooter			

Notes: This is a broad list of “Dos”, or tasks, to accomplish in order to have a well-planned and organized launch. Each country will need to adapt it to their local situation, needs and resources. What is crucial here is to find one overall coordinator for the launch and have certain designated focal points/contacts who assist from various sponsoring organizations and clear delegation of responsibilities.

From this list, a calendar can also be developed (say starting three months before the launch ceremony) that can help guide this process. Like organising any public event (especially one with this importance), it is necessary to plan ahead and not wait until the last minute.

ANNEX IV

National Chapter Launch Ceremony Sample Programme

- 1 - National anthem
- 2 - Welcome and introduction by host city mayor
- 3 - Statement by Alliance Coordinator (or representative)
- 4 - Statement by national association of local authorities president (or equivalent)
- 5 - Introduction of guest speakers
- 6 - Address by guest speakers (e.g., a prominent AIDS activist or guest mayor from another country to talk about his/her country's AMICAALL programme)
- 7 - Introduction of the keynote speaker
- 8 - Keynote address by prominent political leader (e.g., head of state or minister responsible for local government or head of national AIDS authority) including official recognition and inauguration of the Alliance Chapter
- 9 - End of formal opening
- 10 - Refreshments

Notes: The official launch programme usually takes about two to three hours given that some entertainment is usually interspersed between the speeches. The highest-ranking person attending the ceremony is responsible for the actual 'inauguration' of the Alliance chapter.

ANNEX V

Specimen of Declarations for Launch of National Chapters

ALAN DECLARATION ON HIV/AIDS: Local Crisis-Local Action a Must

We, the Mayors and Municipal Leaders of local authorities of the Republic of Namibia, having taken cognisance of the magnitude of the HIV/AIDS epidemic and the significant impact on our cities, towns and villages, and local authorities in Namibia, under the auspices of the Association for Local Authorities in Namibia (ALAN) join our government and other Local Authorities in Africa and launch the Namibian Chapter of Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa.

Considering that local government, as an integral part of the national structure of governance, is the level of government closest to the people and, therefore, well placed to respond to the many challenges posed by HIV/AIDS.

Honouring the resolution during the 52nd Annual Congress of the Association for Local Authorities in Namibia, calling for a commitment to address the implications of HIV/AIDS on our cities, towns and villages.

Welcoming the commitments of African Heads of States or Governments, at the Organization of African Unity Special Summit in April 2001, particularly their pledge to allocate at least 15 percent of their annual national budgets for the improvement of the health sector to help address the HIV/AIDS epidemic.

Recognising and supporting the commitment made by His Excellency the President of the Republic of Namibia, Dr. Sam Shafiqhuna Nuyoma and the Namibian Government to promote multisectoral action on HIV/AIDS in Namibia.

Recognising the ABIDJAN DECLARATION of Mayors and Municipal Leaders of Africa of 9th December 1997, proclaimed in Abidjan, Cote d'Ivoire on the occasion of the 5th International Conference on STDs/AIDS in Africa.

Recognising and Appreciating the commitments and actions taken by African local authorities, continental and Namibian NGOs and other organizations to promote awareness of the socio-economic effect of HIV/AIDS on our societies and support measures to minimise its impact.

Recognising the establishment of the Alliance Continental Secretariat in Windhoek, Namibia and contributions made by both the Government of the Republic of Namibia and the City of Windhoek and our support to the Alliance Secretariat.

Expressing deep concern about the increase in orphans, street children, widows/widowers in our Cities, Towns and Villages, acknowledge the impact on sustainable urban development.

Acknowledging that poverty, in all of its manifestations, contributes to the spread of HIV/AIDS; local authorities are deeply concerned that HIV/AIDS is compounding poverty, reversing development gains and compromising the future development of our country.

Recognising that the full realization of human rights and fundamental freedoms for all is an essential element in an effective response to the HIV/AIDS epidemic, including in the areas of prevention, care, support and treatment, and that it reduces vulnerability to HIV/AIDS and prevents stigma and related discrimination against people living with or at risk of HIV/AIDS.

Convinced of the need for all Local Councils in Namibia to develop and implement policies and strategies appropriate to the specific HIV/AIDS related social, economic, developmental, cultural, human rights and health dimensions in our communities.

Taking into account all Global, Continental, National and Local initiatives, we thus affirm our commitment and resolve as the Namibian Chapter of the Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa to the Alliance of Mayors Initiative on Community Action on AIDS at the Local Level (AMICAALL) strategy and to the Abidjan Declaration.

As local governments of the Republic of Namibia we hereby commit to the following actions:

- Inclusion of strategies and resources to address the implications of HIV/AIDS for cities, towns and villages in our municipal management and service delivery agendas;
- In particular, develop and implement strategies and financing plans for combating HIV/AIDS that address the epidemic in forthright terms; confront stigma, silence and denial; address gender and age-based dimensions of the epidemic; eliminate discrimination and marginalisation; involve partnerships with civil society and with the business sector and the full participation of people living with HIV/AIDS, those in vulnerable groups and people mostly at risk, particularly women and young people; fully promote and protect all human rights and fundamental freedoms, including the right to the highest attainable standard of health; integrate a gender perspective; and address risk, vulnerability, prevention, care, treatment and support and reduction of the impact of the epidemic;
- Encourage all partners in the field of HIV/AIDS and development in our communities to collaborate with us in this initiative;

- Develop appropriate strategies and programmes to raise awareness of the impact of HIV/AIDS on socio-economic development in our Cities, Towns and Villages and to promote prevention, care, treatment and support as the mainstay of our response;
- Support the National Strategic Plan on HIV/AIDS (Medium Plan II) and the activities and programmes of the National AIDS Committee, the National AIDS Coordination Programme and Regional and District AIDS Committees;
- Encourage all stakeholders to work with us in partnership towards one purpose by harnessing both human and financial resources for effective implementation of our respective programmes and efforts;
- Support the continental Secretariat of the Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa in the same spirit as that shown by our Government and the City of Windhoek;
- Foster stronger collaboration and the development of innovative partnerships between the public and private sectors, and encourage United Nations Agencies to work closely with the Mayors and their local authorities, in order to establish an enabling environment and strengthen mechanisms that involve the private sector, civil society partners, people living with HIV/AIDS and communities in the fight against HIV/AIDS;
- Call for action to protect young people; identify and mobilize local capacity for prevention, care and support; and provide leadership and commitment in establishing a supportive environment that makes prevention, care and support possible;
- Commit to the establishment of municipal committees for HIV/AIDS, STD's (Sexually Transmitted Diseases) and alcohol and drug abuse in order to raise awareness, build local capacity, disseminate information and encourage a multisectoral approach to this crisis;
- In endorsing the above we, the leaders of local governments of Namibia, hereby sign this declaration in Windhoek on 30 October 2001:

Association for Local Authorities in Namibia (ALAN)

Cllr Helen Nkandi-Shiimi, President

Windhoek City Council

Walvis Bay Municipality

Swakopmund Municipality

Tsumeb Municipality

Keetmanshoop Municipality

Mariental Municipality

Okahandja Municipality

Henties Bay Municipality

Karasburg Municipality

Otavi Municipality

Outjo Municipality

Arandis Town Council

Oshakati Town Council

Ondangwa Town Council

Okakarara Town Council

Khorixas Town Council

Rundu Town Council

Aranos Village Council

Bethanie Village Council

Uis Village Council

Maltahohe Council

Witvlei Village Council

Gibeon Village Council

Otjiwarongo Municipality

Karibib Municipality

Gobabis Municipality

Omaruru Municipality

Usakos Municipality

Katima Mulilo Council

Opuwo Town Council

Ongwediva Town Council

Otavi Town Council

Rehoboth Town Council

Eenhana Town Council

Aroab Village Council

Koes Village Council

Leonardville Council

Tses Village Council

Outapi Village Council

Gochas Village Council

SNALA Declaration on HIV/AIDS

A Declaration by Mayors and Municipal Leaders of the Cities and Towns of Swaziland on HIV/AIDS

