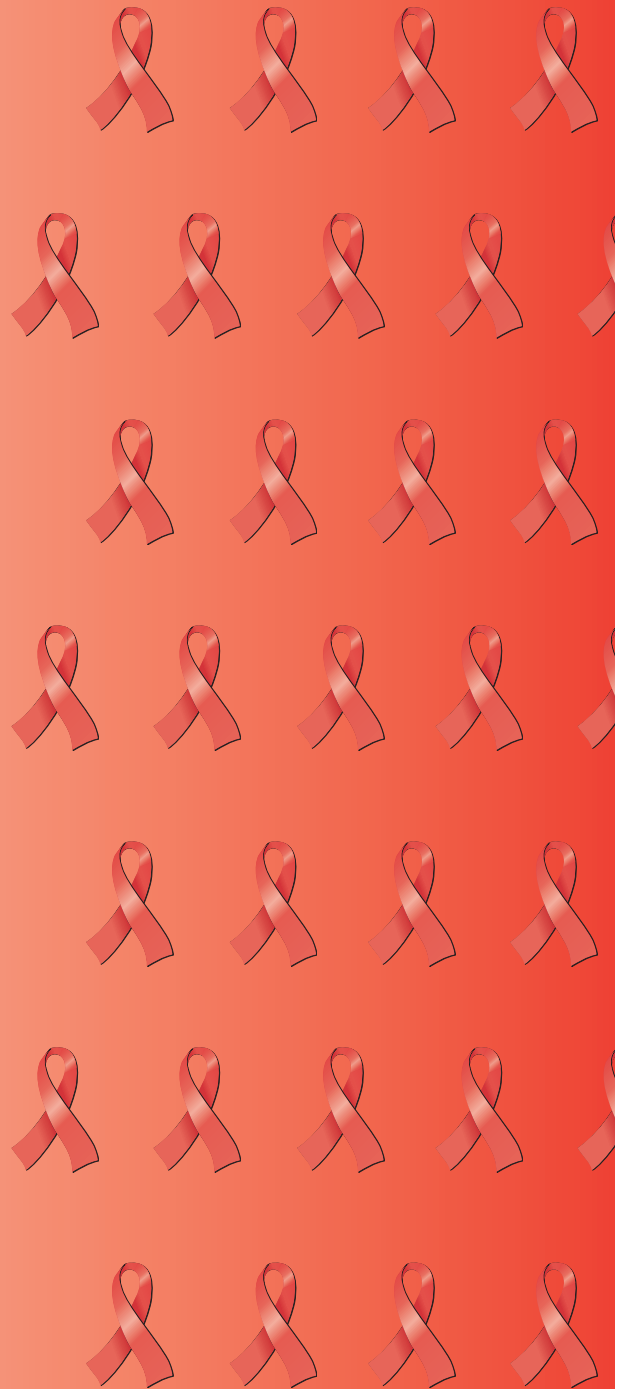


# Country Harmonization and Alignment Tool (CHAT)

A tool to address harmonization and alignment challenges by assessing strengths and effectiveness of partnerships in the national AIDS response



**UNAIDS**  
JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

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# **Country Harmonization and Alignment Tool (CHAT)**

A tool to address harmonization and alignment challenges  
by assessing strengths and effectiveness of partnerships  
in the national AIDS response

June 2007  
Geneva, Switzerland

## Acknowledgements

The Country Harmonization and Alignment Tool (CHAT) has been developed by UNAIDS and the World Bank in response to recommendation 4.1 of the *Global Task Team on Improving AIDS Coordination Among Multilateral Institutions and International Donors* to develop a tool to “assist national AIDS coordinating authorities (in collaboration with international partner agencies) to assess

- 1) the participation and degree of engagement of country-based partners in the national response; and
- 2) the degree of harmonization and alignment among international partners”.

The CHAT has been harmonized with the Organisation for Economic Co-operation and Development (OECD) Paris monitoring framework, and utilizes the experience from similar work conducted in Mozambique and Zambia. Progress reports were given to the UNAIDS Programme Coordinating Board meetings in June and December 2006, the latter which endorsed the process and “recognized the importance of the Country Harmonization and Alignment Tool for increasing country level accountability as a tool for identifying opportunities for greater harmonization and alignment as part of national AIDS reviews” (PCB Decision 4.5).

Field testing of the pilot CHAT was carried out in seven countries (Botswana, Brazil, Democratic Republic of the Congo, Indonesia, Nigeria, Somalia, Zambia) and extensive involvement of national civil society was ensured, in addition to full engagement and feedback elicited from national and international partners in the piloting countries.

Much of the development and drafting was carried out under contract to UNAIDS by Anne Gillies; Sarah Pouezevara has supported organization and design of the final document. We acknowledge the important contributions received from many sources, in particular from representatives of relevant national AIDS coordinating authorities, from civil society and the national consultants involved in the country pilot processes.

## About this guide

This guide to using the Country Harmonization and Alignment Tool (CHAT) has been written for national AIDS coordinating authorities and other country-level partners involved in planning and monitoring progress in the national AIDS response. There are three sections:

**Section 1: Introduction to CHAT.** This section contains background information and an overview of the CHAT components, principles and processes. It will be of interest to managers, AIDS professionals of the national AIDS coordinating authority and professionals of international and national organizations involved in AIDS programming, whose degree of alignment and harmonization in the national response is the object of this survey. Some of the content of Section 1, particularly the guidelines for how to use the CHAT (Chapter 3), are repeated in greater detail in later sections of the guide. However, after reading Section 1, the process and expected outcomes of the CHAT should be clear.

**Section 2: Implementation guide.** This section contains detailed information about completing the three components that make up the CHAT. It will be of particular use to programme officers and administrators in charge of planning the research process, recruiting and training field researchers, and monitoring implementation—as well as to consultants hired to conduct research using the CHAT. The first chapter describes the process of mapping stakeholders in the national response, which will be an important point of reference throughout the process.

**Section 3: CHAT surveys.** This section contains the survey instruments that will be used to gather information about the degree of harmonization and alignment of various stakeholders present. The surveys are based on areas of assessment with core questions and optional additional questions for specific groups. Each Area of Assessment has a description which will help the field researchers put the questions into context. There is also a model of a blank data collection sheet that can be used during interviews to record answers to each Core Question, and note the overall rating.

The entire guide is meant to be an easy reference manual, not a guide to be read sequentially from start to finish. There is also a CD-ROM containing both this text and practical tools that can be adapted to the local context including

- the complete blank survey instruments (see Annex I), and
- a simple spreadsheet for analysis.

The CD-ROM will also facilitate adaptation and reproduction of the CHAT at country-level. These documents are also available online at [www.unaids.org](http://www.unaids.org) or by e-mailing UNAIDS at [CHAT@unaids.org](mailto:CHAT@unaids.org).

# Table of contents

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Table 1: Overview of CHAT areas of assessment	7
---	---

## **SECTION I: INTRODUCTION TO CHAT**

Chapter 1: What is CHAT and why should countries use it?	9
--	---

Table 2: Overview of CHAT components	12
--------------------------------------	----

Chapter 2: CHAT principles	15
----------------------------	----

2.1 CHAT and the OECD/DAC Paris Declaration on Aid Effectiveness	15
--	----

2.2 CHAT and the “Three Ones”	16
-------------------------------	----

2.3 CHAT and the joint national AIDS programme review	17
---	----

2.4 CHAT and the essential role of civil society	19
--	----

Chapter 3: How to use CHAT	21
----------------------------	----

3.1 Preparation	21
-----------------	----

3.2 Implementation of CHAT	24
----------------------------	----

Table 3: Individuals and groups involved in the CHAT process	25
--	----

3.3 Analysis	25
--------------	----

3.4 CHAT report and follow-up	26
-------------------------------	----

## **SECTION II: IMPLEMENTATION GUIDE**

Chapter 4: Mapping the national AIDS response	27
---	----

4.1 What is mapping?	27
----------------------	----

4.2 Why do mapping?	28
---------------------	----

4.3 Who is involved in the mapping process?	28
---	----

4.4 Steps in the mapping process	29
----------------------------------	----

Chapter 5: Selection of respondents	34
-------------------------------------	----

5.1 Define an overall selection approach for CHAT	34
---	----

5.2 Selecting national partners	34
---------------------------------	----

5.3 Selecting international partners	36
--------------------------------------	----

---

Chapter 6: Data collection	37
6.1 Recruit and train the CHAT data collection team	37
6.2 Customize the data collection approach	37
6.3 Administer the surveys	39
Chapter 7: Analysis	40
7.1 Stage 1: Conduct rapid analysis of the individual survey data	40
7.2 Stage 2: Consolidate findings within and across groups and categories	40
7.3 Stage 3: Analysis of CHAT findings in the national context	43
<b>SECTION III: CHAT SURVEYS</b>	
Chapter 8: Introduction to surveys	45
Table 4: Areas of assessment and core questions for national partners	46
Table 5: Areas of assessment and core questions for international partners	48
Chapter 9: Description of areas of assessment and core questions	50
9.1 Questions for national partners	50
9.2 Questions for international partners	65
Annex 1: Sample pages of the blank questionnaire form	81

Table 1: Overview of CHAT areas of assessment

Categories	Areas for national partners	Areas for international partners
<b>National AIDS Coordinating Authority and National Strategic Framework</b>	1. Extent of participation and alignment by national partners in the national AIDS strategic framework	1. Extent of alignment between the AIDS strategies of international partners and national and/or subnational AIDS strategic frameworks
	2. Extent of representation for national partners in the national AIDS coordinating authority or equivalent body	2. Extent to which international partners are supporting and cooperating with the national AIDS coordinating authority
<b>Monitoring and Evaluation</b>	3. Extent to which national partners are using the national AIDS monitoring and evaluation framework and/or system	3. Extent to which international partners are aligned with the national AIDS monitoring and evaluation framework and/or system
	4. Extent of participation by national partners in the joint annual national programme review or equivalent process	4. Extent of participation by international partners in the joint annual national programme review or equivalent process
<b>Finances</b>	5. Extent to which domestic/national partners receive a fair portion of the national AIDS budget	5. Extent to which international partners have indicative multi-year commitments (i.e. more than three years) for the national AIDS response
	6. Extent of integration by national partners in decision-making and reporting about allocation of financial resources	6. Extent to which international partners support pooled funding arrangements for the national AIDS response
<b>Administration, Support, Coordination and Communications</b>	7. Extent to which national partners participate in the design and assessment of the administrative systems for the national AIDS response	7. Extent to which international partners are harmonizing their AIDS procurement mechanisms
	8. Extent of openness and transparency among national partners and with the national AIDS coordinating authority	8. Extent to which international partners are building technical capacity and harmonizing their AIDS technical assistance strategies
		9. Extent to which international partners are harmonizing administration, technical/financial reports and human resource approaches with each other and in relation to the national AIDS response
		10. Extent of transparent, timely and accurate communications among international organizations and with all members of the national AIDS coordinating authority



## SECTION I:

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### Introduction to CHAT

*This section contains background information and an overview of the CHAT components, principles and processes. It will be of interest to managers, AIDS professionals of the national AIDS coordinating authority and professionals of international and national organizations involved in AIDS programming, whose degree of alignment and harmonization in the national response is the object of this survey. Some of the content of Section I, particularly the guidelines on how to use the CHAT (Chapter 3), are repeated in greater detail in later sections of the guide. However, after reading Section I, the process and expected outcomes of the CHAT should be clear.*

## Chapter 1:

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### What is CHAT and why should countries use it?

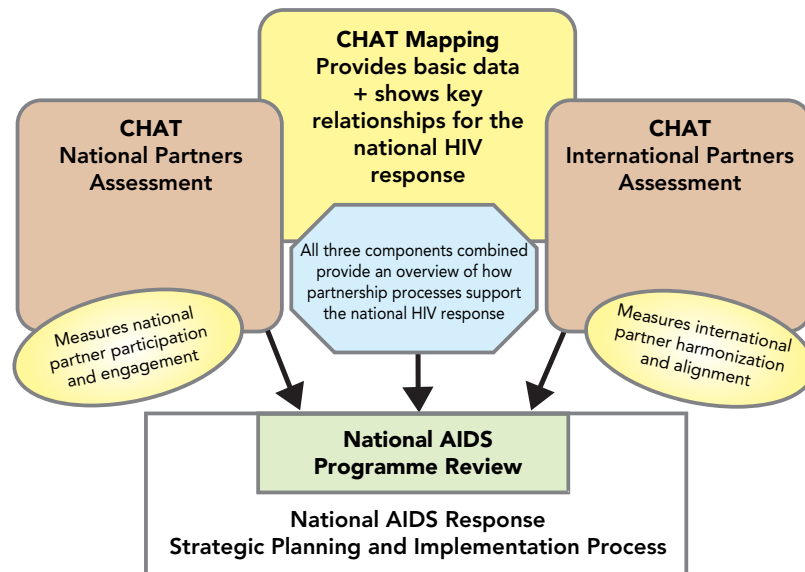
The **Country Harmonization and Alignment Tool (CHAT)** was designed to help answer the following questions:

- Do we have **inclusive, participatory national responses** to AIDS?
- Do we have **effective coordination and funding partnerships** for the national AIDS response?
- How can we **improve our partnerships** to strengthen the response to AIDS?

The main purpose of CHAT is to invite dialogue about the strengths and weaknesses of the national AIDS response, leading to positive action for change.

CHAT consists of a three-part process of mapping—or constructing a visual overview—of stakeholders in the national response, followed by structured interviews with national and international partners. The results will gauge national and international partner involvement in the AIDS response and their adherence to agreed good practice in harmonization and alignment, improve transparency and accountability, and help to catalyse a national dialogue to improve practice for a more effective national response. CHAT provides important contextual information relevant to national strategic planning, and is ideally carried out as part of the joint national AIDS programme review. The following diagram gives an overview of how the three CHAT components link to the joint review. CHAT is a way of assessing both the strengths and areas for improvement in these relationships. Additionally, CHAT is designed to highlight and reinforce the key role that civil society plays in the AIDS response.

Figure 1



It is important to emphasize that CHAT is **not** a standard survey tool. Rather, it is a multifaceted process based on action research principles and techniques.<sup>1</sup> Therefore, CHAT is:

- **adaptive.** There may be many different ways of using CHAT based on the local context, circumstances and resources.
- **rapid.** CHAT focuses on collecting rich qualitative information using open-ended rapid survey techniques, analysing it quickly using rapid scan approaches, and then applying the findings immediately to trigger change.
- **learning-based.** CHAT supports constructive reflection at the country level on how to enhance participation, partnerships, harmonization and alignment, but as the basis for dialogue and continual improvement.
- **qualitative.** The rich description obtained from CHAT is equally important as the actual rating assigned for each area of assessment with the aim to provoke further dialogue and positive change.
- **participatory.** To be effective, CHAT requires strong participation from a wide variety of stakeholders, including civil society groups and other key partners. It can help increase participation and joint ownership of the national AIDS response.
- **change-oriented.** CHAT identifies positive aspects of relationships, roles, coordination arrangements and funding mechanisms for the national AIDS response. CHAT also identifies issues that need to be addressed.

CHAT information can be used in the following ways.

- The primary use of information from CHAT is at the country level by the national AIDS coordinating authority and the national and international partners, in order to create concrete changes in the quality, scope and effectiveness of partnerships.
- The secondary use of CHAT is by UNAIDS distilling from country reports of CHAT analysis (or joint national AIDS programme review) the global trends and gaps related to partner support for the international AIDS response.

<sup>1</sup> For more on action research, see: Dick B. A beginner's guide to action research [Online, 2000]. Available at <http://www.scu.edu.au/schools/gcm/ar/arp/guide.html>

## CHAT origins

**The Global Task Team on Improving AIDS Coordination among Multilateral Institutions and International Donors** called for the completion of the following tasks (Rec. 4.1):

- Assist national AIDS coordinating authorities (in collaboration with international partner agencies) to assess
  - 1) the participation and degree of engagement of country-based partners in the national response, and
  - 2) the degree of harmonization and alignment among HIV international partners.
- Develop a tool that can be used by national AIDS coordinating authorities (in cooperation with UNAIDS and other agencies) in assessing the above, and proceed with pilot testing and use within a select number of countries.

In December 2006, the members of the UNAIDS Programme Coordinating Board recognized “the importance of CHAT for increasing country level accountability [and] as a tool for identifying opportunities for greater harmonization and alignment as part of national AIDS reviews” (Decision 4.5, December 2006).

Tables 2 shows a comparison of the three CHAT components and how they can be applied at the country level. These components are:

- Mapping,
- National Partners Assessment, and
- International Partners Assessment.

Table 2: Overview of CHAT components

	Mapping	National partners assessment	International partners assessment
<b>Intended USERS</b>	National AIDS coordinating authorities, national partners including civil society, and international partners.		
<b>Content covered</b>	<p>Mapping is a way of visually displaying (through a multi-layered diagram), the <b>main systems, linkages, communication/ information and funding flows as well as accountability and coordination mechanisms</b> that comprise the complex web of organizational and institutional relationships in the national AIDS response.</p> <p>Mapping also includes a <b>rapid desk review</b> to collect basic statistics or background information on the national AIDS response that can be added to the visual map and/or summarized to accompany it.</p>	<p><b>Eight (8) areas of assessment</b> for assisting national partners to assess their degree of involvement, alignment and harmonization with the national AIDS response, and identify areas for change and improvement.</p> <p>Each area of assessment is made up of one or more <b>core questions</b> to ask to selected national partners (including civil society groups). Optional <b>supplemental questions</b> can be asked to solicit more in-depth information from specific groups of respondents.</p> <p>The core and supplemental questions used under each area of assessment can be adapted depending on the status of the AIDS epidemic and the structure of the country's multisectoral response, as well as the degree to which the country has been able to implement the "Three Ones" at the time of the survey.</p>	<p><b>Ten (10) areas of assessment</b> to assist international partners to assess their degree of participation, alignment and harmonization with the national AIDS response, and identify areas for change and improvement.</p> <p>Under each area of assessment, one to three <b>core questions</b> can be asked to international partners. Optional <b>supplemental questions</b> can be asked to solicit more in-depth information from specific groups of respondents.</p> <p>The core and supplemental questions used under each area of assessment can be adapted depending on the status of the AIDS epidemic and the structure of the country's multisectoral response, as well as the degree to which the country has been able to implement the "Three Ones" at the time of the survey.</p>
<b>Respondents</b>	<p>Selected representatives of the main national partners (government agencies/ministries, civil society organizations, research/policy institutions, the private sector) and the main international partners (bilateral/multilateral funding agencies, funds and foundations, major international nongovernmental organizations or implementing partners).</p>	<p>Selected representatives of <b>the main national partners</b> including:</p> <ul style="list-style-type: none"> <li>• government agencies/ministries (national and subnational levels),</li> <li>• civil society organizations (e.g. nongovernmental organizations, networks and umbrella groups, faith-based and labour organizations and organizations representing marginalized groups such as women, youth, people living with HIV, men who have sex with men, injecting drug users and sex workers),</li> <li>• research and policy or think-tank institutions, and</li> <li>• the private sector.</li> </ul>	<p>Selected representatives of <b>the main international partners</b> including:</p> <ul style="list-style-type: none"> <li>• bilateral funding agencies,</li> <li>• multilateral funding or coordination agencies (e.g. members of the UN system, the World Bank),</li> <li>• international foundations and specialized funds (e.g. the Global Fund, Gates Foundation, Clinton Foundation and others), and</li> <li>• major international nongovernmental organizations who serve as implementing agencies for donors (e.g. CARE, OXFAM, World Vision etc.) .</li> </ul>

<p><b>Process</b></p>	<p><b>Rapid desk review</b> to collect basic statistics and background information on the national AIDS response (funding flows and amounts, coordination/communication and reporting or accountability mechanisms). <b>Participatory workshop</b> with selected partners to produce a multi-layered diagram showing major actors, linkages, relationships and any gaps or weaknesses that may need to be addressed.</p>	<p>Use <b>purposeful selection methods</b> to select a representative cross-section of the main national stakeholders and partners (including strong representation from any civil society groups currently “missing” from the national AIDS response). Use qualitative/action research techniques to <b>interview selected respondents</b>. Use rapid qualitative analysis techniques to identify key trends and themes, and to assign <b>qualitative ratings</b> (e.g. very poor, poor, good and very good) to each of the eight areas of assessment after each interview. Analyse overall perceptions by summarizing ratings and reoccurring issues across areas of assessment and groups of respondents in order to extract positive lessons learnt and areas for improvement.</p>	<p>Use <b>purposeful selection methods</b> to select a representative cross-section of the main international partners. Use qualitative/action research techniques to administer <b>face-to-face surveys</b> with selected respondents. Use rapid qualitative analysis techniques to identify key trends and themes, and to assign <b>qualitative ratings</b> to each of the ten areas of assessment after each interview. Analyse overall perceptions by summarizing ratings and reoccurring issues across areas of assessment and groups of respondents in order to extract positive lessons learnt and areas for improvement.</p>
<p><b>Expected results</b></p>	<p>Use mapping as a participatory mobilization and learning tool at the beginning of CHAT to provide an analytical overview of the national AIDS response, help select the best respondents for national and international partner surveys, provide a framework for analysis, and identify key issues for further investigation. A regularly updated map is a strong tool for coordination purposes.</p>	<p>Use the National Partners Assessment to provide a detailed qualitative diagnosis about the degree of engagement and participation of national partners. A follow-up process will develop specific strategies for <b>advocacy, concrete action</b> and <b>positive change</b> in the involvement of national partners in the national AIDS response.</p>	<p>Use the International Partners Assessment to provide a detailed qualitative diagnosis about the degree of participation, alignment and harmonization for international partners. A follow-up process will develop specific strategies for <b>advocacy, concrete action</b> and <b>positive change</b> in the harmonization and alignment of international partners in relation to the national AIDS response.</p>

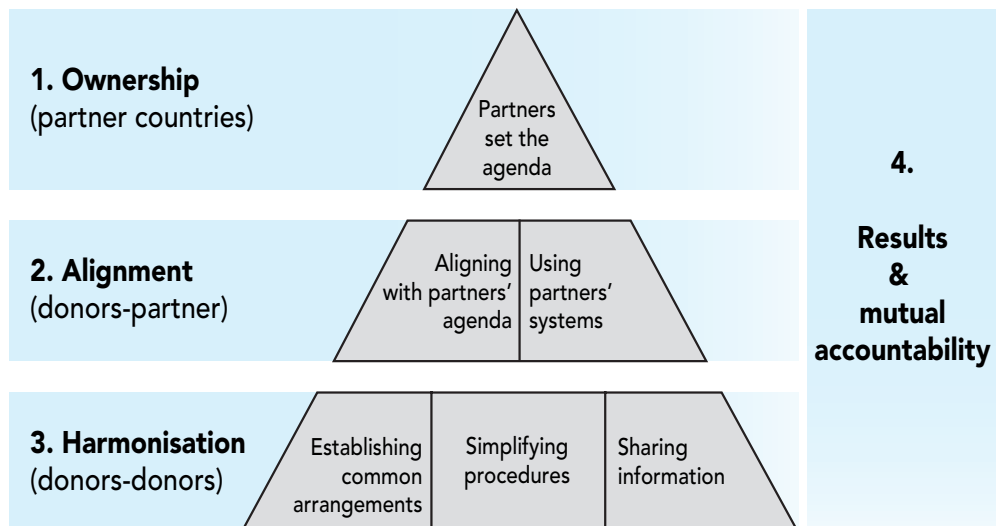
## Chapter 2:

### CHAT principles

#### 2.1 CHAT and the OECD/DAC Paris Declaration on Aid Effectiveness

CHAT is based on a number of key principles related to the Organisation for Economic Co-operation and Development/Development Assistance Committee (OECD/DAC) Aid Effectiveness agenda. CHAT reflects the Paris Declaration on Aid Effectiveness (March 2005) and translates these principles into the AIDS response, to strengthen how national and international partners work together to create a coordinated and effective national AIDS response.

