

HEAP- 2001

Nigeria

**MONITORING AND
EVALUATION SYSTEMS FOR THE NATIONAL
HIV/AIDS EMERGENCY ACTION PLAN**

Guidelines and Indicators

*Based on the strategic mission and plan of the HEAP
2001 - 2003 - Three years strategic plan document*

Draft prepared for the National HIV/AIDS coalition of stakeholders –
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HEAP- 2001

MONITORING AND EVALUATION

GUIDELINES

*Based on the strategic mission and plan of the HEAP
2001 – 2003 - Three years planning document.*

HEAP is a national response to HIV/AIDS IN Nigeria. It has two components with four sub-components each. The components are: removal of barriers to a large-scale response and creation of an enabling environment. The first component consists of the following sub-components.

The HEAP mission is to support processes, which empower rural people and their institutions, in order to enhance their response to HIV/AIDS according to their own locally defined aspirations for the benefit of local livelihoods and society.

- (a) Preventive interventions targeted to the highest risk groups.
- (b) Preventive interventions targeted at the public.
- (c) Care and Support for people infected by HIV/AIDS and (d) Care and Support for persons and families affected by HIV/AIDS.
- (d) Remove of barriers to a large-scale response and

- (a) Remove socio-cultural, political and behavioural barriers.
- (b) Remove information barriers.
- (c) Remove systemic barriers and
- (d) Community mobilisation and empowerment.

The second component 'Cost –Effective Intervention against HIV/AIDS' consists of

- (e) Create and manage an enabling environment. The objective of this component is to create an enabling environment by identifying and removal of barriers that prevent the mitigation of HIV/AIDS interventions in the country.

HEAP is designed to assist Nigeria to mobilise all partners who can contribute to the fight against HIV/AIDS; together, they will prepare a national strategy against HIV/AIDS, with clear place and role of each participant such as NACA, sector ministries, NGOs, private firms, religious organizations CBOs and donors. HEAP will assist NACA to elaborate a detailed action plan with precise targets, verifiable indicators, budgets and expected sources of funds.

The co-ordination mechanism should not be imposed on the various partners. HEAP will help various ETG System HIV/AIDS stakeholders top identify a minimum of tasks that really need to be conducted at the federal level and cannot be executed in each state. The planning and coordination effort will aim at stimulating the responses, not at understanding many programmes in each organization. It should translate into supports to all types of local initiatives/responses, with each partner assuming the responsibilities of its initiatives. NACA will play the role of a role as facilitator of national and state

Draft/restricted

action plans and SACA will play a role of facilitators of LGAs actions plans.

Monitoring, evaluation, operational research will focus on situation analysis, including impact assessments, at sector level and at programme level, a broad based sentinel surveillance system involving. Operational research by Nigerian Research Institutions (in cooperation with international partners if possible) aims to assess the effectiveness of the various efforts to fight against HIV/AIDS and to improve ways to monitor and evaluate the impact of these efforts.

MONITORING AND EVALUATION POLICIES

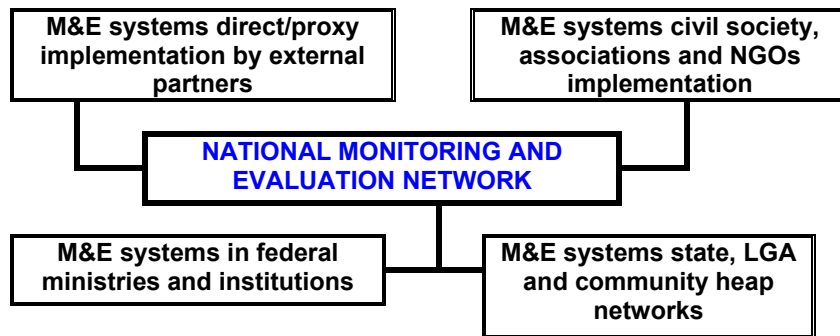
1. **HEAP M&E Policy Statements.** Monitoring and evaluation are essential management functions that are interactive and mutually supportive. Monitoring and evaluation must be continuously strengthened to enable HEAP to respond to demands for:
 - a. Greater accountability in the use of resources,
 - b. A clearer basis for decision-making, and
 - c. More practical lessons from experience to guide future development interventions. Monitoring and evaluation must be results-oriented and provide assessments of the relevance, performance and success of HEAP development interventions.
2. **Monitoring Coverage.** Monitoring and systematic reporting must be undertaken for all programmes and projects regardless of duration and budget.
3. **Evaluation Coverage.** Evaluation of programmes and projects will be undertaken selectively based on the following set of criteria: Mandatory evaluation for large-scale programmes and projects and for innovative and strategic programmes and projects. Compliance with mandatory evaluations will be enforced and used as an indicator for assessing management performance.
4. **Tracking System for Evaluation.** HEAP management information systems must be able to track: (a) programmes and projects to be covered by monitoring and evaluation, and (b) the implementation status of recommendations emanating from evaluations.
5. **Institutional Memory on Lessons Learned.** In support of organisational learning, HEAP will continue to maintain and ensure access of staff to its central evaluation database as the institutional memory on lessons learned from programmes and projects that have been evaluated. Evaluators must submit, along with their evaluation reports, a project evaluation information sheet containing information to be entered into the database. The HEAP country offices or headquarters units that managed the evaluation must hire a person to do the task and the costs for this must be charged against their own budgets.
6. **Funds in Association with HEAP.** In line with the objective of harmonising monitoring and evaluation policies, resource mobilisation and management must

conform to HEAP policies and guiding principles on monitoring and evaluation. Every stakeholder should work in collaboration with all partners in determining the extent of flexibility that they would exercise to adapt the policies and guiding principles to their specific contexts and requirements.

MONITORING AND EVALUATION

Monitoring and evaluation are management functions through which HEAP ascertains whether or not its technical

HEAP MONITORING AND EVALUATION FRAMEWORK



cooperation programmes meet their objectives as well as support the HEAP mandate. HEAP Monitoring is a continuing function that aims primarily to provide the expanded theme group and the main stakeholders of an ongoing programme or project with early indications of progress, or lack thereof, in the achievement of programme or project objectives. Monitoring enables the FGN and the expanded theme group to identify and

assess potential problems and success of a programme or project. It provides the basis for corrective actions, both substantive and operational, to improve the programme or project design, manner of implementation and quality of results.¹

The requirements for effective monitoring are **baseline data**, indicators of performance and results, and mechanisms or procedures that include such planned actions as field visits, stakeholder meetings and systematic reporting. To emphasize monitoring as an essential management function, monitoring actions must be adequately planned. Monitoring actions must be undertaken throughout the lifetime of a specific programme or project. In addition, ad hoc studies may be carried out as needed, for example, when an unexpected problem arises for which planned monitoring activities cannot provide sufficient information. The results may lead to a timely solution rather than waiting for formal evaluation. Like other monitoring activities, these studies must seek the views of target groups on how to improve the relevance and performance of the programme or project.

Evaluation is a time-bound exercise that attempts to assess systematically and objectively the relevance, performance and success of ongoing and completed programmes and projects. Unlike monitoring, which must be undertaken for all programmes and projects, evaluations are carried out more selectively for practical reasons. Programme or project

¹ In addition, it enables the reinforcement of initial positive results. Through monitoring, HEAP stakeholders are also able to determine whether or not a project continues to be relevant. In this context, relevance refers to whether or not: the programme or project supports national development priorities and HEAP thematic concerns; appropriate groups are being targeted; and the objectives remain valid in light of any changes in the programme or project environment.

managers have the flexibility to decide why and when an evaluation is needed based on a set of criteria.²

Monitoring and evaluation differ yet are closely related. They are mutually supportive and equally important. Monitoring can provide quantitative and qualitative data using selected indicators, data that can serve as inputs to evaluation exercises. Evaluation also supports monitoring. It can serve as a source of lessons that can be applied in the development of conceptual or methodological innovations for use in refining the monitoring function, e.g., devising appropriate indicators for future projects.

It may be argued that excellent monitoring precludes the need for evaluations. This is true only when the main objective is to obtain information on which to base improvements in a specific ongoing programme or project. When a final judgement of the impact, sustainability of results and contribution to institutionalisation of an intervention is needed, an evaluation must be conducted because of the time factor: it takes a certain amount of time before sufficient evidence of results can be observed and attributed to that intervention.

Moreover, when the objective is to draw generic lessons from the experience of a cluster of projects in a given sector or

² If an evaluation is conducted at the mid-point of a programme or project, it may serve as a means of validating or filling in the gaps in the initial assessment of relevance, effectiveness and efficiency obtained from monitoring. It may also assess early signs of programme or project success or failure. If conducted after the termination of a programme or project, an evaluation determines the extent to which that intervention is successful in terms of its impact, sustainability of results and contribution to institutionalisation. As in monitoring, evaluation activities must be planned at the country and programme or project levels. Baseline data and appropriate indicators of performance and results must be established.

having a particular thematic focus, an evaluation is more appropriate because projects are monitored on an individual basis where as an evaluation can encompass one or many projects. The relationship between monitoring and evaluation is best described as interactive. HEAP stakeholders believe that neither function should be undertaken as a substitute for the other.

An audit is an examination or review that assesses and reports on the extent to which a condition, process or performance conforms to predetermined standards or criteria. It is concerned with resource allocation, financial and general administrative management and, to a certain extent, substantive issues. Like evaluation, an audit requires the assessment of effectiveness and efficiency and the formulation of recommendations to promote improvement. In appraising these elements, however, audit differs from evaluation in orientation or objective.³

HEAP MONITORING AND EVALUATION OBJECTIVES

The focus of monitoring and evaluation on relevance, performance and success is strategically linked to the objective of ensuring that HEAP programmes and projects produce sustainable results that benefit the target groups and the communities they belong to. Both functions contribute to the

³ An audit usually focuses primarily on compliance with existing rules and regulations rather than on establishing the relevance and determining the likely impact or sustainability of results of programmes or projects, which are the main concerns of evaluation. Notwithstanding this difference in focus, audit and evaluation are instruments through which management can obtain a critical assessment of the operation of the organization as a basis for instituting improvements.

achievement of this objective by supporting decision-making, accountability, learning and institutionalisation.

Decision-making: Decision-making may be linked to interventions at the macro, meso and micro levels. Macro-level decisions relate to policies that cut across sectors and affect the overall development process. Decisions made at the meso and micro levels pertain to programmes and projects, respectively. HEAP monitoring and evaluation actions support decision-making at all three levels, e.g., policy and strategic evaluations at the macro level and monitoring and evaluation of programmes and projects, individually and in clusters, at the other two levels. However, many of these actions are currently concentrated at the meso and micro levels.

The data and information collected during monitoring and evaluations constitute a critical foundation for action by programme managers and stakeholders, who need to be able to identify evolving problems and decide on crucial strategies, corrective measures, and revisions to plans and resource allocations pertaining to the activities in question. Even after the completion of a programme or project, monitoring and evaluation can contribute significantly to decision-making. For instance, terminal reports, considered to be part of the monitoring function, can contain recommendations for follow-up activities. Post-programme or post-project monitoring can lead to the recommendation of measures to improve the sustainability of results produced by the programme or project.

Accountability: Monitoring and evaluation provide critical assessments that demonstrate whether or not

programmes or projects satisfy target group needs and priorities. They help to establish substantive accountability by generating answers to questions such as:

- ◆ What is the impact of the programme or project on the target groups and the broader development context?
- ◆ Are the required mechanisms in place to sustain the benefits in a dynamic, strategic way?
- ◆ As for the question "Who is accountable?" Monitoring and evaluation must be used to support accountability at different management levels within HEAP, i.e., the accountability of resident representatives, Senior Management at headquarters, the Administrator and the Executive Board.

Learning: The learning derived from monitoring and evaluation can improve the overall quality of ongoing and future programmes and projects. This is particularly significant when one considers HEAP support for innovative, cutting-edge programmes and projects with all the attendant risks and uncertainties.⁴ Learning from monitoring and evaluation must be incorporated into the overall programme or project management cycle through an appropriate feedback

⁴ The learning that occurs through monitoring applies particularly to ongoing programmes or projects. Mistakes are made and insights are gained in the course of programme or project implementation. Effective monitoring can detect early signs of potential problem and success areas. Programme or project managers must act on the findings, applying the lessons learned to modify the programme or project. This learning by doing serves the immediate needs of the programme or project, but it can also provide feedback for future programming.

system and support decision-making at various levels, as described above.

Institutionalisation: Monitoring and evaluation must contribute to the HEAP mission by assisting programme countries to develop their capacity to manage development. Improving the decision-making process, ensuring accountability to target groups or stakeholders in general, and maximising the benefits offered by learning from experience can all contribute to strengthening capacities at the national, local and grass-roots levels, including, in particular, the capacities for monitoring and evaluation. National autonomous programming, the current modality for HEAP programmes and projects, implies a corresponding shift to a bipartite mechanism for monitoring and evaluation, with the FGN and HEAP as major partners. HEAP monitoring and evaluation activities can serve as entry points for assisting the FGN to strengthen their monitoring and evaluation capacities since they bear primary responsibility for monitoring and evaluating their programmes and projects.

Monitoring and evaluation and the programme/project cycle: Monitoring and evaluation are integral parts of the programme/project management cycle. On the one hand, monitoring and evaluation are effective tools for enriching the quality of interventions through their role in decision-making and learning. On the other hand, the quality of project design (e.g., clarity of objectives, establishment of indicators) can affect the quality of monitoring and evaluation. Furthermore, the experience gained from implementation can contribute to the continuing

refinement of monitoring and evaluation methodologies and instruments. To maximize the benefits of monitoring and evaluation, the recommendations and lessons learned from those functions must be incorporated into the various phases of the programme or project cycle.