PREAMBLE:

We, the leaders and representatives of local governments of the Kingdom of Swaziland:

Firmly concede that the HIV/AIDS epidemic is indeed a national crisis as declared by His Majesty King Mswati III;

Considering that local governments, as an integral part of the national structure of governance, is the level of government closest to the citizens and therefore is well placed to respond to the many challenges posed by the HIV/AIDS epidemic;

Realising that the threat and propensity of the pandemic to critically impact on the way of life of the Swazi population;

Deeply concerned that the towns and cities of Swaziland are becoming increasingly flooded by street kids, orphans, affected families who try to make ends meet through street vending and other means that will in the long term adversely impact on sustainable urban development;

Recognising that national and international efforts to fight the scourge need to be augmented at local (grassroots) level;

We thus affirm our commitment and resolve to the Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa and to the Abidjan Declaration.

We commit ourselves and our respective local governments to the following:

Creating an enabling environment wherein multi-faceted approaches to HIV prevention and care of infected and affected persons can develop;

Providing the necessary institutional capacity and financial support however possible to the already existing NGO structures and HIV/AIDS programmes;

Supporting and fund-raising for programmes and campaigns towards the HIV/AIDS fight;

Raising awareness and changing attitudes on stigmatization, denial, rape, incest, multiple partners and other unsafe practices;

Developing programmes to reduce the socioeconomic impact of HIV/AIDS in cities and towns.

In endorsing the above we, the leaders of local governments of Swaziland, hereby sign this declaration at Manzini on the 28th day of January 2000.

Manzini City Council

Mbabane City Council

Nhlangano Town Council

Piggs Peak Town Council

Siteki Town Council

Hlatikulu Town Board

Lavumisa Town Board

Mankayane Town Board

Ezulwini Town Board

Ngwenya Town Board

Vuvulane Town Board

DECLARATION OF MAYORS AND MUNICIPAL LEADERS OF THE REPUBLIC OF ZAMBIA

We, the Mayors and Municipal leaders of the Republic of Zambia, having taken cognisance of the magnitude of the HIV/AIDS pandemic and the significant impact on our cities, towns and villages, under the auspices of the Local Government Association of Zambia (LGAZ), join our government and other Local Authorities in Africa and Launch the Zambian Chapter of Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa.

Considering that local government, as an integral part of the national structure of governance, is the level of government closest to the people and, therefore, well placed to respond to the many challenges posed by HIV/AIDS

Honouring the resolution during the 46th Annual Conference of the Local Government calling for a commitment towards efforts to support and coordinate the eradication of HIV/AIDS and gender disparities in our cities, towns and villages.

Recognizing and supporting the National Strategic Framework to promote multisectoral HIV/AIDS Programmes in Zambia

Believe that the Private Sector is a key partner in the fight against HIV/AIDS

Expressing deep concern about the increase in orphans, street children, widows/widowers in our cities, towns and villages, acknowledge the impact on sustainable development

Acknowledging that poverty, in all of its manifestations, contributes to the spread of HIV/AIDS; local authorities are deeply concerned that HIV/AIDS is compounding poverty, reversing development gains and compromising the future development of our country

Recognizing that the full realization of human rights and fundamental freedoms for all is an essential element in an effective response to the HIV/AIDS pandemic, including in the areas of prevention, care, support and treatment, and that it reduces vulnerability to HIV/AIDS and prevents stigma and related discrimination against people living with or at risk of HIV/AIDS

Convinced that all Local Councils in Zambia need to develop and implement policies and strategies appropriate to the specific HIV/AIDS related social, economic, developmental, cultural, human rights and health dimensions in our communities.

To this end we have agreed to:

- Contribute to the reduction of the socio-economic impact of HIV/AIDS in our communities by implementing effective measures to reduce HIV transmission
- Promote coordinated local multisectoral approaches for HIV/AIDS prevention and care of infected and affected people
- Participate in efforts to mobilize the necessary human and financial resources to implement local strategies
- Ensure the active involvement of people infected and affected by the HIV/AIDS epidemic in designing and implementing
- Strengthen solidarity amongst our cities, towns, villages and developing effective partnerships with national and international public and private stakeholders.

We, therefore commit ourselves to:

- Ensuring that the search for an effective solution to HIV/AIDS is a public policy priority
- Effectively involving our citizens in designing action plans, defining local strategies, an implementing activities
- Providing the necessary institutional support to our cities, towns and local communities and strengthen their capacity to intervene
- Guaranteeing transparency and accountability in programme management.

We, Mayors, Local Government and Municipal leaders, hereby endorse this declaration:

Endorsed by seventy two Local Government Authorities

Tool 2

Forming a Municipal HIV/AIDS Team

Purpose

In the AMICAALL approach, a Municipal HIV/AIDS Team plays a central role in planning and guiding the local response. The team brings together representatives of the different groups involved in the local response to HIV/AIDS.

Questions to Consider

Do you **need** to have an MHT in your area i.e. does any similar mechanism already exist at local level that you could join or draw upon?

Which are the **key groups** that need to be represented on your MHT?

What **indicators** could you use to measure the progress of your MHT?

How will you ensure that the team addresses the needs of **women** and of **people living with HIV/AIDS**?

Who is going to take responsibility for **getting the team up and running**?

FORMING A MUNICIPAL HIV/AIDS TEAM

What is the Municipal HIV/AIDS Team?

- The Team is a working group responsible for guiding the development and implementation of a municipal and community-based response to HIV/AIDS. It meets on a regular basis.
- The size of the Team is determined by the size of the municipality and the resources (human and technical) available. (Annex I provides practical guidance on resource mobilization).
- The Team may include as few as five or six individuals/organizations or as many as 10 to 15. It should be sufficiently large to be representative of the municipality's response to HIV/AIDS, but small enough to remain viable as a working group. A smaller core group is better with other members co-opted for specific tasks as necessary.
- The composition of the Municipal Team can be reviewed on a regular basis.
- It is important that each member is fully committed to addressing HIV/AIDS and has sufficient time and capacity to carry out the tasks that are allocated. Since Team members have other jobs, they will need to have the support of their line managers or organizations agreeing to their participation in the Team and involvement in its tasks.

What is the purpose of the Team?

To be responsible for guiding and facilitating the development and implementation of a municipal and community-based response to HIV/AIDS in collaboration with key local government and community stakeholders.

In some municipalities, the Team has developed by focusing on the completion of a specific task. In Namibia, for example, the Windhoek Municipal HIV/AIDS Team collaborated on the development of an HIV/AIDS Service Directory for public distribution, while in Otjiwarongo, the team focused its attention on the establishment of a multi-purpose centre offering a range of services to vulnerable young people, HIV/AIDS affected households and the larger community.

To whom is the Team accountable?

The team is accountable to the highest authority of the local government e.g. the Mayor or the Chief Executive.

Who are the members of the Team?