Figure 2



Source: OECD/DAC (2005).

The CHAT process and areas of assessment found in the National Partners Assessment and International Partners Assessment are designed to address the key areas shown in the OECD/DAC Aid Effectiveness Pyramid (Figure 2).

- CHAT looks at **country-owned and country-led** processes, like the national AIDS coordinating authority, responsible for setting the agenda (see #1 in Figure 2).
- CHAT helps uncover the extent to which international donors (as well as national partners) are **aligned with the national AIDS response**, including whether they are using the national agenda, framework/plans and management/administrative systems (see #2 in Figure 2).
- CHAT provides useful information about whether international donors are **harmonized among themselves and with the national AIDS coordinating authority** to establish common funding and accountability arrangements, simplify their procedures and openly share information about their approaches (see #3 in Figure 2). Also, CHAT helps reveal if key national stakeholders are fully aware of and engaged with the same systems.
- Finally, CHAT maintains an overall focus among both national and international partners on **ensuring improved results** and provides a strong basis for national processes of **mutual accountability for performance** in the national AIDS response (see #4 in Figure 2).

## 2.2 CHAT and the “Three Ones”

In 2004, a set of guiding principles for national AIDS responses, known as the “Three Ones” principles, were agreed upon by national and international partners and institutions. UNAIDS has since played an active role as facilitator and mediator for all partners in country-led efforts to apply the principles. The “Three Ones” are widely accepted as the optimal architecture to ensure that partners at country level join forces to reach the goal of universal access for prevention, treatment, care and support.

The “Three Ones” principles focus on greater national ownership, harmonization and alignment.

In 2005, to strengthen the application of the “Three Ones”, national governments, bilateral donors, civil society, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and UNAIDS established the Global Task Team on Improving AIDS Coordination Among Multilateral Institutions and International Donors. Its purpose was to develop a set of recommendations to enhance key components of the AIDS response—for example, the quality of AIDS action frameworks or strategic plans. The Global Task Team also recognized that more intense efforts would be needed to create strong organizational relationships and partnerships at the country level to support an improved AIDS response. CHAT was developed in response to one of the Global Task Team recommendations (see “CHAT origins” box in Chapter 1).

The CHAT is firmly rooted in the “Three Ones” principles and provides additional information and analysis that actively reinforces their country level application. CHAT links to and supports the “Three Ones” in several ways.

- **Mapping** clarifies issues related to funding flows, communications/coordination and reporting/accountability mechanisms—areas that all provide a foundation for effective implementation of the “Three Ones”. It provides constructive diagnosis and analysis about how to improve relationships among the stakeholders in the national AIDS response.
- **The National Partner Assessment** provides qualitative information to help illustrate the level of national partner engagement with the “Three Ones”, including whether national partners are fully integrated with the national strategic framework, national AIDS coordinating authority and monitoring and evaluation. The national partner assessment includes a strong focus on analysing the role and degree of participation and involvement for civil society (including marginalized groups such as people living with HIV, men who have sex with men, injecting drug users, sex workers, women and youth) within the national AIDS response.
- **The International Partner Assessment** provides qualitative information about how international partners work with each other and with key country stakeholders, including whether they are actively harmonized and aligned with the national strategic framework, national AIDS coordinating authority and country-led monitoring and evaluation.

Overall, CHAT is a way of assessing both the strengths and areas for improvement in the relationships that make the “Three Ones” work. To be most effective, CHAT should be linked to ongoing performance review processes for the national AIDS response such as strategic planning and/or joint national HIV/AIDS programme reviews.

### **The “Three Ones” are:**

*one* agreed HIV/AIDS action framework that provides the basis for coordinating the work of all partners (e.g. a national AIDS strategic framework and/or action plan);

*one* national AIDS coordinating authority with a broad based multisectoral mandate; and

*one* agreed country-level monitoring and evaluation system.

## 2.3 CHAT and the joint national AIDS programme review

To ensure an effective and relevant AIDS response, it is recommended that every country make provision for a regular joint review of progress towards the main AIDS-related aims and targets, as well as the processes and partnerships used to attain them. This approach to results-based, country-owned planning and review is consistent with OECD/DAC principles for improved aid effectiveness. Many countries conduct joint reviews of the AIDS response, although the scope and quality are variable. It is important that those leading the AIDS response in country understand the importance of doing regular joint reviews—that is, involving a wide range of donors, beneficiaries, implementation agencies and other stakeholders including civil society as active, common partners in the review process.

The rationale for conducting the joint review (whether on an annual basis and/or at longer intervals) is as follows:

- it makes the national AIDS strategic plan a “living document” that can be used to guide ongoing implementation and adjustments to the national AIDS response;
- it supports evidence-informed decision-making about how to address key gaps or weaknesses in the national AIDS response; and
- it provides the basis for increased consultation and policy/programming dialogue with key actors and stakeholders.

At the current time, there is no standardized template or process for planning and conducting this joint review. Countries have developed different approaches depending on their context and needs. However, it is possible to identify some generic steps that can be applied in conducting these reviews.



### **Annual joint national AIDS programme review**

A joint review process generally includes: (1) an overseeing group, including high level officials of both government (planning, finance, sector ministries and NACA secretariat) and partners (donors, civil society networks), and (2) a technical group that is in charge of the quality assurance of the different aspects of the review, such as progress reports, special studies, consultants, overall analysis, presentation to and organization of a broad stakeholder review meeting, etc.

The terms of reference for the review will generally cover a number of broad areas:

- progress towards major objectives and outcomes (like UNGASS and universal access targets);
- annual outputs, looking at service delivery results, programmatic themes, institutions and coordination; and
- identifying a few priorities that need specific focus: e.g. targeting sex workers; an institutional assessment of the pooled fund management unit; review of harmonization and alignment of national and international partners, using the CHAT.

Some generic steps are:

1. National AIDS coordinating authority in consultation with key partners (for example, via a Partnership Forum) agrees on timing and requirements of the review linked to the annual or multi-year programming cycle. A decision needs to be made as to whether the review team consists purely of in-country partners, or whether independent consultants or groups will be part of the process with the aim of benefiting from the viewpoint of a critical outsider.
2. Formation of a Task Team to oversee the review with representation from each key constituency, with responsibility to:
  - oversee planning of the review and communicate key dates and timelines to stakeholders;
  - agree on the main areas to be covered in the review, including CHAT or other specialized areas of investigation;
  - develop terms of reference for the review as well as for specific subcomponents;
  - draw up a budget and agree how to cost-share for review process expenses;
  - design the investigation framework, organize the report-writing team and appoint a team leader;
  - support logistical arrangements (via the NACA secretariat); and
  - circulate all background documents as needed in advance to stakeholders.
3. Creation of a multi-disciplinary team, assisted by the national AIDS coordinating authority, to do a desk review and collect field data in a two–three week time period, including data collection on the context, processes and enabling issues (e.g. CHAT surveys) as required.
4. The Task Team will then oversee the compilation of all data, data analysis and preparation of the report as input to the review meeting. The report can contain different elements including fact-based (activity and budget report, financial and procurement report), analytical (assessment of key trends, progress towards outputs and outcomes, effectiveness of programme coordination mechanisms) and prioritized recommendations to improve the national AIDS response and achieve set targets.
5. Present and review all relevant reports and input at a participatory meeting between key stakeholders and partners including civil society, to discuss findings and agree on action items and adjustments.

CHAT is intended to play an important role in the joint national AIDS programme review process. The timing, process and depth of this process will vary considerably from country to country. Whatever the process or steps used, CHAT data collection can be integrated into the review. In the absence of regular joint national AIDS programme reviews, CHAT can serve as a catalyst as it provides an opportunity for a joint review effort around one aspect of the national AIDS response—partnership behaviour. This may in turn lead country stakeholders to understand the importance of doing regular joint reviews of the broader AIDS response.

## 2.4 CHAT and the essential role of civil society

CHAT is designed to highlight and reinforce the key role that civil society plays in national AIDS responses. Recent UN high-level consultations and reports have reinforced the need to ensure that implementation of the “Three Ones” includes the full and active participation of civil society and not just token involvement.

A key principle underlying the “Three Ones” is that civil society organizations are active stakeholders in the national AIDS coordinating authority. In general, civil society organizations play an important strategic role in relation to the national AIDS response in the following areas:

- strategic, operational and budget planning;
- design and use of national monitoring and evaluation systems;
- decision-making about allocation of funding;
- ongoing analysis/review of the effectiveness of the national response— including a “watchdog” function;
- review of performance reports on the national response;
- key multi-stakeholder technical and programme coordination mechanisms; and
- implementation of essential programmes related to prevention, treatment, care and support.

The diversity and wide range of strategic and tactical expertise within civil society organizations makes them essential partners in the process of joint national AIDS programme reviews. Specifically, civil society organizations are well positioned to provide quantitative and qualitative information to augment the data collected by governments. They can provide a valuable perspective on the issues included in CHAT.

In planning the use of CHAT, the national AIDS coordinating authority should fully involve civil society organizations—including networks of people living with HIV, marginalized groups such as men who have sex with men, injecting drug users, sex workers, women and youth, community-based service delivery organizations, faith-based organizations, trade unions and others—as respondents as well as partners in the process of gathering, analysing and reporting qualitative data from the fullest possible range of respondents. In addition, civil society need to have sufficient opportunity to review and comment on the CHAT report before it is finalized— ideally at a workshop or civil society forum. The CHAT findings and report should be disseminated to civil society organizations in national languages.<sup>2</sup>

Civil society can be involved in CHAT in the following specific ways.

- **Mapping** involves key representatives of civil society to help identify missing partners in the response and help analyse the functional links, funding and reporting lines and other aspects that have been decided to be included in the overview of stakeholders.

### ***What is “analysis of the missing”?***

“Analysis of the missing” means incorporating information from groups or organizations that may be currently excluded from the national AIDS response. This may involve purposefully seeking out organizations that perhaps should be involved but which are not yet fully engaged. Their perspectives and viewpoints on the mechanisms for inclusion of different groups in the national AIDS coordinating authority, for example, will be useful in identifying areas for improvement.

<sup>2</sup> An important resource for ensuring effective involvement of civil society is the “Three Ones” guidelines “Coordinating with Communities. Guidelines on the involvement of the community sector in the coordination of national AIDS responses”. AfriCASO/ICASO/International HIV/AIDS Alliance, 2007. Available at [www.icaso.org](http://www.icaso.org)

- **The National Partner Assessment** involves national civil society organizations (as well as other key national stakeholders) to obtain their qualitative input on the extent of their ownership and participation in the national AIDS response including those that are currently “missing” or marginalized. As well, civil society organizations provide their assessment of the extent to which international partners are harmonized and aligned, and they offer suggestions for improving national AIDS coordinating authority and donor approaches from the civil society perspective.
- **The International Partner Assessment** involves international nongovernmental organizations with a strong local implementing presence, to obtain qualitative input on their roles and relationships with international partners and their local nongovernmental organization counterparts. International partners can provide information on what they are doing to strengthen civil society’s role and capacity in the national AIDS response.

## Chapter 3:

### How to use CHAT

**NOTE:** The following section outlines major aspects of CHAT use at the country level. It is important to reflect on the whole process before the start and modify the suggested actions to the country context. Details on several stages in the process are found in Section II, Chapters 4–7 of this guide.

CHAT may need to be adapted to take the wide variations among different countries into account (in terms of the status of the epidemic, the organization of the national AIDS response and the role of international partners). The tool may not necessarily be used in the same way in every country, although it is recommended that each country assess their performance against all areas of assessment using the core questions to enable data from different countries to be collated and analysed at the global level. Countries are encouraged to adapt CHAT to their context by modifying institutional terminology and adding supplemental questions as deemed necessary. Technical advice on how to do this can be requested from UNAIDS.

### 3.1 Preparation

#### *Briefing stakeholders*

Information on CHAT should be shared as widely as possible at the country level. This type of advocacy will build broad interest in CHAT as well as help define how it will be used. Ideally, the briefings on CHAT need to be spearheaded by national counterparts, preferably senior staff in the national AIDS coordinating authority or a comparable body. Various options for information-sharing might include:

- introducing it at scheduled meetings, such as a meeting of the national AIDS coordinating authority, the partners' forum, the joint UN team on AIDS, the monitoring and evaluation working group, the steering committee for the joint national AIDS programme review or any other relevant meeting held in the country;
- extending a special effort to inform civil society organizations about CHAT and their potential for involvement.

#### *Planning the implementation of CHAT*

These questions should be considered before implementing CHAT.

- **Who should be in charge of the CHAT process?** In principle those who are in charge of harmonization issues in the national government—such as the planning or donor liaison ministry, should be in charge to create links with broader harmonization and alignment efforts in-country related to the Paris Declaration. This group

#### ***CHAT mobilization and advocacy in the Democratic Republic of the Congo***

CHAT was introduced via multiple meetings in the Democratic Republic of the Congo to a wide range of key stakeholders, including heads of key agencies and the Minister of Cooperation and Planning. This helped mobilize the high-level political buy-in for the use of CHAT and ensured that the process was clearly linked to parallel initiatives in the country related to the Paris Declaration. Full country ownership was promoted by ensuring senior government leaders already involved in harmonization and alignment for OECD/DAC were in charge of the CHAT process. Involvement of the major agencies such as the World Bank facilitated participation of international partners, while the major civil society umbrella groups were also involved to advocate CHAT involvement in their constituencies.

could also include senior staff of the national AIDS coordinating authority (executive secretary or director), ministry of health (the minister) and other ministries, donor agencies and stakeholder organizations including civil society members. They will further be referred to as the “CHAT oversight group”.

- **Who should guide the CHAT process technically?** From the group in charge of the joint review a smaller group can be formed to take responsibility for the implementation of the CHAT. This will be further referred to as the “CHAT working group”.

If the CHAT will be used outside of a joint review process a similar group should be formed, mandated by the national AIDS coordinating authority and officials in charge of the harmonization process in-country. Ideally this would be a group representing the different stakeholder constituencies from the AIDS and harmonization field and contain people with expertise in this type of action-oriented work.

- **What will be the follow-up process?** The planning stage needs to include consensus on the design of a follow-up process to ensure dialogue on the outcomes, analysis and recommendations from CHAT. To be effective in brokering change in partnership relations, results of the CHAT need to be discussed in a transparent way. Facilitation for this dialogue should probably come from outside the group of directly involved actors. This dialogue needs to ensure an informal and unthreatening environment to the discussion to ensure that the different points of view can be openly discussed. It may be impossible to reach full consensus on the issues and the dissension and consensus should therefore be noted.
- **How to present CHAT results?** The results of CHAT will have the most impact if they are presented during the discussions of a well-conducted joint review of the national AIDS response (see “Annual joint national AIDS programme review” box in section 2.3). The review process will need to be participatory and focused on improvements in the strategies, priorities and architecture of the AIDS response. The CHAT categories are highly relevant to these discussions and can lead to a number of relevant recommendations. Linking CHAT findings to other key processes, studies or initiatives that may be under way in the country, will strengthen the process and outcomes (see below).

### Possible simultaneous processes relevant to CHAT

- **Joint review of the national AIDS response**
- **OECD-DAC Monitoring of the Paris Declaration on Aid Effectiveness**  
Monitoring against the 12 indicators for ownership, harmonization and alignment of aid has been conducted in 37 countries (2006) to determine the extent to which the Paris Declaration is applied at the country level. Surveys will be repeated at regular intervals.
- **Monitoring of the UNGASS Core Indicators**  
The biennial monitoring process for UNGASS includes (in selected countries) the National Composite Policy Index. This index incorporates a number of harmonization issues—relevant to achieving the Millennium Development Goals—that may be cross-referenced with the CHAT results.
- **Setting and reaching universal access targets**  
As a follow up to the 2006 Political Declaration of Commitment on HIV/AIDS all countries have committed to setting ambitious targets towards universal access to prevention, treatment, care and support by 2010.



- ***Coordinating with communities—guidelines for community sector involvement in the coordination of national AIDS responses***

This is a tool which can be used by governments, international organizations and civil society to strengthen civil society involvement at country level. This in turn can provide more in-depth evidence about the barriers and challenges to civil society involvement.

Major decisions on the CHAT process should be made by the CHAT oversight group.

These decisions can include:

- using all or parts of CHAT;
- conducting a national-level survey or include subnational levels;
- determining how broad or how narrow the selection of respondents will be (number of respondents); and
- estimating the budget for implementation of CHAT.

The tasks of the CHAT working group are:

- to ensure that all key stakeholder groups are included in the CHAT process and to liaise with constituencies for their participation;
- to familiarize themselves with these CHAT guidelines (Section I: Background and Section II: Implementation Guide) and prepare for the CHAT-specific follow-up/dialogue;
- to determine the plan for implementation and determine the team, including field researchers and the possible hire of consultants;
- to design and approve the adjustment of the indicators and questions to the terminology used in-country (name of national AIDS coordinating authority etc.) and the adaptations of the sub-questions to country needs;
- to approve the strategy for data collection (person-to-person interviews, focus groups, self-administration plus interviews) and analysis;
- to determine the steps that will be taken to ensure a wide cross-section or representation of respondents, including an “analysis of the missing”;
- to review the results from CHAT and strengthen the analysis and proposed recommendations; and
- to present the results to the broader stakeholder partners, in the joint review meetings or in separate meetings.

The plan and schedule for CHAT will need to be elaborated by the working group, to include these elements:

- objective
- scope (national, subnational; respondent selection)
- timeline
- strategy
- responsibilities of the team, including field researchers and if hired, consultants
- technical resources (UNAIDS, national research institutions)
- budget.

## 3.2 Implementation of CHAT

### *Mapping of the national AIDS response*

**NOTE:** Mapping is not a “one-time” process—it can be returned to continually throughout CHAT planning, implementation, analysis and follow-up. However, it will be important to keep track of the main mapping products and diagrams and how they are modified over time.