Pre-formulation: searching for lessons learned: At the identification and conceptualisation stages of a programme or project, the people responsible for its design must make a thorough search of lessons learned from previous or ongoing HEAP programmes and projects and from the field of development cooperation at large. A wide variety of sources of information are available in HEAP, other donor institutions, FGN offices and elsewhere. Those sources take the form of printed material, electronic media such as the Internet and computerised databases. Databases facilitate the search for relevant lessons extracted from evaluation reports since the lessons can be sorted using multiple criteria (e.g., sector, country, and region).

Formulation: incorporating lessons learned and preparing a monitoring and evaluation plan: Relevant lessons learned from experience with other programmes and projects must be incorporated in the design of a new programme or project. A monitoring and evaluation plan must also be prepared as an integral part of the programme or project design.⁵

⁵ A monitoring and evaluation plan is not intended to be rigid or fixed from the outset; rather, it should be subject to continuous review and adjustment as required owing to changes in the programme or project itself. The appraisal and approval of programmes and projects must ensure that appropriate lessons and a monitoring and evaluation plan are incorporated in the programme or project design.

Those responsible for programme or project design must:

- ◆ Construct baseline data describing the problems to be addressed;
- ◆ Clarify programme or project objectives;
- ◆ Set specific programme or project targets in accordance with the objectives;
- ◆ Establish consensus among stakeholders on the specific indicators to be used for monitoring and evaluation purposes;
- ◆ Define the types and sources of data needed and the methods of data collection and analysis required based on the indicators;
- ◆ Reach agreement on how the information generated will be used;
- ◆ Specify the format, frequency and distribution of reports;
- ◆ Establish the monitoring and evaluation schedule and assign responsibilities for monitoring and evaluation;
- ◆ Provide an adequate budget for monitoring and evaluation

Implementation: monitoring and evaluation as support to decision-making and learning: As noted earlier, since monitoring is an ongoing process, it can reveal early signs of problems in implementation. This information can serve as a basis for corrective actions to ensure the fulfilment of programme or project objectives. Areas of success can also be revealed through monitoring, enabling their reinforcement. The contribution made by both monitoring and evaluation to lessons learned was also noted earlier. Thus, programme managers and other stakeholders must make certain that a learning culture is maintained throughout the implementation of a programme or project. Such a culture should motivate those involved in the expanded theme group to learn from their experience and apply those lessons to the improvement of the programme or project. Learning can be enhanced through participatory mechanisms that

enable the various stakeholders to share their views and provide feedback when and where it is needed.

Programme or project completion: dissemination of lessons learned: Upon termination of a programme or project, stakeholders as a group must take stock of the experience that has been gained: successes and failures, best and worst practices, future challenges and constraints. Special emphasis should be placed on identifying the lessons that have the potential for wider application, determining which particular user groups could benefit most from such lessons, and ascertaining the best way to disseminate the lessons to the target groups.

CONSTRAINTS AND CHALLENGES

Certain conceptual and methodological constraints and challenges are associated with the monitoring and evaluation functions. Effective monitoring and evaluation can be achieved only through a careful, pragmatic approach to addressing these limitations.

Dependence on clarity of objectives and availability of indicators: Monitoring and evaluation are of little value if a programme or project does not have clearly defined objectives and appropriate indicators of relevance, performance and success.

- ❖ Any assessment of a programme or project, whether through monitoring or evaluation, must be made vis-à-vis the objectives, i.e., what the interventions aim to achieve. Indicators are the critical link between the objectives (which are stated as results to be achieved)

MONITORING AND EVALUATION PLANNING FRAMEWORK

- ❖ Construct baseline data on problems to be addressed.
- ❖ Clarify programme or project objectives and set specific targets.
- ❖ Establish stakeholders' consensus on indicators.
- ❖ Define data collection process requirements and usage.
- ❖ Agree on the generation and utilisation of information.
- ❖ Specify reporting requirements (format, frequency, and distribution).
- ❖ Establish monitoring and evaluation schedule.
- ❖ Assign monitoring and evaluation responsibilities.
- ❖ Provide adequate budget for monitoring and evaluation.

and the types of data that need to be collected and analysed through monitoring and evaluation. Hence, lack of clarity in stating the objectives and the absence of clear key indicators will limit the ability of monitoring and evaluation to provide critical assessments for decision-making, accountability and learning purposes.

- ❖ **Time constraints and the quality of**

monitoring and evaluation: Accurate, adequate information must be generated within a limited time frame. This may not be a very difficult task in the case of monitoring actions since programme or project managers should be able to obtain or verify information as necessary. However, the challenge is greater for HEAP evaluation missions conducted by external consultants. The average duration of such missions is three weeks; however, this should not be considered as the norm. HEAP country offices, in consultation with the FGN should have the flexibility to establish realistic timetables for these missions,

depending on the nature of the evaluations. Budgetary provisions must be made accordingly.

- ❖ **Objectivity and independence of evaluators and their findings:** No evaluator can be entirely objective in his or her assessment. It is only natural that even external evaluators could have their own biases or preconceptions. The composition of the evaluation team is therefore important in ensuring a balance in views. It is also crucial that evaluators make a distinction between facts and opinions. External evaluators must seek clarification with the FGN or other concerned parties on matters where there are seeming inconsistencies to ensure the accuracy of the information. This applies particularly to understanding the cultural context of the issues at hand. In cases where opinions diverge, the external evaluators must be willing to consider the views of others in arriving at their own assessments.
- ❖ **Learning or control?** Traditionally, monitoring and evaluation have been perceived as forms of control mainly because their objectives were not clearly articulated and understood. Thus, the learning aspect of monitoring and evaluation needs to be stressed along with the role that these functions play in decision-making and accountability. In the context of HEAP, the contribution of learning to the building of FGN capacity to manage development should be emphasised.
- ❖ **Feedback from monitoring and evaluation:** Monitoring and evaluation can provide a wealth of knowledge derived from experience with development cooperation in general and specific programmes and

projects in particular. It is critical that relevant lessons be made available to the appropriate parties at the proper time. Without good feedback, monitoring and evaluation cannot serve their purposes. In particular, emphasis must be given to drawing lessons that have the potential for broader application, i.e., those that are useful not only to a particular programme or project but also to related interventions in a sector, thematic area or geographical location.

- ❖ **Responsibilities and capacities:** FGN and development agencies such as HEAP usually must respond to a variety of monitoring and evaluation requirements from many donors, including HEAP. This situation is being partially addressed through the harmonisation efforts of United Nations agencies, specifically those that are members of the Joint Consultative Group on Policy. Within the context of national autonomous programming in particular, there should be only one monitoring and evaluation system, namely, the national monitoring and evaluation system of the FGN. The HEAP monitoring and evaluation system and those of other donors should be built upon that national system to eliminate duplication and reduce the burden on all parties concerned. Not all FGN agencies, however, may have the full capacity to carry out the responsibilities for monitoring and evaluation adequately.

MONITORING COVERAGE: Monitoring is a basic management function. Managers must know what is happening in their respective programmes and projects, particularly at critical points in implementation. All HEAP programmes and projects, regardless of duration and amount of funding, must be monitored.

EVALUATION COVERAGE: Evaluation is an important tool for learning and ensuring accountability. It is not practical, however, to evaluate all HEAP programmes and projects considering the magnitude of the costs and the time that would be required to do so. Hence, for evaluation to be cost-effective, it should be undertaken on a selective basis. The following set of criteria must be considered in selecting which programmes and projects to evaluate. It is essential that evaluation be mandatory in certain cases to ensure: (a) an adequate number of programmes and projects from which lessons can be drawn to support organisational learning, and (b) significant financial coverage (i.e., the magnitude of financial resources represented by programmes and projects evaluated) to support the accountability of the Administrator. There are two criteria for mandatory evaluations: scale of resources and duration of technical cooperation.

Scale of Resources: The following programmes and projects must be evaluated: those that are large-scale, that is, with big budgets. These programmes and projects may be evaluated individually or as part of a cluster evaluation, i.e. the evaluation of a set of projects in the same sector, thematic area or geographic location. The objectives of an evaluation based on this criterion are to:

- ♣ assess the overall impact of technical cooperation support on the institution concerned and the larger environment in which it operates;
- ♣ provide a basis for making a decision on whether or not the continuation of HEAP cooperation is justified; and

- ♣ indicate a reasonable time frame for the eventual termination of the cooperation if an extension of the cooperation is necessary,

The evaluation of specific types of community based programmes and projects - those that are considered to be innovative and/or strategic - may help to broaden the knowledge base for improving the quality of future development interventions. They may also provide the basis for policy formulation. Evaluation of innovative programmes and projects is encouraged as a means of reinforcing HEAP support for such interventions. The following types of programmes and projects fit under the umbrella of innovative interventions:

1. Experimental - characterised by a high degree of uncertainty because they involve new development concepts, approaches and/or technologies;
2. Pilot - undertaken to test the results of experimentation under different conditions and to adapt the innovations that have proven to be effective in the experimental stage to local conditions;
3. Demonstration - conducted to show the effectiveness and to increase the acceptability of innovations on a broader scale. Although lessons can be derived from the assessment of these three types of innovative interventions, evaluation is most critical in the case of demonstration programmes and projects, prior to the investment of sizeable amounts of resources for their replication.
4. Strategic Programmes and Projects: Programmes and projects may be considered strategic with respect to substance or timing.⁶

⁶ Examples include those that could have major repercussions on development policies and strategies at various levels (e.g., global, macro, sectoral or micro), such as a capacity-development programme to enable local government to undertake HIV/AIDS programmes, whose prerequisites are other development initiatives, such as a participatory research programme consisting of policy analysis and in-depth organisational and management studies as a basis for instituting massive reforms in governance; support a shift from emergency assistance to rehabilitation and development

Compliance with evaluation requirements

Compliance with the evaluation requirements will be enforced to ensure that the corporate memory maintains a coverage of programmes and projects that is adequate to support organisational learning and the accountability of the Administrator. ETG M&E Team will monitor and report on the compliance rate for mandatory evaluations. The following are some examples of explanations that should not be accepted as justifications for

1. Non-compliance: resource constraints (funds for evaluation should be provided at the very outset during the design and approval stages of the programme or project); programme or project claimed to be successful (this constitutes an even stronger reason to evaluate the programme or project and identify lessons learned and best practices for replication); technical review of the programme or project conducted or being planned
2. To support the process of identifying programmes and projects to be covered by evaluations (particularly those that are mandatory), an effective tracking system must be established that builds on information systems within HEAP, e.g., financial information management, executive information management, and classification of programmes and projects by area of thematic focus.

cooperation for countries and regions that have been affected by complex development situations (i.e., collapse of political and social systems, economic deterioration, destruction of physical property, violence etc.).

SUBSTANTIVE FOCUS

Three interrelated dimensions of programmes and projects must be assessed as the substantive focus of monitoring and evaluation: **RELEVANCE, PERFORMANCE AND SUCCESS**. They are not entirely new, having received some attention in line with the shift to results-oriented monitoring and evaluation of HEAP programmes and projects. However, the emphasis has been uneven. For instance, the previous focus of monitoring development actions on the delivery of inputs neglected the more basic issue of the relevance of the programme or project. In a similar vein, a programme or project might have been deemed effective because it produced target outputs (performance), but it should not be considered a successful intervention if it does not contribute to the development of national or local capacity to respond to the needs of target groups (relevance) in a sustained way. Therefore, relevance, performance and success should be assessed in an integrated manner in order to have a sound basis for making recommendations and drawing lessons learned from experience to improve programme or project quality.⁷

RELEVANCE:

Relevance is the degree to which the objectives of a programme or project remain valid and pertinent either as originally planned or as subsequently modified owing to changing circumstances within the immediate context and external environment of that programme or project.

⁷ In addition, given the mutually supportive relationship between monitoring and evaluation, the three dimensions should be emphasised in carrying out both functions, from the planning of monitoring actions and evaluation exercises to their execution and from the designing of instruments for data collection to the dissemination of feedback for learning.

Specifically, monitoring and evaluation must consider the relevance of programmes and projects to:

- ◆ development issues at the local, national, regional and/or global levels;
- ◆ target groups, whose needs and constraints must be clearly identified relative to their gender, socio-economic status and geographical location;
- ◆ Direct beneficiaries, which may be the FGN, the private sector and/or CSOs, which are responsible not only for implementing the programme or project but, more significantly, for sustaining its positive results;
- ◆ The HEAP mission to promote participation by assisting national programmes to build their capacities in the four areas of focus; and the HEAP comparative advantage vis-à-vis other agencies and development partners in terms of resources and expertise.

PERFORMANCE: An assessment of performance looks at the progress that is being made by the programme or project relative to its objectives. In the past, assessment of performance tended to focus on the delivery and transformation of inputs into outputs, with limited reference to immediate and long-term development results. Under the new monitoring and evaluation framework, more importance is given to results. There are three criteria for performance:

1. effectiveness - the extent to which a programme or project achieves its immediate objectives or produces its desired outcomes;
2. Efficiency - the optimal transformation of inputs into outputs timeliness of inputs and results.

SUCCESS: The three criteria of success are impact, sustainability and contribution to institutionalisation.