- The group should include an individual designated as the HIV/AIDS Focal Point. This individual should be accountable to the highest level of local government authority (usually the Mayor). They should participate independently rather than as a representative of a specific sector. They should have working relationships with general local government and specific HIV/AIDS structures.
- Representatives of the mayor's office, councillors and local government staff from a range of sectors (i.e. not limited to the 'health' sector) including planning, education, youth, housing, etc.
- Representatives of civil society and local communities including: private sector organizations, faith-based organizations, police, media, community based service organizations for PLWHA, women and youth representatives, and informal neighbourhood groups.

What are the Team's key tasks?

- To guide and facilitate the development of a coherent and realistic HIV/AIDS strategy internally for the local government workplace and externally for HIV/AIDS service delivery and local coordination.
- In the 'start-up' phase the Team will oversee a situation analysis (What is currently being done? What are the gaps? etc.), develop a strategy and implementation plan and secure resources to implement the plan. Once implementation is underway, the focus of the Team will be on coordination and monitoring.
- To coordinate the implementation of the municipal HIV/AIDS response. Implementing partners include local government agencies as well as nongovernmental organizations and community-based organizations, as appropriate.
- To identify and work with focal points/offices in all local government departments and nongovernmental and civil society organizations responsible for implementing HIV/AIDS activities, and to monitor their progress.
- To facilitate communication and reporting on the municipal HIV/AIDS response within the local government authority and to the broader public.
- To serve as a forum for problem solving in relation to obstacles that may arise in implementing local responses to HIV/AIDS.

- To manage, monitor and report on any specific funding (in line with associated requirements), which has been allocated via the Team to the Local Government HIV/AIDS Response.
- To promote the development of a larger “representative network” of individuals and organizations, not necessarily currently involved in HIV/AIDS activities, but with potential to support the work of the Team such as technical experts, or decision-makers from key sectors.
- To meet with Teams/Coalitions from other municipalities to share lessons learned.

ANNEX I

Suggestions for Resource Mobilization

Introduction

- The issue of resource mobilization needs to be a process engaged in by the Municipal HIV/AIDS Teams, rather than an external ‘quick-fix’ solution.
- While generating external resources can be an issue around which the Taskforce can gather, it is preferable for them to have come together before this and to be clear on agreed strategies and projects.
- The same is true with respect to local resource mobilization. While there may be opportunities which appear possible to an outsider, unless these are identified and the advantages and disadvantages considered by local players, these can actually produce tensions and may be ultimately destructive to the effective working of the team.

Local Resource Mobilization

Representation of the private or business sector

- It is suggested that the team considers the relationship with the business sector as more than just a source of funding, but as an opportunity for a business exchange. Examples include:
 - Advertising space on the HIV/AIDS Directory in exchange for sponsorship of printing;
 - Training of employees on HIV/AIDS by organizations with relevant capacity; sharing of materials, condoms or testing and counselling services, etc.
- Teams are encouraged to investigate the potential availability of a range of resources and capacity rather than focusing narrowly upon funding. Other resources could include:

Equipment Photocopiers, computers, email facilities, fax, vehicles etc (which may be in very short supply and therefore of great value).

Buildings Physical space for meetings, offices, counselling services, etc. Sharing of space can be of great assistance and improve the capacity of partners to deliver.

Training Capacity Training and capacity building is a valuable resource much in need by different partners and communities. Identification

of training capacity and matching with community-based and nongovernmental organizations needs assists in maximizing resources.

Skills

Different partners possess a range of potentially complementary skills e.g. facilitation, communication, secretarial, proposal writing, counselling, and financial management. Pooling skills on joint endeavours can assist in accelerating progress and prevent delays resulting from lack of capacity among some partners.

- Teams are encouraged to develop a local resource mobilization strategy based on identification of the strengths and weaknesses of its different partner organizations, and a recognition of where and how resources could be shared, if not permanently, then at least for the purposes of joint projects.

External Resource Mobilization

- Before the search for external resources begins, Teams should have formulated a municipal strategy, agreeing which projects/services will require external funding.
- Lead partners for each project/service could then come together, including those with expertise in proposal writing, to prepare proposals in respect of each or several projects/services. Included in the proposal should be the local contributions in funding or in-kind support for the project/service.
- Partner organizations can also share information regarding possible donors. Some donors find it difficult to fund local government directly. Therefore it may be strategic to apply for funding via nongovernmental organizations. An alternative is the creation of a joint funding structure for the Team through the establishment of a not-for-profit entity.
- External resource mobilization has commenced in a number of countries, with support from National AMICAALL Programmes, the Alliance Secretariat and the UN AMICAALL Partnership Programme (UN APP), which have been successful in raising funds from a range of donor partners, both public and private. This then becomes a second potential external route, which looks at the partnership between municipalities as well as within municipalities. Clearly this is a route that should continue to be pursued, hopefully informed by the priorities and projects/service needs identified through local planning processes.
- National AMICAALL offices have been playing a valuable role in both preparation of funding proposals and identification of possible donors. Identification of funding sources should be assisted by Mayors, Local Government Associations and other development partners that support decentralized responses to the epidemic.

Tool 3

Checklist for Preparing a Municipal Profile

Purpose

Municipal profiles are a useful resource for anyone involved in local responses. A Profile provides an overview of the local government structure, population, infrastructure, economic activities, HIV/AIDS assessments and existing services and policies responding to the epidemic.

This note provides a structured checklist necessary for developing a Municipal profile.

Questions to Consider

What sources will you use for relevant information?

How often will you update the Profile ensuring that the statistical information is current?

How will you disseminate the Profile?

CHECKLIST FOR PREPARING A MUNICIPAL PROFILE

Name of city/town/municipality

Local Government structure

- Council Members (#)
- Annual Budget
- Source of funding (local revenues, national government)
- Municipal Services (all)

Population

- Total Population
- % Male
- % Female
- % Stable population
- % Transient population
- HIV prevalence
- % Orphans
- Poverty rate
- Unemployment rate
- Adult literacy rate

Infrastructure (brief description of services provided, target groups, geographic coverage)

- Health facilities
- Education facilities
- Social facilities

Economic activities

- Commerce, Industry, Handicrafts, others

Response to HIV/AIDS – Existing Services

- Prevention
- Care and support
- Treatment
- Impact mitigation

Service Providers (including description of services, target groups (e.g. vulnerable children and young people, people living with HIV, women), geographic coverage, source of funding)

- National government
- Provincial/State/Regional government
- Local government
- Nongovernmental sector
- Private sector
- Religious sector
- Others

Response to HIV/AIDS – Policies

- National (role of local government)
- Municipal (role of local government)
- Workplace (public and private sector workplaces, including municipalities)
- Human Rights
- Decentralization

Impact assessment, identification of gaps, capacities at local government level

- Rapid assessment and gap analysis (services and capacities)
- Service needs by sector, by population group
- Capacity needs by service providers
- Priorities (short-term, longer-term)

Tool 4

Preparing a Municipal HIV/AIDS Directory

Purpose

Preparing a Municipal HIV/AIDS Directory is an important task for four main reasons. First, it acquaints the Municipal HIV/AIDS team with the range of available services and those providing them. Second, it provides a useful resource for anyone involved in the local response. Third, it helps with future planning by identifying important gaps. Fourth, it provides the local population with access to information about available HIV/AIDS services in their cities and towns.

Questions to Consider

Do any such directories already exist, in whole or in part?

How will you present the Directory?

How will you use the Directory?

How will you disseminate the Directory?

How will you maintain the Directory?

PREPARING A MUNICIPAL HIV/AIDS DIRECTORY

Why a Municipal HIV/AIDS Directory?

For those in need of support

A directory of HIV/AIDS-related services, such as prevention, care and support, treatment, training and advocacy, is essential for those infected and affected by HIV/AIDS and indicates they are not alone, that assistance is available.