A map of the stakeholders in the national AIDS response is a vital component of CHAT. Therefore, if no such map exists, it should be elaborated as a first step in implementing CHAT. Detailed steps for a mapping exercise can be found in Chapter 4. The main intent of mapping is to identify the linkages, relationships and flows of information and resources that inform the national AIDS response. It is assumed that mapping will also help identify the respondents for the CHAT survey components, as well as be a useful tool in outlining lines of communication, resource flows and power relationships.

### *Determining respondents for CHAT*

The concept of “sampling” for CHAT—i.e. selection of respondents—needs to be consistent with its action orientation as well as to the country context. In most cases the number of respondents involved in CHAT can be relatively small, ensuring representation (between 10–50 organizations for each of the national and international partner surveys). In some cases, it may be necessary or desirable to conduct CHAT data collection through a broader selection of respondents. However the usefulness of this approach needs to be carefully weighed against the larger expense.

CHAT places less emphasis on the ability to generalize from a large amount of data than on detailed qualitative information about what is happening, including the perspectives of those who may be currently marginalized or “missing” from the national response dialogue. Therefore a choice needs to be made for the most sensible and cost-effective ways to reach a reasonable number of respondents in each country.

In line with the above, the recommended approach to use in CHAT is to select respondents based on the types of experiences they can share, including seeking out the most likely “best case” and “worst case” examples. The intention is to uncover and record a broad range of perspectives.

### *Data collection using the National Partner Assessment and International Partner Assessment*

It is recommended that one or more short-term local consultants be recruited to conduct interviews using the surveys in Section III of this guide, and analyse the data from respondents. Alternatively, the team already tasked with the joint national AIDS programme review can integrate CHAT into their review plan, or a team of national staff or field researchers can carry out the necessary data collection and analysis. The CHAT consultant(s) will need to be very familiar with the CHAT components and methodology, including the way in which the areas of assessment and the core questions for CHAT link together and the way in which the information will ultimately be analysed and used. With larger teams, it is recommended that a short methodological workshop be organized to review the methodology, instruments and techniques to be used in data collection that has decided by the CHAT working group.

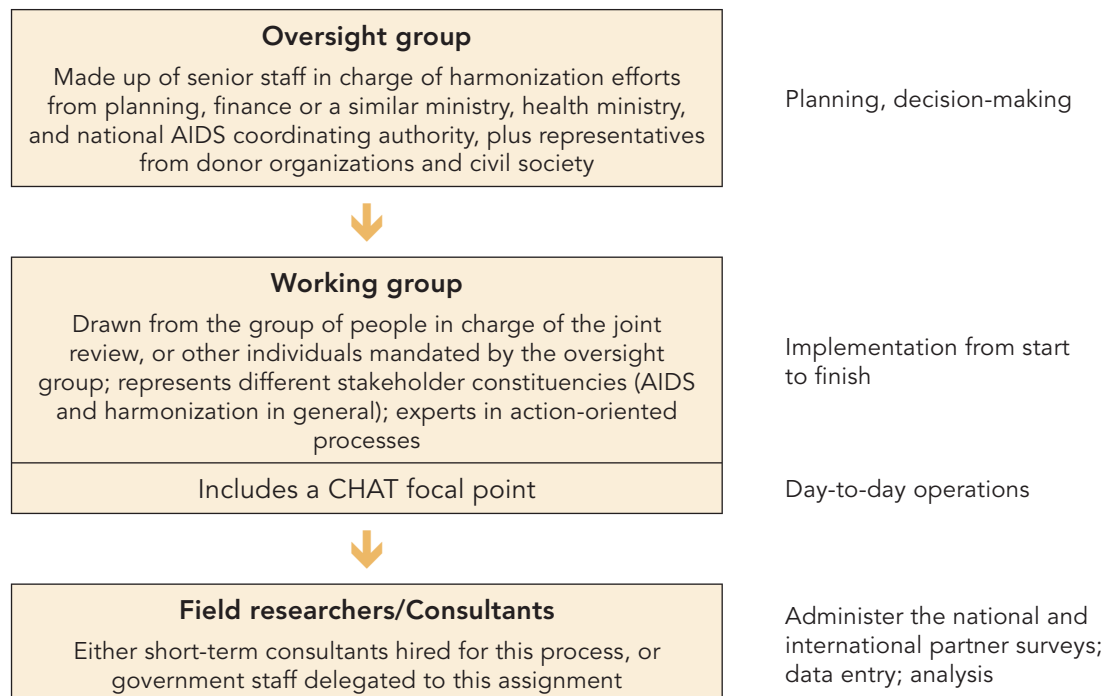
The consultant(s) need to have a strong background in qualitative data collection and analysis, and will do the following:

- finalize the approach to selection of respondents for the survey(s);
- finish any modifications to the survey instruments;

- plan the logistics for conducting the data collection;
- administer surveys;
- analyse the data; and
- prepare reports.

Table 3

### Individuals and groups involved in the CHAT process



## 3.3 Analysis

### *Rapid qualitative analysis*

CHAT uses a rapid qualitative analysis technique to identify trends, extract underlying issues and assign a common-sense rating (i.e. “very poor”, “poor”, “good”, “very good”) to each of the areas of assessment based on qualitative evidence from each interview. After each interview, each questionnaire is analysed and a rating is assigned to the area of assessment. Next, data can be consolidated by establishing a summary of ratings per area and across groups of respondents. However, due to the qualitative and action-oriented focus of CHAT, it is very important to ensure that the descriptive information attached to each aggregated rating is properly noted. A spreadsheet is provided on the CD-ROM to assist with this analysis.

### *Overall data analysis*

Once data are compiled from individual surveys into a consolidated summary for the national as well as international partner survey, higher levels of analysis can be done to add meaning and to extract overall recommendations and action items. While the preliminary levels of data analysis can easily be conducted by the consultants themselves, the further levels of qualitative data analysis would ideally involve active input from the CHAT working group and the relevant national AIDS coordinating authority secretariat staff.



In summary, possible analytical outputs for each of the national and international partner surveys would include:

- analysis of each area of assessment across groups of respondents;
- analysis of each area of assessment by each group of respondents;
- analysis of each broad category of assessment across groups of respondents; and
- analysis of each broad category of assessment by each group of respondents.

### 3.4 CHAT report and follow-up

#### *Preparing the CHAT report*

The CHAT focal point supervises the development of the report by the consultants or team. A narrative report can be prepared as a short stand-alone document or integrated with the joint national AIDS programme review report. CHAT narrative reports should be concise, user-friendly and highlight gaps to address, best practices or positive actions for change. A suggested format for preparation of the in-country CHAT report is provided in Section II.

#### *Presenting and disseminating CHAT findings in-country*

The most important task once the CHAT country report is prepared is to ensure that the agreed upon follow-up process is begun. To get to this process of open dialogue and decision-making, the reports should be widely disseminated to all key stakeholders, including all national AIDS coordinating authority members, CHAT respondents and other key officials. CHAT information can be integrated into multi-stakeholder discussions or workshops linked to the joint national AIDS programme review where it exists, or a similar forum can be organized where no joint review is yet done.

In addition to the follow-up process designed to follow-up the CHAT work, the national AIDS coordinating authority or its partners should seek out opportunities to present CHAT information and findings in all key forums related to planning, monitoring, review and/or strategic decision-making on the national AIDS response or broader national development processes.

## SECTION II:

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### Implementation Guide

This section contains detailed information about completing the three components that make up the CHAT. *However, it is not a comprehensive list of steps in the process. Refer to Chapter 3 for this.* It will be of particular use to programme officers and administrators in charge of planning the research process, recruiting and training field researchers, and monitoring implementation, as well as to consultants hired to conduct research using the CHAT. The first chapter of this section describes the process of mapping stakeholders in the national response, which will be an important point of reference throughout the process.

## Chapter 4:

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### Mapping the national AIDS response

#### 4.1 What is mapping?

Mapping is a way of visually displaying (through a multi-layered diagram), the main systems, links, communication/information and funding flows as well as accountability and coordination mechanisms that comprise the complex web of organizational and institutional relationships in the national AIDS response. Key categories and relationships can be colour-coded. Mapping also includes a rapid desk review to collect basic statistics or background information on the national AIDS response that can be added to the visual map and/or summarized to accompany it.

Mapping is usually done through a participatory, multi-stakeholder group workshop or series of workshops so that a map or diagram can be jointly constructed. Alternatively, mapping can be done by one individual (the CHAT focal point or a consultant) and then presented to a larger group or different groups for validation and further input. Sample and blank mapping diagrams can be presented in PowerPoint, on transparencies or on large sheets of paper to provoke discussion and then layered or modified through a group exercise.

It is recommended that mapping be done first at the national level to provide a broad overview of the national AIDS response. Later, if time and resources allow, more detailed mapping can be done at the subnational level.

Mapping is **not** simply another way of doing an elaborate organizational chart showing the official lines of responsibility in the national AIDS response. Rather, it can depict a much wider variety of relationships and linkages and help diagnose any challenges, bottlenecks or problems.

**NOTE: There is no correct way to do mapping. Mapping is endlessly adaptable and needs to be used in a way that reflects the reality of each specific country.**

**Overview of suggested mapping process (see details in section 4.4)**

*Step 1: Rapid desk review*

*Step 2: Identify the key groups and agencies*

*Step 3: Illustrate main linkages and mechanisms*

*Step 4: Identify areas for further improvement*

## 4.2 Why do mapping?

Mapping makes explicit the way in which different partners (national and international) relate to each other in the national AIDS response. It may help clarify the strengths and weaknesses of various funding, communication and coordination mechanisms. It can help highlight the ways in which certain essential groups such as those from civil society may be “missing” from the national AIDS response. It is a learning tool that can be helpful for multi-stakeholder team building by showing who the main actors are and how they work together. A map, depicting the many flows, linkages and mechanisms, including those that are working well or need improvement, is an important tool for the national AIDS coordinating authority in coordinating the national AIDS response. The map can be referred to repeatedly over time and revised regularly to depict the evolution of the national AIDS response.

Mapping is recommended as the first stage of CHAT, because it

- increases interest and buy-in for CHAT among a variety of stakeholders including civil society;
- prepares for implementation of the national and international partner survey components; and
- enhances understanding of CHAT survey data significance to help identify action or follow-up items.

## 4.3 Who is involved in the mapping process?

The CHAT focal point in conjunction with the CHAT working group (on behalf of the national AIDS coordinating authority) can take responsibility for the mapping process by deciding how and when to do it. If resources allow, a skilled participatory workshop facilitator with experience in team building and/or organizational dynamics can be used to conduct workshops or meetings to construct the map. Someone with skills in graphic design may be required to transfer the ideas into electronic format for wider circulation.

The CHAT working group is a multi-stakeholder group with overall responsibility to supervise and give technical advice to the CHAT process on behalf of the national AIDS coordinating authority. The working group will need to ensure that any mapping exercise includes representatives of civil society, government agencies, research institutions, the private sector and key international agencies or partners. Likewise, the map itself should include all key actors in the national AIDS response, including those who are more and those who are less involved at the time of mapping.

## 4.4 Steps in the mapping process

### *Step #1: Rapid desk review*

The CHAT focal point or an external consultant can conduct a **rapid** desk review to compile some basic statistics and background data. The following list can be adapted or added to according to the country context and the time/resources available for CHAT:

- 1) lists of known actors in the national AIDS response
- 2) national AIDS coordinating authority (NACA) membership data
- 3) funding data
- 4) results of the AIDS response
- 5) coordination and communication data
- 6) reporting and accountability data.

See “Guide to rapid desk review data collection” for further examples of these sources.

**NOTE:** The desk review is NOT intended to be a time-consuming or exhaustive research process in itself. It is assumed that most of this information would be readily accessible either via on-going NACA monitoring or through reference to key documents already available.

*It is recommended that the desk review focus first on the national level to provide a broad overview of the AIDS response. Later, other desk reviews can be done to support more detailed mapping at subnational levels if desired.*

### Guide to rapid desk review data collection

#### 1) Lists of known actors in the national AIDS response

Public sector

- i. ministries and government agencies
- ii. subnational authorities

Nongovernmental sector (membership as well as service delivery organizations)

- i. organizations and networks of people living with HIV
- ii. nongovernmental organizations
- iii. interest-based organizations
- iv. faith-based organizations
- v. development and humanitarian organizations and agencies
- vi. membership organizations
- vii. advocacy and activist organizations and networks

research institutions

private sector

bilateral agencies

multilateral agencies

international foundations and specialized funds

major international nongovernmental organizations

other



**2) National AIDS coordinating authority membership data**

Organizational overview/chart (council, secretariat, working groups, etc.)

Number and types of organizations (national and international) represented on the national AIDS coordinating authority

**3) Funding data (if available the national AIDS spending assessment can be used)**

Funding dedicated to the national AIDS response from all domestic and international sources

Breakdown of major funding flows at the national level

- i. sources
- ii. beneficiaries
- iii. amounts
- iv. types of funding (budget support, basket/pooled, project-based, technical assistance, other)

**4) Results of the AIDS response**

Information from the nationally agreed indicator set to monitor the AIDS response

Information from the actors on service delivery (public sector and others) on targets and results of different interventions

**5) Coordination and communication data**

Number and type of interagency AIDS coordination and communication mechanisms at the national level (e.g. working groups, committees, etc.)

Background on each main AIDS coordination mechanism or working group

- i. membership/participants
- ii. mandate
- iii. meeting frequency
- iv. major outputs (minutes, reports, other)

Background on each main AIDS-related communication mechanism or process

- i. type (electronic, hard copy)
- ii. frequency
- iii. source(s)
- iv. recipient(s)

**6) Reporting and accountability data**

Number and type of AIDS-related key reports (financial and narrative) being produced

- i. by whom
- ii. for whom
- iii. purpose/content
- iv. frequency

### ***Step #2: Identify the key groups and agencies***

Create the map or diagram of the national AIDS response as the next step to illustrate who is involved and how they are linked. It identifies the main categories of groups, organizations and constituencies involved, and it shows how they are connected.

1. To begin the map, list the main stakeholders in the national AIDS response in the country, and use a **blank** template to help construct a detailed, country-specific diagram.
2. If necessary, change the arrangement and number of elements to capture the country situation more accurately.
3. List the specific names of agencies and organizations under the generic categories provided.

Questions to ask while constructing the map include these.

- Which stakeholders are most closely involved with the national AIDS response i.e. who is closer to the centre of the map?
- Which stakeholders are not yet involved i.e. who is on the margins of the map? Who are the main marginalized groups in civil society who could be added to the map (such as men who have sex with men, injecting drug users, sex workers, women or youth), and where are they positioned?

**NOTE:** that the different elements on the map can be organized to show their degree of influence or participation in the national AIDS response. For example:

- groups with the highest influence and/or greatest degree of involvement can have larger circles, and their circles might be placed closer to the boxes showing the main elements; and
- groups with less influence or not yet involved can have their circles placed further away from the main elements.

### ***Step #3: Illustrate main links and mechanisms***

The next stage is to place lines or links on the map to illustrate some of the main areas:

- funding flows,
- coordination/communication mechanisms, and
- reporting/accountability mechanisms.

Mapping can also depict visually the various roles and functions of stakeholders. It can be as simple or complex as needed to show the way in which the country AIDS response operates. For each key link identified, refer to or provide some supporting background information based on the desk review. Use colours and symbols to show specific types of interchange between the various stakeholders. The option exists to add lines showing additional linkages between various stakeholders. Separate or sub-maps could be done showing funding, coordination/communication and reporting/accountability mechanisms, which could then be combined or layered to provide a full overview of the national response.

One way of doing this is shown in Figure 3a and 3b (see also Botswana example in Figure 4), which shows some generic coordination and information/resource flows in a typical national AIDS response, as well as some information on the status of coordination/communication mechanisms.

Figure 3a

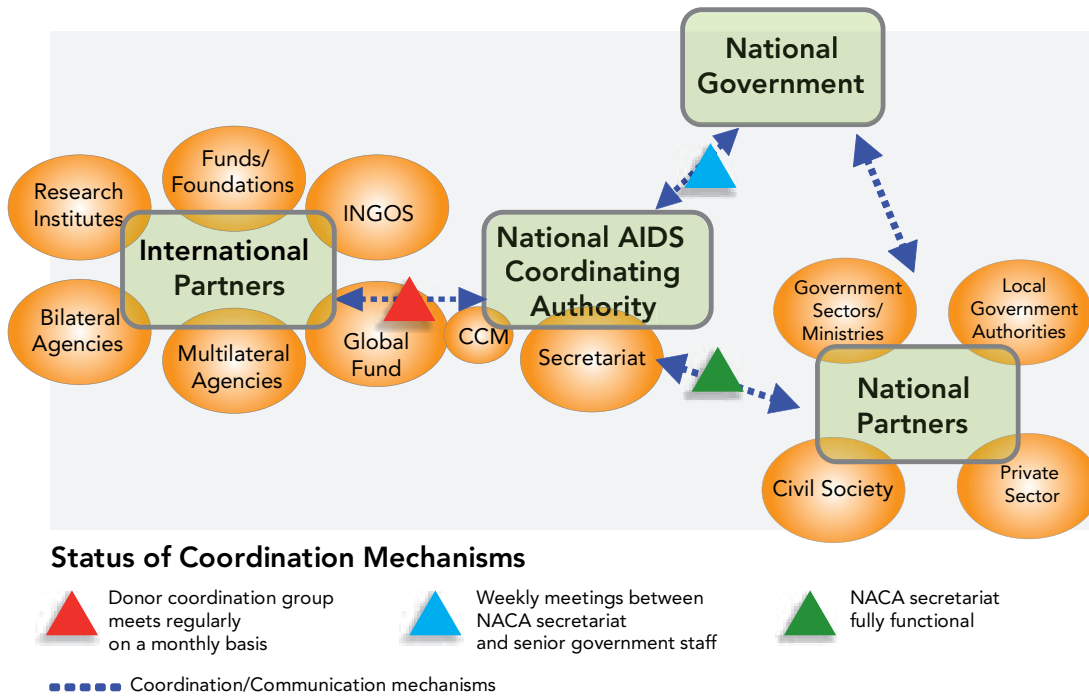
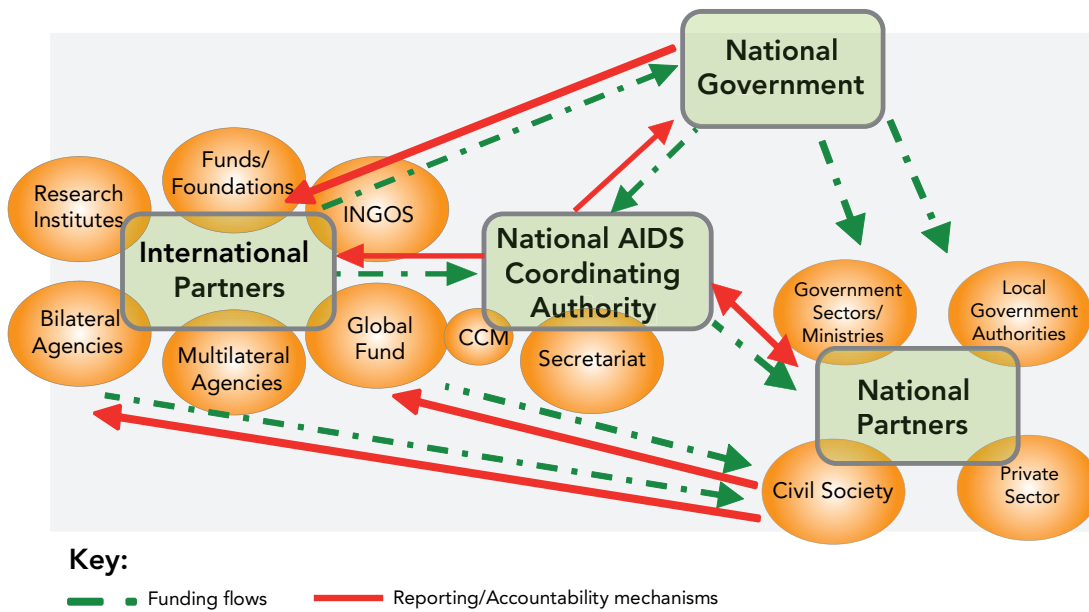


Figure 3b



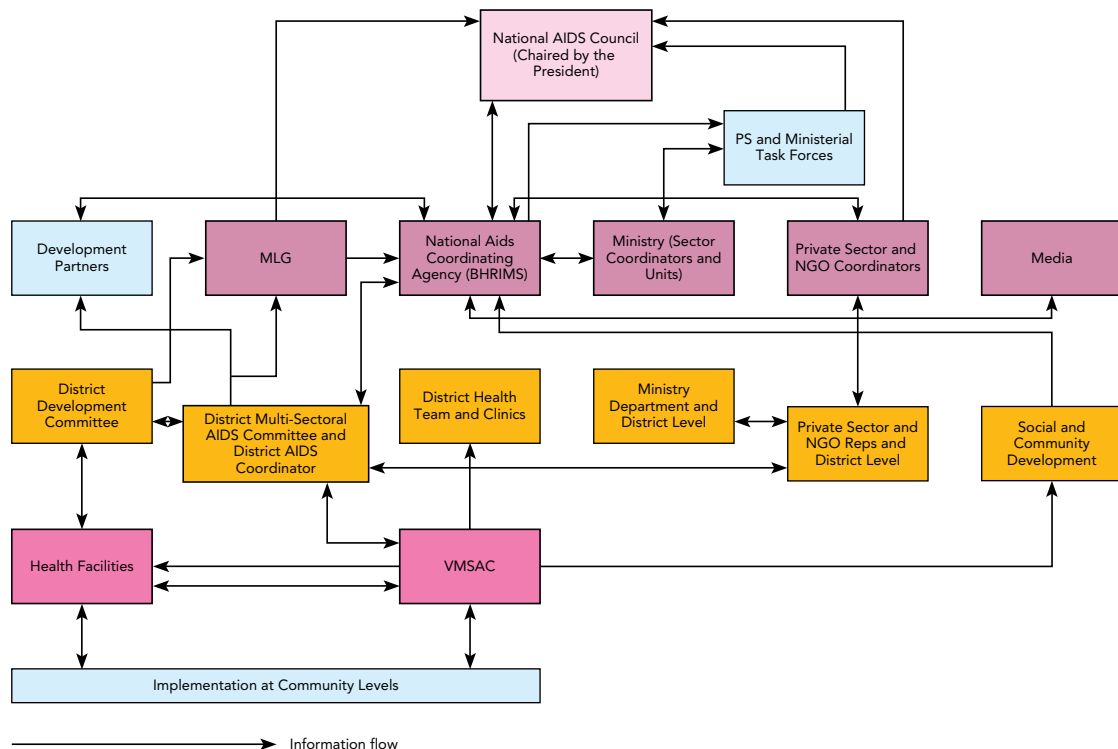
**Step #4: Identify areas for further improvement**

- Mapping can identify whether any key national partners (including civil society organizations) are missing and what can be done to involve them in concrete ways.
- Mapping shows the key areas where strengths and weaknesses exist by answering these questions.
  - Which organizations or agencies tend to be most fully and frequently involved? Which organizations or agencies tend to be excluded and why?
  - Where are there noticeable gaps or weaknesses in funding, coordination/communication and reporting/accountability at different levels? Where is there duplication or overlap that needs to be addressed?
- Mapping can lead directly to actions to improve relationships and the flow of information or funds for the national AIDS response.