1. **Impact**: Impact refers to the results of a programme or project that are assessed with reference to the development objectives or long-term goals of that programme or project. In this sense, impact represents changes in a situation, whether planned or unplanned, positive or negative, that a programme or project brings about. Impact can be assessed only once a significant period has elapsed after the completion of a programme or project. It is thus essential that a programme or project be designed in a way that will lend itself to impact assessment at a later stage, e.g., through the preparation of baseline data and the setting of indicators for monitoring and evaluation.
2. **Sustainability**: Sustainability is the durability of positive programme or project results after the termination of the technical cooperation channelled through that programme or project. Static sustainability refers to the continuous flow of the same benefits that were set in motion by the completed programme or project to the same target groups. Dynamic sustainability refers to the use in, or adaptation of programme or project results to, a different context or changing environment by the original target groups and/or other groups.
3. **Contribution to Institutionalisation**: As a criterion of success, the contribution made to institutionalisation relates to the extent to which a programme or project enables target groups to be self-reliant and makes it possible for FGN institutions, the private sector and CSOs to use

positive experiences with the programme or project in addressing broader development issues. Institutionalisation is both a means and an end for HEAP. It empowers people to realize their potential and to use their capabilities better and assures ownership and sustainability of the process and results of development. It has four inter-related dimensions: individual learning, organisations, organisational interrelationships and enabling environment.⁸

TYPES OF EVALUATIONS AND MONITORING MECHANISMS

A variety of means are available for use by programme and project managers and other stakeholders in monitoring a programme or project.

1. **Work Plans**: HEAP must prepare annual work plans that translate the project document into operational terms. The work plans should describe in detail the

⁸ Monitoring and evaluation must assess these dimensions and their linkages. Evaluation must also look at two levels of institutionalisation: the overall capacity to manage development and the specific capacity to carry out monitoring and evaluation functions. A holistic approach must be taken in assessing the success of a programme or project. The rationale for this is that while a programme or project operates in a very specific environment, it also functions as part of a larger system, i.e., the socio-economic and political milieu that dictates development goals, the requisite policy frame-work and institutional arrangements. While a programme or project may be affected by this larger system, it may also bring about changes in this same system. Therefore, the challenge in assessing success is to go beyond the limits of the immediate environment of the programme or project. Consequently, the appropriate types of evaluation for assessing success are terminal and ex-post evaluations. They must consider holistically the three criteria of success: impact, sustainability and contribution to institutionalisation.

delivery of inputs, the activities to be conducted (which ones and how), and the expected results. They should clearly indicate schedules and the persons and/or institutions responsible for providing the inputs and producing results. The work plans should be used as the basis for monitoring the progress of programme or project implementation. To keep representatives of the FGN informed of the progress of programmes or projects, managers should also provide them with work plans that do not need to be very detailed. These work plans could simply indicate critical milestones in implementation with the corresponding timetable and responsible actors.

2. **Field Visits**: Programme or project managers must make field visits at regular intervals and adequate budgetary resources should be allocated for this purpose. In addition to inspecting the sites, physical outputs and services of the programme or project, the visits must focus on interaction with target groups to obtain their views on how the programme or project is affecting them (directly or indirectly, positively or negatively) and their proposed solutions to perceived problems. The HEAP resident representative or his/her staff must visit each programme and/or project as often as necessary but no less than once a year. In some cases, it would be useful to organize joint field visits by HEAP and other development partners involved in the same types of programmes or projects. This may be more practical in terms of logistics than visits by one agency, but, more important, it will allow a more transparent approach to the discussion of similar issues with target groups and other stakeholders. Persons undertaking the field visits must prepare their reports either at the site or immediately after the visits,

focusing on relevance and performance, including early signs of potential problem or success areas.

3. **Stakeholder Meetings**: The objective of stakeholder meetings is to involve the major stakeholders in addressing issues that pertain to the programmes or projects, thereby creating a sense of ownership. The FGN plays a key role in identifying the stakeholders. Besides the executing and implementing agencies and other development partners, it is essential that target groups that are expected to be affected by the programmes or projects be involved in the discussion of issues relevant to them. Depending on the issues and problems to be addressed, these meetings may be conducted at different levels and venues with varying frequency. Technical and operational issues may be handled at the programme or project management level. Whereas policy issues that have significant implications for the programme or project and their ultimate beneficiaries may be discussed at a higher level, e.g., bipartite or tripartite reviews. Programme or the expanded theme group meetings must be conducted regularly. Bipartite or tripartite meetings must be held once a year, with additional meetings if the need arises. Reports should be prepared on all of these meetings.
4. **Systematic Reporting during Implementation**: There must be systematic reporting on all programmes and projects assisted by HEAP, regardless of budget or duration. The executing agency (the FGN or United Nations specialised agency) must submit an annual report to HEAP on the relevance, performance and likelihood of success of the programme or project. These annual reports must feed into the annual and triennial reviews. Internally, however, the programme

or the expanded theme group must prepare monitoring reports more frequently (i.e., monthly, quarterly and/or semi-annually) to serve its internal management requirements.

5. **Terminal Reports:** Upon completion of a programme or project, the executing agency must prepare a terminal report that focuses on the relevance and performance of the programme or project, the likelihood of its success, and the initial lessons learned in terms of best and worst practices. The report should also contain recommendations for follow-up actions by appropriate institutions where necessary.

TYPES OF EVALUATIONS

HEAP will have a range of options in evaluation. Evaluations methodology that may be used for the HEAP, may be classified by agent, timing and scope

1) By Agent

- a) **Internal or Self-evaluation:** Conducted by the Expanded Them Group, those directly involved in the formulation, implementation and management of the programme or project.
 - b) **External or Independent Evaluation:** Conducted by those who are not directly involved in the formulation, implementation and/or management of the programme or project.
- 2) **By Timing:** Mid-term Evaluation - Conducted at the mid-point of programme or project implementation. This

focuses on: relevance performance (effectiveness, efficiency and timeliness) issues requiring decisions and actions initial lessons learned about programme or project design, implementation and management.

- 3) **Terminal Evaluation:** Conducted at the end of each contributing project implementation that focuses on relevance performance (effectiveness, efficiency and timeliness) lessons learned about programme or project design, implementation and management early signs of potential impact and sustainability of results, including the contribution to institutionalisation recommendations for follow-up activities, including those being proposed for HEAP cooperation, e.g., second phase of a programme or project.
- 4) **Ex-post Evaluation:** Conducted two years or more after the completion of the programme or project. This is preferred for clusters of projects or programmes in a particular sector or geographical location or that concentrate on a specific theme in order to generate generic lessons and identify relevant policy issues. Judges the relevance, performance and success of the interventions at the programme or project, sectoral and thematic levels. This focuses on relevance performance (effectiveness, efficiency and timeliness) success (impact, sustainability and contribution to institutionalisation) lessons learned (best and worst practices, intended and unintended costs and benefits, applicability of lessons at sectoral and thematic levels and across geographical boundaries) as the basis for policy formulation and future programming. There are four types of evaluations based on scope in harmony with the common guidelines.

- 5) **Project Evaluation:** Evaluation of a single project. Its focus depends on the timing of the evaluation.
 - a) **Sectoral Evaluation:** Cluster evaluation of projects or programmes in a sector or sub sector. It focuses on: a comparison of the strengths and weaknesses of different approaches, modalities and/or strategies to address sectoral issues collective effects of the programmes and projects on sectoral objectives at the country, regional and/or global level.
 - b) **Thematic Evaluation:** Cluster evaluation of projects or programmes addressing a particular theme that may cut across sectors or geographical boundaries; same focus as that of a sectoral evaluation except that the evaluation is concerned with a theme that may also cut across sectors.
- 6) **Programme Evaluation:** Each of the types of evaluations categorised by scope may also focus on policies and processes. However, policy and process evaluations are described below as distinct types of evaluations to highlight their unique features. The strategic evaluation is included as a variation of the policy evaluation since it also deals with policies, but it is not concerned with policy impact. The timing of the strategic evaluation is crucial. Its main objective is to enable the various stakeholders to reach a common understanding of certain policy issues as a significant step towards policy formulation.
- 7) **Policy Evaluation:** Cluster evaluation of projects or programmes dealing with particular policy issues at the sectoral or thematic level. These aims to support policy-making by recommending new policies or changes in existing ones that are necessary to attain the sectoral or thematic objectives. It focuses on relevance implications or

impact of policies on those directly and indirectly affected by them: costs and benefits effectiveness of institutional arrangements to implement or enforce the policies;

- 8) **Strategic Evaluation** may be called for because of the following: nature of the topic: cross-cutting issues with significant implications for the major development priorities of the FGN and with high risks to stakeholders urgency of a situation that needs to be addressed, which therefore makes the timing of the evaluation critical widely conflicting views on the issues that need to be resolved. It aims to deepen the understanding of a particular issue reduce the range of uncertainties associated with the various options for addressing that issue help the parties concerned to reach acceptable working agreements as a step towards making timely decisions on the issues involved. Process Evaluation is a cluster evaluation of projects or programmes to assess the efficiency and effectiveness of a particular process or modality they have adopted;

GENDER

Gender mainstreaming is a strategy for promoting gender equality. It is defined as taking account of the social, cultural, economic and political inequality between women and men in all policy, programming, administrative, human resource and financial activities and all organisational procedures for the empowerment of women. In practice, this means:

- ◆ identifying gender issues with regard to a given situation through gender situation analysis;
- ◆ advocating the incorporation of this information in all aspects of decision-making and

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- ◆ implementation through the involvement of local gender experts and consultation with women as well as men at every stage; and
- ◆ Ensuring monitoring and gender impact assessments using appropriate indicators.

We have initiated the development of core evaluation guidelines on gender issues. Such guidelines, which may be used for both monitoring and evaluation, emphasize the following:

- ◆ assessment of the extent to which gender differences have been considered in the programme or project design and implementation stages, particularly in targeting beneficiaries and determining the resources, delivery systems and participatory mechanisms required;
- ◆ collection of gender-differentiated data regarding the delivery of all programme or project services and resources;
- ◆ Use of gender-differentiated impact indicators to measure, in quantitative and qualitative terms, the extent to which the following are achieved. Poor women and men have been reached by and benefited from the programmes or projects, especially in terms of empowering them to overcome poverty. Local capacities have been strengthened to address gender issues, and necessary safeguards and institutional linkages have been put in place to ensure the sustainability of benefits to women and men.

INDICATORS

Here we focus on indicators for the monitoring and evaluation of HEAP programmes and projects. Indicators of

performance for corporate planning within HEAP are outside the scope of the present document. Indicators constitute a critical component of a results-oriented monitoring and evaluation framework. Generally speaking, they are signs that show changes in certain conditions or results from specific interventions. They provide evidence of the progress of programme or project activities in the attainment of development objectives.

Within the context of HEAP programmes and projects, indicators are pre-established signs that the people carrying out monitoring and evaluation actions look for in determining the extent to which a programme or project remains relevant, is performing well and is achieving its objectives. In this context, they may be classified as relevance, performance and success indicators. Indicators for use in monitoring and evaluation should be selected during the formulation stage of a programme or project when the objectives are being established. The following questions should be answered as part of the process of establishing the indicators.

- 1) What are the objectives of the programme or project?
- 1) Who are the target groups and what are their needs and expectations?
- 1) What changes are anticipated as a result of the programme or project?
- 1) To what extent and how efficiently is the programme or project achieving its objectives?
- 1) What are the criteria for judging the success of the programme or project?

Guiding Principles for the Selection of Indicators

At the programme or project formulation stage, the institutions that will be directly responsible for the programme or project and other stakeholders should be involved in selecting a preliminary list of indicators. During implementation, the indicators should be revised in accordance with changes in the programme or project context and design through consensus of the various stakeholders. The participatory process is intended to promote ownership of, and responsibility for, the planned results of the programme or project.

Quantitative, Qualitative and Proxy Indicators: Both quantitative and qualitative indicators should be selected based on the nature of the particular aspect of the programme or project that is being assessed. Efficiency, for instance, lends itself easily to quantitative indicators. On the other hand, measuring dynamic sustainability, which involves people's adaptability to a changing environment, necessitates some qualitative assessment of attitudes and behaviours. However, there are some methodologies, such as beneficiary assessment, rapid rural appraisal (RRA) and structured interviews, which can be used to convert qualitative indicators into quantitative indicators. In cases where cost, complexity and/or timeliness of data collection prevents a result from being measured directly, proxy indicators may be used to reveal performance trends and make managers aware of potential problems or areas of success. For example, in an environmental protection programme where a target result is the improvement in the health of certain lakes, the level of toxins in duck eggs may serve as a proxy indicator of that improvement.

Limiting the Number of Indicators: A good balance should be achieved between theory and practice, i.e., between what should be and what can be measured. An ideal set of indicators includes indicators of relevance, performance and success. However, for practical purposes, it is absolutely necessary that a thorough selection process be undertaken, through negotiation among the various stakeholders, to arrive at a realistic number of meaningful indicators. The major considerations in selecting the indicators are:

- ◆ appropriateness of the indicator vis-à-vis the immediate and development (long-term) objectives of the programme or project;
- ◆ ownership by beneficiaries and other stakeholders;
- ◆ Cost-effectiveness of data collection.

Table 1. Shows the genesis of indicators as far as they are designed to address in a systematic way the relationship to objectives, outputs, effects and impact. In this regard they are defined as⁹

- **Variables that help to measure changes in a given situation.**
- **Tools for monitoring and evaluating the effects of an activity.**

Indicators are defined as specific (explicit) and objectively verifiable measures of changes or results brought about by activity. In other words, indicators are designed to provide a standard against which to measure, or assess, or show, the progress of an activity against stated targets, towards delivering its inputs (input indicators), producing its outputs (output

⁹ UNICEF (1985). Food Aid and the Well-being of Children in the Developing World. New York.