Sensitization

A directory can serve as a sensitization document for the general population by educating citizens, encouraging de-stigmatization and promoting services. It includes a section on basic facts about HIV/AIDS and modes of transmission and suggests ways in which People Living with HIV (PLWHA) can live positive, healthy and productive lives.

Municipality commitment

As an example of a municipality's active response to HIV/AIDS, the directory is also evidence of commitment to addressing HIV/AIDS and providing information to the public.

For service providers, policy makers and donors

As a "snapshot" of available HIV- and AIDS-related services, a directory can be used to stimulate greater collaboration and coordination; identify gaps in the current response; and encourage a more integrated approach to service provision. This can be part of a larger effort to enhance commitment and capacity for scaling up responses to the epidemic.

Contents of the Directory

Upfront a Municipal HIV/AIDS Service Directory should include:

- A preface by the Mayor or City Council stating the municipality's commitment to confronting HIV/AIDS and helping their citizens.
- A copy/summary of the city's HIV/AIDS policy, if available.
- Basic facts on HIV/AIDS.

For its core, the directory contains an exhaustive list of information on all HIV-and AIDS-related services available in a city or town operated by the municipality, government ministries, health facilities, international agencies, development partners, nongovernmental organizations, faith-based organizations and community groups. This information should include:

- Type of organization (i.e. nongovernmental organizations, government organization etc.).
- Name of organization.
- Short organization profile and statement of purpose.
- Organization contact information (complete address, telephone, fax, email, etc.)
- Targeted group (i.e. people living with HIV, adolescents, women, general public etc.).
- Services provided.

NOTE: Information should also be collected on community groups and organizations that:

- Provide support to build the capacity of HIV care-givers.
- Provide support (in whatever capacity) for orphans and vulnerable children.
- Undertake HIV/AIDS community-based information and education activities through dance, theatre, etc.
- Undertake other relevant HIV/AIDS activities or services in the community.

Preparing the Directory

Collecting information

Although approaches may vary, it is important to identify a focal point/person in each municipality to be responsible for facilitating the data collection. The task of data collection and compilation can be assigned to someone within the municipality, a consultant or outsourced to a nongovernmental organization capable of this work. All service providers should be contacted and encouraged to contribute information. The information collected should be reviewed for accuracy and a database produced to enable periodic updating of information.

Producing the Directory

Once the information is collected, it should be published in hard copy as a brochure and online as a PDF document.

The date of publication should be included on the hard copy and digital version of the directory.

Disseminating the Directory

The hard copy version of the directory should be distributed free of charge to the general population through various channels determined by the municipality. They may include: City Council offices, libraries, health centres, community centres, schools, and other public places. If feasible, municipalities could also distribute the directories to households. The directory should be placed on the City Council's website and other websites, as appropriate.

Publicity activities should be undertaken where possible. For example, low cost fliers and posters, containing information on where the directory can be found, can be distributed on the street and the posters can be hung up in key public spaces such as shebeens, cafes, bus stops, etc. Advertisements for the directory in local newspapers/publications or on the radio are other possible avenues for publicity.

Preparation of a Budget for the Directory

Breakdown of the usual costs involved:

- Consultant services to facilitate the collection of information.
- Translation for local language version.
- Graphic design and layout of the brochure.
- Printing.
- Development of a database, including the data entry.
- Updating information periodically, at least once a year.
- Publicity for the directory (e.g. posters, flyers, radio ads, etc.).

An example of a Municipal HIV/AIDS Directory can be found on the AMICAALL website:

<http://www.amicaall.org/publications/directory/windhoek.pdf>

Tool 5

Conducting a Community Assessment Example: Orphans

Purpose

To illustrate community action planning with regard to a specific population e.g. orphans.

Questions to Consider

What other groups might you consider to be the focus of your community action?

In what ways might the planning process be different in relation to these groups?

Has any other work already been undertaken with these groups? If yes, how could you benefit from this?

CONDUCTING A COMMUNITY ASSESSMENT EXAMPLE: ORPHANS

Introduction

The purpose of these activities is to guide you in working with a local community to explore a particular problem and to consider a range of responses to it. In this case, the activities focus on orphans and vulnerable children, but the process could be adapted to explore a range of other concerns.

The activities allow you to explore the problem from the point of view of those most affected by it as well as of those involved in responding to it (i.e. service providers). This note is intended to help you plan and conduct the activities, to identify key learning and to use this in planning next steps with the community and service providers.

Doing these activities will help you—as the Municipal HIV/AIDS Team—to work together as a team and to work in collaboration with local communities and service providers, drawing on their insights and experiences of the problems they face.

The activities will also help you strengthen collaboration with existing service-providers and to work with them in identifying and responding to important gaps.

The Annex contains examples of some responses to working with orphans from different countries.

Process

We think that the best way to learn about undertaking assessments is by doing them. We suggest that you do this gradually, taking one topic at a time and using the experience to build the confidence of the Team. This Guidance Note focuses on orphans, but future examples might include:

- Prevention
- Treatment
- Home-based Care
- People living with HIV advocacy

Steps

1. Identify what you need most to know about orphans and vulnerable children to be able to take effective action.

- For example, you need to know the *size of the problem*, i.e. how many orphans and vulnerable children are there in the community now? Who keeps this kind

of information? If it is not available, who should keep this kind of information? How should this information be shared?

- You need to know the *nature of the problem*, i.e. what are the most important needs of these children? How are these being met presently (or not)?
- You need to know how *the community is coping with the problem*, i.e. who looks after orphans? Are there children who are not looked after? What is happening to them?
- You need to have an idea of how *the problem might be changing*—will there be more orphans and vulnerable children? Will families be able to cope? If not, what might happen?

2. Having identified the key questions to ask, you need to identify who might best answer these questions:

- *Orphans and vulnerable children themselves*—what do they see as their most important needs and concerns?
- *Community members*—how are they affected now by orphans and vulnerable children? What would be of most help to them in looking after these children?
- *Service providers*—how are they responding to the needs of these children? What gaps exist in terms of service provision? What would be of most help to them in meeting the needs of these children?
- Any others?

3. Choose the best way to ask your questions:

You will probably need to use a combination of ‘one to one’ and group discussions. ‘One to one’ is probably best when you need to get factual answers to specific questions such as the questions for service providers. Group discussions are particularly useful for exploring a problem in more detail.

For both methods, you should practice with each other before you go out to use it in the community.

The most important skills for a group discussion are being able to ask clear questions, to listen, to encourage everyone to speak, to avoid imposing your own opinions and to take clear records. It may be useful to work in pairs, with one person leading the discussion and the other taking notes.

Groups should be kept small and divided according to gender, age and, if appropriate, by other important variables. Make sure that you include as many different sections of the community as you can.

You need to explain the purpose of the discussion (or interview) and why taking notes is necessary. Reassure participants that no individual participant will be identified in any subsequent discussion. The note-taker should summarize at the end and check with participants that the summary is an accurate reflection of the discussion.

You can ask for volunteers who are willing to come and participate in the meeting at which you will present and discuss the findings.

Suggested Questions for Community Group Discussions

What has been the most serious impact of HIV/AIDS on your community/ household/ family/children?

How many households would you say are now looking after orphans and other vulnerable children?

In the last year, has the situation got better or worse in terms of the numbers of orphaned children?

What do these children need most (physically, emotionally, economically)?

What do households need most to be able to look after them?

What does the community need most to make sure these children are looked after?

How could we find out if things are getting better or worse in relation to the care of these children?