Since the initial mapping exercise for CHAT will be followed by the international and national partner assessments using the surveys in Section III, each respondent can be asked to review and comment on the map, including indication of any missing respondents or data. Mapping can then be revisited to identify the specific areas for change.

**Figure 4**

**Example of Information Flow Mapping from Botswana**





## Chapter 5:

### Selection of respondents

#### 5.1 Define an overall selection approach for CHAT

CHAT is **not** intended to be applied as a standard, extractive social survey process. Selection of respondents for CHAT needs to be consistent with its action orientation as well as to the country context. Selection, as well as the entire data collection process, should take into account the need for detailed qualitative information about what is happening, including the perspectives of those who may currently be marginalized or “missing” from the national response.

The recommended approach to use in CHAT is **purposeful selection**. This method is used in qualitative research and it is consistent with the principles of CHAT, where rich description is equally important as the numerical data.

Purposeful selection does not seek to find the “average condition” of a randomized sub-set. Rather, it is a pragmatic approach intended to uncover and record a broad range of perspectives from respondents with varying backgrounds and diverse views, seeking out the most likely “best case” and “worst case” examples.

The selection of respondents should be linked to the mapping of the partnerships and relationships found in the national AIDS response (see Chapter 4), which is the first step of the process. The total number of respondents depends on the objective as well as time and resources available, but keeping the number of respondents relatively small means administration of the surveys can go into more depth, which enables strong dialogue about key issues. This approach is time-limited, selective and pragmatic, and it can be adapted easily for use at either national or subnational levels.

The national and international partner assessments can be focused at either the national or subnational levels. Both levels of research can be conducted independently. In most cases, the recommended approach is to conduct CHAT data collection and analysis at the level of the **national AIDS response** first to obtain a broad overview of the situation. Later, as resources and time allow, subnational surveys can be conducted within provinces/states and/or districts to uncover more detailed information about participation, harmonization and alignment at those levels. This is also a useful way to verify whether information obtained at the national level is accurate based on local experiences.

**NOTE: The main purpose of CHAT is to invite dialogue about the strengths and weaknesses of the national AIDS response, leading to positive action for change. CHAT places less emphasis on the ability to generalize from a large amount of data than on promoting information sharing for change. Therefore, it is assumed that in most cases the total number of respondents involved in CHAT will be relatively small (between 25 and 75).**

#### 5.2 Selecting national partners

National partners should be selected from two major groups:

- national partner organizations already active in the national AIDS response and represented in its associated mechanisms (e.g. the national AIDS coordinating authority); and
- organizations that are active in the AIDS response, but **not** already represented on the national AIDS coordinating authority either directly or indirectly. See “What is analysis of the missing” box in section 2.4 for more explanation.

To provide the best coverage, at least **three to ten representatives from each** of the following groups of national partners would be interviewed.

- **Government ministries or departments:** the main government sectors or ministries represented on the national AIDS coordinating authority can all be interviewed in smaller countries. In larger countries, selected ministries or departments of different sectors, sizes and types can be interviewed. Try to involve both ministries and agencies that are more active, as well as others that are not currently active in the national AIDS coordinating authority.
- **Local government authorities or agencies** (e.g. provincial and district levels).
- **Civil society organizations** (both national umbrellas/networks and stand-alone or local organizations), including nongovernmental organizations, community-based organizations, organizations of people living with HIV, faith-based organizations, labour organizations, and those representing marginalized groups (i.e. men who have sex with men, transgendered persons, injecting drug users, sex workers, prisoners, migrant workers, women and youth). See guidelines below.
- **Research institutions (private and public):** select any prominent ones in the country that are attached to universities, colleges or government agencies. These may include those involved in the national AIDS coordinating authority as well as others that are not.
- **The private sector:** private sector representatives on the national AIDS coordinating authority should be included in the survey. Prominent private sector companies that are not active in the NACA or not included in NACA should be included to find out whether and how they are engaged with the national AIDS response.

### Purposeful selection of civil society organizations

The following broad guidelines can be applied for purposeful selection of this group of respondents.

- Identify the main national umbrella groups/networks that regroup community based organizations, associations or other organizations. For smaller countries, all main umbrella groups can be included. For larger countries, identify a cross-section of umbrella groups representing different constituencies, points of view and interest groups. If possible, and to draw out different perspectives, identify some umbrella groups with a strong track record of participation and engagement, and others that appear to be less involved or visible.
- Identify other national nongovernmental organizations that are main actors in the national AIDS response for separate interviews and are not represented by the umbrella groups.
- It is recommended that the national partner questionnaires be directly administered to local representatives of a few member organizations of each umbrella group that is surveyed. This enables verification that the views expressed by the umbrella group actually reflect the member organizations' own perspectives. It is recommended that the local representatives come from different parts of the country.

In addition to the main umbrella groups at the national level it is important to include direct input to the national partner survey from stand-alone groups representing affected, vulnerable or at-risk populations (e.g. people living with HIV, sex workers, migrants, men who have sex with men, prisoners and injecting drug users). These groups may constitute some of those "missing" from the established mechanisms. It is important not to compromise the confidentiality or safety of marginalized and vulnerable populations in countries where such activities may be illegal. Support may be available through national umbrella networks to identify suitable representatives or spokespeople for these populations.

In purposeful selection, there is no recommended percentage or optimum number of respondents from each category. Selection of respondents at the country level needs to be based on common sense, e.g. Where can we obtain a broad range of perspectives about the extent of inclusion, harmonization and alignment in the national AIDS response? Where can we find out about the "best case" and "worst case" examples that will enable us to identify areas for positive change?

## 5.3 Selecting international partners

Select international partners from two major groups:

- international partner agencies **already active** in the national AIDS response and the national AIDS coordinating authority; and
- international partner agencies currently **less directly involved with** the national AIDS coordinating authority.

To provide the best coverage, it is recommended that at least **three to five representatives from each of the following groups** be included:

- bilateral donor agencies representing individual donor countries, (e.g. AusAID, SIDA, United States Government-funded foundations and agencies such as PEPFAR);
- multilateral donor agencies (e.g. World Bank, other development banks, EU);
- UN agencies (e.g. UNAIDS and its UN co-sponsors, other UN agencies);
- The Global Fund to Fight AIDS, Tuberculosis and Malaria (including members of the CCM for the country);
- private foundations (e.g. the Bill & Melinda Gates Foundation, the Clinton Foundation);
- international research institutions; and
- international nongovernmental organizations (e.g. PSI, OXFAM, CARE, World Vision, etc.) as well as larger national nongovernmental organizations that receive substantial donor funds to implement national or subnational programming or provide sub-grants on behalf of international partners.

### Summary of methods for selecting CHAT respondents

- **Recommended: purposeful selection** in CHAT helps uncover various viewpoints and seek solutions directly from those involved. Concerns about research bias are not as important in an action research process, because by obtaining a wide range of perspectives and representing them fairly and accurately in the final analysis there is always room to correct misconceptions, triangulate data by getting multiple viewpoints and add new information. Purposeful selection is closely related to other forms of non-probability sampling that are commonly used in qualitative social survey research (described below).
- **Convenience selection** is used to obtain an inexpensive approximation of the truth. This method is often used to get an estimate without incurring the cost or time required to select a random sample. For CHAT, this may mean in some cases selecting respondents who are easier to reach (i.e. within the capital city) or more willing to participate in a given timeframe.
- **Judgement selection** is where the researcher uses expert judgement to select a representative group from which to obtain data. When using this method, the chosen sample needs to be truly representative of the entire population. For example, if not all international agencies can be interviewed for the International Partners Assessment, then judgements will need to be made about which available ones would be most likely to represent the views of others.
- **Quota selection** is the non-probability equivalent of stratified sampling. Like stratified sampling, the researcher first identifies the strata and their proportions as they are represented in the overall population. Then convenience or judgement selection is used to select the required number of subjects from each stratum.

## Chapter 6:

### Data collection

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#### 6.1 Recruit and train the CHAT data collection team

It is recommended that the NACA recruit one or more short-term local consultant(s) under the direct supervision of the focal point to conduct CHAT data collection and analysis. A sample terms of reference is provided below. Alternatively, the team already tasked with collecting information for the joint national AIDS programme review can integrate some aspects of CHAT as part of their own research methodology.

The consultant(s) will need to be very familiar with the CHAT components and instructions, as well as the background information for each of the areas of assessment. Furthermore, they should understand how the areas of assessment and the core questions for CHAT link together and the ways in which the information will ultimately be analysed and used.

With larger teams, it is recommended that a short methodological workshop be organized for the consultants by the focal point, to review the steps, methodology, instruments and techniques to be used in data collection. This workshop should emphasize the action research orientation of CHAT, so that consultants can adapt their data collection techniques accordingly.

#### 6.2 Customize the data collection approach

Prior to data collection, the focal point and the consultant(s) will need to make several practical adjustments about how to focus and organize the data collection approach based on the decisions taken by the CHAT oversight group (i.e. to use all or parts of CHAT, to focus at national or subnational levels, etc.)

As noted elsewhere, CHAT data collection does not need to be a stand-alone process in order to reduce duplication and transaction costs and is preferably implemented in the framework of a joint national AIDS programme review. However, as the main intent of CHAT is to obtain detailed qualitative information related to partnership behaviour around the national AIDS response, it is essential to try and retain the focus on face-to-face interviews for data collection.

All the areas of assessment and core questions are expected to be included in each interview, since this would constitute a thorough survey of partner behaviour in the national AIDS response. It will also allow for global analysis of progress on harmonization and areas of concern to be addressed at the global level as well as at country level.

However, surveys can easily be customized (based on the electronic template provided in the CD-ROM) by adding supplemental questions or entirely new questions not (yet) included in the CHAT. At the same time, terminology, names of institutions or processes, and language can be adjusted in the core questions as needed to make sure that the survey questions correspond to local needs. Translation may be necessary.

## Terms of reference for CHAT consultant(s)

(sub)headings and sample text

### Background

Country background (brief details about epidemiological background and response structure)

Rationale for using the CHAT

Relation to concurrent joint AIDS review (or other processes going on)

### Objectives

For the use of CHAT as well as the involvement of a consultant

### (CHAT) methodology

Refer to guidelines and elaborate on decisions re: adaptations of process and questionnaires

### Responsibilities of consultant(s)

Work closely with the focal point to do the following:

- finalize the selection approach and the selection of those who will be asked to participate in the survey(s);
- finish any modifications to the survey instruments;
- plan how to administer the interviews;
- plan the logistics for conducting the data collection;
- administer surveys;
- plan how to analyse the data with the input of the CHAT working group or other oversight sub-committee, and prepare reports; and
- present the findings to the broad stakeholder workshop organized by the focal person and the CHAT working group and discuss their implications.

(If there are multiple consultants, specific responsibilities need to be clear.)

### Deliverables

- Finalized questionnaires
- Transparent documentation of analysis
- Draft report
- Presentation to broad stakeholder meeting

### Timeline

#### Qualifications and skills

- Minimum work experience and education level
- Strong background in qualitative data collection and analysis, social research methods, including participatory/action research approaches
- Familiar with conducting open-ended interviews and with doing rapid analysis of qualitative/descriptive information to extract themes, issues and key trends
- Familiar with the AIDS context in the country, including existing coordination mechanisms and systems
- Able to adapt tools and techniques as needed, and work with relevant computer programmes (Word, Excel, others)
- Flexible
- Communication skills

#### Budget or payment level / schedule

### 6.3 Administer the surveys

The options and strategy for implementing CHAT data collection will vary from country to country.

At least two to four weeks before data collection formally starts, the focal point on behalf of NACA can send out invitation letters to all those who will be asked to participate. It will be necessary to identify at least one key individual in each agency who is in the best position to represent that agency's perspective. The CHAT consultant(s) may conduct a group interview or focus group with two to four key individuals from a single agency, and then consolidate the collective responses onto a single survey response which accurately represents that agency's viewpoint. The interviews may take anywhere from 30 minutes to two hours, depending on the depth and range of comments that are invited from respondents.

Consistent with the approach, the interviews to conduct the surveys will involve a lot of dialogue between the consultant(s) and the respondent(s). A typical interview process might involve these steps.

1. Set up the interview time and place in advance. It is expected that the initial introduction to CHAT and the formal invitation to participate has come previously from NACA.
2. At the beginning of the interview, quickly review the areas of assessment and core questions to be covered and explain again the purpose of CHAT. Address any questions or concerns raised by the respondent, and invite their comments on the CHAT process.
3. It may be necessary to provide some background information to clarify a question. This can be done by referring to the description for each of the areas of assessment provided in Section III.
4. The consultant(s) can take rough notes during the interviews using the survey template provided in Section III, or one created by the CHAT working group. Make sure, as much as possible, to note exact wording by the respondent for better qualitative analysis.
5. The consultant(s) needs to actively engage in dialogue and information-sharing with the respondents during each interview for better understanding of the respondent's inputs.
6. Also, the surveys are part of a capacity-building and advocacy process to promote critical awareness about how to improve the national AIDS response. Therefore, researchers are encouraged to be fully engaged with the respondents as co-learners in the process.

#### **Example: Consultant teams for CHAT data collection in the Democratic Republic of the Congo**

In the Democratic Republic of the Congo, the consultants selected for CHAT first attended a methodological workshop organized by the NACA Secretariat to train them. Then, data collection teams of two people each were formed to do the interviews with informants. While one researcher was conducting the interview, the other person was able to note the level of interest and receptivity of the person being interviewed, as well as any other relevant points raised that were outside the survey. After each interview, the research teams were able to jointly discuss and come to agreement on what they had heard, as well as identify ways to improve subsequent interviews including logistical arrangements. This is an extremely useful way of checking the validity and accuracy of information collected while the survey process is under way.

## Chapter 7:

### Analysis

#### 7.1 Stage 1: Conduct rapid analysis of the individual survey data

CHAT uses a “rapid qualitative analysis” technique to identify trends, extract underlying issues and assign a common-sense rating to each of the areas of assessment based on the qualitative evidence from each interview.

Immediately following each interview the consultant(s) should quickly assess the individual responses for each of the core questions and supplemental questions and the main themes raised by respondents to assign a qualitative rating (i.e. “very poor”, “poor”, “good”, or “very good”) for each area of assessment for that respondent.

- Note that it is not necessary to quantify the absolute number of “yes” and “no” responses; however this analysis can be done internally by the consultant(s) to assist in the rating if they find it useful.
- Similarly, it is **not** recommended that each core question and supplemental question be rated and averages calculated in order to assign a rating to the area of assessment, as this can be overly time-consuming and not very useful.
- Provide a summary of three to five key points to justify the assigned rating.
- If the area of assessment did not apply for some reason or it was impossible to assign a rating, please briefly explain.

The consultant(s) can also discuss and agree on the rating with the respondent at the end of the interview. The consultant(s) and the respondents can jointly enumerate the points to justify the assigned rating.

If desired, at the planning stage the consultants can work with the focal point and CHAT working group to create country-specific rating criteria for each area of assessment. However, due to extremely wide variation between countries in terms of what constitutes “very poor”, “poor”, “good” or “very good” practices, there are no international standardized CHAT rating criteria.

Validation of the rating assigned to each area of assessment can be done in one of two ways:

- if consultants work in teams to do interviews and rapid analysis, they can work together to double-check each other’s analysis and ratings;
- the CHAT focal point can do a random double-check of individual survey notes and their analysis as conducted by the consultant(s), in order to verify the accuracy and validity of the ratings.

#### 7.2 Stage 2: Consolidate findings within and across groups and categories

Once each individual survey has been quickly analysed and a rating assigned to each area of assessment with the qualitative justification, data can be consolidated at a second stage of analysis.

All ratings and their supporting points for the areas of assessment should be summarized and analysed **across** the national and international partners as well as **within** each group of national partners (i.e. civil society, government agencies, private sector etc.) or international partners (although this is less relevant given there are fewer in-country). For example, there may be trends in the way that civil society members, different from other national partners, responded to the core questions and supplemental questions under each area of assessment.

The qualitative analysis of individual ratings for each area of assessment to determine a summary rating can be done using different methods.

- For example, if the ratings from 10 national respondents (all groups) were: 5 “good”, 2 “very good”, and 2 “poor”—the consolidated rating would intuitively be “good”.
- Giving numerical scores (1 to 4 for instance) to the ratings and doing a crude average may be used as well—with this crude average translated back in the correspondent rating. However, it should be noted that the number has no meaning in itself and should never be used in presenting the CHAT results.
- Using the proportion of individual ratings falling in the “good” and “very good” range or alternatively only in the “very good” range. The summary score would then be “very poor” if less than 25% of ratings fall within the range; “poor” if between 25% and 50% of ratings fall within the range; etc.

Presentation graphics can be developed using a bar or pie chart per area (Figure 5) to show the range of ratings. For an overview of all areas a table could be colour-coded depending on the summary scores (for instance green for “very good”, yellow for “good”, orange for “poor” and red for “very poor”, as in Figure 6).