HYPOTHESES AND ASSUMPTIONS	CRITERIA FOR DESIGN	- E
OBJECTIVES		
Assumptions about relationships between objectives and impact indicators	Criteria for choosing impact indicators. Design criteria: accuracy, levels, timing	
IMPACT PROCESSES		
Hypotheses about how effects produce impacts		
EFFECTS		
Assumptions about relationships between impacts / effects indicators	Criteria for choosing effects indicators. Design criteria: accuracy, levels, timing	
Hypotheses about how outputs produce effects and external factors		
OUTPUTS		
Assumptions about relationships between effects / output indicators	Criteria for choosing output indicators. Design criteria: accuracy, levels, timing	
Implementation hypotheses		
INPUTS		

indicators) and achieving its objectives (effect and impact indicators)¹⁰. Indicators¹¹ may be

- **direct, such as those cited above(usually monitoring indicators), or**

¹⁰ Such as the efficiency on agricultural package delivery (input), yield in farms (output), technology adoption rate (effect), and change in livelihood security (impact).

¹¹ In general, indicators must be incorporated into various stages of the programme or project cycle. At the design or formulation stage, indicators (even those that are tentative) must be established to help to clarify the logical framework of the programme or project. The indicators selected should then be used during programme or project implementation as part of the monitoring process to measure progress, including the identification of potential problems or success. Finally, they should be part of evaluations to assess results, including beneficiary satisfaction with results. Specifically, indicators must be integrated into the rating and reporting system for monitoring and evaluation purposes. There are other ways of categorising indicators. For instance, the provisional set of core indicators that HEAP has developed for situational analysis in the areas of thematic focus was based on the inputs-immediate outputs-outcome classification scheme.

- **Indirect (proxy), usually impact indicators used where direct measurement is not feasible or cost effective¹².**
- Depending on scope, content, and operational circumstances, impact measurement may be feasible, and all opportunities to do it should be exploited, given existing resource and time constraints. However, it cannot, and should not, be treated as an automatic or standard objective of evaluation.
- In all cases where proposals for effect and impact measurement are made, particular emphasis must be placed on the assessment of practical requirements. What may be interesting and stimulating conceptually may not be feasible at the implementation level. Information collection for "general", but not clearly specified, purposes is not justified;

M & E DEVELOPMENT PRINCIPLES AND REQUIREMENTS

Monitoring and evaluation requirements can best, and most cost-effectively, be satisfied if undertaken on a combined and integrated basis to meet effect and impact assessment requirements. In this regard, input and output measurement, although essential, is not sufficient, and objectively verified information on process and effects should, as a minimum, be obtained during the time span considered for study;

When designing such systems, a specific selection of the most pertinent process issues and measures of effect must be

¹² Such as the size of assets or holdings, type of house or consumption expenditure as proxy indicators for levels of income: and weight in relation to height as a measure of the health status of children.

made before a project is implemented. A clear and deliberate distinction must be maintained between what is "useful" and what is "essential" in individual cases. The **substantive link between evaluation and policy analysis** should, in this regard, be fully exploited by assigning the examination of selected policy issues and equations, or particular aspects of them, to individual M & E systems, thereby usefully drawing policy, evaluation, and project design together.¹³ Indicators are not targets, and neither indicators nor targets should be confused with objectives. Targets are specified results in terms of quantity or timing (usually both), but these results may relate to inputs, outputs, effects or impacts. Indicators are used as markers of progress towards reaching intermediate or long-term objectives. They are not numerical targets in themselves.

Indicators should, in the ultimate analysis, be determined by the nature of the objectives and intended effects and impact. The first step, therefore, is a clear and unambiguous statement of the objectives, short-term, intermediate and long-term. These may pertain to increased outputs, such as awareness

¹³ The "burden of proof" for the generation, collection, and recording of data lies with the data users. They must be identified and must provide a justification for such activities based on clearly defined information requirements, an analysis plan, and established information flow for feedback purposes. The fact that donors and beneficiaries (including the FGN and other organisations) have essentially the same information requirements should, in this regard, be emphasised. Requirements should not, therefore, be treated as extemporaneous, unique, or externally imposed on the people to "satisfy the needs of external agents" M & E as a whole should take full advantage of other on-going data collection efforts and local institutional capacities. Since they are by nature and design integral to larger national processes and data requirements. Supplementary data and needs for externally provided technical support should be kept of a minimum. When provided, such support should meet not only specified technical requirements but should also aim at the institution-building purposes; and statistical rigor and interference, although desirable, may have to be relaxed in view of cost and time constraints, and the need for practical and useful results.

generation civic education (short-term), or enhanced effects (intermediate-term) such as empowerment. Or they may be impacts such as eradication of rural poverty or better health of the target population (There is little conceptual problem with outputs and effects which generally are directly measurable, but concepts such as poverty and health are not easily measured. Hence the need for indicators which in this context are the (smallest number of) variables by which the objectives (less poverty, better health) can be comprehensively described and measured. While the choice of indicators is a matter of common sense, or of experience and knowledge of statistical data source, certain rules of thumb can be applied. Thus, ideally, indicators should be:

- **validity:** they should be valid units of comparison for rural people to understand and actually measure what they are supposed to measure, be statistically valid and used to represent the intentions of the goal to be achieved;
- **reliability:** verifiable conclusions based on them should be the same if measured by different people at different times and under different circumstances;
- **relevant:** should be relevant to sustainable livelihood issues rural people would like to verify;
- **sensitive:** should be sensitive to changes in the situation being observed,
- **specificity:** this pertain to the ability of the indicators to work on specific verifiable areas of outputs based on available data;
- **cost effective:** the results should be worth the time and money it costs to apply them; and
- **Timely:** it should be possible to collect the data reasonably quickly.
- **simplicity:** simple indicators must be used that can be understood by the rural communities

- **measurability**
- **verifiability**

Few indicators can fulfil all these criteria. But they may still indicate direction and general magnitude, thereby assisting in comparisons over time or among different areas or groups of people at a point in time. As noted, choice of appropriate indicators is a task that requires experience and skill. It is an art rather than a science. It also requires thorough understanding of the information needs of management at the various levels, knowledge of how best to obtain the data for the indicators and of the limits imposed by both costs and techniques. A few other more technical considerations in the choice of indicators may be noted:

1. An important factor affecting the cost of data collection and the method of analysing it is the level of the data collected. Indicators may be aggregate at national level, derived from national sources and only applicable at this level. A second category of aggregate indicators is derived at the local level (community, village, and district)¹⁴. A third category of indicators is derived from households or individuals, usually through census or sample survey¹⁵. By and large, aggregate indicators are simpler to collect than household indicators. Nevertheless, because they cannot readily be disaggregated and therefore no distribution data can be obtained from them, they have limited utility. On the other hand, household data can be disaggregated, but it is generally costly to collect.

¹⁴ Examples are whether schools are available in each village \ district surveyed and their condition.

¹⁵ The degree of literacy and height and weight of children are examples.

2. Not all concepts lend themselves to relatively simple, quantitative construction of indicators. Examples are the degree of popular participation or reformed organisational structure. Rather than trying to squeeze these complex concepts into a small set of numbers, descriptive statements might be prepared with indications of the direction of change.
3. Implicit in the points above, the number of indicators must be limited to keep information requirements and costs of collection to a minimum and to ensure focus on the most significant issues.
4. Both indicators and related information requirements should be periodically reviewed to take into account changing needs or refinements in data quality. In this connection, present indicators, or indicators used in other projects, should be reviewed before new ones are considered.
5. Finally, as far as possible the indicators, or at least some of them, should be divisible by gender, income group, etc., in line with objectives. Disadvantaged groups such as the rural poor and women cannot receive equitable benefits from development projects unless they are specified as beneficiaries, with strategies indicated whereby their disadvantaged position can be overcome and their conditions monitored. To repeat, aggregate indicators cannot usually be divided into sub-categories. Indicators based on the household or the individual are required to provide data separately for men and women or for socio-economic categories such as the poor or the landless.

Sources and means of verification: Decisions about indicators and data generally should be taken on the basis of available and potential sources. There is little purpose in compiling an ideal list, which is either too complex or too large. The first step in data collection, therefore, is a review of what exists in the way of information and sources. The review should cover both internal and external sources. In practice, it may often be found that data or data sources do not precisely fit the purposes but may be made to do so with marginal adjustments. Thus, for monitoring and evaluation purposes available, data on crop yields may require tabulating for a specific population. Health records kept in dispensaries might be improved with one or two additional entries per patient and with simple analysis. Even in the best of cases, and in spite of the apparent wealth of secondary data, it will normally be necessary to collect additional information. The next step, therefore, is to decide what to collect and how. In turn, this may be a suitable time to review earlier requirements. It may be found that initial plans were unduly ambitious in the light of available resources and difficulties in data collection. There are basically six sources of data:

1. The management processes, which yield or can be, made to yield information-particularly on inputs and outputs-through periodic reporting systems.
2. Techniques that can be incorporated into enhancing livelihood security processes.
3. In-depth investigation of small samples of households or individuals, where the method of investigation is through detailed, open-ended questions and probes rather than set questionnaires.
4. Sample surveys of a medium-to-large number of households or individuals, normally using a set questionnaire with closed, alternative choice questions.
5. Interviewing key respondents for information on generic community characteristics and participant observation, for an analysis of the functioning and role of institutions, such as co-operatives, credit Banks, marketing arrangements, etc.

Sample Size: The art of data collection is to select the appropriate source and method for a given type of data to manpower, technology and money. Medium-or large-scale sample surveys (above) tend to be the most costly in terms of both manpower and money. Management can seldom cope with surveys it is proposed to devolve surveys to a central agency or an external body. Even then, one or more of several techniques should keep sample size to a minimum now available, such as stratification¹⁶

Collection and Analysis of Data for Indicators: Based on selected indicators, time-series data must be collected and analysed during and after programme or project implementation to support monitoring and evaluation.¹⁷

¹⁶ (i.e. dividing the population into groups as homogeneous as possible with respect to the main variables examined and sampling a small number from each group) or sequential sampling. Actual sample size is determined by an estimate of the likely rate of change in the major variables and by the desired degree of probability that the survey results reflect reality rather than the chance effect of sampling. This can effect is expressed in terms of the "sampling error". The smaller the error, the more precise the estimate is said to be. Reducing the error, however, generally requires enlarging the sample, thereby increasing the cost. It has been pointed out, that for purposes of monitoring, estimates need not be "precise".

¹⁷ At the programme or project formulation stage, the following elements must be defined: types and sources of data needed, methods and frequency of data collection, methods of data analysis, who will be responsible for data collection and analysis; and Who will use the resulting information? The time-series data must be compared with the baseline data (constructed at the formulation stage) describing the problems to be addressed by the programme or project. The data comparison will enable programme or project managers and other key stakeholders to assess whether the programme or project is achieving its objectives.

**MONITORING AND
EVALUATION SYSTEMS FOR THE NATIONAL
HIV/AIDS EMERGENCY ACTION PLAN**

ACTIVITIES, ACTORS & INDICATORS

Based on the strategic mission and plan of the HEAP

COMPONENT:

Removal of barriers to a large-scale response to HIV/AIDS

SUB-COMPONENT: Removal of Behavioural and Informational barriers

STRATEGY 1: Promotion of Behaviour Change

Activities	Source/Mean of Verification	Output Indicators	Outcome Indicators	Assumptions/ Risks
Develop and produce Advocacy packages for all levels and groups.		Advocacy packages produced	Number and type of advocacy forum conducted by LGA, State & Federal Committees.	State advocacy team will be composed of 11 members drawn from: Education, Information, Health Women Affairs Sports & Youth Finance, Agriculture, NLC (state) PLWHA (Rep.) and SACA staff.
Facilitate the establishment of SACA, & LACA.	NACA/DP & SACA State Programme. Team	State & Local Committees formed throughout the country (37 states & 778 LGAs).	Percentage of opinion leaders responding through positive remarks against HIV/AIDS epidemic.	
Three days zonal training for SACA mobilization team (12 workshops for 33 participants each.) 2 per Geopolitical zone.		396 SACA members trained.	SACA members have acquired skills and are mobilized.	
Three days training workshop for LACA mobilization teams. (52 Workshops of 60 participants – i.e. 4 participants per LGA)	SPT NACA/DP	3096 LACA members trained	LACA members have acquired skills and are mobilized.	