Sometimes it can be helpful to ask people to draw a picture or to tell a story in response to questions. This can be useful in making the discussion more concrete and it is particularly useful with children and young people (with whom you would need to ask more relevant questions). Participants may wish to volunteer to present the outcomes of this work (e.g. drawings or stories) at the presentation meeting and this can ensure that the proceedings remain grounded in local realities.

4. Decide who will be responsible for conducting the interviews/discussions.

5. Agree to a timetable and stick to it.

6. When all the discussions have been completed, have a meeting to discuss how you will present the data. It is probably simplest to do this by presenting

each of the key questions you set out to ask in turn together with the relevant answers. Do not be afraid to say that you do not have all the answers!

7. Call stakeholders together and involve as many community members as you can.

8. Present your data (if possible involving community members) and then discuss:

- What have been the most important things we have learned about orphans and vulnerable children?

9. Brainstorm priorities for action before considering the following questions:

- Who should be the focus of our action?
 - Most vulnerable orphans themselves?
 - Most affected families?
 - Most affected communities?
- What should be the focus of our action?
 - Immediate survival needs, e.g. nutrition, health, schooling, and skills training?
 - Longer-term support to households and families, e.g. through economic strengthening and/or psychosocial support?
 - Advocacy with community groups, local and higher level political bodies?
- Have we considered: Gender? Age? Sustainability? Do girls need different kinds of support from boys? Different age groups may need different types of support. How can we ensure that actions to support orphans can be sustained?

10. When the priorities for action have been identified, clarify:

- Who will be responsible for what? For example, preparing a plan to address the problem? Finding resources, financial and technical, to implement a plan to address support to orphans.
- How will we know if we have achieved this?
- What topic or issue should we consider next?

ANNEX I

Service Providers

Name of Organization	
Contact Person and Details	
Type of Organization: e.g. nongovernmental	
Broad overall goal of the organization	
Describe your work with orphans	(Describe)
Structure of organization (number and status of staff/ volunteers, full/part-time – number of hours)	
Annual budget (overall)	
Source of funding for orphan programme(s)	
Geographical area covered	
Number of clients seen in last month	
Describe your monitoring system	
Most important gaps and priorities in service provision for orphans	
Key sources of data	
Key partner organizations	

ANNEX II

The Experiences of FOCUS, COPE, World Vision, AMICAALL Namibia SOS Programme

Families, Orphans and Children under Stress (FOCUS). The FOCUS programme in Zimbabwe supports community-based orphan initiatives at urban and rural sites in Manicaland. Female volunteers, often widows with orphans, are given the basic training they need to identify and register orphans in the community. At each site, a church leader, together with a committee composed of other community members, runs the programme. Needy orphans are identified, visited regularly, and provided with material support to help them stay in their homes and communities. Assistance includes helping children to rebuild their homes and giving them food, blankets, and primary school fees. An important aspect has been identifying ways to support orphans that complement the existing coping mechanisms. Also crucial has been encouraging the more important members of the communities to be involved in helping affected families. This approach has, in turn, encouraged other members of the community to provide support and has been an important strategy for reducing stigma and community rejection (Foster, 2000)².

COPE (Community-Based Options for Protection and Empowerment). The COPE programme established in Malawi by the Save the Children Federation has developed a strategy to mobilize sustainable, effective community action to mitigate the impact of HIV/AIDS on children and families. COPE's main purposes are (a) to catalyse the formation of community care coalitions in efforts to respond to the needs of children and families affected by HIV/AIDS, and (b) to strengthen the capacity of these coalitions through the appropriate trainings to mobilize internal resources, access external resources, and organize village care committees and build their capacity to undertake initiatives intended to assist AIDS-affected children and families. At the beginning, COPE collaborates with village headpersons and volunteers to implement a set of interventions (in health, psychosocial, and economic areas intended to assist AIDS-affected families and their children). This initial phase is supposed to last about six months—that is, the period necessary for COPE to help the community start a community-based care initiative that should continue when COPE phases out (Krift and Phiri, 1998). Yet new evidence suggests that a better approach would be for COPE to phase down instead of phasing out to make the transition smoother (Williamson and Donahue, 2001)².

World Vision (WV) Approach. WV supports community-led home care initiatives in which a coalition composed of concerned community members takes responsibility for identifying, monitoring, and protecting orphans and vulnerable children (OVC) with the assistance of WV. Those targeted include orphans, children whose parents are chronically ill, children living in households that have taken in orphans, and other children the community identifies as vulnerable. Coalition members are volunteers trained by WV to provide adequate assistance and care during their regular visits to orphans, vulnerable children and their families. The neediest children and families are provided with in-kind support (education, nutrition, health, clothing, and blankets), but also with, among other things, access to safe water, spiritual and psychological support, succession planning, and training in life-sustaining skills. Practical support is also given, such as assistance with basic household tasks, care for the chronically ill, and day care centres for young children. One of WV's objectives is to build the capacity of the coalition by providing training in planning, proposal writing, budgeting, monitoring, and reporting so that the coalition can access and manage external resources in order to address other needs (World Vision 2002 can be accessed at www.wvi.org)².

Skills, Opportunities and Self-reliance (SOS) - AMICAALL Namibia in collaboration with ORT International Cooperation, an international nongovernmental organization specialising in vocational and technical training, and the UN AMICAALL Partnership Programme, are implementing a programme targeting orphans and vulnerable youth. Through this programme, orphans and vulnerable youth are able to access vocational training, employment or self-employment skills to enable them to earn a living and contribute to their societies. The vocational and employment skills training activities are coupled with youth development activities and access to HIV prevention education and information. This programme is also helping municipalities to set up systems to monitor support to orphans and encourage the setting up of referral systems amongst service providers so that orphans and vulnerable youth can better access a range of support services. (www.amicaall.org)

² quoted in Kalanidhi Subbarao and Diane Coury, *Reaching Out to Africa's Orphans: A Framework for Public Action*, The International Bank for Reconstruction and Development, The World Bank, 2004.

Tool 6

Developing a Community Based HIV/AIDS Action Plan at the Municipal Level

Purpose

This note provides simple, structured guidance on planning community action.

Questions to Consider

What assessments have been conducted that you could draw upon in your planning?

Does a suitable planning group mechanism already exist?

DEVELOPING A COMMUNITY BASED HIV/AIDS ACTION PLAN AT THE MUNICIPAL LEVEL

This guidance note has been prepared for Municipal HIV/AIDS Teams or other similar mechanisms that have responsibility for coordinating and planning local action to respond to HIV/AIDS. The purpose of the note is to provide a simple, structured guide to planning community action.

1. If you have not already done so, **establish a planning group** as a committee or sub group of your Municipal HIV/AIDS Team. The group should include representation from district HIV/AIDS teams (where these exist), from local government and local communities, including for example, people living with HIV, nongovernmental and community-based organizations, as well as from the private sector. If you think it necessary, ask someone to facilitate your sessions(s), allowing all the group members to focus on the task.
2. Familiarize yourselves with critical information in terms of your **national policy and strategy** on HIV/AIDS to make sure that your plan is consistent with this. You may want to invite a representative of the national HIV/AIDS programme or commission to come and talk with you about the programme, to help you in your planning or to observe and learn about planning at the local level.
3. Review the **findings of the municipal/community assessment** and consider the question: “what is the current situation within our municipality/ community?”
4. Think ahead and decide what you would like the situation to be in the future, for example five or ten years from now?
5. On the basis of your community assessment and your future vision, **identify priorities** in terms of specific target groups,—e.g. orphans and vulnerable children, child-headed households, young women—and specific **actions** to be implemented:

e.g. to establish a daily feeding programme and referral centre for all the orphans within our municipality or community.