Figure 5

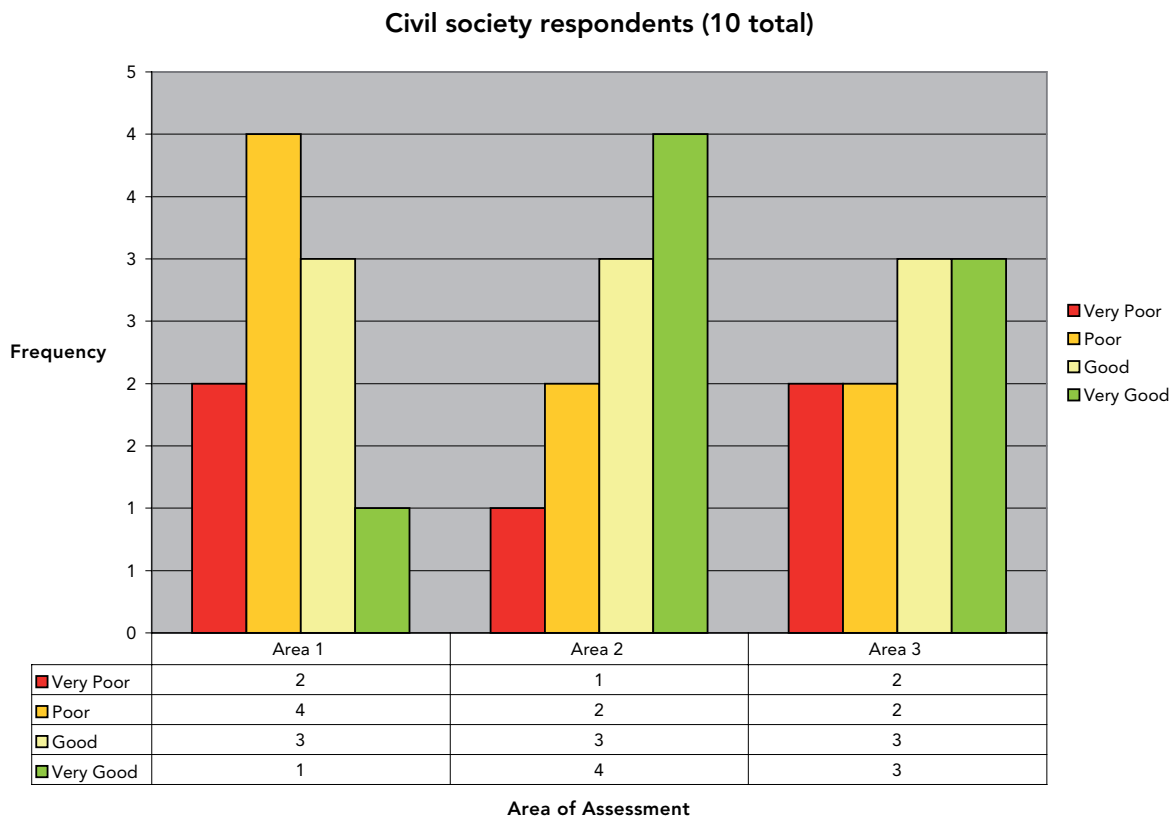




Figure 6

		Groups of respondents (Total)					
		Civil Society (10)	National Government (6)	Local Government (6)	Research (3)	Private Sector (5)	Other (7)
Summary score in each area	Area A1	Poor	Good	Poor	Very Poor	Poor	Good
	Area A2	Good	Good	Very Good	Very Good	Poor	Good
	Area A3	Good	Poor	Very Good	Good	Good	Very Good
	Area A4	Poor	Very Poor	Good	Poor	Poor	Good
	Area A5	Very Poor	Very Poor	Good	Good	Poor	Poor
	Area A6	Very Poor	Poor	Poor	Very Poor	Poor	Poor
	Area A7	Very Poor	Poor	Very Poor	Good	Poor	Good
	Area A8	Good	Good	Poor	Good	Very Good	Very Good

The aggregation of the ratings within each area of assessment for the national and international respondents gives a broad overview of the perspectives in-country on this area. This consolidated score or rating can be useful, but at the same time it is essential to qualify the rating by providing enough descriptive details to ensure that specific differences related to each category of respondent are still apparent. For example, the summary rating for all civil society groups may be “good” and for government groups “poor” so it would be very important to describe clearly the underlying range of perspectives in each group. The consolidated rating either within or across categories may ultimately be less important than the description of the main issues obtained from the respondents under each core question and supplemental question and presentation of the total variation in ratings.

**Summary of possible analytical outputs for each of the national and international partner surveys:**

- Analysis of **each area of assessment across groups of informants.** (“50% of all 50 national partner respondents report that participation in the joint national AIDS programme review is ‘good’ or ‘very good’.”)
- Analysis of **each area of assessment by each group of informants.** (“The majority of civil society respondents report that participation in the joint national AIDS programme review is ‘good’.”)
- Analysis of each **broad category of assessment across groups of informants.** (“The assessment shows that overall, financial management procedures are unsatisfactory.” This indicates a majority of ‘poor’ or ‘very poor’ responses to the areas of assessment “A5”, “A6”, “B5” and “B6”.)
- Analysis of each **broad category of assessment within groups of informants.** (“Overall, civil society respondents report that their participation, harmonization and alignment with the national AIDS coordinating authority and the national strategic framework is “good”, while bilateral organizations generally classify it as “very poor”.” This combines the ratings for areas of assessment “A1”, “A2”, “B1” and “B3”.)

### 7.3 Stage 3: Analysis of CHAT findings in the national context

Once data are compiled from individual surveys into consolidated summaries (i.e. areas of assessment ratings along with a qualitative description of underlying points and issues) for national and international partners, another level of analysis needs to be done to add meaning and to extract overall recommendations and action items. This analysis needs to elaborate on the consensus as well as the diversity of perspectives and extract the consensus on the country status on harmonization and alignment in the AIDS response and the issues that need further work and dialogue.

While the preliminary levels of data analysis can easily be conducted by the consultants (using simple spreadsheet software such as Excel and the format provided on the CD-ROM), this analysis would ideally involve active input from the CHAT focal point and working group members.

The mapping results need to be used in this further analysis as well as other (quantitative) data available from other sources or obtained during mapping/desk review. For example, information on the national AIDS budget and the amount and type of financial contributions being disbursed to and received from various sources can be related to data from the areas of assessment.

A participatory workshop to present and validate the preliminary findings from the data and to discuss their implications can be held including the consultant(s), the focal point and the CHAT working group members. This workshop could cover other aspects of a joint review or equivalent process or focus on CHAT data only, including the following:

- summary and discussion of the initial mapping done prior to the CHAT surveys, in terms of the major relationships, linkages, statistics or issues identified;
- summary and discussion of the methodology and approach used for implementing data collection and analysis;
- summary and discussion of key findings for each area of assessment from national and international partners, including details on findings within and across groups of respondents, key trends or themes and the main critical issues identified;
- presentation and discussion of national and international partner assessment data in relation to the original mapping (i.e. What could be added? Based on what has been learnt, how could or should the mapping be modified?);
- agreement on reporting formats for in-country and global reporting;
- key findings for civil society as an important category of national respondents including the extent to which marginalized groups were included (e.g. men who have sex with men, sex workers, injecting drug users, women, youth etc.) and any outstanding gaps or missing groups that were not included; and
- presentation and discussion of draft conclusions (prepared in advance by the focal point with support from the consultants), including brainstorming of implications, action items and more concrete planning of follow-up activities as agreed in the planning period.

Details on CHAT reporting have been outlined in Section I, but a sample report template has been included on the following page.

## Suggested template for CHAT reporting

### Executive summary

- 1) Summary of process (dates conducted, regions covered, etc.)
- 2) Summary of findings (facts)
  - a. Map
  - b. International Partner Assessment major findings and qualitative description of main issues
  - c. National Partner Assessment major findings and qualitative description of main issues
- 3) Main conclusions (interpretation of findings/relevance, including analysis within categories)
- 4) Follow-up and action items

### Introduction

Note by whom and for whom the report was prepared, the date, overall number of partners counted in the analysis, the dates covered by the analysis, etc. For example: "This report was prepared for the national AIDS coordinating authority (date). It assesses the performance of (number) national and international partners in relation to the national AIDS response in (country, year). The analysis draws on data collected from (number) questionnaires, administered between (date) and (date)."

Add further details regarding the range and type of national and international partners surveyed and the country context, as well as methods used for data collection, analysis and report preparation.

### Mapping

Present mapping exercise: graphic modelling of national AIDS response, key statistical or basic data on the response and description, etc.

### Key findings and analysis

Present category-by-category analysis of national and international partner survey results: area of assessment ratings; qualitative description of significance; trends and issues identified; and findings according to groups of informants under each of the national and international partner assessments.

### Summary and recommendations

Provide a summary of data and an overview of the country situation for partner inclusion, participation, alignment and harmonization under each category for data collection and analysis: how effective were processes used, how did they contribute to the national response, gaps or weaknesses that need further attention, recommendations for improvements in partners' performance and/or in the methods used by the national AIDS coordinating authority to ensure inclusion, participation, harmonization and alignment in relation to the national AIDS response, etc.

### Follow-up and action items

Describe next steps to follow-up on the findings from CHAT: timebound, specific actions with responsibilities noted for follow-up.

### Annexes

- terms of reference for the CHAT and/or for the joint review
- terms of reference for consultants if any were hired
- full list of interviewed organizations and persons
- membership of CHAT working group
- possible: detailed analysis per area of assessment or per broad category of areas
- agreed follow-up process if a document was agreed upon before the exercise (otherwise it will be part of the recommendations)

## Section III:

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### CHAT Surveys

This section contains the survey instruments that will be used to gather information about the degree of harmonization and alignment of various stakeholders present. The surveys are based on areas of assessment with core questions and optional additional questions for specific groups. Each area of assessment has a description which will help the field researchers put the questions into context. There is also a model of a blank data collection sheet that can be used during interviews to record answers to each core question, and note the overall rating.

## Chapter 8:

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### Introduction to surveys

The national and international partners assessment components are designed to collect information from national and international partners (see definitions below) about their degree of participation, alignment and harmonization in the national AIDS response. This is **not** an assessment of the overall quality and scope of the national AIDS response. Eighteen areas of assessment (eight for national partners and 10 for international partners) fall within the following broad categories:

- national AIDS coordination authority and the national strategic framework
- monitoring and evaluation
- finances
- administration, support, coordination and communications.

Through qualitative interviewing, the research team will be able to assign a rating (“very poor”, “poor”, “good”, “very good”) to each area of assessment, and then proceed to analyse the ratings and responses within and across categories. For both national and international partners there are a set of core questions that are the minimum necessary to assign a rating for each area of assessment; however, additional questions may be added, including the supplemental questions that are suggested in the following chapters. Each core question can be answered “yes” or “no”, but additional detailed information should be gathered based on the answer. See Section II of this guide for complete details on the methodology for collecting and analysing data using these surveys.

#### *How to use this section*

In Chapter 9 you will find a detailed description for each of the areas of assessment, and the core questions and supplemental questions designed to lead to an overall assessment rating of that area. Annex 1 contains a blank data collection form which can be photocopied and used to record responses from the interviews. When conducting interviews, the team might want to bring this guide with them in order to refer to the question descriptions. It is recommended that the team of consultants prepare by discussing potential interpretations of the questions, responses that might be received, and how they might need to prompt or provide additional information to the respondent. The team should also make revisions to the questions so that they match the local context (i.e. if there is no national AIDS coordinating authority, or if it has a different name, then adjust the questions for area of assessment 1 accordingly). They should practise conducting interviews

in a role play situation, anticipating misunderstandings that might arise, and recording the answers in the sample data collection template in Annex 1 (or one developed locally). The CD-ROM that accompanies these guidelines includes an electronic version of these forms with a blank template covering all the questions which you can adapt to the local circumstances and preferences of the data collection team.

The four broad categories listed above are the same for both the national and international partners' assessments. The link between the broad categories and the specific areas of assessment were shown in Table 1, page 7. The two tables below show what the core questions are for each area of assessment starting with the national partners.

Table 4: Areas of assessment and core questions for national partners	
Areas of assessment	Core questions
A1. Extent of participation and alignment by national partners in the national AIDS strategic framework	1.1. Did your organization participate in the design and/or validation of the latest national strategic framework or equivalent document? 1.2. Does your organization have a programming strategy for its AIDS work (e.g. goals, targets, strategies and activities)? 1.3. Does your organization have its AIDS programming plan reviewed and validated by the national AIDS coordinating authority? 1.4. In your opinion, did all relevant national/international organizations participate in the design and/or validation of the latest national strategic framework or equivalent document? 1.5. In your opinion, are the AIDS programming plans and strategies of international partners aligned with national and/or subnational AIDS strategic plans?
A2. Extent of representation of national partners in the national AIDS coordinating authority or equivalent body	2.1. Is your organization represented in the national coordination authority at the national or subnational levels? 2.2. Does your organization participate in specific technical coordination mechanisms, thematic groups and/or working groups related to the national AIDS response (e.g. the country coordinating mechanism or technical working group under the national authority etc)?
A3. Extent to which national partners are using the national AIDS monitoring and evaluation framework and/or system	3.1. Does your organization have a monitoring and evaluation plan that describes how you are measuring the impact of your AIDS work (e.g. results achievement and progress towards key indicators)? 3.2. Does your organization participate in monitoring and evaluation technical or working groups?
A4. Extent of participation by national partners in the national joint HIV/AIDS programme review or equivalent process	4.1. Did your organization participate in the last joint national AIDS programme review (or equivalent process), where one exists?
A5. Extent to which national partners receive a fair portion of the national AIDS budget	5.1. Does your organization receive funding from the national AIDS budget (if one exists)? 5.2. In your opinion, does your organization receive a fair portion of the national AIDS budget?
A6. Extent of integration by national partners in decision-making and reporting about allocation of financial resources	6.1. Does your organization participate in decision-making about allocation of resources within the national AIDS budget? 6.2. Does your organization report regularly on actual versus planned expenditures for AIDS programming?

A7. Extent to which national partners participate in the design and assessment of the administrative systems for the national AIDS response	<p>7.1 Did your organization participate in the design or assessment of the administrative procedures for the national AIDS response?</p> <p>7.2 Is your organization asked to provide any duplicate reports for the national AIDS coordinating authority and international donors?</p>
A8. Extent of openness and transparency among national partners and with the national AIDS coordinating authority	<p>8.1A Is there an accurate and timely information flow between the secretariat of the national AIDS coordinating authority and your organization?</p> <p>8.1B Is there an accurate and timely information flow between your organization and other national partners?</p> <p>8.2A Is there transparency regarding sharing of budgetary and programming information between the national AIDS coordinating authority and your organization?</p> <p>8.2B Is there transparency regarding sharing of budgetary and programming information between your organization and other national partners?</p>
AO. (Other)	What are in your opinion the three main issues that need to be addressed to help ensure a more harmonized and inclusive national response?

**Table 5: Areas of assessment and core questions for international partners**

Areas of assessment	Core questions
B1. Extent of alignment between the AIDS strategies of international partners and national and/or subnational AIDS strategic frameworks	<p>1.1 Did your organization participate in the design and/or validation of the latest national AIDS strategic framework or equivalent document?</p> <p>1.2 Does your organization have a programming strategy on its AIDS work (e.g. goals, targets, plans, expenditures and activities)?</p> <p>1.3 Has your organization made changes in its programming strategies in order to effectively support the national AIDS strategic framework?</p> <p>1.4 Does your organization have its country AIDS programming documentation reviewed and validated by the national AIDS coordinating authority?</p> <p>1.5 In your opinion, did all relevant national/international organizations participate in the design and/or validation of the latest national strategic framework or equivalent document?</p> <p>1.6 Overall, do you feel that the AIDS programming plans and strategies of international partners are aligned with national and/or subnational AIDS strategic plans?</p>
B2. Extent to which international partners are supporting and cooperating with the national AIDS coordinating authority	<p>2.1 Is your organization directly or indirectly represented in the coordination authority at national or subnational levels?</p>
B3. Extent to which international partners are aligned with the national AIDS monitoring and evaluation framework and/or system	<p>3.1 Does your organization have a monitoring and evaluation plan and/or system?</p> <p>3.2 Does your organization rely on information obtained from the national AIDS monitoring and evaluation system (where one exists) for programmatic decision-making?</p> <p>3.3 Is your organization supporting the development of national AIDS monitoring and evaluation coordination mechanisms and technical capacities?</p>
B4. Extent of participation by international partners in the joint national AIDS programme review or equivalent process	<p>4.1 Does your organization support and/or participate in the joint national AIDS review (or equivalent process) where it exists?</p>
B5. Extent to which international partners have indicative multi-year commitments (i.e. more than three years) for the national AIDS response	<p>5.1 Does your organization have an indicative multi-year (3+ years) commitment to the national AIDS strategic framework?</p>

B6. Extent to which international partners support pooled funding arrangements for the national AIDS response	<p>6.1A. Is your organization involved in pooled funding arrangements for the national AIDS response?</p> <p>6.1B. Please indicate the total annual sum provided by your organization to the AIDS response, and the amount of this that goes into pooled funding.</p> <p>6.2. Does your organization provide funding to intermediary organizations or via funding modalities outside the current national AIDS budget (where one exists)?</p>
B7. Extent to which international partners are harmonizing their AIDS procurement mechanisms	7.1 Is your organization using national procurement policies/ procedures and interagency procurement coordination mechanisms (where they exist)?
B8. Extent to which international partners are building technical capacity and harmonizing their AIDS technical assistance strategies	<p>8.1 Is your organization strengthening AIDS technical and organizational capacity including that of government and civil society?</p> <p>8.2 Is your organization using the national technical assistance strategy (where it exists) as the basis for provision and procurement of any technical support?</p>
B9. Extent to which international partners are harmonizing administration, technical/ financial reports and human resource approaches with each other and in relation to the national AIDS response	<p>9.1 Is your organization harmonizing requirements for technical and financial reports?</p> <p>9.2 Does your organization try to strengthen the human resource base for the national AIDS response?</p> <p>9.3 How many AIDS-related missions were undertaken by your agency in the last 12 months (either from your headquarters or instigated from the country office)?</p>
B10. Extent of transparent, timely and accurate communications among international organizations and with all members of the national AIDS coordinating authority	<p>10.1A Is there an accurate and timely information flow between the national AIDS coordinating authority secretariat and your organization?</p> <p>10.1B Is there an accurate and timely information flow between your organization and other national partners?</p> <p>10.2A Is there transparency regarding sharing of budgetary and programming information between the national AIDS coordination authority secretariat and your organization?</p> <p>10.2B Is there transparency regarding sharing of budgetary and programming information between your organization and other national partners?</p>
BO. (Other)	What are in your opinion the three main issues that need to be addressed to help ensure a more harmonized and inclusive national HIV response?



## Chapter 9:

### Description of areas of assessment and core questions

Detailed descriptions of each area of assessment begin on the next page, along with the core questions that should be asked for each area, and optional supplementary questions. This chapter can serve as an interview guide to follow, but answers should be recorded on a different page.

You may use the electronic version provided to you on the CD-ROM that accompanies this guide to revise the questions to match the local context.

In addition to the questions listed from the next page onwards, the electronic version of each blank questionnaire includes one core question of a general nature to end the interview.

Core Question	AO Other	What are in your opinion the three main issues that need to be addressed to help ensure a more harmonized and inclusive national HIV response?
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Core Question	BO Other	What are in your opinion the three main issues that need to be addressed to help ensure a more harmonized and inclusive national HIV response?
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#### 9.1 Questions for national partners

Category: National AIDS Coordinating Authority and National Strategic Framework	Area of assessment	A1	Extent of participation and alignment by national partners in the national AIDS strategic framework
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#### Description

The active involvement of national partners in all stages of the planning process (design, planning, costing and assessment) is partially determined by the type of consultation strategy used (ranging from passive to empowering) and by the degree of commitment of the national government to inclusive and transparent public management practices. Particular care must be paid to providing opportunities and incentives for involvement and input into the national AIDS strategic plan by stakeholders, including those representing marginalized and stigmatized people in society (including women, people living with HIV, youth, minorities and those living on the margins of society). This can be a delicate process that takes considerable time to get right. Strategies used may vary widely from country to country depending on the political and social environment. The level of interest or engagement for national partner agencies may also vary according to their resources and capacities. The ideal situation is where there is a high level of inclusion and active participation in the strategic planning process, with strong dialogue around the national AIDS action plan to ensure that the priorities of national partners are included, and so that national partners fully “own” and

support the national strategy. National partners can ensure that the plans and programming strategies of their sectors, organizations or agencies are clearly linked to the national AIDS strategy—for example, by specifying which strategic outcomes or objectives in the national AIDS action plan are being supported through their specific activities. The national AIDS coordinating authority can request, during the participatory planning process, that certain national partners (including civil society) take responsibility for certain outcomes and objectives where they are best placed to do so. For example, some partners will already have established relationships with most-at-risk groups that are important to prevention, care or treatment activities.<sup>3</sup>

<b>Core Question</b>	<b>A1.1</b>	Did your organization participate in the design and/or validation of the latest national strategic framework or equivalent document?
<b>If YES</b>	✓	Please provide details on your level of participation in the design and/or validation/approval process. Were you satisfied with your level of participation? Were there specific ways in which participation or inclusion could have been enhanced or improved?
<b>If NO</b>	✗	Please elaborate on how your organization can contribute to future national strategic planning and/or validation processes.
<b>Core Question</b>	<b>A1.2</b>	Does your organization have a programming strategy for its AIDS work (e.g. goals, targets, strategies and activities)?
<b>If YES</b>	✓	Describe how the strategy of your organization is aligned with the national AIDS strategic framework or equivalent document.
<b>If NO</b>	✗	Describe how you intend to develop an organizational programming strategy in future that is derived from the national AIDS strategic plan or framework.
<b>Core Question</b>	<b>A1.3</b>	Does your organization have its AIDS programming plan reviewed and validated by the national AIDS coordinating authority?
<b>If YES</b>	✓	Please provide details on how this was done and the type of feedback that was received. What changes (if any) did you make as a result of the feedback received?
<b>If NO</b>	✗	Does your organization have plans to ensure that the national AIDS coordinating authority reviews and validates your strategies? Why or why not?
<b>Core Question</b>	<b>A1.4</b>	In your opinion, did all relevant national/international organizations participate in the design and/or validation of the latest national strategic framework or equivalent document?
<b>If YES</b>	✓	Please provide details on the level of participation. Were you satisfied with other organizations' levels of participation? Were there specific ways in which participation or inclusion could have been enhanced or improved?
<b>If NO</b>	✗	Please elaborate on who you think should participate in the future.