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Conduct 4 Advocacy visits to National Level Legislature	National legislature, NACA/DP	17 national, 17 states, 19LGA Advocacy and social mobilization against HIV/AIDS undertaken at all levels.	% of influential and key groups mobilized.	60 are justifiable because of economics of scale. There will be adequate facilitation 1:5 ratio
General public sensitisation and awareness creation – multiple media <u>National:</u> TV, Radio, Bill Boards, and Print Media. Below the line items. <u>State:</u> TV, Radio, Bill Boards, Print Media, below the line items. <u>LGAs:</u> mobile TV units, Radio public address systems, traditional channels.	Min of Information & Culture NACA/DP NGOs SACA, NGOs LACA, NGOs, Min of Info. The media, NGOs, CBOs, PLWHA & PABA. Sectors critical mass	80% of Nigerians Sensitised 72 radio jingles, 36TV jingles, 12 TV discussions, 121 interviews, 3 dramas per quarter Awareness seminars undertaken in all sectors at all levels.	Proportion of the general public becoming aware and sensitive to HIV/AIDS. Awareness among high risk groups (Survey held in the sectors at all levels)	Sensitisation and information leads to behaviour change. This is because previous awareness programme had been target group oriented. i.e. 100% awareness target.
Awareness seminars in all sectors at various levels. National, state & LGA				
Review, development & Production of IEC materials		50% of Communities reached		
Composition and Training of Rural mobilization Team: SE – Ebonyi, SW – Lagos, NW – Kaduna, NC – Benue, NE – Taraba, SS – Akwa Ibom	SACA Min of Info., MOH, ARD, PLWHAS	18state Rural Mobilization Team composed and trained.	Reduction by to 8% in HIV prevalence in the 18 states.	Community members should be ready to volunteer at zero cost.
Compose and Train Local Govt. Rural Mobilization drawn from REW and village health workers	SACA, FMOH. ARD/ADP	180 L.G. Rural Mobilization Teams composed and trained.	Existence of community based programme supporting HIV prevention and mitigation activities	Selection criteria for volunteers; - Ready to serve -Respected and accepted by community members
Selection and sensitisation of rural communities (50/state- Hot spots). (Total of 1500 communities)	SACA/NGO LACA ARD/ADP	900 rural communities selected and sensitised	Rural Communities sensitised and mobilized for HIV/AIDS epidemic response.	If the assumption fails during implementation Community based Agricultural Extension Officers and

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Selections and Training of Community Volunteers. 5 Vol./community i.e. 250C.V./LGA. 1250/State 7500 C.V. for 6States.	LMT / SACA NGOs PLWHA	45000 Community Volunteers, selected and trained in all the 18 States.	Remove line institution of Community based activities	
Development of and funding of Community Action Plan	LACA mobilization teams Comm. Volunteers. ARD / ADP	Number of Community Action Plan developed and funded.	Rural community implementing HIV/AIDS prevention programme	
Information dissemination, counselling & linking PLWHA with care & support sources.	SACA, CVs.	Implementation of Action Plan undertaken including info. Dissemination.	Reported changes in sexual Behaviour. Number of PLWHA benefiting from community support programme	
Select and train 18 CSO, one per state as trainees for other CSO to integrate HIV/AIDS into their programme / activities and support Community Action Plan	NACA/DP, SACA/CSO	One NGO selected/Zone and its staff train and supported to train others.	Target 5/Community (ex. 7500 Nation wide)	
Education and training of 'quack doctors', herbal doctors, paramedics and chemists.	NACA/DP, SACA, NTP, NASCAP, PLWHAS, CSOs	Expanding pool of trained unorthodox personnel to take care of PLWHA	Improved cooperation b/w orthodox and traditional treatments	
Under take a study tour of appropriate programme within and outside the country	SACA LACA Community PLWHAS & CSO	Study tour undertaken per year.	Report produced. Increased capacity in community mobilization	
Assessment of the extent of right violation and denial of right for HIV/AIDS infected and affected persons.	Labour. Justice H/Right Com. NGOs, Assembly, Trade Unions, Employers Associations	Fact finding of Extent of Discrimination and Right violation Against PLWHA/ PABA.	Reports on right Violation produced.	Improved impact of HIV/AIDS activities
Initiate and support the drafting of at least one at national and state level to protect the right of infected and affected	NACA/DP / SACA As above	Advocacy For enactment of H/right Laws undertaken.	36 lobby meetings held in 18 states and 4 at national level	

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4 lobby meetings at national, legislature, 2 per state to support the enactment of at least one new law at national and state level to protect the right of infected workers, orphans AID widows and widowers.	NACA/DP UNAIDS	Committees set up in all zones of the federation	New laws to protect the rights of PLWHA, PABA, and AIDS orphans	
Set up committees to review the existing relationship of HIV to Ethics and Human rights	NACA/DP, SACA, CSOs, Legislature, Unions, CiSCGHAN, CSACEFA, PLWHA	As above	Protection of rights of infected and affected people	
Develop and maintain condom distribution channels throughout the country	FED Govt, FHI, other condom suppliers	Condom distribution channels set up for affordable and quality condoms	Reduced transmission of HIV/AIDS	
Create awareness and advocacy with govt, agencies, civil societies, private sector, and support the involvement of CSOs in advocacy and awareness	NACA/DP, SACA, UNAIDS	Improved interaction between actors, better coordination of activities	Integration of HEAP activities into all aspects of human endeavour.	Increased utilization of PMTCT and other women focused initiatives.
Support the coordination of advocacy and communication with other organizations and develop partnerships with these organisations		As above	Synergy of anti AIDS activities	
Promote and support relationships with religious bodies	NACA/DP, SACA, CSOs, Religious bodies	As above, integration of religious body activities against HIV/AIDS into the Nigerian response to HIV/AIDS	Enhancement of women focused HIV/AIDS preventive measures	
Promote and support equalization of gender issues relating to Health and HIV/AIDS	Women, Trade Unions, Govt, CSOs, MOWA, Women's organizations	Equal opportunity to health, employment etc.	Equalization of gender,	

Sub-Components:
Removal of behavioural and informational barriers
Strategy 2: Collate and use technical information nation-wide

Activities	Source/Means of Verification	Output	Outcome	Assumption/ Risks
Set up one Information and Resource Centre in NACA/DP accessible to all stakeholders	NACA/DP Ministry of Info FMOH CSOs	Collection of book, flyers, guidelines, research reports An operational information management system + website in place.	Increased information in circulation and stimulation of research interest in Nigeria	Availability of relevant information, materials/ equipment
Set up 18 Information resource Centres in 18 states	NACA/DP SACA	18 Information Resource Centres established.	Increased information in circulation and stimulation of research interest in the states, Creation of research networks.	Increase in information and knowledge on HIV/AIDS within the research and practitioner communities.
Set up research information & dissemination system based at information resource centres	SACA & LACA	Information dissemination system including mailing lists, electronic contacts with Nigerian researchers established.	Global research Information dissemination system networking	Assumptions: That there is lack of behavioural, cultural and impact studies and that these studies are important for the implementation of the strategic plan.
Develop guidelines on ethical issues in HIV/AIDS research and reporting.	NIMR, NUJ Consultants PLWHAs, MOJ, NACA/DP Human rights CSOs	Set of guidelines developed and disseminated.		Risk: Lack of cooperation from the study group.
Support operational research to generate gender disaggregated information in the following areas: Economic impact of AIDS on labour and productivity	NACA/DP, CSOs Consultants	At least 9 research reports and publications produced on various aspects of HIV/AIDS	Enhanced understanding of ethical issues among professionals.	That all CSOs in the 18 states will be mapped
Socio-Economic impact of AIDS on women and men in the informal sector	Min of Labour, NLC, Economic Comm. NACA/DP, SACA, LACA,	Baseline data on impact of HIV/AIDS on labour & productivity	Increased knowledge and understanding of key research issues for programming, planning and response	That assessment models used will cover a wide spectrum of the

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▪ Socio-Cultural factors that sustain HIV transmission in Nigeria			Information generated for use by planning committees	population
▪ Impact of HIV in and out of school youth	UNAIDS, UNICEF, UNFPA, UNDP	Report on the socio-economic impact of AIDS in the sector	Baseline data generated for use in planning of interventions	That assessment models used will cover a wide spectrum of the population
▪ Documentation of the work of NGOs & CBOs. In HIV/AIDS prevention	Private sector, Consultants, CSOs, NACA/DP, SACA, LACA	Report generated on factors that sustain transmission of AIDS	Guide line available for drawing up appropriate interventions Mapping of CSO activity in 18 states	
▪ Annual HIV sentinel sero- prevalence			Baseline for effective strategy intervention	
▪ Bi-annual HIV Syphilis/TB Sentinel survey on high risk groups	FMOE, SOME, SACA, LACA, CSOs, PTA'S, Consultants CiSCGHAN, AAN, DFID	Assessment of impact Report on CSO activity generated Report generated on National prevalence	Baseline for use in planning effective interventions & modifying existing ones	
▪ 4 yearly BSS	NASCP, NACA/DP, NASCP, UNAIDS, UNICEF, UNFPA, UNDP	Report generated on high risk groups Report produced Report produced on attitudes and behaviour in out of school youth	Baseline for use in re/planning effective interventions	
▪ Baseline survey on knowledge, attitude and behaviour of out of school youth			Baseline data for monitoring impact of interventions Baseline against which to plot attitude and behaviour changes	

Component:
Removal Of Barriers to Large Scale Response
Sub Component: Systemic Barriers
Strategy 3: Ensuring Adequate Resource

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Activities	Source/Mean of Verification	Output	Outcome	Assumption
Training Needs Assessment	NACA/DP/SACA, LACA/CSOs	TNA conducted	Increased capacity within Govt for HEAP implementation	Risk: That state governments and Civil Service Associations in hotspot states may not be supportive of recommended training and re-deployment efforts
Training Plan	Line Ministries FMOF, SMOF,	Training Plan developed.	Strategy developed for resource mobilisation	
Training implementation		3530 persons trained in both phases.	Improved management & Resources allocated to HEAP	
Monitoring of training impact	NACA/DP, SACA CSOs	Gap Analysis produced and disseminated		
Funding Gap analysis	Private Sector			
Development of transparent financial management systems	NACA/DP/CSOs/ Private Sector/ Donors.	Operational systems in place		Difficult to undertake a comprehensive Funding Gap Analysis study given the size of the country High level Advocacy and Follow-up
Engage profit-making private sector in making commitment to social responsibility on HIV/AIDS prevention and impact mitigation.		No. of meetings and organisations involved	Funding commitments made by private sector.	
NACA/DP/Civil Society participation in private sector resource mobilisation forum.		No. of meetings and funding decisions reached.		
Monthly meetings of Expanded Theme Group		No. and type of action points/decisions on funding.	Enhanced coordination of donor funding.	
To develop and operationalise accounting and audit systems to be adopted by (NACA/DP, SACA, LACA) and all participating organisations including NGOs, CBO, CSOs	NACA/DP, FMOF	Financial Management Guidelines and Manuals	Transparent and efficient financial management system	
To institutionalise practices imbuing financial transparency and accountability		Published audited accounts	Transparent and efficient financial management system	

COMPONENT: Systemic Barriers
SUB-COMPONENT: Institutional Capacity
STRATEGY 4:
Developing Institutional Capacity for HEAP Implementation

Activities	Source/Means of Verification	Output	Outcome	Assumption / Risk
Drafting, advocacy, enactment of legislation	NACA/DP/Min of Justice	Draft legislation with clearly defined roles TORs developed and approved.	Legal framework for NACA/DP / SACA/ LACA. Legislation passed	Risk: yet another bureaucratic structure
Provide essential infrastructural support			Increased capacity to develop and coordinate activities	Assumption: That NACA/DP's needs assessment must be phased in accordance with its anticipated growth in accordance with the HEAP
Develop TORs for technical working groups at federal state / local level	NACA/DP, SACA, LACA, donors CSOs	TWGs established at all levels	Improved capacity for planning + programme implementation	Risk: NACA/DP may have more responsibilities than it can handle
Establishment of technical working groups		Organisational structure and systems developed.	Improved coordination and combined approaches developed.	Assumption: That NACA/DP will be a coordinating agency
Develop operational systems + reporting mechanisms		Regular dialogue between government, civil society, private sector and donors.	Ownership of national state plans increased.	Widespread dissemination of information
Build partnership with CSOs & PLWHAs through consultative forum	CSOs SACA LACA		Increased govt support to CSO activities.	
Training Needs Assessment	CSOs, SACA	NACA/DP, Training plan developed and implemented	Improved capacity of civil society to partner government in HIV programmes implementation	
Development of training plan	CISCGHAN, NACA/DP, SACA	180 CSOs trained in 18 states (10 per state) per year.	Improved coordination and networking of CSOs working on HIV/AIDS	
Training plan implementation	NACA/DP, Donors CISCGHAN			

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Develop operational systems + reporting mechanisms	NACA/DP SACA CISCGHAN	Areas of support & collaboration defined. Formal recognition of CISCGHAN by stakeholders.
Support networking initiatives of CISCGHAN	UN Theme Group NACA/DP SACA, LACA	

COMPONENT:
Prevention of HIV Infections
Sub Component: Targeted Interventions
Youth (High risk youth population and non-high risk youth population)
Strategy 5.1: To reduce high risk behaviour and to create awareness

Activities	Source/Means of Verification	Output	Outcome	Assumptions/Risks
Support and coordinate the development of youth focused mass media campaign on radio, television and the print media.	MOI NACA/DP/SACA, MOWA	<u>Increased output of campaign material</u>	Increased awareness & positive behavioural changes	Assumption: That a multi-media and targeted approach is needed to reach the youth
Selection and training of popular sports men and women, singers and musicians and young actors and actresses to convey HIV/AIDS messages	FMOE, MOE'S, NGO'S, UBEC	<u>Number of artists and sports persons trained</u>	Acquired competence to advocate and sensitise	Risk: Resistance in the Northern Islamic states and in the Catholic areas in the East
Sensitisation of communities within tertiary institutions using visits and performances by young actors and actresses, sportsmen and women, young singers and musicians		<u>Number of institutions visited and performances staged</u>	Reduced transmission of HIV due to enhanced awareness	
Development, pre-test production and distribution of HIV/AIDS/STI modules for integration into the curriculum of virtually all courses in tertiary institutions taking cultural differences into consideration	NGO'S, FMOE, FMC	<u>No. of Policy makers sensitised</u>		Messages from artists etc more meaningful to youth