6. Identify partners who will be involved in implementing the action together with the specific roles to be played by each.
7. Clarify the resources (financial, technical and human) needed and who will provide them:

e.g. municipality (will provide premises and some financial support), nongovernmental organizations (will provide human and technical support), and private sector (will co-finance).

8. Establish specific objectives (that are SMART: Specific, Measurable, Achievable, Realistic and Time-related) and check that these are acceptable to all partners:

e.g. by the end of March 2005 to provide a daily feeding programme for xxxxx orphans through xxxxx centres through the municipality/commune of xxxxx.

9. Identify how you will monitor the progress of your activities and evaluate their success, e.g. what kinds of records will need to be kept and what reporting will be required?
10. Use the checklist in Annex I to assess your plan.

ANNEX I

Checklist for developing a municipal HIV/AIDS plan

ISSUE	ACTION
Be consistent with the overall national HIV/AIDS policy and strategy	Familiarize yourselves with national HIV/AIDS policy and strategy documents and other relevant documentation.
Compliment the plans and work of other government and nongovernmental agencies	Consult widely during the planning process for example by inviting key individuals to join the planning group or participate in specific sessions.
Be gender-sensitive	Consider each element of the plan in turn—ask yourselves if it addresses the specific needs of girls and women, and, if not, how it could be made to do so.
Be clear and targeted at particular groups	Describe priority groups e.g. youth, orphans and vulnerable children, people living with HIV (PLWHIV), women, etc. and each action to be implemented.
Be explicit regarding the roles and responsibilities of all partners	Describe respective functions and allocate roles and responsibilities.
Make best use of available resources and identify how additional resources can be accessed, as needed	Identify the resource needs of the plan: human, technical and financial and how these will be made available.

Tool 7

Guidance on Monitoring and Evaluation of AMICAALL Small Grants

Purpose

To demonstrate a framework for monitoring and evaluation of a Small Grant Scheme.

Questions to Consider

What is the monitoring and evaluation requirement of your funder? Will this format meet their requirements?

Who will be responsible for monitoring and evaluating the Small Grant Scheme?

GUIDANCE ON MONITORING AND EVALUATING AMICAALL SMALL GRANTS

Monitoring Form: AMICAALL

Period:

AMICAALL	Comment	MEANS OF VERIFICATION
Number of proposals received		Copies of proposals
Number rejected		Copies of rejection letters
Number approved		Grant Award letters Record of bank transfer
Number of Grants awarded by Municipality		Minutes of meeting of the Award Committee
Grants By Target Group: e.g. PLHIV Orphans Women Young people		Memorandum of Understanding with grant recipients
Average amount of grant		Memorandum of Understanding with grant recipients
Number and locations of site visits		Site visit report
Technical assistance needs identified and responded to		Site visit report

Monitoring Form: Implementing Agency

Period:

IMPLEMENTING AGENCY	Progress to date	MEANS OF VERIFICATION
List key objectives activities as per proposal: 1. 2. 3. 4. etc.	Describe what has been achieved so far in relation to each objective /activity 1. 2. 3. 4. etc.	1. 2. 3. 4. etc.
	Comment	
Amount Budgeted		Financial report
Amount Spent		Financial report
Technical assistance needs identified		Technical assistance Provided

Key Evaluation Questions

It will probably not be possible or appropriate to answer all of the following questions. Therefore, you will need to select those questions that are most appropriate to the focus of your evaluation and to the nature of the particular project.

Your conclusions should be based upon what you have **seen** (observations of project activities) and what you have **found out** (from relevant documents and interviews with project stakeholders including implementers and beneficiaries). Where possible, use direct quotes from members of these groups.

The questions below are divided into categories (highlighted in bold and underlined). These categories reflect different dimensions of the project (e.g. the community-based nature, groups with whom the project works, gender dimensions, etc.).

Under each category heading, the bulleted text in bold are the key questions to be considered. Where relevant, additional questions are provided to demonstrate how key questions might be explored in more detail.

Community-Based

- What evidence is there that the project is community-based?
- Where is the project managed?
- Where is it actually based?
- Where do project activities take place?

Vulnerable Groups

- **Which specific *vulnerable groups* are involved in the project?**

Describe the ways in which members of these groups are involved in the project:

Do members of vulnerable groups have any decision-making role in relation to the project?

Are they involved in implementing the project activities?

Gender

- **In what specific ways are women involved in the project?**

What roles do women have in the project? (i.e. are they beneficiaries, project implementers, decision-makers?)

What steps have been taken to encourage women to participate in the project? (e.g. has special training been provided or childcare facilities organized?)

Partnership

- **Describe the different ways in which local government, civil society and local communities relate to each other in this project in terms of communication.**

Make a diagram of all the different groups who are involved in the project.

e.g. local government, Municipal HIV/AIDS Teams, nongovernmental organizations, beneficiaries etc. Draw lines to demonstrate how communication occurs, e.g. who talks to who within the project—for example, are there opportunities for beneficiaries to talk to project decision-makers? Highlight which groups are responsible for decision-making within the project.

Learning and Information-Sharing

- In their own words, what have been the specific benefits from the project for local government? Local implementers? Beneficiaries?
- What specific tasks can local groups now perform as a result of this assistance that they could not previously do?

Capacity Building

- Has any specific technical assistance been received? If so, describe.

What needs have been addressed?

Who provided the assistance and how was this done? (e.g. through training, exchange visits?)

Sustainability

- **What potential exists for future expansion in terms of:**
 - Need
 - Capacity to implement among local partners
 - Possible funding sources

Overall

- **What have been the three most important lessons you have learned so far?**

On the basis of your experience so far, if you were to undertake another project, what would you do differently?

Tool 8

Integrating Local Government in National HIV/AIDS Plans

Purpose

This note demonstrates how one country has integrated local government within its national response to HIV/AIDS.

Questions to Consider

What is the role of local government as articulated in our current national HIV/AIDS plan?

Do we need to do more advocacies at the national level to show more clearly how local government can contribute to the national response?

Are we engaging in the tasks allocated to us within the national plan?

INTEGRATING LOCAL GOVERNMENT IN NATIONAL HIV/AIDS PLANS

Taken from the Republic of Namibia's National Strategic Plan on HIV/AIDS (Third Medium Term Plan MTP III 2004-2009), the excerpt that follows provides an example of how one country has integrated the role of local government within its national response to HIV/AIDS.

This example raises a number of key points that are potentially relevant to demonstrating how local government can contribute to the overall objectives of a national response to HIV/AIDS in any country. These include explicit recognition of:

- Local government as a sector in its own right;
- AMICAALL and local government authorities as key coordinating bodies;
- The importance of building capacity of mayors, municipal leaders and local authority institutions; and
- The comparative advantage of local authorities in relation to coordination and implementation of local responses.

The plan articulates a number of commitments on the part of local authorities in relation to prevention, impact mitigation, programme management and coordination and creating an enabling environment. These commitments include:

- Briefing and sensitization for mayors, councillors, officials and staff;
- An HIV/AIDS coordinating committee and plan of action to mitigate the impact of the epidemic upon local communities;
- Capacity building for local authorities in terms of supporting needs assessment processes, project management and funding of community based responses;
- Provision of workplace programmes for all municipalities;
- Mobilizing capacity to work with young people;
- Working in partnership with private sector and civil society, including people living with HIV/AIDS;
- Planning (informed by rapid assessments) and monitoring mechanisms in place; and
- HIV/AIDS mainstreamed within the municipal services agenda.