<sup>3</sup> The AIDS Strategic Self-Assessment Tool (SAT) developed in early 2006 by the AIDS Strategy and Action Plan (ASAP) team (coordinated by the World Bank on behalf of UNAIDS) is a concrete technical initiative to improve the quality of national strategic planning so that all partners and stakeholders are involved in the process.

<b>Core Question</b>	<b>A1.5</b>	In your opinion, are the AIDS programming plans and strategies of international partners aligned with national and/or subnational AIDS strategic plans?
<b>If YES</b>	✓	Please give examples of strengths and weaknesses.
<b>If NO</b>	✗	Please indicate areas where you think better alignment is most critical.

### *General, open-ended question*

- Any other issues or topics regarding participation in the national AIDS strategic planning process that you would like to comment on?

### *Optional supplementary questions*

- What do you think should be the role of international partners or donor organizations in the planning of the national AIDS framework? Are they too involved or not involved enough? What could be done to improve their role or participation?
- How important do you think it is that your own organizational programming plans are linked to the national AIDS strategic framework in some way? How difficult or easy do you think it is to create this type of linkage?

### *For civil society organizations*

- What could be done to increase the participation of civil society groups in the national strategic planning process? What could be done at the subnational level to increase the input into subnational plans and strategies?
- What is your overall perception of the national strategic planning process?
- What is the quality of the current national strategic framework?
- Was the planning process handled in a sensitive and inclusive way?
- What improvements could be made to the coordination process in order to increase civil society involvement (especially from low-profile groups)?

### *For national AIDS coordinating authority secretariat staff*

- What are the main strengths and weaknesses of the current national strategic framework? How could it be improved to make it clearer, more understandable etc? (This question could also be used in adapted form with subnational coordination secretariats.)
- What can the national AIDS authority do to strengthen the national strategic planning process? (This question could also be used in adapted form with subnational coordination secretariats.)

### *For government staff*

- Do you think that government agencies or departments have been adequately involved or consulted in the planning and approval process for the national or subnational strategic frameworks?
- What improvements could be made in the level or scope of representation (at either the national or subnational levels)?

Category: National AIDS Coordinating Authority and National Strategic Framework	Area of assessment	A2	Extent of representation for national partners in the national AIDS coordinating authority or equivalent body
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## Description

An effective national AIDS response actively involves all key national partners with a special emphasis on including civil society organizations that represent affected groups. Strong, multi-stakeholder involvement in the national AIDS coordinating authority (NACA) is an essential aspect of such an inclusive approach. Many countries are still in the process of building capacity of the NACA (and its secretariat) for strong management and leadership; therefore the extent to which it is able to facilitate full participation by national partners may vary widely from country to country. Over time, it is hoped that national partners will take full ownership of a strong central coordination mechanism and agree to undertake new forms of cooperation with other national stakeholders that further strengthen these structures by encouraging even broader participation. An important consideration for the national AIDS response is the need for ongoing participatory coordination mechanisms functioning as sub-committees or working groups of the NACA, to provide specific input into ongoing policy, technical and programming discussions. The composition of these mechanisms may vary widely, but they are typically task teams, partnership forums or sub-committees that meet on a regular basis to provide technical or political guidance, convened or chaired by the NACA secretariat. Participation and active engagement of national partners in these bodies ensures accountability, improves policy dialogue and enables quick solutions to be found for such problems as procurement bottlenecks, duplication/overlap of monitoring and evaluation systems and technical challenges. Active and consistent involvement of national partners (including civil society) is an indication of the degree to which there is good commitment to the national AIDS response as well as a strong enabling environment for multisectoral cooperation.

Core Question	A2.1	Is your organization represented in the national AIDS coordination authority at the national or subnational levels?
If YES	✓	Provide details on your level or type of representation and participation; for example: How many meetings has your organization been invited to in the past 12 months? How many meetings have you attended in the past 12 months?
If NO	✗	Provide some details on how your organization could contribute to the national coordination authority (either directly or indirectly). Describe the barriers for your organization's effective participation in coordination efforts.
Core Question	A2.2	Does your organization participate in specific technical coordination mechanisms, thematic groups and/or working groups related to the national AIDS response (e.g. country coordinating mechanism or technical working groups under the national authority etc)?
If YES	✓	Provide details on your level of participation.
If NO	✗	What can be done to improve participation in these specific mechanisms?

### General, open-ended question

Any other issues or topics regarding participation in the national AIDS coordinating authority that you would like to comment on?

### Optional supplementary questions

- What do you think are the strengths and weaknesses of international partners or donor organizations in the coordination of the national AIDS response? What could be done to improve their role or participation? Are international partners doing enough to build the capacity of the national AIDS coordinating authority? If not, what more could be done?

#### *For civil society organizations*

- Do you think that a representative range of civil society organizations are involved in the national AIDS coordinating authority? Why or why not? What could be done overall to improve representation and participation from civil society groups? What missing or marginalized groups need to have their level of participation improved? (Note: A variation on this question could be posed at the subnational level if desired.)
- (Umbrella Groups): What are the specific challenges facing civil society organization umbrella groups? What do you think needs to be done to improve the ability of national civil society umbrella groups to adequately represent their constituencies or members at the national level of AIDS coordination? Overall, how could the quality and scope of participation for civil society groups be improved? What missing or marginalized groups should be included?

#### *For national AIDS coordinating authority secretariat staff*

- What can the national AIDS coordinating authority secretariat do to strengthen representation and inclusion among national partners at the level of the national AIDS coordinating authority? (This question could also be posed in adapted form to subnational coordination secretariats.)

#### *For government staff*

- Do you think that government agencies or departments are adequately represented in the national or subnational AIDS coordinating authorities? What improvements could be made in the level or scope of representation (at either the national or subnational levels)?

<p><i>Category:</i> Monitoring and Evaluation</p>	<p><b>Area of assessment</b></p>	<p><b>A3</b></p>	<p>Extent to which national partners are using the national AIDS monitoring and evaluation framework and/or system</p>
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## Description

Many countries have invested considerable time and energy in building monitoring and evaluation capacity for the national AIDS response and have requested technical expertise from external donors and international partners to help establish coherent and coordinated national monitoring and evaluation systems. One of the key challenges at the country level is to construct a coherent and unified perform-

ance measurement system that links data from many different sources and levels to the overall results framework for the national AIDS response. Furthermore, there is tremendous pressure internationally and nationally for production of accurate data related to all facets of the national AIDS response, ranging from accurately measuring HIV prevalence to ongoing monitoring of programme and service delivery activities at all levels. Ideally, all national partners need to be integrated and aligned with the national monitoring and evaluation system, through participation and input for the design of indicators and tools, collection of data for relevant indicators and forwarding of data at regular intervals for national-level compilation and analysis. It is important that national partners are supportive of a clear multisectoral strategy for monitoring and evaluation and agreement on the key indicators to use. To date, key national groups including civil society have not always been fully involved in these activities. The challenge is to fully integrate civil society at all stages, and build their capacity to take a strong and meaningful role in the process. Information obtained from a functional national monitoring and evaluation system can also be used by national partners to further adjust and improve their own programming strategies.

<b>Core Question</b>	<b>A3.1</b>	Does your organization have a monitoring and evaluation plan that describes how you are measuring the impact of your AIDS work (e.g. results achievement and progress towards key indicators)?
<b>If YES</b>	✓	How is the plan of your organization aligned with or derived from the national monitoring and evaluation framework (where one exists)? For example, are you using the national indicators to measure progress towards targets or results? Are you feeding required data from your programming into the national monitoring and evaluation system? Why or why not? What concrete changes in your monitoring and evaluation strategies can be made to effectively support the single national AIDS monitoring and evaluation framework?
<b>If NO</b>	✗	Do you intend to develop an organizational monitoring and evaluation plan in the future that is linked to the national AIDS monitoring and evaluation framework? What concrete changes in your monitoring and evaluation strategies can be made to effectively support the single national AIDS monitoring and evaluation framework?
<b>Core Question</b>	<b>A3.2</b>	Does your organization participate in monitoring and evaluation technical or working groups?
<b>If YES</b>	✓	Please provide details about your participation. Were you involved in the design of the national monitoring and evaluation framework and elaboration of national indicators? How does your participation in monitoring and evaluation working groups help you strengthen your integration with the national monitoring and evaluation framework or system?
<b>If NO</b>	✗	Please suggest ways in which your participation in monitoring and evaluation working groups could be improved.

### General, open-ended question

- Any other issues or topics regarding participation in the national AIDS monitoring and evaluation system that you would like to comment on?

### Optional supplementary questions

- Are you familiar with the national monitoring and evaluation framework or system? What do you think of the quality of the monitoring and evaluation framework or system? Is it clear and easy to understand?

- Do you know of specific instances where monitoring and evaluation work is being duplicated?
- What is the role of international partners or donor organizations in the monitoring and evaluation of the national response? How could their role or involvement be improved?

*For civil society organizations*

- Are there opportunities to feed data from civil society monitoring into the national monitoring and evaluation system? How could the role of civil society in the national monitoring and evaluation system be improved? What specific capacity in monitoring and evaluation does civil society require?

*For national AIDS coordinating authority secretariat staff*

- What can the secretariat of the national AIDS authority do to strengthen the national monitoring and evaluation framework or system? (This question could also be used in adapted form with subnational coordination secretariats)

*For government staff*

- Do you think that government agencies or departments have been adequately involved in the national monitoring and evaluation system? What improvements could be made (at either the national or subnational levels)?

<i>Category: Monitoring and Evaluation</i>	<b>Area of assessment</b>	<b>A4</b>	Extent of participation by national partners in the joint national AIDS programme review or equivalent process
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## Description

Most countries have a national review process that takes place annually or at longer intervals, where all internal and external stakeholders jointly analyse the progress made towards the key targets established in the national AIDS strategic plan. This process can involve consultation, field data collection, workshops to discuss findings and critical analysis of key gaps and recommendations with a view to improve future performance. While the process and timing may vary widely from country to country, the involvement of national partners including a broad cross-section of civil society organizations is a common requirement. Ideally both government and civil society partners need to participate together and in equal partnership on joint country review coordination teams, sub-committees and/or field review teams, as well as provide essential information about progress on key objectives from their own perspectives. Any national review process needs to identify key gaps or weaknesses in progress towards the national action plan. As well, information from the review process needs to be useful for national partners in terms of adjusting their approaches and programming strategies to better support the national AIDS response.

<b>Core Question</b>	<b>A4.1</b>	Did your organization participate in the last joint national AIDS programme review (or equivalent process), where one exists?
<b>If YES</b>	✓	Please provide details on your level of participation in the joint review process. Were you satisfied with your level of participation? How could it have been improved or enhanced?
<b>If NO</b>	✗	How can your organization be involved in the future in the national joint review (or equivalent process)?

### General, open-ended question

- Any other issues or topics regarding the joint national AIDS programme review process that you would like to comment on?

### Optional supplementary questions

- Are you familiar with the joint national review process? What do you think of the quality of the joint national review process? Is it clear and easy to understand?
- What is the role of international partners or donor organizations in the national programme review? How could their role or involvement be improved?

#### *For civil society organizations*

- How could the role of civil society in the national programme review be improved? What specific capacity does civil society need to participate effectively in the national programme review?

#### *For national AIDS coordinating authority secretariat staff*

- What can the national AIDS coordinating authority secretariat do to strengthen the national programme review process? (This question could also be used in adapted form with subnational coordination secretariats.)

#### *For government staff*

- Do you think that government agencies or departments have been adequately involved in the national programme review process? What improvements could be made (at either the national or subnational levels)?



Category: Finances	Area of assessment	<b>A5</b>	Extent to which national partners receive a fair portion of the national AIDS budget
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## Description

The participatory strategic planning and budgeting exercise should cost all key activities and outputs related to the national AIDS response and indicate clearly which national partners are responsible for implementing them and with what amount of government budget resources. In close consultation with major national partners, including civil society representatives, the national AIDS coordinating authority needs to ensure that an equitable proportion of national AIDS resources is allocated to different categories of partners including civil society. Then they must work with the government finance department to ensure that funds allocated for implementing each component of the national action plan are disbursed to implementing partners in an efficient and timely manner. Disbursement decisions need to be based on participatory planning processes that get input from key partners about how much activities are likely to cost and whether the budget assigned is adequate to meet the targets. The national AIDS coordinating authority can also work with national partners to negotiate cost-sharing arrangements whereby some independent programming funds are counted as part of the unified national AIDS budget (even though they are sourced from outside donors and managed independently by each organization). While in many countries this process is still under development, the aim is to ensure that all national partner agencies, both government and civil society, receive a sufficient amount of funds (according to allocations set in the unified national budget) to undertake what they plan to do and that the funds are provided to partners in time for them to implement their assigned activities under the national AIDS strategic plan.

<b>Core Question</b>	<b>A5.1</b>	Does your organization receive funding from the national AIDS budget (if one exists)?
<b>If YES</b>	✓	Please provide estimated amount of resources received for the past programming year from the national AIDS budget. What rough proportion of your overall programming expenditures on AIDS does this represent (compared to what you receive directly from external donors or other funding sources)? <i>NOTE: Some of this information can also be obtained outside the interview via document or desk review.</i>
<b>If NO</b>	✗	Please provide suggestions on what you think can be done to allow you to receive more funds from the national AIDS budget.
<b>Core Question</b>	<b>A5.2</b>	In your opinion, does your organization receive a fair portion of the national AIDS budget?
<b>If YES</b>	✓	Provide details on why you think this is a fair allocation (based on your organization's role, membership, influence, effectiveness, profile, etc.).
<b>If NO</b>	✗	Please elaborate on what could be done to ensure that your organization would receive a fairer portion of national AIDS resources.

### General, open-ended questions

- What do you perceive as the major strengths and weaknesses regarding the organization and allocation of finances under the national AIDS budget (where one exists)? How could this situation be improved?

### Optional supplementary questions

- Does your organization receive funding from other organizations outside the national AIDS budget? Has your organization participated in the elaboration of programmes or projects to be funded by international donors outside the national AIDS budget? Is there a mechanism for reporting these resources to the national AIDS coordinating authority in order to facilitate oversight of the total AIDS budget?
- Does your organization provide funding to other organizations? If yes, is there a mechanism for reporting these resources to the national AIDS coordinating authority so that they are integrated within the national AIDS budget? If no, provide suggestions on how to capture information on resource allocation and use.
- Do you think that a unified national AIDS budget is a good idea? Why or why not? What would be advantages and disadvantages of this, from your perspective?
- Were the funds received from the national AIDS budget sufficient to cover the planned needs for the past programming year? Were the funds allocated made available in time to meet planned needs?

#### *For civil society organizations*

- Where do pooled funding arrangements (also known as basket funds or cost-sharing) exist to support the national budget?

Category: <i>Finances</i>	Area of assessment	A6	Extent of integration by national partners in decision-making and reporting about allocation of financial resources
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## Description

Where there is a unified planning and budgeting process for the national AIDS response that is overseen by the national AIDS coordinating authority, there is a need to have broad-based input into how national AIDS budgets are designed, including how resources are allocated. Related to this, there is also a need to link national AIDS strategic plans and budgets to Poverty Reduction Strategy Papers (where they exist) and to national development plans and budgets such as Medium-Term Expenditure Frameworks so that there is clear justification for the resources that are being allocated to the national AIDS response. Ideally, the unified multisectoral AIDS budget should be developed, reviewed and analysed by different national partners so that they can be part of the decision-making process on how resources are spent, provide recommendations on how the budget is organized, and ensure that adequate funds are provided to different stakeholders to meet specific targets for which they have implementation responsibility. The extent to which agencies are consulted can help improve their level of participation and engagement, and ensure

increased transparency and accountability for the government’s budgetary processes. Their input can help identify gaps that need to be addressed to strengthen equitable national resource distribution and enhance widespread national ownership of the AIDS strategic plan and budget.

Every national partner budget, which outlines the specific resources dedicated to AIDS programmes or service delivery. These resources may be obtained from the organization’s own funding sources or channelled via the central AIDS budget. At the end of each programming year, for purposes of analysing the scope and reach of the national AIDS response, national partners should ideally provide summary information to the national AIDS coordinating authority regarding how much was actually spent (in comparison to what was planned) and how these resources were used in support of key targets and results outlined in the national AIDS strategic plan. This is helpful for analysing the actual amount of the resources used for AIDS within countries (in relation to the amount planned both within and outside the national budget), as well as assessing whether the resources allocated were sufficient to achieve planned results. This also increases overall transparency of information-sharing among national stakeholders for the AIDS response.

<b>Core Question</b>	<b>A6.1</b>	Does your organization participate in decision-making about allocation of resources within the national AIDS budget?
<b>If YES</b>	✓	Please provide details about how you participated. How did this strengthen your participation in the national AIDS response?
<b>If NO</b>	✗	Please elaborate on how your participation in resource allocation decisions could be improved.
<b>Core Question</b>	<b>A6.2</b>	Does your organization report regularly on actual versus planned expenditures for AIDS programming?
<b>If YES</b>	✓	Please describe to whom you report and how often.
<b>If NO</b>	✗	Describe how financial reporting could be improved, especially to the national AIDS coordinating authority. To what extent is your financial reporting linked to benchmarks and timelines in the national AIDS strategic plan?

### General, open-ended question

- What do you perceive as the greatest challenges regarding financial allocations, decision-making and reporting or anything else that you would like to comment on?

### Optional supplementary questions

- Has your organization prepared a budget to submit to government for funding from the national AIDS budget (if one exists)? Has your own organizational budget for AIDS work been taken into account in development of the national AIDS budget?

#### *For civil society organizations*

- Do you think that civil society members in general have enough opportunities to participate in decision-making about resource allocation at different levels? Which groups (if any) are currently excluded from this process?

*For national AIDS coordinating authority secretariat staff*

- What can the NACA secretariat do to assist in improved coordination, harmonization and information-sharing on financial decision-making and allocations? How can the national AIDS budget process be strengthened?

*For government staff*



- Do you think that government agencies are sufficiently consulted and involved in making decisions about resource allocation? Why or why not? How could this be improved?

<b>Category:</b> <i>Administration,  Support,  Coordination and  Communications</i>	<b>Area of  assessment</b>	<b>A7</b>	<b>Extent to which national partners  participate in the design and  assessment of the administrative  systems for the national AIDS  response</b>
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## Description

A common challenge faced by many national AIDS responses is the need to strengthen country-level public administration and coordination capacities. Introduction of improved management and coordination systems is at different stages in different countries, depending on the specific social, institutional, political and economic context, and the status of public sector reform. However, for these systems to work they must be recognized and supported by national partners including a wide range of civil society organizations. National partners need:

- to be consulted about the design of the processes used by the national AIDS coordinating authority (usually via its government-run secretariat), for planning, administration and assessment;
- opportunities to provide recommendations about revising and improving the transparency, accuracy and accountability of the systems used for planning, monitoring and reporting; and
- opportunities to suggest improved management and coordination approaches to the national AIDS coordinating authority that will better enable and support their work.

<b>Core  Question</b>	<b>A7.1</b>	<b>Did your organization participate in the design or assessment of the administrative procedures for the national AIDS response?</b>
<b>If YES</b>		Please provide details on your level of participation. How well-informed are you about the administrative requirements for grant applications, workplans, reports, financial data etc? How could these systems be improved, from your perspective?
<b>If NO</b>		Please elaborate on how your organization could contribute to the design and assessment of the administrative procedures or systems used by the national AIDS coordinating authority secretariat, or other coordinating and funding bodies.

<b>Core Question</b>	<b>A7.2</b>	Is your organization asked to provide any duplicate reports for the national AIDS coordinating authority and international donors?
<b>If YES</b>	✓	Please provide details/examples regarding the number and type of reports that you produce for different funders.
<b>If NO</b>	✗	Please elaborate on how reporting procedures (financial and narrative) could be harmonized and streamlined.

### General, open-ended question

- Any other issues or topics regarding the administrative or reporting systems used for the national AIDS response that you would like to comment on?

### Optional supplementary questions

- In your opinion, do international partners respect the need to harmonize administrative and reporting requirements? Are there specific examples of overlap, duplication or on-demand reporting requirements? To what extent do international partners consolidate their oversight or monitoring requirements? What more could be done to improve this?
- In your opinion, what more can be done by the national AIDS coordinating authority secretariat to improve and harmonize administrative requirements including funding applications, reporting and other oversight activities?