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Integration of HIV/AIDS/STI into curriculum of virtually all courses in tertiary institutions through policy analysis, advocacy and lobbying	NACA/DP, CSACEFA CISCGHAN NUC, NBTE, NCTE	<u>Number of schools involved in module development</u>	Integration of HIV/AIDS/STI into general studies curriculum in schools	Teaching on HIV/AIDS in schools will lead to reduced rate of HIV/AIDS transmission among youth
Conduct 2 five day training per state for GS teaching staff that will teach basic facts. About HIV/AIDS/STIs in tertiary institutions	NACA/DP, FMOE, SACA	GS teaching staff trained (no. of staff to be trained determined by FMOE) <u>Number of tertiary institutional publications reflecting HIV/AIDS issues</u>	Integration of modules into curricular of schools	
Inclusion of HIV/AIDS issues in publications of tertiary institutions, e.g. newsletters, journals papers, books.	FMOE, FMOH, SOME, CSOs SMOH	<u>Size of such stocks and number of institutions libraries who have acquired them</u>	Information on basic knowledge of HIV/AIDS disseminated to youth Increased knowledge of HIV/AIDS and reduced rate of HIV/AIDS transmission	Resistance in Islamic states and in the Catholic areas
Stocking of central and departmental libraries of tertiary institutions with HIV/AIDS documentation	All tertiary institutions	<u>Core of peer health educators to disseminate information</u>		
Conduct a national Peer Health Educators (PHE) workshop to distil best practice	NACA/DP, Tertiary institutions MOE, NANS, Muslim Students Ass, Christian Students Association	<u>Curriculum developed & integrated into schools</u>		
Review, produce & distribute curriculum for training PHEs in tertiary institutions	NACA/DP, CSOs FMOE, FMOH, NTP, NASCAP, SMOE, SMOH, CSOs	<u>Core of trainers trained</u>	Increased ability to make informed choices about sexual behaviour	
Conduct TOTs for training of peer educators in tertiary institutions in 18 states.	NACA/DP, CSOs FMOE, FMOH, NTP, NASCAP, SMOE, SMOH, CSOs	<u>IEC materials produced & distributed</u>	Expanding core of peer health educators	
Review, develop, produce and distribute IEC materials in support of Behaviour Change Interventions in tertiary schools	MOE NACA/DP/CSO	<u>Peer educator & counsellors trained</u>	Increased knowledge amongst youth	
Conduct peer education training in all tertiary institutions in ALL states	FMOE, FMOH, NACA/DP/CSO, NTP, NASCAP	<u>Female students educated on rights</u>	New trainers trained, increasing base of trainers	

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Conduct reproductive Health and Rights education for female students in 72 tertiary institutions	FMOE NACA/DP/CSOs FMOH/SACA,	<u>Female condoms promoted and adopted as safe practice</u>	Positive behavioural changes as a result of IEC strategies	
Promote female condoms in tertiary institutions in 18 states through targeted IEC materials	FMOE, SOME, FMOH, SMOH, Human rights org, Justice dept. CSOs, NTP, NASCAP	<u>Wide availability of good quality affordable condoms</u>	Improved accessibility by youth to peer educators	
Establish traditional and non-traditional male and female condom sales outlets in tertiary institutions.	FMOE, NACA/DP, SACA, FMOH, CSOs, SFH,NTP	<u>Establishment and spread of anti aids clubs and groupings</u>	Female students able to make informed choices regarding their behaviour	
Establish anti AIDS clubs and church/mosque related student or/and staff groupings for HIV/AIDS information discussion and support in tertiary institutions	FMOE, NACA/DP, SACA, FMOH, CSOs, SFH,NTP NASCAP	<u>Training curriculum produced</u>	Females placed in a position of control over their activities	
Develop pre-test and produce counselling training curriculum for personnel of tertiary institutions	FMOE, MOE'S, Student government, CSOs, tertiary institutions.	<u>Number of persons trained</u>	Increased % of protected sex by youth	Female students are willing to adopt female condoms
Select and train sociologists, doctors, nurses and psychologists as HIV/AIDS counsellors in tertiary institutions	NGO'S, NERDC, FMOE	<u>Number of functioning counselling and testing services in tertiary institutions</u>	Peer pressure influence enhancing awareness about HIV/AIDS and reduction in transmission	
Create or strengthen existing HIV/AIDS counselling and testing services in tertiary institutions	NACA/DP, SACA, FMOH, MOH'S, FMOE,NTP, NASCAP	<u>Number of staff/ students who are members of the network</u>	Increased capacity to conduct counsellor training	
Develop a support network in tertiary institutions for staff and students who test positive	Staff unions, student unions, campus religious association, management of institutions	<u>Enactment of regulations against sexual harassment</u>	Improved counsellor spread	

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Undertake advocacy meetings with top management and members of governing boards of tertiary institutions	MOE'S, NGO'S, FMOE	<u>Number of IEC materials produced and disseminated</u>	Increased capacity for counselling and testing Institute and enforce strict regulations against sexual harassment	
Develop, produce and disseminate IEC materials to staff and students which are focused on coping with sexual harassment	Ngo's, Tertiary institutions	Map identifying concentrations of OSY.	Protection of rights of staff and students	Sales outlets should be youth friendly Students will accept to members of anti-AIDS clubs in tertiary institutions
Conduct mapping of points in urban areas where street /out of school children reside.	NACA/DP, SACA SMOE, CSOs PHE, UNICEF, UNESCO, UNAIDS	5,550 out of school peer educators trained	Increased sensitivity to sexual harassment in tertiary institutions Enhanced capacity to resist sexual harassment	
Train 30 out-of-school peer educators in 5 LGAs per state.	NACA/DP, SACA, PHE, CSOs, NURTW, UNICEF			
Identify and support community-based/CSO established programme on HIV/AIDS targeting out-of-school youth in urban area	NACA/DP, SACA CSOs, UNICEF, UNDP, UNDCP, UNAIDS, DFID, McArthur, Ford foundation,	CSO programmes identified & supported	Focus for targeting interventions	
Establish a pilot youth friendly health centres (within existing facilities) in each of the 18 states.	NACA/DP/ SACA, CSOs, FMOH, SMOH, NASCAP, UNICEF, NTP	Establishment of at least one youth friendly health centre per state in 18 states	Core group to influence out of school youth to positive behaviour practice	Strict penalties against offenders of sexual misdemeanours will reduce the incidence of such offences
Review, adapt, produce and distribute youth friendly films, dramas and folklores	NACA/DP, SACA LACA CSOs Women Affairs SACA, CSO,	Youth friendly films produced	Improved impact of programmes on the community	
Sensitise out-of-school youth using street drama, films folklores and other traditional methods.	MOH, Min of Women Affairs, UNICEF, NTP	No. of out of school youth sensitised	Availability of youth friendly health care & counselling to out of school youth	

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Train peer educators in secondary schools	NASCAP. SACA, CSOs, MOWA	Peer educators trained in sec. Schools	Heightened awareness by youth of HIV/AIDS issues
Conduct at least five state level workshops to train secondary and primary schools teachers on HIV/AIDS basic facts	NACA/DP, Min of Culture, SMOH, NTP, NASCAP. SACA/CSOs SMOI,	Primary & secondary school teachers trained	Peer group pressure directed towards positive behaviour change
Integrate HIV/AIDS into secondary and primary schools Curriculum, through child friendly school initiative.	FMOE, SACA, Parents/ Teachers Association, CSOs, National Primary Education Board	Integration of HIV/AIDS education into curricular of secondary & primary schools	Positive behaviour change Utilization of life skills training by youth in and out of school
Establish anti-AIDS Clubs in secondary schools	CSACEFA, CISCGHAN, UNICEF	Anti Aids clubs established in schools	Secondary school students aware of HIV/AIDS leading to positive behaviour stand
Intensive drug use reduction campaigns, drug detoxification and rehabilitation centres	UNDCP, UNICEF, NDLEA, CISCGHAN, CSACEFA, NACA/DP, SACA, NOA, MOH'S, health centres	Drug free youth clubs established, drug rehabilitation centres established	HIV/AIDS education integrated into curricular informally Positive behaviour changes
Life skills training centres, workshops, outings, youth gatherings, drama, etc.	UNICEF, CSOs, NACA/DP, CSACEFA, CISCGHAN, MOH	Number and distribution of life skills centres formed	Peer group pressure directed towards positive behaviour change, availability of centres in all states for rehabilitation

Component:
Prevention Of HIV Infection
Sub-Component: Targeted Interventions
Strategy 5.2: Empowerment of Women to Negotiate Safer Sex

Activities	Source/Means of Verification	Output	Outcome	Assumptions Risks
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train 5 CSOs to include gender & HIV/AIDS in their programmes		180 CSOs Programme Staffs trained in 18 States	CSOs integrating Gender and HIV/AIDS into their Programme	
Develop and produce a women centred manual to train and empower vulnerable women for HIV/AIDS prevention.	FMWAYD NACA/DP CSOs	No. of pre-tests conducted	Capacity developed in women's groups for sexuality communication and empowerment for safer sex	Assumption: Women and girls need to be empowered
Develop IEC materials targeting women in purdah + women in polygamous relationships	CSOs, NACA/DP FMWAYD SACA States Women Affairs	No. + Type of IEC materials developed	Increased awareness of HIV/AIDS prevention + transmission among Women	Existing Methodology e.g. Stepping Stones to be tested.
Conduct TOT workshops for market place women on peer counselling, gender issues and HIV/AIDS including negotiation of safer Sex		18 TOTs conducted	Enhances skills among women in Marketplace in conduct of peer education and counselling	
Mass rallies for women to promote Condom use in HIV/AIDS prevention	CSOs States Women Affairs, Women peer educators, LACA mobilization team	540 peer educators for market women trained	Knowledge + Acceptability of Condom use	
		778 mass rallies held per annum		

Component:

Prevention Of HIV Infection

Sub-Component: Targeted Interventions

STRATEGY 5.3: HIV/AIDS Intervention with the Armed Forces and the Police

Activities	Source/Mean of Verification	Output Indicators	Outcome Indicators	Assumptions/Risks
Develop, and produce curriculum for training peer educators in the Armed Forces and allied civilian populations	MOD DHQ NACA/DP	Curriculum produced	Improved capacity to conduct peer education training in the Armed Forces	Assumption: Peer education reinforces knowledge and promotes behaviour change in the Armed Forces and amongst its allied civilian population
Conduct 2 (tri-service) TOT workshops (one in Lagos and one Kaduna) for training PHEs in the Armed Forces	MOD DHQ NACA/DP	No of TOT workshops held Critical mass of trainers trained	Improved capacity to conduct peer education training in the Armed Forces	

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Conduct 63 PHE workshops in divisional and command headquarters targeting the Armed Forces and allied civilians.	MOD DHQ NACA/DP	No of peer educators workshops held	Improved capacity to conduct peer education training in the Armed Forces	
		No of persons attending PHE workshops		
		No of pre-tests done	Improved capacity to conduct counselling training in the Armed Forces	
Develop and produce counselling training curriculum for training of Armed Forces personnel and allied civilian populations	MOD DHQ NACA/DP	Counselling curriculum developed		
		No of TOT workshops conducted	Improved capacity to conduct counselling training in the Armed Forces	Assumption: Because of their Exposure to non regular and multiple partners, men of the Armed Forces are in need of quality counselling services
Conduct 2 TOT workshops for training of counsellors in the Armed Forces.	MOD DHQ NACA/DP	No of persons attending TOT workshops		
Develop and produce a range of IEC materials targeted at Armed Forces personnel and the allied civilian population	MOD DHQ NACA/DP	No and type of IEC materials produced	% increase in knowledge and practice of Armed Forces personnel	
		No of IEC materials distributed		
Train 3 counsellors in each Armed Forces health facility to provide counselling services.	MOD DHQ NACA/DP Police Affairs, PHQ, NACA/DP CSO.	No of counselling workshops held + persons attending	No of counselling workshops held Popularity of counselling workshops in the uniformed forces	Assumption: War is one of the major factors known to drive the HIV epidemic. When military men on duty imbibe the condom-use culture, they help to stem the tide of the epidemic
Promote condom access in the Armed Forces through the establishment of condom outlets in the Military locations.		No of condom outlets established, condoms distributed, condoms sold, and condoms distributed in Armed Forces locations	Increase in condom use among Armed Forces personnel	
Conduct workshops on HIV/AIDS prevention, use of condom amongst contingents to military operations, peer education counselling, and the use of IEC materials			% increase in condom use among Armed Forces personnel	
Establish VCCT centres in each divisional HQ of the Armed Forces		No of condoms sold in Armed Forces locations	Utilisation rate	

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Conduct sensitisation meetings in 6 Police zones. Conduct 2 TOTs for PHES in 3 Police Zones		No of VCCT centre established and operational	Increased access to information on HIV/AIDS prevention & protection
Conduct 2 sensitisation Meeting with members of POWA in the 6 Police Zones (Officers & other ranks' wives)		Sensitisation Meetings 6 TOTs conducted	Strengthened Capacity for counselling on HIV/AIDS increased use of condoms.
Train Police Health workers on HIV/AIDS counselling in 18 states Police Commands.	Police Affairs,	90 Health worker trained as counsellors	Increase in Condom use among Police personnel
Establish condom sales outlet in Police Barracks in 18 states.		At least 10 condom sales outlet in each barrack in 18 states	
Establish VCCT centres in each Zonal HQ of the Police		No of VCCT centre established and operational	Utilisation rate

**COMPONENT:
PREVENTION OF HIV INFECTION
SUB-COMPONENT: TARGETED INTERVENTIONS
STRATEGY 5.4 -Prevention of Infection through MTCT**