**Excerpt from Namibia's National Strategic Plan on HIV/AIDS
Third Medium Term Plan MTP III 2004-2009**

(Taken from Chapter VI: Sectoral Obligations and Commitments)

Sector: Local Authority

Coordinating Bodies: ALAN and AMICAALL and NALAO

Key actors to be involved: Local Authorities throughout Namibia

Target Groups: Those HIV/AIDS infected and affected populations in cities, towns and villages

Sector objectives:

1. Empower local authorities to respond more effectively to the HIV/AIDS epidemic in the constituencies and to work together with these communities.
2. Build the capacity of mayors and municipal leaders and local authority institutions to initiate or expand local responses to HIV/AIDS.
3. Increase access by local authorities to relevant and up-to date information in support of HIV/AIDS advocacy. Sensitization and programme development.
4. Apply the comparative advantage of local authorities in coordination and implementation of local responses.

This Sector's Commitments in MTP IIIChapter 3 Reference

Enabling Environment	1
All mayors, local councillors and local authority officials receive relevant Information, Education, Communication (IEC) material on HIV/AIDS	1.1.1
Conduct training and sensitization activities for local authorities on the HIV/AIDS epidemic, management implications, governance, advocacy and coordination	1.1.1
Local authorities contribute to national policy dialogue through articulation of local realities 1.3.1	1.3.1

Prevention	2
Mobilize local capacity to protect and support young people in staying free of HIV/AIDS infection, and in appropriate care and support for those infected and affected	2.3.2
Develop workplace programmes for municipalities	2.4.2
Mitigating the Impact	4
Capacity building for local authorities on project management of community-based responses to HIV/AIDS and use limited resources	4.1.1
The Local Authority will act as a local funding agent for community responses	4.1.1
Identify, through a needs assessment process, community based HIV/AIDS response projects	4.1.1
Work together with private sector, civil society, people living with HIV/AIDS and other partners in the community	4.1.2
Ensure that all Local Authorities have a plan of action for combating the impact of HIV/AIDS on communities, and an HIV/AIDS Coordinating Committee	4.3.1
Programme Management and Coordination	5
All local authorities undertake a rapid impact assessment to inform planning	5.1.1
All local authorities undertake a strategic planning process to mainstream HIV/AIDS into the municipal service agenda	5.1.5
Develop monitoring system for programmes, including client feedback	5.3.1

Medium Term Plan III for HIV/AIDS

Tool 9

Annual Monitoring and Reporting Tool

Purpose

To support monitoring of Alliance and AMICAALL activities at country level and to contribute towards the national-level monitoring and evaluation of responses to the HIV epidemic.

Questions to Consider

Within your team, who has the main responsibility for monitoring and reporting?

Are team members and partners aware of their respective responsibilities in relation to monitoring and reporting?

Is there a clear plan and timeframe for gathering necessary information?

ANNUAL MONITORING AND REPORTING TOOL

UNAIDS is leading efforts to enhance national-level monitoring and evaluation of responses to the HIV epidemic. AMICAALL National Programmes and National AIDS Commissions need to collaborate to ensure that local-level indicators are reflected in these efforts.

Therefore, this tool has two broad purposes: to support monitoring of Alliance and AMICAALL activities at the country level, as well as contributing to broader national level monitoring and evaluation activities.

This is an annual report and while it will require considerable effort in the first year of reporting, thereafter it will be necessary to report only on key activities and changes that have occurred *during the previous year*.

Key Area	Narrative Text to be Provided	Documentation to be Attached
1. Political Commitment	<p>Details of Launch held</p> <p>Declaration signed</p> <p>Describe support provided by:</p> <p>Local Government:</p> <p>National Government:</p> <p>Others (UN, Bilateral, NGOs, etc.)</p>	Copy of declaration
2. Role of Local Government (including decentralization) in National HIV/AIDS Plans Summary	Summary	Relevant sections of National HIV strategy/plan
3. AMICAALL Programme	<p>Staff recruited</p> <p>Capacity building activities including consultancies (technical/organizational/financial)</p> <p>Number and description of Local Authorities covered by AMICAALL Programme</p>	<p>Organization chart</p> <p>Terms of reference/ executive summaries of consultancy reports</p>
4. Resources/ Funding Mobilized	<p>Expressed in monetary terms or in-kind contributions:</p> <p>Source:</p>	<p>Copy of contract;</p> <p>Description of resources mobilized</p>

<p>5. New Partnerships</p>	<p>Name Contact Person Description of the nature of collaboration</p>	<p>Copy of letter of agreement</p>
<p>6. Programme Progress Milestones/ Enhancing Municipal Level Capacity</p>	<p><u>Describe current status in terms of:</u> Establishment of functioning Municipal HIV/AIDS Team (number) <u>Examples of joint activities:</u> Impact Assessment Needs Assessment Municipal HIV/AIDS Directory Municipal HIV/AIDS Budget Lines Municipal policy Preparation and Implementation of work-plan (Internal – local government workplace) Preparation and Implementation of work-plan (External – for municipality) Monitoring & Evaluation</p>	<p>Minutes of meetings Report Report Copy of directory Amount budgeted Copy of Policy/ Plan Copy of workplan Copies of reports M & E Framework</p>
<p>7. Monitoring of Key Principles</p>	<p>Specific action taken to promote principles of: Human Rights PLHIV Involvement Gender Equity</p>	<p>Stakeholder Feedback</p>

Tool 10

Preparing a Case Study

Purpose

This note explains how to go about preparing a case study of an AMICAALL country programme or a local initiative.

Questions to Consider

Why do we need to prepare a case study? (i.e. is it a requirement of a funder, part of an evaluation, or are there lessons we want to share with our partners)?

What aspect(s) of our work potentially offers the most learning for others and us?

PREPARING A CASE STUDY

- In the AMICAALL context, case studies have been used so far to describe in detail countrywide programmes and individual municipal programmes (see Annex II for hyperlinks to the case studies of Swaziland and Namibia).
- One advantage of a case study is that it provides an opportunity to describe a situation or problem in depth and therefore to generate learning.
- Disadvantages of case studies are that they are not easy to prepare. It is all too easy to ramble and to lose focus. Furthermore, as soon as a case study is completed it is likely to be out of date. Therefore the lessons learned need to have longer-term relevance.
- It is important to begin preparing any case study with a clear sense of purpose and intended audience. In the AMICAALL context, case studies provide an important opportunity to document and share lessons learned primarily with peers throughout the AMICAALL network, but also with others interested in engaging local government in the response to HIV/AIDS.
- The next step in preparing a case study is to decide upon the theme: for example, you might want to describe the history of a programme to date, drawing attention to problems encountered and creative ways found of resolving them. Sometimes we learn more from examining what went wrong, or at least did not go as planned, as we did from our successes. Or else you might want to describe in depth an innovative aspect of a programme (see for example the Namibia municipal case study). The important thing is to identify a focus for the study and to stick to it.
- Begin by looking at other case studies, including those produced by AMICAALL programmes and reflect on what it is, you think, makes for a good case study.
- Having done this, you should then write down the purpose of your study: e.g. “to document milestones and key challenges in the history to date of the AMICAALL programme in XXXXX”.
- Some general hints:
 - State the purpose of the study at the beginning and keep reminding yourself of it throughout.
 - At the end, remind yourself of the purpose and review the document to consider how far and how clearly you have met the goal.
 - Identify key questions for the future.
 - Keep jargon and acronyms to a minimum.
 - Ask yourself if the detail you provide is necessary.