#### *For civil society organizations*

- Are there clear guidelines for preparation of proposals, funding applications, plans, documents and reports by civil society groups for the national AIDS response? Are these systems clearly understood by civil society? What more could be done to ensure that the administrative demands on civil society are reasonable and realistic?

#### *For national AIDS coordinating authority secretariat staff*

- What can the NACA secretariat do to improve the harmonization or streamlining of various administrative procedures for the national AIDS response? For example, what can be done to reduce the number of international partner “stand-alone” missions as well as on-demand or parallel reporting requirements?

<p><i>Category: Administration, Support, Coordination and Communications</i></p>	<p><b>Area of assessment</b></p>	<p><b>A8</b></p>	<p>Extent of openness and transparency among national partners and with the national AIDS coordinating authority</p>
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## Description

The national AIDS response requires a strong communications plan in order to support transparent and timely information sharing at all levels. Information about the AIDS situation in the country needs to be shared widely on a continuing basis in different formats (print, electronic and other media) to provide a better basis for evidence-based activities and services. The national AIDS coordinating authority (NACA) needs to be supported by national partners in developing any national information protocols that assist in improving accuracy and timeliness of information flows. At the same time, national partners can play a role in providing advice on how to enhance national communication processes, as well as in keeping themselves up-to-date on current information and in developing their own communications plans that are fully linked to the national system. Civil society umbrella groups can play an important role here by collecting and consolidating information that arises from community-level service delivery, for example, and ensuring that it is shared regularly at the national and subnational levels with government agencies through their active membership in the NACA. Transparency is largely dependent on the degree to which important programming and budgetary information is widely available to and from national partners, including civil society (see area of assessment A6). In some countries, there are still challenges regarding transparency and accountability among all members of the NACA and other key national stakeholders, and in ensuring that all national partners are kept well informed about crucial budgetary, policy and strategic information from the national and international levels that may affect their work. This goes beyond simple communications processes to ensuring that there is a strong commitment among all national stakeholders towards maintaining inclusive and accountable institutional practices. Not only does the NACA need to be open, but it is incumbent on national partners to ensure transparency and accountability in their own programming approaches without compromising their autonomy. In the case of civil society, it is important to keep the NACA informed regarding key programming directions or specialized budgetary allocations received from international sources that may have implications for the national AIDS response. It is also essential for all national partners to be transparent and accountable towards key constituencies or beneficiaries for the national AIDS response at the community level.

<p><b>Core Question</b></p>	<p><b>A8.1A</b></p>	<p>Is there an accurate and timely information flow between the NACA secretariat and your organization?</p>
<p><b>If YES</b></p>	<p>✓</p>	<p>Please provide details on how well the information flow works. Please describe whether you receive enough information and if it arrives in time to assist your work.</p>
<p><b>If NO</b></p>	<p>✗</p>	<p>Please elaborate on how accuracy and timeliness of information sharing could be improved.</p>

<b>Core Question</b>	<b>A8.1B</b>	Is there an accurate and timely information flow between your organization and other national partners?
<b>If YES</b>	✓	Please provide details on how well the information flow works. Please describe whether you receive enough information and if it arrives in time to assist your work. How does your organization normally share information with others?
<b>If NO</b>	✗	Please elaborate on how accuracy and timeliness of information sharing could be improved.
<b>Core Question</b>	<b>A8.2A</b>	Is there transparency regarding sharing of budgetary and programming information between the national AIDS coordinating authority and your organization?
<b>If YES</b>	✓	Please provide details about the level of transparency in information sharing. Please describe whether you receive enough up-to-date and detailed information to assist in decision-making and planning.
<b>If NO</b>	✗	Please elaborate on how transparency can be improved. What more can be done to keep everyone in the national AIDS response well-informed?
<b>Core Question</b>	<b>A8.2B</b>	Is there transparency regarding sharing of budgetary and programming information between your organization and other national partners?
<b>If YES</b>	✓	Please provide details about the level of transparency in information sharing. Please describe whether you receive enough up-to-date and detailed information to assist in decision-making and planning.
<b>If NO</b>	✗	Please elaborate on how transparency can be improved. What more can be done to keep everyone in the national AIDS response well-informed?

### General, open-ended question

- Any other issues or topics regarding openness and transparency of information flows that you would like to comment on?

### Optional supplementary questions

- What more could be done by the national AIDS coordinating authority secretariat to coordinate information flows and ensure transparency?
- Are there any specific challenges with international partners or large donor organizations in terms of information sharing and transparency? Are there any specific examples where international partners have not shared important programming or budgetary information with the national AIDS coordinating authority or with national partners?

#### *For civil society organizations*

- What more could be done to ensure that all key civil society groups (at different levels) receive accurate and timely information about the national AIDS response? What are the main barriers and bottlenecks in information flow, particularly for marginalized groups?

#### *For national AIDS coordinating authority secretariat staff*

- What more could the national AIDS coordinating authority secretariat do to improve information flows among national and international partners? Is there an AIDS communication plan or information-sharing protocol in place? If not, should one be developed? What capacities or processes are needed to improve information sharing?

## 9.2 Questions for international partners

<p><i>Category:</i> National AIDS Coordinating Authority and National Strategic Framework</p>	<p><b>Area of assessment</b></p>	<p><b>B1</b></p>	<p>Extent of openness and transparency among national partners and with the national AIDS coordinating authority</p>
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### Description

The “Three Ones” principles call for all international (and national) partners to align their work with an agreed national strategic framework for AIDS. This includes recognizing the country’s own programming and budgetary cycle, and carefully harmonizing international partner planning and disbursement processes to this cycle. International partners obviously need to support implementation of the national strategic framework, and in some cases international partners are closely involved in its development. If the programming strategies of international partners are not aligned with the national strategic plan, or if international partners fund programming initiatives outside the national AIDS strategic plan there is a risk that they will contradict or undermine its efficacy, and divert resources away from national priorities. Also, there can be extensive duplication or overlap of investments by international partners in certain key areas. International partners can ensure that their plans and programming strategies are explicitly linked to the national AIDS strategy, for example, by specifying clearly which strategic outcomes or objectives in the national AIDS action plan are being supported through their programming or other service delivery activities. They can also actively adjust or adapt their own programming approaches to fully support the national AIDS strategic framework, which may include phasing out or changing the strategic direction of some programming initiatives that are not clearly linked or cutting out activities where there is extensive duplication between different agencies.

While capacities vary widely, national AIDS coordinating authorities need to be given the opportunity to review and comment on the documentation that international partners produce to guide their in-country programming (whether it be programme frameworks, project documents, country plans and/or programming strategies) to ensure they are closely aligned with the country’s own strategic plan and framework. Likewise, it is incumbent on international partners to ensure that any relevant programming documents or plans are shared with and reviewed by the NACA so that there is complete cohesion and transparency regarding their aims and strategies. If the NACA reviews and validates the plans produced by international partners, it can raise strategic questions and suggest modifications that better reflect the country’s own priorities.

<p><b>Core Question</b></p>	<p><b>B1.1</b></p>	<p>Did your organization participate in the design and/or validation of the latest national AIDS strategic framework or equivalent document?</p>
<p><b>If YES</b></p>	<p>✓</p>	<p>Please provide details on your level of participation in the design and/or validation/approval process. Were you satisfied with your level of participation? Were there specific ways in which participation or inclusion could have been enhanced or improved?</p>
<p><b>If NO</b></p>	<p>✗</p>	<p>Please elaborate on how your organization can contribute to future national strategic planning and/or validation processes.</p>



<b>Core Question</b>	<b>B1.2</b>	Does your organization have a programming strategy on its AIDS work (e.g. goals, targets, plans, expenditures and activities)?
<b>If YES</b>	✓	Describe how the strategy of your organization is aligned with the national AIDS strategic framework or equivalent document.
<b>If NO</b>	✗	Describe how you intend to develop an organizational programming strategy in future that is derived from the national AIDS strategic framework.
<b>Core Question</b>	<b>B1.3</b>	Has your organization made changes in its programming strategies in order to effectively support the national AIDS strategic framework?
<b>If YES</b>	✓	Please provide details on the types of changes you have made. How have you adapted your funding allocations, targets and areas of work to ensure strongest support for the national strategic framework?
<b>If NO</b>	✗	Please provide information on how your organization could make changes to better align with the national framework.
<b>Core Question</b>	<b>B1.4</b>	Does your organization have its country AIDS programming documentation reviewed and validated by the national AIDS coordinating authority?
<b>If YES</b>	✓	Please provide details on how this was done and the type of feedback that was received. What changes (if any) did you make as a result of the feedback received?
<b>If NO</b>	✗	Does your agency have plans to ensure that the national AIDS coordinating authority reviews and validates your strategies? Why or why not?
<b>Core Question</b>	<b>B1.5</b>	In your opinion, did all relevant national/international organizations participate in the design and/or validation of the latest national strategic framework or equivalent document?
<b>If YES</b>	✓	Please provide details on the level of participation. Were you satisfied with other organizations' levels of participation? Were there specific ways in which participation or inclusion could have been enhanced or improved?
<b>If NO</b>	✗	Please elaborate on who you think should participate/be included in the future.
<b>Core Question</b>	<b>B1.6</b>	Overall, do you feel that the AIDS programming plans and strategies of international partners are aligned with national and/or subnational AIDS strategic plans?
<b>If YES</b>	✓	Please give examples of strengths and weaknesses.
<b>If NO</b>	✗	Please indicate areas where you think better alignment is most critical.

### General, open-ended questions

- What do you perceive as the greatest successes and challenges regarding alignment of international partner strategies with the national coordinating authority and/or the national strategic framework? Anything else that you would like to comment on?

### Optional supplementary questions

- What is the status of your alignment with subnational strategic frameworks or plans?
- How is your organization ensuring that any funding arrangements are aligned under this framework? What are the main challenges with doing this, from your perspective?

#### *For multilaterals*

- What are the main issues regarding alignment from the multilateral perspective? What specific initiatives are being taken to ensure that alignment takes place (e.g. UN consolidated workplans at country level, UN coordination groups etc)?

#### *For bilaterals*

- What are the main issues regarding alignment from the bilateral perspective? What policies does your organization have that enable alignment? What are the specific restrictions (if any) facing your organization due to your government's policies or approaches to alignment?

#### *For international nongovernmental organizations*

- What degree of autonomy does your organization have in aligning with the national strategic framework? Are there any restrictions to alignment placed on it by its parent organization or by its donors?

#### *For the Global Fund (CCM Members)*

- How is the country coordinating mechanism functioning to ensure alignment with the national strategic framework?

<p><i>Category:</i> National AIDS Coordinating Authority and National Strategic Framework</p>	<p><b>Area of assessment</b></p>	<p><b>B2</b></p>	<p>Extent to which international partners are supporting and cooperating with the national AIDS coordinating authority</p>
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## Description

International partners can help ensure effective, coordinated and collegial networking and representation among themselves and with the national AIDS coordinating authority through vigorous and consistent support to national coordination. For example, international partners should participate in national partnership forums (where they exist) and they can help support AIDS technical or working groups to function effectively and efficiently through: regular attendance, consistent representation, assistance in preparation of clear committee plans and action strategies (including budgets), financial support, provision of secretariat functions, as well as by ensuring that the group dynamics are democratic and inclusive. While the exact methods may vary, support for national coordination mechanisms is also based on the need for inclusive policy dialogue and regular opportunities to share policy analysis between international partners and national stakeholders that affects the AIDS response. International partners need to coordinate among themselves to provide harmonized support for national AIDS coordination and policy dialogue mechanisms and find strategies to avoid redundancy and overlap between committees, possibly via delegated cooperation agreements.

<b>Core Question</b>	<b>B2.1</b>	Is your organization directly or indirectly represented in the coordination authority at national or subnational levels?
<b>If YES</b>	✓	Provide details on your level of representation.
<b>If NO</b>	✗	Please provide some details on how your organization can contribute to the coordination efforts.

**General, open-ended questions**

- What do you perceive as the greatest successes and challenges regarding support for and cooperation with the national coordinating authority? Anything else that you would like to comment on?

**Optional supplementary questions**

- How is your organization supporting capacity-building for the national AIDS coordinating authority so that they can review and validate the programming plans of international partners? How are you helping to enhance their leadership, ownership and control over the national response?
- What is being done to assure long-term sustainability of the systems and processes for the national AIDS response?

<i>Category: Monitoring and Evaluation</i>	<b>Area of assessment</b>	<b>B3</b>	Extent to which international partners are aligned with the national AIDS monitoring and evaluation framework and/or system
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**Description**

The national AIDS coordinating authority is the body with ultimate responsibility for coordinating the national monitoring and evaluation system, but it may require a gradual process of skill-building, logistical support and technical inputs for this to occur. Advice may be needed to create effective monitoring and evaluation operational plans and enable strong working relationships to be established. For example, in many countries international partners provide continuing support through involvement in a monitoring and evaluation technical working group or similar initiatives to strengthen national monitoring and evaluation capacity. These partner coordination and engagement mechanisms are useful if they have clear terms of reference, costed plans for the group’s activities and annual assessments of the areas where joint collaboration has taken place. As well, it is important for international partners to participate consistently and diligently in these types of coordination mechanisms, so that the full benefits of cooperation and capacity-building can be achieved.

Many countries have invested considerable time and energy in building monitoring and evaluation capacity for the national AIDS response and have requested technical expertise from external donors and interna-

tional partners to help establish unified national monitoring and evaluation systems. Information obtained from national AIDS monitoring and evaluation systems should be easily usable at all levels to assist in decision-making—both for national and international partners. If the information available from the monitoring and evaluation system is only used to respond to external reporting demands (such as UNGASS) and not for national programmatic decision-making—and/or if international partners continue to use their own parallel monitoring and evaluation systems—then key opportunities can be lost for improving overall AIDS programme performance. For example, data regarding key surveillance, service delivery or coverage indicators can help identify successes and gaps in the national AIDS response and suggest concrete follow-up actions to be taken. International partners can demonstrate the effectiveness of evidence-informed decision-making based on the national monitoring and evaluation system through consistently using the performance information to inform their own programming decisions, as well as encouraging the national AIDS coordinating authority to do the same. Ideally, all international partners need to be integrated with the national monitoring and evaluation framework and system by reducing or eliminating the number of requests for specialized monitoring and evaluation information outside the agreed-upon common framework, and by using the national system as their primary source for programme performance data. International partners should ideally phase out the use of parallel agency-specific monitoring and evaluation systems, as this can severely undermine the credibility and functioning of a unified, country-owned system.

<b>Core Question</b>	<b>B3.1</b>	Does your organization have a monitoring and evaluation plan and/or system?
<b>If YES</b>	✓	How is your organization's monitoring and evaluation plan/system aligned with the national AIDS framework or system?
<b>If NO</b>	✗	How does your organization measure the progress of your programming activities?
<b>Core Question</b>	<b>B3.2</b>	Does your organization rely on information obtained from the national AIDS monitoring and evaluation system (where one exists) for programmatic decision-making?
<b>If YES</b>	✓	Please describe what information you use. Are you able to obtain the data you need? Why or why not?
<b>If NO</b>	✗	Please indicate how your organization could improve its alignment with the national AIDS framework or system. What could be done to enhance alignment between your organization's monitoring and evaluation system and the national one?
<b>Core Question</b>	<b>B3.3</b>	Is your organization supporting the development of national AIDS monitoring and evaluation coordination mechanisms and technical capacities?
<b>If YES</b>	✓	Please describe how. What specific capacity-building inputs is your organization providing, if any and at what levels (e.g. training, human resources, management support, technical resources, etc.)?
<b>If NO</b>	✗	Please suggest ways that your organization could be part of the support or capacity-building network for the AIDS monitoring and evaluation framework or system.

### General, open-ended questions

- What do you perceive as the greatest successes and challenges regarding alignment of international partner monitoring and evaluation strategies with the national monitoring and evaluation framework or system? What more could be done to build capacity of the national AIDS coordinating authority, in your opinion? Anything else that you would like to comment on?

### Optional supplementary questions

- What is the status of your alignment with subnational monitoring and evaluation frameworks or systems?
- How is your organization functioning to ensure creation of and alignment with a national monitoring and evaluation framework or system? How are your own monitoring and reporting requirements being aligned under this framework? What are the main challenges with doing this, from your perspective?

#### *For multilaterals*

- What are the main issues regarding monitoring and evaluation alignment from the multilateral perspective? If your organization still has a parallel monitoring and evaluation system, what are the main strengths and weaknesses of this? What more could be done to strengthen national monitoring and evaluation capacity so that parallel systems are no longer needed?

#### *For bilaterals*

- What are the main issues regarding monitoring and evaluation alignment from the bilateral perspective? If your organization still has a parallel monitoring and evaluation system, what are the main strengths and weaknesses of this? What more could be done to strengthen national monitoring and evaluation capacity so that parallel systems are no longer needed?

#### *For international nongovernmental organizations*

- What degree of autonomy does your organization have in aligning with the national monitoring and evaluation framework or system? Are there any restrictions to monitoring and evaluation alignment placed on it by its parent organization or by its donors?

<p>Category: Monitoring and Evaluation</p>	<p>Area of assessment</p>	<p><b>B4</b></p>	<p>Extent of participation by international partners in the joint national AIDS programme review or equivalent process</p>
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## Description

It is important for international partners to align with and strengthen country-led systems for continuing performance review of progress. These processes support effective implementation of the national strategic plan or framework by providing opportunities for all key stakeholders (national and international) to review progress to date towards specified outputs and outcomes, analyse the strengths and weaknesses of coordination and monitoring systems, assess the need for any adjustments via a comprehensive peer

review process and agree on the way forward. In most countries, the annual review is convened by the national AIDS coordinating authority, in close cooperation with (international) partners, under the supervision of a task force or reference group. An independent multi-disciplinary team (sometimes with participation of task force members) makes field visits and collects information in order to prepare a qualitative report on the progress made against results and budgets, assess trends and effectiveness of programme responses and offer prioritized recommendations for the next period. A meeting or workshop can then be convened with all key national and international stakeholders to discuss and agree on these recommendations and assign responsibility for follow-up. The role of international partners is essential to the national AIDS programme review process, in terms of active participation and engagement as well as ensuring that the leadership and technical capacity of the national AIDS coordinating authority is enhanced throughout.

<b>Core Question</b>	<b>B4.1</b>	Does your organization support and/or participate in the joint national AIDS review (or equivalent process) where it exists?
<b>If YES</b>	✓	Please describe how you support and/or participate in this process. Were you satisfied with your level of participation? How could it have been improved or enhanced?
<b>If NO</b>	✗	Please suggest ways that your organization could be part of the joint national review process.

### General, open-ended questions

- What do you perceive as the greatest successes and challenges regarding the national joint programme review process? What more could be done to build support for this process, in your opinion? Anything else that you would like to comment on?

### Optional supplementary questions

- What do you think about the quality, scope and effectiveness of the national joint review process to date (where one exists)? What more could be done to strengthen this process, including capacity-building, leadership and coordination skills, funding, etc? What can be done to ensure ownership by the national AIDS coordinating authority?

<i>Category:</i> <i>Finances</i>	<b>Area of assessment</b>	<b>B5</b>	Extent to which international partners have indicative multi-year commitments (i.e. more than three years) for the national AIDS response
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## Description

It is important to ensure maximum predictability (short and medium term) of external financing for the national AIDS response. National strategic plans are usually designed to cover periods of up to six years. Therefore it would make sense to ensure that international partner commitments are aligned with these timeframes. Short-term commitments by donors can contribute to an unstable programming environment and reduced effectiveness for the national AIDS programme. It is generally accepted that multi-year commitments of three years or more are the standard to work towards so that realistic budgets can be

designed to support the priorities reflected in the country’s AIDS plan. International partners can increase the effectiveness of their financial commitment to the national AIDS response by increasing the stability and duration of their funding commitments, as well as being fully transparent and open with the national AIDS coordinating authority about these predictions. As well, timing of disbursements for donor funds under multi-year or pooled funding arrangements need to be aligned with the country’s own programming and budgeting cycle for AIDS. This can in turn help strengthen the planning and financial management capabilities of the national AIDS coordinating authority and its multisectoral partners/members.

<b>Core Question</b>	<b>B5.1</b>	Does your organization have an indicative multi-year (3+ years) commitment to the national AIDS strategic framework?
<b>If YES</b>	✓	Exactly how long is your commitment and what is the approximate size and scope of this commitment (to which programming areas etc.)?
<b>If NO</b>	✗	Would it be possible to increase the length of your resource commitment? Why or why not?

**General, open-ended questions**

- What do you perceive as the greatest successes and challenges regarding provision of assured, ongoing funding for the national AIDS response? What more could be done to create long-term financial support, in your opinion? Anything else that you would like to comment on?

**Optional supplementary questions**

- In your opinion, is multi-year funding a desirable option in this context? Why or why not?
- Are there any internal organizational constraints on your ability to provide multi-year funding commitments (from your own donors etc.)? If so, what are they and how could they be addressed?