Activities	Source/Mean of Verification	Output Indicators	Outcome Indicators	Assumptions/Risks
Incorporate HIV/AIDS education into antenatal care services in 18 states.	FMOH, NACA/DP, SACA, SMOF, GUILD	No of ANC clinics providing HIV/AIDS education	Percentage of ANC clinic attendees who have basic knowledge of HIV/AIDS/STIs and MTCT	Health system reforms.
Development of a range of IEC materials for prevention of MTCT	OF medical Directors, NTP, NASCAP, FMOH, NACA/DP, CSOs, NASCAP, NTP	No and type of IEC materials produced and distributed	Increased knowledge of HIV/AIDS as it relates to MTCT	That the ARV drug provision in ANC clinics needs to be sustained and one way of doing so is through the creation of a revolving fund
Integrate ARV into ANC clinics in 18 states		No and type of ARV administered.	% of ANC clinic attendees who have access to ARV for prevention of MTCT	HIV+ pregnant women require psychosocial support to carry the pregnancy to term

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<p>Create an ARV revolving scheme in selected ANC clinics for sustainability of the HIV/AIDS drug programme</p>	<p>FMOH,NTP, SMOH, NACA/DP, CSOs, FMOF, SMOF, NASCAP</p>	<p>No of revolving fund accounts established and operational 18 counselling workshops conducted 540 persons trained. (30 in each State)</p>	<p>Extent of coverage of revolving funds. Increase in HIV-infected pregnant women accessing quality counselling services in ANC clinic</p>
<p>Conduct counselling training workshops focusing on MTCT in ANC clinics, 30 participants per state.</p>			

**COMPONENT:
Prevention of HIV Infection
Sub-Component: Targeted Interventions
Target: Commercial Sex Workers
STRATEGY 5.5:**

increase awareness to reduce risky behaviour amongst sex workers

Activities	Source/Mean of Verification	Output	Outcome	Assumptions/ Risks
Undertake participatory mapping of CSWs sites in the 18 states and Abuja FCT	CSOs MOWA	Number of site identified and population.	Baseline knowledge for improved planning, design of interventions and M & E	Gatekeepers will support HIV/AIDS interventions for CSWs
Undertake □sensitisation/advocacy meetings with hotel managers, owners and policy implementing groups (police, local government officials)	SACA LACA CSOs	No. of sensitisation/ advocacy meetings held	Improved gatekeeper support for the CSWs project	A corps of trainers need to be developed in the country to train CSWs as PHEs
Revise and adapt existing curriculum for training of CSWs in peer education, counselling and condom negotiation.	CSO NACA/DP SACA	No. of persons met at advocacy meetings	CSWs acquire skills in peer education, peer counselling and condom negotiation	Trained CSWs will provide one-on-one education and group education

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Develop, produce and disseminate IEC material.	CSOs/NACA/DP SACA	Production of training curriculum for use in training sessions No and type of IEC material developed and disseminated	Increased Knowledge and practice and positive attitude to HIV/AIDS prevention	Increased access / sensitisation will lead to increase in condom usage. PHE/CSWs may not be able to write reports Elimination: Facilitation may be required
Conduct a TOT workshop to train core trainers who will train CSWs peer educators in 18 states	NACA/DP CSOs	No of trainers trained	Increased training capacity	
Train peer educators among CSWs in 18 states (At least 100 brothels per state) (2 from each brothel)		3600 CSWs trained as PHEs	CSWs acquire skills in peer education, peer counselling and condom negotiation	
Improve CSWs' access to condom through condom social marketing and establishment of condom outlets in brothels.	SACA CSOs	No. of condom outlets established	Increase in condom use among CSWs	
Bi-Annual meetings of PHEs to review their work and distil best practices (2 meetings per year)	CSO SACA LACA Private sectors	2 meetings held per annum in 18 states and best practices shared.		Increased information base to plan CSW interventions and review existing ones
Conduct quarterly monitoring visits to brothels where interventions are taking place	CSO LACA SACA CSOs			Improved Programme implementation
Activities linking to Poverty reduction Programme like Income generating activities	NACA/DP, CSOs, NPC	Strategy developed.		Strategies incorporated into PRS process.

COMPONENT: Prevention of HIV Infection

Sub-Component: Targeted Interventions

STRATEGY 5.6: HIV/AIDS intervention in Prisons and Immigration Border Control

Activities	Source/Mean of Verification	Output	Outcome	Assumptions/ Risks
Sensitisation/Advocacy meeting with key officials of the Ministry of Internal Affairs. Prison and Immigration Service	FMIA CSOs NACA/DP	No. of sensitisation/ Advocacy meetings held./ No. of persons attending sensitisation meetings	Increased support for HIV/AIDS programmes and policies in the MOIA and the prisons, and Border control posts	Increased awareness and knowledge leads to behaviour changes in high risk groups

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Conduct sensitisation seminars for staff of Ministry of Internal Affairs including staff of Prison and Immigration personnel at Borders control posts.	FMIA CSOs NACA/DP SACA	No. of sensitisation/ seminars conducted. No. of staff attending sensitisation seminars	Increase in awareness among staff of the FMIA	in border areas and corridors of migration
Conduct at least 2 sensitisation seminars each for Prison inmates in 12 prisons	FMIA CSOs SACA	No. of persons met at advocacy meetings	Increase in knowledge about HIV/AIDS of staff of the FMIA	
Develop and produce prison and Immigration Border, staff friendly peer counselling manual	FMIA FMOL NACA/DP CSOs	24 No. of sensitisation/ seminars conducted.	increase in awareness and knowledge of prison inmates and NIS personnel at border control post	
Develop and produce manual for work place peer counselling targeting workers in prison Services and Immigration border control posts.	FMIA NACA/DP CSOs FMOL	No. of peer counselling manual produced and distributed	Improved capacity to conduct peer counselling training in the prisons and immigration Border control posts	
Develop, produce and distribute a range of IEC materials targeted at Prisoners in all Prisons and Immigration control posts		No. of peer counselling manual produced and distributed	Improved capacity to conduct peer counselling in the border control posts.	
Conduct one counselling TOT to train core trainers in the Prison and Immigration Services	FMIA CSOs	No. and type of IEC materials produced and distributed	Increase in knowledge of HIV/AIDS of Prison inmates and NIS personnel at the border control posts	
Conduct at least 10 counselling workshop to train health workers in Prison and Immigration Services	FMIA FMOL CSOs	90 health workers trained at the TOT workshop.	Improved capacity to conduct peer-counselling training for health workers in Prison and Immigration Services.	
Promotion of condom access through the establishment of condom outlets in Clinics accessed by prison inmates and immigration border control personnel	FMIA CSOs Private Sector	10 peer counselling workshops conducted. 270 health workers trained as counsellors	Improved capacity to conduct peer counselling for workers and inmates in Prison and Immigration Services.	
Establishment of VCCT centres in one Major Prison in each geographical region	FMIA, NTP CSOs, NASCAP	No. accessing condoms No of VCCT centre functional.	Increase in knowledge, attitude and practice of prison inmates, workers and Immigration border control personnel.	

COMPONENT:

Prevention of HIV infection
Sub-Component: Targeted Interventions
Target: Workers in Public and Private Sectors
Strategy 5.7: Workplace policies and programmes to prevent HIV infection

Activities	Source/Mean of Verification	Output	Outcome	Assumptions/Risks
Develop & produce guidelines for design of HIV/AIDS/STI'S interventions.	FMOL, Trade Unions, NLC, Human Rights, NACA/DP, CSOs, Consultants.	Manual for public & private sector AIDS programmes produced & distributed.	Capacity to design and implement workplace policies & interventions in the public & private sector enhanced.	Utilization of manual on issues regarding human rights.
. Develop, produce & disseminate operational manual on HIV/AIDS ethical & human rights issues to the workplace	Consultants, Human rights orgs., PLWHA & NMA	No. Of public sector AIDS manuals developed.	Increased knowledge & awareness of HIV/AIDS	
3. Conduct HIV/AIDS sensitisation for migrant workers (such as: nomads, seasonal farmers, fishermen) in the informal Labour sector.	CSOs, LACA mobilization teams, Nomadic education	No. of sensitisation meetings held, No. of participating migrant workers.	Increased knowledge & awareness of HIV/AIDS	
4. Conduct advocacy meeting with Captains of industries and the workplace.	NACA/DP, SACA, NLC	2 advocacy meeting per year (6)	Increased support by captains of industries to HIV/AIDS intervention in the workplace.	
5. Integrate HIV/AIDS messages into occupational health policy	FMOL, CSOs, Employers	HIV/AIDS messages incorporated into occupational guidelines	Increased knowledge & awareness on HIV/AIDS	Assumption: Informal workers are often neglected in HIV/AIDS intervention.
6. Support formation of PLWHA networks for workers who test positive	FMOL, CSOs, Employers.	Networks formed and supported	Protection of rights of PLWHA in the workplace.	
7. Provide support to training of peer educators in the workplace.	FMOL, Trade Unions, Employers, Associations, Human rights organizations, NGOS & Organized private sector	Peer educators trained in different workplaces	Increased knowledge and positive attitudes and practice on HIV/AIDS prevention	

COMPONENT:
PREVENTION OF HIV INFECTION
SUB-COMPONENT: TARGETED INTERVENTIONS
STRATEGY 5.8: HIV/AIDS Intervention For Long Distance Drivers (LDDs)

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Activities	Source/Means of Verification	Output Indicators	Outcome Indicators	Assumptions/Risks
Conduct 2 rallies in two major motor parks in each of the 18 states	1NURTW CSOs Private sector and Employers of LDDs, FRS	172 rallies held per annum. No of LDDs and touts attending rallies	Increase Knowledge and awareness of HIV/AIDS.	
Conduct mapping of stop points in 18 states	2FRSC, CSO	Stop Point Identified		
Conduct 2 Stop Point Rallies in 18 states	CSOs, SACA, NURTW	3 No. of rallies Held at Stop Points	Increase Knowledge and awareness of HIV/AIDS	
Establish condom sales outlets at Stop Points.	CSOs, SACA, NURTW, Private sector	No. of condom outlets established at stop Points.	Knowledge and use of Condom	

Component: Prevention Of HIV Infection

**Sub- Component: Interventions For The General Population
Strategy 6: Prevention Of HIV Infection In**

The General Population.

Activities	Source/Means of Verification	Output	Outcome	Assumption/Risk
Produce and distribute guidelines and training manual on syndromic management of STIs	FMOH, NACA/DP, NMDC, NTP, NASCAP	Revised flowchart and manual on syndromic management produced and distributed	Improved practice owing to recommended guidelines.	
Conduct 4-Day TOTs in three sites (one workshop for each geopolitical zones) for trained of health care providers (HIP) on the use of guidelines for syndromic management of STIs	FMOH, NACA/DP, SACA, NASCAP, NTP	No. of TOTs conducted. No. of persons attending TOTs	Enhance the capacity of HCP in syndromic management of STIs	
Conduct 3-day state level workshop using 3 trained trainers at the initial TOTs	SMOH, NTP SACA, NASCAP	111 workshops held and 3330 health providers trained.	Enhance the capacity of HCP in syndromic management of STIs	
Integrate syndromic management of STIs into services delivered at FP and primary health care clinics in states	FMOH, SMOH, SACA, NASCAP LACA, NTP, Primary Health Care Units	No. of FP PHC clinics offering STI services	Increase in STI services in FP PHC	
Develop and produced modules for the integration of STIs into the curricula of	FMOH, NASCAP NMDC Nigeria Nursing	No. of modules developed, produced and distributed		

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colleges of Medicine and Schools of Nursing in Nigeria	& Midwifery Council of Nigeria, NTP			
Integrate the syndromic management into the training curriculum of colleges of medicine and schools of nursing in Nigeria	FMOH, NTP NMDC, NASCAP, NNMC	No. of colleges of Medicine teaching syndromic mgt of STIs	Improved management of STIs	Assumption: If doctors/nurses are trained from school, there will be a pool of trained Health Care Providers in city centres and outside to provide dependable STI services Risk: Blood transfusion services in private health facilities may distort the impact of the expected results Elimination: this risk can be eliminated through intensified public enlightenment programmes on blood transfusion and use of blood products
Circulate the New Health Policy on Blood Transfusion to all Blood Banks in Nigeria	FMOH ,NACA/DP, SACA, SMOH,NTP, NASCAP	No. of facilities having the policy having the policy guideline	Improved blood safety practices in facilities	
Conduct 6 training workshops for 5 staff from each geopolitical zone on Blood Safety Procedures	FMOH SMOH, NACA/DP, SACA, NASCAP, NTP	185 staff trained on blood safety procedures	Increased blood safety practices through capacity building of staff in facilities	
Train health workers in 6 Teaching Hospitals on Blood donor counselling (one per zone)	FMOH,NTP NACA/DP, NASCAP	No. of health workers trained in 6 geo-political zones on blood donor counselling	Increased blood safety practices through capacity building of staff in facilities	
Set up a blood safety enforcement unit on Blood Transfusion that will ensure that the blood transfusion policy and guidelines are adhered to.	FMOH,NTP NACA/DP, NASCAP	Enforcement unit established	Adherence to the procedures established in the policy and guidelines in facilities	
Advocacy and sensitisation to policy makers	CSO, Fed Min of Health, NASCAP, NTP	At least 38 sensitisation meetings conducted with national assembly and state houses of assembly.	Support to policy formulation and implementation on VCCT	
Develop national policy on VCCT		At least 38 sensitisation meetings conducted	Functional policy developed	
Review and refine existing training curriculum on counselling for the public		Number of curriculum reviewed and refined	Skilled and trained Counsellors	
Training of trainers (TOT) for 20 participants per state		740 persons trained	Skilled and trained Counsellors	

