

4. Examples: support boosts M&E in health systems

Providing tools to implement El Salvador's Global Fund grant

Context

El Salvador is facing a fast growing HIV epidemic, with infection rates rising most notably among men who have sex with men and commercial sex workers. In July 2003, the Global Fund awarded El Salvador a grant worth \$27 million over five years to address HIV and tuberculosis. UNDP is the Principal Recipient and its work is overseen by the Salvador Global Fund Coordinating Committee (CCE). At the outset, however, members of the CCE were concerned that they lacked the means to do this oversight. They therefore, asked the BACKUP Initiative to provide TS to develop their capacity and, in particular, to develop an integrated M&E system to improve the quality of HIV and tuberculosis services.

Technical support

The support from BACKUP began with a three-phase plan to design and implement an integrated M&E system (IMES). First, in 2003, technical experts held a series of meetings with stakeholders to agree on a harmonized design for the system. Second, a consultant helped in the choice and validation of indicators. Third, consultants helped to finalize the system design, which was then pilot-tested. Implementation began soon after in early 2005.

Throughout, the project made sure that the process included all key stakeholders and that IMES integrated the M&E activities of all relevant agencies: the CCE and the Principal



Recipient, the National HIV/AIDS and Tuberculosis Programmes, NGOs and self-help organizations serving as Sub-recipients of the grant. It also supported the development of a manual about IMES. As well, the BACKUP Initiative provided experts to help design data and to verify that the indicators were comparable with those of the UNAIDS Country Response Information System (CRIS).

Results

The rapid response of the BACKUP Initiative to the request of the CCE resulted in "activities undertaken with efficiency, producing clear and useful results", according to an evaluation by the Health Systems Resource Centre of the United Kingdom's Department for International Development (DFID). The participatory approach used in the M&E system, and other related interventions, boosted transparency and strengthened the CCE. This, in turn, facilitated the smooth implementation of the Global Fund grant. The promising results of IMES in El Salvador encouraged the governments of Honduras, Guatemala, Nicaragua, Paraguay and Ecuador to adopt the same approach. Paraguay, for example, is now using IMES to monitor and evaluate all national health programmes.

Developing Guinea's capacity to monitor, evaluate and coordinate HIV programmes

Context

Guinea's efforts to address rising rates of HIV have been undermined by extremely low technical and managerial capacity, and a lack of transparency in public administration. In addition, the country did not have a CCM during the early rounds of the Global Fund, making it ineligible for grants to address these weaknesses and scale up health services for HIV, tuberculosis and malaria.

Technical support

After consulting with the BACKUP Initiative and its partners, the Ministry of Health asked for support from GTZ for several projects. The one described here aimed to strengthen the capacity of the Comité National de Lutte Contre Le SIDA (CNLS) to coordinate, monitor and evaluate HIV programmes. This filled a gap in the support provided to the CNLS by the World Bank and the UNAIDS Global Monitoring and Evaluation Team (GAMET): the need to develop and install shared M&E software for organizations working on HIV.

Known as SIDAPES (the French acronym for Development and implementation of an effective monitoring and coordination system), the project began in April 2004 and lasted 12 months. Its objectives were to improve the collaboration and harmonization of strategies and action plans developed by key health service partners all over the country, and to ensure that all aspects of the national HIV plan were properly addressed. Under SIDAPES, the Ministry of Health hired a German consulting firm, Health Focus, to provide technical support in five areas:

- › Analysis of the needs of the different actors involved;
- › Identification and assessment of the existing systems;
- › Development of monitoring and evaluation software, including a database known as PESCH (Planning Evaluation Suiting Collaboration Harmonization) and an internet forum for HIV agencies to communicate among themselves;
- › Training of the future users of this system; and
- › Installation of the system.



Results

SIDAPES has yet to be completed, partly owing to the slowness of public administration and CNLS and poor communication among partners. An evaluation by DFID in 2005, however, found that SIDAPES was effective in providing the national committee and its partners with a common tool – PESCH – to better coordinate M&E of HIV interventions. The internet forum also allows for the exchange of data and good practices. The activities supported, coupled with flexible, short-term financial aid, helped the Ministry of Health fill logistical and techni-

cal gaps at a crucial time and secure US\$ 22 million in new global health financing. Improved coordination and M&E also contributed indirectly to the scale-up of voluntary counselling and testing, as well as psychosocial and medical treatment for people living with HIV.

GTZ helps Philippines to track progress of health programmes

Context

In the Philippines, the Tropical Disease Foundation is the Principal Recipient of five Global Fund project grants worth more than US\$ 83 million. These grants aim to reduce the burden of tuberculosis, malaria and HIV in this country of 85 million people. The Foundation's management of the grants has been made difficult, however, by a weak monitoring and evaluation system, which is based on spreadsheets and separate from the system that tracks the financial status of Global Fund programmes.

Technical support

In July 2006, at the request of the Foundation, GTZ provided funding for a team of four to visit New Caledonia, for meetings with the Secretariat of the Pacific Community (the Principal Recipient of a Global Fund grant). Here the team received training in the use of the Secretariat's Project Information Management System (PIMS) and began to customize the web-based software, so that Filipino agencies and the Secretariat of the Pacific Community could share it. The software is a powerful tool for monitoring and reporting on Global Fund grant programmes. It allows managers to record programme and financial plans and to archive and generate reports; and,



since it is web-based, it is easily accessible to stakeholders: Sub-recipients and other implementing partners, as well as members of CCMs, technical working groups and Local Fund Agents. It is hoped, therefore, that PIMS will aid in the country's grant decision-making, coordination and oversight.



After funding the initial training, GTZ financed the work of a technical consultant who, over several months, helped to develop and implement the system in the Philippines. Meanwhile, at meetings, managers of programmes addressing HIV, tuberculosis and malaria agreed on ways of customizing the new system, and hammered out a five-phase plan to introduce PIMS across a network of ministries, agencies and programmes by early 2007. The plan also allows for an external evaluation of the new system after one year.

Results

It is too early to assess results, but it is expected that PIMS will tighten the links in a network of organizations implementing Global Fund grants and improve the management of HIV, tuberculosis and malaria programmes throughout the Philippines and Pacific Community.