- Use short, clear and simple sentences—these are easier to read and will keep the reader engaged.
- Use quotes—but make sure they are relevant to the point you are trying to make and that you respect the confidentiality of your informants.
- Make a list of headings you need to cover in your study, for example:
 - Purpose of the study and intended audience;
 - Brief description of the context in terms of the HIV epidemic and local government engagement with it so far;
 - How your programme/project came into being (i.e. key stakeholders/beneficiaries) and progress so far;
 - Problems encountered and how these have been addressed;
 - Key Lessons learned;
 - Outstanding challenges.
- Go through these headings and assess what information you already have and what you still need to assemble. Identify key people and how they relate to the story you want to tell. Make a list of the questions you need to ask them to be able to tell your story.
- Once you have assembled all your information, go through it and decide under which of the above headings it belongs.
- Write your study! And ask your colleagues to read it to assess the extent to which it is clear, accurate and interesting to them.

Links and References

[Vol. 2, Issue 3, March 2004 \(PDF file\)](#)

[Vol. 2, Issue 4, September 2004 \(PDF file\)](#)

[Vol. 2, Issue 5, April 2005 \(PDF file\)](#)

Electronic Bulletin of the Alliance

[Issue 1, October 2002](#)

[Issue 2, December 2002](#)

[Issue 3, March 2003](#)

[Issue 4, May 2003](#)

[Issue 5, July 2003](#)

[Issue 6, September 2003](#)

[Issue 7, November 2003](#)

[Issue 8, December 2003](#)

[Issue 9, April 2004](#)

[Issue 10, June 2004](#)

[Issue 11, August 2004](#)

[Issue 12, October 2004](#)

[Issue 13, December 2004](#)

[Issue 14, March 2005](#)

[Issue 15, June 2005](#)

[Issue 16, August 2005](#)

[Issue 17, September 2005](#)

ANNEX II

AMICAALL IN ACTION

Case Studies

[From Advocacy to Action - Swaziland: A Case Study](#)

[Otjiwarongo, Namibia - Multipurpose Centre, Case Study](#)

[AMICAALL Ukraine: A Case study](#)

Conference Papers

[Abstract presentation for the XV International AIDS Conference 2004: Bridging the Implementation Gap”](#)

[World Summit on Health Research 2004 - The Millennium Development Goals, Local Government in Africa and a Systems Approach to Addressing HIV/AIDS](#)

Guides and Toolkits

[Alliance of Mayors and Municipal Leaders on HIV/AIDS in Africa: HIV/AIDS ADVOCACY GUIDE, Namibia](#)

[Local Government and HIV/AIDS: A Toolkit for Impact Assessment and Strategic Planning](#)

Local Government Responses to HIV/AIDS: A Handbook Produced by the World Bank in Collaboration with AMICAALL and other partners English / French

HIV/AIDS Services Directory

Some municipal examples:

Cameroon:

Nanga HIV/AIDS Service Directory (French)

Namibia:

[Windhoek, Namibia HIV/AIDS Service Directory](#)

Tanzania:

Ilala HIV/AIDS Service Directory

Uganda:

Jinja, Uganda HIV/AIDS Service Directory

Municipal Profiles

Some municipal examples:

Cameroon:

[Nanga Municipal Profile \(French\)](#)

Namibia:

[Otjiwarongo Municipal Profile](#)

Private Sector Partnerships

An example

[PriceWaterHouse Coopers](#)

GENDER AND HIV/AIDS

[The Global Coalition on Women and AIDS](#)

[A web portal on Gender and HIV/AIDS](#)

HIV/AIDS AND HUMAN RIGHTS

[HIV/AIDS and Human Rights in a Nutshell](#)

MAINSTREAMING

[UNAIDS Secretariat Strategy Note and Action Framework 2004-2005](#)

MILLENNIUM DEVELOPMENT GOALS AND LOCAL PROCESSES

[The Millennium Development Goals and Local Processes: Hitting the Target or Missing the Point?](#)

ORPHANS

[Bethany Project - Guidelines to establishing a community- based Orphan Care Programme](#)

[Children on the Brink 2004 A Joint Report on Orphan Estimates and Program Strategies](#)

[Family and Community Interventions for Children Affected by AIDS](#)

Orphans and Other Vulnerable Children Support Toolkit

Reaching Out to Africa's Orphans- a Framework for Public Action

SOS (Skills, Opportunities, Self Reliance)

STIGMA

Common at Its Core: HIV Related Stigma Across Contexts

Understanding and challenging HIV stigma: toolkit for action

OTHER USEFUL WEBSITES

UNAIDS– Cosponsors can be accessed on the UNAIDS Website (www.unaids.org)

Millennium Development Goals (www.un.org/millenniumgoals)

International HIV/AIDS Alliance (www.aidsalliance.org)

Global Network of People Living with HIV/AIDS (www.gnpplus.net)

The Synergy Project: HIV/AIDS Resource Centre (www.synergyaids.com/resources.asp)

United Cities and Local Government (www.cities-localgovernments.org/uclg)

United Cities and Local Government of Africa (www.uclga.co.za)

Corporate Council on Africa in Partnership with All Africa: A Compilation of HIV/AIDS Resources (allafrica.com/healthafrica/cca/resources)

ANNEX III

OVERVIEW OF ALLIANCE SECRETARIAT

With generous support from the Namibian government, USAID and the UN-AMICAALL Partnership Programme, an Alliance Secretariat was set up in November 2001 in Windhoek, Namibia. The City of Windhoek has provided office space, while the Government of Namibia has contributed funding of support staff. USAID has supplied information technology, office equipment and assistance with communication activities as well as funding for programme activities. Additional support has been mobilized from the Government of the Netherlands, World Bank and other partners to expand the capacity of the Alliance Secretariat to support scaled up responses to HIV/AIDS at the local level, in collaboration with local government authorities, civil society organizations and other stakeholders.

The Secretariat responsibilities include:

Acting as the institutional focal point for the Alliance,

- Provides management and administrative support to activities of the Alliance
- Facilitates access to technical support to national AMICAALL programmes
- Encourages and facilitates partnerships aimed at expanding local capacity to managed scaled up responses to HIV/AIDS

To date local government associations in 13 countries have joined the Alliance and are actively engaged in undertaking activities aimed at enhancing local government responses to HIV/AIDS.

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ANNEX IV

UN-AMICAALL PARTNERSHIP PROGRAMME – UN APP

The UN-AMICAALL Partnership Programme was set up in April 2001 in consultation with the Alliance Coordinating Committee and with support from UN partners. It is run by a small Geneva-based staff and supported by a team of associates around the world.

The main focus areas of the Partnership Programme are:

- Advocacy and promotion of partnerships in support of decentralized responses to HIV/AIDS
- Targeted capacity development to enhance effective management of decentralized and multisectoral action on HIV/AIDS at the local level
- Resource mobilization
- Documentation and sharing of lessons learned
- Institutional support for the Alliance Secretariat

The Partnership Programme works in collaboration with a range of partners:

- UNAIDS and cosponsors—such as UNDP and World Bank
- Bilateral development agencies—such as those in the US, Netherlands, Germany
- Nongovernmental Organizations – such as STOP AIDS NOW!
- Foundations—such as the Africa Capacity Building Foundation and the OPEC Development Fund
- Private sector—such as PricewaterhouseCoopers (PwC)
- Local government organizations—such as United Cities and Local Government (UCLG), the US Conference of Mayors, Locally Elected Officials against AIDS (France)
- City to City cooperation—cities in Canada, France, Netherlands and USA

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