<i>Category:</i> <i>Finances</i>	<b>Area of assessment</b>	<b>B6</b>	Extent to which international partners support pooled funding arrangements for the national AIDS response
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**Description**

There are many development sectors where programme-based approaches or pooled funding mechanisms are being developed or are already in place to enhance the global aid effectiveness agenda. International partners for AIDS are beginning to demonstrate increased commitment to funding arrangements where the multisectoral national AIDS coordinating authority has stronger direct control and ownership over AIDS resources. In some countries, pooled funding arrangements already exist where donors provide consolidated support for the unified national AIDS strategy and budget, as well as participating actively as partners in the national AIDS response at other levels of funding. In other countries where this is not yet happening, efforts are gradually being made to develop appropriate country-owned and managed

funding mechanisms and to build the capacity of the national AIDS coordinating authority to manage these arrangements. Pooled funds for a unified national AIDS response are assumed to increase stability and foster the leadership of national AIDS coordinating authorities. However, they can evolve gradually through many intermediary steps, including instances where international partners are providing both some contribution to pooled funds as well as project-based support. Once pooled funds are in place, it is important to monitor timeliness of disbursements by international partners according to an agreed-upon schedule under an memorandum of understanding as well as the level of actual disbursements compared to what was pledged.

<b>Core Question</b>	<b>B6.1A</b>	Is your organization involved in pooled funding arrangements for the national AIDS response?
<b>If YES</b>	✓	Please provide details and timing on how you are currently participating in pooled funding arrangements (e.g. basket funds).
<b>If NO</b>	✗	Please provide details on how your organization could increase its involvement in pooled funding arrangements.
<b>Core Question</b>	<b>B6.1B</b>	Please indicate the total annual sum provided by your organization to the AIDS response, and the amount of this that goes into pooled funding.
<b>Core Question</b>	<b>B6.2</b>	Does your organization provide funding to intermediary organizations or via funding modalities outside the current national AIDS budget (where one exists)?
<b>If YES</b>	✓	Please describe the mechanism for reporting on these resources to the national AIDS coordinating authority to facilitate oversight of national AIDS resources. Does your organization provide details to the national authority on all your financial disbursements for AIDS support?
<b>If NO</b>	✗	Please provide suggestions for how to better capture financial information for the national AIDS response.

### General, open-ended questions

- What do you perceive as the greatest successes and challenges regarding pooled or basket funding for the national AIDS response? What more could be done to strengthen this approach over time in your opinion? Anything else that you would like to comment on?

### Optional supplementary questions

- In your opinion, is pooled funding a viable option for strengthening the national AIDS response? Why or why not?
- Where pooled funding exists or is under development, is your organization involved in assisting the national AIDS coordinating authority to develop systems for civil society to access pooled funds?
- What are the main internal constraints (government or donor policies, accountability/control issues etc.) that your organization faces in moving towards pooled funding?



*For international nongovernmental organizations*

- Do you have access to pooled funding and/or to funds under the national AIDS budget (where one exists)? What are the main barriers or constraints to accessing this funding?
- Does your organization function as an intermediary or implementing organization for external donors? If so, to what extent does this influence your ability to participate in pooled funding arrangements, harmonize with the national AIDS budget, etc? Are you reporting this funding to the national AIDS coordinating authority so that it can be integrated into the national AIDS budget?

<p><i>Category: Administration, Support, Coordination and Communications</i></p>	<p><b>Area of assessment</b></p>	<p><b>B7</b></p>	<p>Extent to which international partners are harmonizing their AIDS procurement mechanisms</p>
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## Description

In keeping with the principles of the Paris Declaration, international partners should rely as much as possible on national procurement policies and systems where they exist as well as work actively to strengthen them over time. Procurement of required goods and services for the national AIDS response via the country’s own systems is a concrete demonstration of national ownership. Harmonization of international partners’ own agency procurement requirements with the national procurement system assists in supporting timely and cost-effective availability of goods and services and reduces reliance on funding agencies for provision of essential materials such as drugs and condoms. Capacity-building for procurement policies and systems can take considerable time and resources. Therefore international partners need to commit themselves to helping the national AIDS coordinating authority in creating the broad-based participatory structure to take national ownership of technical assistance and in building the necessary skills and infrastructure for effective procurement mechanisms that meet international standards. Because there are many examples and models of procurement policies and systems to work from, international partners can also play a role in bringing forward best practices or approaches that have worked elsewhere, and then provide advice on how to adapt them to the country context for AIDS programming.

Improved procurement harmonization for international partners in relation to the national AIDS response includes continual self-assessment and adjustment of internal procurement systems to harmonize with and support the country’s own system. This can include actively participating in procurement coordination committees or working groups (whether at the national and/or subnational levels) convened by the national AIDS coordinating authority and involving other key multisectoral partners, in order to discuss formulation of appropriate procurement policies and standards, address bottlenecks and take action as needed to improve AIDS-related procurement processes. If necessary, procurement committees should meet often and regularly to provide a strong working environment for all international partners to support national capacities and systems. For example, in the area of pharmaceutical procurement, policies and procedures related to competitive tendering, quality assurance and risk management would need to be discussed through a multi-agency coordination mechanism where international partners could share their expertise and assist national agencies in setting up effective management systems. If there are any issues related to how international partners manage their own procurement from the perspective of the national AIDS coordinating authority and other stakeholders, these types of coordination mechanisms can promote constructive dialogue and help elicit feasible solutions.

<b>Core Question</b>	<b>B7.1</b>	Is your organization using national procurement policies/procedures and interagency procurement coordination mechanisms (where they exist)?
<b>If YES</b>	✓	Please provide details on your organization's level of support and involvement for harmonized AIDS procurement (whether of materials or services).
<b>If NO</b>	✗	Please provide details on how your organization could increase its involvement for harmonized AIDS procurement.

### General, open-ended questions

What do you perceive as the greatest successes and challenges regarding harmonization of procurement mechanisms for the national AIDS response? What more could be done to strengthen this approach over time in your opinion? Anything else that you would like to comment on?

### Optional supplementary questions

- In your opinion, is a standardized national procurement system for the national AIDS response a realistic option in this country? Why or why not? What are the main challenges and constraints in developing this?
- What is your organization doing to build AIDS procurement capacity with domestic partners as part of the national response? What are the successes and accomplishments of this process?
- How well are interagency AIDS procurement coordination mechanisms working? Has it been possible for international organizations to harmonize among themselves in terms of procurement standards, requirements and processes? Why or why not?

<i>Category: Administration, Support, Coordination and Communications</i>	<b>Area of assessment</b>	<b>B8</b>	Extent to which international partners are building technical capacity and harmonizing their AIDS technical assistance strategies
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## Description

National ownership of technical assistance is a core component of an enhanced and sustainable national AIDS response. This includes having technical assistance plans for AIDS that are developed by countries themselves and coordinated through the national AIDS coordinating authority and/or via other multi-stakeholder coordination mechanisms (such as technical assistance committees or working groups). If a national AIDS technical assistance strategy does not yet exist, then international partners can assist national AIDS coordinating authorities to assess technical needs and develop comprehensive budgeted plans based on appropriate funding commitments, as well as ensure that national ownership and control over technical assistance for the national AIDS response is reflected in the degree of direct fiduciary and legal responsibility for key technical assistance contracts. International partners should then harmonize their own technical assistance approaches with these national plans. Over time, this can help reduce the tendency

for international partners to propose or suggest technical assistance rather than respond to the requests of the national AIDS coordinating authority and other key national stakeholders. Likewise, if most AIDS technical assistance tendering is managed by the national AIDS coordinating authority and its delegated implementation partners, including writing of terms of reference, screening and selection of candidates, administration of contracts and actual disbursement of funds, then country capacity in technical assistance management and procurement is likely to increase. International partners can participate in regular review committees or working groups with national AIDS counterparts to actively assess and address technical assistance coordination problems and bottlenecks, and find ways in which to improve national ownership and management of technical assistance procurement and contracting.

<b>Core Question</b>	<b>B8.1</b>	Is your organization strengthening AIDS technical and organizational capacity including that of government and civil society?
<b>If YES</b>	✓	Please describe what your organization is doing in capacity-building and at what levels. How is your organization assuring sustainability of the national AIDS response?
<b>If NO</b>	✗	How could your organization further strengthen its technical capacity-building approach?
<b>Core Question</b>	<b>B8.2</b>	Is your organization using the national technical assistance strategy (where it exists) as the basis for provision and procurement of any technical support?
<b>If YES</b>	✓	Please describe how your organization is ensuring coherence with the national AIDS technical assistance strategy (where it exists).
<b>If NO</b>	✗	What more can be done to improve harmonization and coordination for technical assistance?

### General, open-ended questions

- What do you perceive as the greatest successes and challenges regarding harmonization of technical assistance for the national AIDS response? What more could be done to strengthen this approach over time in your opinion? Anything else that you would like to comment on?

### Optional supplementary questions

- Is the capacity-building your organization offers for the national AIDS response demand-driven, i.e. based on specific needs expressed by national partners? Can the ways in which the scope of demand-driven technical assistance be improved?
- Is contracting and procurement of technical assistance handled by your organization or by the national partners?
- Is your organization supporting specific initiatives to build the capacity of civil society (especially marginalized groups) to participate in the national AIDS response? If so, how is this being done and how do you know that these efforts are working?
- How feasible is it to develop a harmonized technical assistance strategy among international partners and with national counterparts in this country context? Are there specific efforts being made by the UN and others to create a harmonized technical assistance strategy? What is the status and quality of the current national AIDS technical assistance strategy (if one exists), and how is it possible to ensure that the national coordinating authority has ownership over this?

<p><i>Category: Administration, Support, Coordination and Communications</i></p>	<p><b>Area of assessment</b></p>	<p><b>B9</b></p>	<p>Extent to which international partners are harmonizing administration, technical/financial reports and human resource approaches with each other and in relation to the national AIDS response</p>
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## Description

**Administration:** There are numerous ways in which administrative procedures and requirements can be simplified or streamlined by international partners to reduce transaction costs and duplication of effort by the national AIDS coordinating authority and other key national stakeholders. The general principle is that NACA should set their own administrative requirements and procedures including the type and number of transactions taking place with international partners. In many countries there have been strong efforts by international partners to reduce the number of bilateral meetings or consultations requested with the NACA, to participate in joint meetings or missions wherever appropriate and to adhere to the “quiet period” concept where there are certain times of the year when no consultations or meetings will be requested by international partners. Another strategy involves delegated cooperation arrangements, where one or more international partners authorize another peer agency to participate in any meetings, negotiations or reviews on their behalf with the NACA and then report back. These types of arrangements are helpful in reducing the burden on the NACA by developing a coordinated approach by international partners.

**Reporting:** It is also important to ensure consistency among the reporting requirements of international partners, and to harmonize external reports with those produced at the country level. As well, there needs to be agreement to avoid specialized or ad hoc information requests for administrative products by international partners. It is the responsibility of international partners to reduce and eventually eliminate agency-specific reports required for accountability purposes, while at the same time the NACA needs to develop a unified external and internal reporting approach. For example, reporting against the national AIDS strategic framework needs to be regulated by a country-owned plan and schedule, in which the national AIDS coordinating authority agrees to produce a pre-determined number of administrative products such as plans and reports that contain sufficient information to be used for all international partners.

**Human resource approaches:** Shortage of trained personnel to fill key medical, professional, technical and supervisory positions in either the national AIDS coordinating authority or other lead agencies is a challenge in many countries, especially at the national level, where the national AIDS coordinating authority requires a highly skilled set of human resources for strong centralized coordination. International partners often provide vital programming support to build human resource capacity at different levels, mainly through training and offering incentive packages. However, in some cases international partners also exacerbate the human resource shortage by hiring key staff away from national partners into their own agencies. These practices can lead to capacity gaps as well as undermine the ability of the national agencies to attract and retain qualified people in key posts. International partners can ensure that the NACA, strategic sectoral ministries and national nongovernmental organizations are able to maintain their skilled personnel, by being sensitive to the need to equalize compensation packages for key roles and by reducing situations where qualified individuals are hired out of lead national agencies to manage AIDS programming on behalf of donors. International partners need to agree on a protocol or common approach to supporting human resource stability in lead national AIDS stakeholder agencies as well as reexamine their own recruitment approaches where necessary.

<b>Core Question</b>	<b>B9.1</b>	Is your organization harmonizing requirements for technical and financial reports?
<b>If YES</b>	✓	Please provide details on how your organization is harmonizing its reports with the national coordinating authority and other international organizations.
<b>If NO</b>	✗	Please elaborate on how your organization could contribute to greater report harmonization.
<b>Core Question</b>	<b>B9.2</b>	Does your organization try to strengthen the human resource base for the national AIDS response?
<b>If YES</b>	✓	Please provide details regarding how you are doing this.
<b>If NO</b>	✗	Please elaborate on how your organization can ensure that human resources are not attracted away from national partners to international organizations.
<b>Core Question</b>	<b>B9.3</b>	How many AIDS-related missions were undertaken by your agency in the last 12 months (either from your headquarters or instigated from the country office.)
		Number: _____

**General, open-ended questions**

- What do you perceive as the greatest successes and challenges regarding harmonization of administrative requirements and human resources for the national AIDS response? What more could be done to strengthen this approach over time in your opinion? Anything else that you would like to comment on?

**Optional supplementary questions**

- Are many AIDS-related missions a joint effort between multiple agencies? What specific steps are being taken to coordinate external missions among donors and adhere to a “quiet period” for external missions? Are there specific instances where missions have been combined that have worked well? Are there other instances where separate or multiple missions by donors created an overload for domestic partners?
- What is your organization doing to eliminate on-demand or duplicate financial and technical reporting by the national coordinating authority or by specific domestic partners? Are there constraints or barriers in terms of fully harmonizing some of the reporting requirements of international partners? How can these be overcome?
- Are there any examples or instances of hiring of staff by international partners in the past year, where key qualified staff members have been taken away from either the national AIDS coordinating authority secretariat or other key domestic organizations? Does your organization perceive this as a possible problem, and if so, are efforts being made to ensure that domestic organizations maintain their human resource capacity?





*For international nongovernmental organizations*

- Do you have any limitations or constraints in terms of reporting to your central organizations or donors on specific initiatives that fall under the national AIDS response? Is primary reporting to external donors or to the national coordinating authority?

<b>Category:</b> <i>Administration,  Support,  Coordination and  Communications</i>	<b>Area of  assessment</b>	<b>B10</b>	<b>Extent of transparent, timely and accurate communications among international organizations and with all members of the national AIDS coordinating authority</b>
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## Description

Communication and information flows are fundamental to effective functioning of the national AIDS response. Transparency and openness of communications and the availability of timely financial and programming information as requested or agreed upon to all key national and international stakeholders is crucial. In some cases, international partners are more accustomed to sharing information within their own agencies or via specialized donor networks than with national partners in the AIDS response. For example, information on how programming decisions are made or on donor funding allocations is not always available on request to national partners, or international agencies may retain vital information for their own internal purposes. Information on financial information is particularly important to establish transparency, trust and partnership. Where there is a communications strategy or protocol related to the national AIDS response, it is particularly important that international partners recognize the role of the national AIDS coordinating authority in coordinating information flows, as well as provide support for appropriate capacity development in this area. International partners can help ensure that the national AIDS coordinating authority and other partners (government and civil society) are provided with requested information on time, and they can regularly review their agency information-sharing and communication practices to maximize efficiency and transparency.

<b>Core Question</b>	<b>B10.1A</b>	<b>Is there an accurate and timely information flow between the national AIDS coordinating authority secretariat and your organization?</b>
<b>If YES</b>		Please provide details on how the information flow works. Please describe whether you receive enough information and if it arrives in time to assist your work.
<b>If NO</b>		Please elaborate on how accuracy and timeliness of information sharing could be improved.
<b>Core Question</b>	<b>B10.1B</b>	<b>Is there an accurate and timely information flow between your organization and other national partners?</b>
<b>If YES</b>		Please provide details on how the information flow works. Please describe whether you receive enough information and if it arrives in time to assist your work. How does your organization normally share information with others?
<b>If NO</b>		Please elaborate on how accuracy and timeliness of information sharing could be improved.

<b>Core Question</b>	<b>B10.2A</b>	Is there transparency regarding sharing of budgetary and programming information between the national AIDS coordinating authority secretariat and your organization?
<b>If YES</b>	✓	Please provide details about the level of transparency in information sharing. Please describe whether you receive enough up-to-date and detailed information to assist in decision-making and planning.
<b>If NO</b>	✗	Please elaborate on how transparency can be improved. What more can be done to keep everyone in the national AIDS response well informed?
<b>Core Question</b>	<b>B10.2B</b>	Is there transparency regarding sharing of budgetary and programming information between your organization and other national partners?
<b>If YES</b>	✓	Please provide details about the level of transparency in information sharing. Please describe whether you receive enough up-to-date and detailed information to assist in decision-making and planning.
<b>If NO</b>	✗	Please elaborate on how transparency can be improved. What more can be done to keep everyone in the national AIDS response well informed?

### General, open-ended questions

What do you perceive as the greatest successes and challenges regarding information sharing and transparency for the national AIDS response? What more could be done to strengthen this approach over time in your opinion? Anything else that you would like to comment on?

### Optional supplementary questions

- How often does your organization normally share information with others? What feedback do you receive about the information that you provide to others?
- Are there internal constraints on what type of programming and funding information you can share? If so, what are they and how could they be addressed?
- How do you ensure that national partners are well-informed about your organization's policies and programmes? Does your organization share up-to-date and detailed information to assist others in decision-making and planning?

## Annex 1:

### Sample pages of the blank questionnaire form

For the complete questionnaire, an MS-Word document, with all the areas of assessment and core questions, is included on the accompanying CD-ROM and on the UNAIDS website ([www.unaids.org](http://www.unaids.org)). Adaptation of this questionnaire can be done from the file on the CD-ROM.

<i>Category: National AIDS Coordinating Authority and National Strategic Framework</i>		Rating from this respondent:
<b>A1</b>	<b>Extent of participation and alignment by national/domestic partners in the national AIDS strategic framework</b>	
Summary comments on the area of assessment:		Issues : keywords 1. 2. 3. 4.
<b>A1.1 Did your organization participate in the design and/or validation of the latest national strategic framework or equivalent document?</b>		
<i>(Circle one)</i>		
YES	Provide details on your level of participation in the design and/or validation/approval process. Were you satisfied with your level of participation? Were there specific ways in which participation or inclusion could have been enhanced or improved?	
NO	Please elaborate on how your organization can contribute to future national strategic planning and/or validation processes.	
Comments:		



**A1.2 Does your organization have a programming strategy for its AIDS work (e.g. goals, targets, strategies and activities)?**

*(Circle one)*

YES Describe how the strategy of your organization is aligned with the national AIDS strategic framework or equivalent document.

NO Describe how you intend to develop an organizational programming strategy in future that is derived from the national AIDS strategic plan or framework.

Comments:

**A1.3 Does your organization have its AIDS programming plan reviewed and validated by the national AIDS coordinating authority?**

*(Circle one)*

YES Please provide details on how this was done and the type of feedback that was received. What changes (if any) did you make as a result of the feedback received?

NO Does your organization have plans to ensure that the national AIDS coordinating authority reviews and validates your strategies? Why or why not?

Comments:

**A1.4 In your opinion, did all relevant national/international organizations participate in the design and/or validation of the latest national strategic framework or equivalent document?**

*(Circle one)*

**YES** Please provide details on the level of participation. Were you satisfied with other organizations' levels of participation? Were there specific ways in which participation or inclusion could have been enhanced or improved?

**NO** Please elaborate on who you think should participate in the future.

Comments:

**A1.5 In your opinion, are the AIDS programming plans and strategies of international partners aligned with national and/or subnational AIDS strategic plans?**

*(Circle one)*

**YES** Please give examples of strengths and weaknesses.

**NO** Please indicate areas where you think better alignment is most critical.

Comments:

Any other issues or topics regarding participation in the national AIDS strategic planning process that you would like to comment on?

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UNAIDS, the Joint United Nations Programme on HIV/AIDS, brings together the efforts and resources of ten UN system organizations to the global AIDS response. Cosponsors include UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and the World Bank. Based in Geneva, the UNAIDS Secretariat works on the ground in more than 80 countries worldwide.

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The Country Harmonization and Alignment Tool (CHAT) has been designed to help national AIDS authorities and their partners gauge the level of participation and engagement in the national AIDS response, and the degree of harmonization and alignment of international partners. CHAT will help to assess partner adherence to the "Three Ones" principles and international partners' adherence to the commitments in the Paris Declaration on Aid Effectiveness (2005). In its function as a "barometer" of the status of harmonization and alignment at country level and in identifying where real or perceived obstacles lie, CHAT can serve as an advocacy tool for focusing dialogue and driving progress towards a more effective AIDS response.

For further information, please e-mail [CHAT@unaids.org](mailto:CHAT@unaids.org).

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