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Cascade training of at least 10 persons per 1 trainer		7,400 persons trained	Skilled and trained Counsellors
Identify and upgrade existing public and private centres to be VCCT Centres		No. of Centres identified and at least 1 upgraded in a LGA	Utilization rate of facilities increased
Identify and equip new VCCT Centres where it is necessary to improve accessibility by the public		No. of Centres identified and at least 1 new centre equipped in LGAs where there are no facilities	Utilization rate of facilities increased
Provide ARV's for the use of persons found to be positive	Fed Govt, Drug companies, MOH'S, NAFDAC	ARV'S available at affordable costs.	Improved control of infected persons and reduction in transmission of HIV/AIDS
Provision of testing kits for centres at affordable cost	As above	Availability of testing kits at all VCT centres	Accessibility of testing facilities for general public

COMPONENT: CARE AND SUPPORT
SUB-COMPONENT: For Persons infected by HIV
STRATEGY 7:

Providing an enabling environment and reducing the suffering of people infected by HIV

Activities	Source/Means of Verification	Output	Outcome	Assumption/Risk
Review and update existing guidelines (Counselling, CHBC, AIDS case management)	NACA/DP, SACA FMOH, SMOH Network of PLWHA CSOs, NTP, NASCAP		Existing home & facilities based guidelines reviewed and updated	Improved Quality of management of AIDS cases
Production and dissemination of Guidelines to facilitate home based care providers	NACA/DP, SACA, LACA, CSOs	Guidelines produced and distributed.	Utilization of guidelines for AIDS case management.	
Organize 3-day training workshop for 50 health care providers in the areas of patient management and counselling in 18 states.	NACA/DP, SACA FMOH, CSOs, NASCAP, NTP	18 Training conducted increased knowledge and capacity of health workers	900 public and Private healthcare providers	Enhanced capacity of health personnel to provide care and support to PLWHA
Training of 5 health care providers per	LACA, CSOs, SMOH,	Health care provider	Capacity for home based	Rural mobilization 50%

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Community on community Home Based Care approaches	PHC, NTP NASCAP	training conducted, 4,500 community home based care providers trained.	care increased	communities/ state
Establishment of home-based care programme in all the local government areas of the 18 states to provide support for positive people & PLWHA networks	LACA, CSOs, PLWHA	No. of CHBC programme established	Increased access to CHBC	Assumption: PLWHA will utilize the CHBC and will prefer it
Provision of technical support, supervision and basic supplies for home-based care providers in the communities. E.g. disinfectants, gloves, palliatives drugs, mild antibiotics, dressing materials, CHBC First aid Kits, tranquillizers	NACA/DP SACA CSOs PLWHA networks	Drugs, equipment and materials supplied	Increased supply of CHBC materials	
Provide support to PLWHA networks (capacity building etc).	NACA/DP, SACA, LACA, CSOs, PLWHAS, CISCGHAN	No. of PLWHA networks supported	Increased access to information leading to positive living.	
Support at least 2 credible micro-credit NGOs in 6 hotspot states and 6 non hotspot states (6 zones to develop and implement an appropriate micro credit scheme for PLWHAS	NACA/DP NGOs Networks of PLWHA	Number of persons participating in the micro credit scheme	Economic empowerment of PLWHAS	Assumption: That this activity will be conducted with family members and will therefore be both a PLWHAS and PABA intervention. It will be costed under the PABA budget. PLWHAS coping mechanisms improved.
Pilot community based drug-revolving scheme in 6 hot spots & 6 non hot spots.	NACA/DP, SACA, LACA, FMOH, SMOH, PLWHA, CSOs, Min of Agriculture, Min of Women affairs. NASCAP, NTP	No. of operational pilots established.	Increased access to drugs.	Sustainability of drug revolving schemes assumes that the funds will be used to replenish drugs.

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Hold Workshop for sensitisation of human rights advocacy groups on the problems of stigmatisation and of access Health care.	SACA, LACA NACA/DP PLWHAS CSOs, NLC, Human Rights Commission, Min of Agriculture, Min of Women Affairs, Media, CISCGHAN, Min of Labour.	Workshop held + number of people attending (2 reps from each state and from each of the identified organizations)	Increased advocacy on the rights of PLWHAS	Assumption: Microscopes will be maintained & reagents replenished as necessary
Review, develop & extend an integrated TB management system. (Pre service training mechanisms	National TB programme Fed Min of Health, Schools of medicine, nursing & community health.	System Reviewed, developed and expanded	Development & integration of TB curricular into health care training	
Develop integrated training Manual.	State Min of Health, schools of medicine, nursing & community health, NTP	Training Manual development & production	Health workers better able to managing TB patients	
Training of Health Workers, training of trainers	Institute of Medical Lab Tech, medical & nursing schools	2 technicians per LGA	No. of Lab. Technologists trained	
Strengthening TB Centres	FMOH, NTP, Technicians training schools Tertiary health centre, NASCAP	No. of Centres supported. (1 per LGA)	Utilization rate of the Centres increased	
Capacity development of labs for HIV/AIDS screening and management. Procurement of microscopes & reagents for labs.	FMOH, SMOH, Pharmaceutical firms, NASCAP, NTP	No. of labs developed, (at least 850- 2 labs per LGA) provided with microscopes and stocked with reagents	Improved reliability and short time for results return.	
Provision of anti TB drugs, using existing distribution mechanisms	FMOH, SMOH, Tertiary health centres, Secondary and primary health centres, NTP, International donors	Anti TB drugs available to infected persons	Reduced incidence of TB in society	
Pilot/ contact studies for co- trimaxazole as prophylactic anti-opportunistic drug.	FMOH, SMOH, Pharmaceuticals, Research organizations,	Trails conducted & results compiled & information	Reduced incidence of opportunistic infections	

<p>Nat. TB control programme. FMOH, SMOH, PLWHA Network, PHC programme. NACA/DP, SACA, CSOs</p>	<p>18 States</p>	<p>NTP, NASCAP</p>	<p>disseminated.</p>	<p>1) IEC to PHC workers, PLWHA, and communities 2) Training on preventive therapy provision 3) Drugs (isoniazid and possibly rifampicin/PZA) 4) Feasibility assessment mechanisms</p>	<p>1) PHC facilities with sufficient capacity and drugs to provide TB preventive therapy to PLWHA 2) Awareness of TB preventive therapy as an effective DALY saving intervention for PLWHA 3) Assessment of feasibility that may be used in considering scaling-up or national level preventive therapy strategy 4) Referral system between TB and HIV/AIDS services</p>	<p>1) Proportion of PHC facilities with HIV testing and counselling capacity (or linked to testing facility) that offer TB preventive therapy 2) Proportion of people with known HIV+ status that have access to / receive TB preventive therapy 3) Proportion of people with known HIV+ status who develop TB disease (comparative indicator: preventive therapy recipients vs. none)</p>
<p>NACA/DP, SACA, FMOH, PHC PROGRAMME. Nat. TB programmes. INT. Stakeholders, VCCT, SMOH, Govt.</p>				<p>1) Needs assessment; quantification of TB patients per PHC catchment area 2) Technical assistance for strategic planning 3) Training 1) Anti-TB drugs 2) Upgrade laboratory network 3) Resources for monitoring quality at PHC, community levels</p>	<p>1) Increased human resource capacity for detecting and treating TB cases 2) Ownership of TB control as a core function of PHC 1) Stable drug supply 2) Functioning lab network 3) On-going monitoring of TB control quality</p>	<p>1) Case detection rate 2) Time between onset of symptoms and initiation of TB treatment 3) Proportion of PHC facilities with health workers trained in TB detection and treatment</p>

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NTP, NACA/DP, SACA, CSOs, FMOH, SMOH, NASCAP	18 States	Training of staff/personnel	Improved general health of PLWHA, reduction of TB cases seen	<ul style="list-style-type: none"> 1) Proportion of time/districts that report drug supply problems 2) Proportion of districts/PHC facilities that report delays or difficulties in accessing lab services 3) Proportion of laboratories that report inability to work due to equipment or supply problems 4) Proportion of health facilities providing TB control services that receive at least 2 monitoring visits during a year
CSOs, NACA/DP, SACA, FMOH, SMOH, VCCT, NTP, NASCAP	18States	<ul style="list-style-type: none"> 1) Editorial assistance to revise existing training materials 2) Production and dissemination costs 3) Training 	<ul style="list-style-type: none"> 1) Cohesive training tools 2) Improved efficiency and consistency in training 	<ul style="list-style-type: none"> 1) Proportion of training materials that include information on both TB and HIV/AIDS 2) Proportion of training courses that discuss both TB and HIV/AIDS
As above	18 States	Technical assistance	<ul style="list-style-type: none"> 1) Improved efficiency and consistency of support to health workers 2) Increased awareness of operational considerations for TB/HIV jointly 3) Annual strategic plans of TB and HIV/AIDS programmes reflect recommendations from joint missions 	<ul style="list-style-type: none"> 1) Development of terms of reference for joint monitoring missions 2) Proportion of districts / PHC facilities that participate in at least 1 joint monitoring mission during the year

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NACA/DP, SACA, CSOs, FMOH, SMOH, INT. STAKEHOLDERS, NASCAP, NTP	18 States	Technical assistance	1) On-going needs assessment for enhanced collaboration between programmes 2) Investment in synergistic TB and HIV/AIDS control; without overlap 3) Strategic plan that addresses dual epidemic	1) Strategic plan that optimises opportunities for collaboration; no overlap 2) Documented recommendations from periodic meetings; follow-up needs reflected in annual work plan 3) Proportion of TB-specific or HIV/AIDS-specific meetings
NACA, SACA, Fed Govt, Health Centres, NASCP, NTP, NASCAP	18 States	Tech assistance, consultants, import best practices	Development of National Policy on PMTCT	Reduced incidence of MTCT of HIV
Tertiary health centres, NACA/DP, NTP, FMOH, and drug companies.	6 centres	Training workshops, supply of drugs	Access to MTCT services for infected mothers	
NACA/DP, SACA, CSOs, FMOH, NASCP, NTP, NASCAP	National		Number and type of IEC materials developed	Improved survival of infants born to infected parents
As above	Selected sites for pilots	Tech committees commissioned	Accessibility of VCCT services for pregnant mothers Availability of ARV'S and safe delivery options for expectant mothers More babies being fed by safe feeding methods, healthier babies	General acceptance of MTCT services
As above, CSOs, LACA, SACA, SMOH, communities, Drug companies	Selected project sites			Utilization of services
Selected centres, FMOH	Selected centres	Centres selected, personnel trained		Reduction of incidence of infected children born to infected mothers
Selected centres for PMTCT, VCCT centres for infected mothers		Training of infected mothers in safe feeding methods	Information generated on baseline data	Increased life expectancy of babies born to infected mothers

Technical assistance

Situation analysis, and impact of interventions documented.

Component: Care And Support
Sub-Component: For Persons Affected By Aids/Aids
Strategy 8: Care And Support For Persons Affected By Aids/Aids

Activities	Source/Means of Verification	Output Indicators	Outcome indicators	Assumptions/ Risks
Survey design, implementation, analysis and report writing	NACA/DP/DP Min of Women Affairs FMOH, NTP, NASCAP CSOs PLWHAS	Number of assessments conducted and Survey report produced	Improved AIDS orphans planning	Assumption: That the survey is the first step to AIDS Orphan planning in the HEAP and the Strategic Plan
Conduct a 2-day National Strategy Development Workshop involving Federal, State Government Officers of Education, Health, Finance and National Planning to come up with a Strategy for Care and Support for AIDS orphans	NACA/DP/DP, SACA, Min of Women Affairs, NASCAP, CSOs, NTP, PLWHAS	National Strategy Developed	Improved support for AIDS orphans	Assumption: That the strategy will be more effective if supported by a Policy
Develop criteria for identification and selection of affected families.	CSOs, PLWHAS	Criteria developed	Deserving families benefiting from IGA programme support.	Assumption: That selection will be on the basis of clearly established guidelines
Conduct 6, 2-week Skills/Entrepreneurial Building Training Workshops in each geo-political zone involving 150 participants for hot spot states.	NACA/DP/DP, NDE, Industries, Poverty reduction programmes, CSOs	300 participants trained	Improved entrepreneurial skills	
Establish pilot micro-credit programmes for the families trained under the Skills Building programme	NACA/DP/DP, FMOF, UNDP, Private sector.	Micro-credit programme established	Deserving families benefit from IGA support.	
promote and support NGOs to replicate the Skills Building programme by training NGOs in a 3-day Workshop	NACA/DP/DP NGOs	Number of NGOs trained to replicate - credit interventions for PABA	Enhanced capability of NGOs to contribute to building coping strategies	Assumption: The families trained in the Skills Building programme will qualify to participate in the micro-credit scheme

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Develop and implement a Welfare Fund to offset the cost of school attendance for 200 AIDS orphans per state in 6 states	NACA/DP/DP, Private Sector, CSOs, SACA, LACA	Welfare fund established	Number of orphans sustained in school as a result of the fund	
Develop IEC MATERIALS, advocacy workshops		IEC materials produces and disseminated	Acceptance of orphan strategies by General public	Families participating in the Skills Building and Micro-Credit Schemes will not qualify for support in the AIDS Orphans programme
Strategy development and fund availability	NACA/DP/DP, SACA, CSOs, Govt agencies, Health institutions	Support of sustainable mechanism that remove the burden of survival form orphans	More orphans leading normal lives and equal to non-orphaned peers.	