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Technical Resource Networks and Intercountry Teams

Contents

I INTRODUCTION

1.   The acceleration of national-level efforts to expand the response to the HIV/AIDS epidemic has resulted in a substantially increased demand for technical resources - both information and expertise - in a widening array of programme areas. At the same time, effective programme approaches are often specific to cultural, resource and political environments.

2.   It is also increasingly evident that single agencies, whether government departments, UN agencies, non-governmental organizations (NGOs), or people living with HIV/AIDS groups, do not have the capacity to deal with the multiple determinants of HIV on their own. Individual agencies have made, and continue to make, substantial contributions in specific areas of HIV prevention and care. However, the need to act simultaneously and synergistically in a number of different areas such as health services, communications, legal reform, education, rural development and the status of women[1], requires that a range of strategic alliances be developed and maintained.

3.   Consequently, a more iterative and evaluative approach to HIV/AIDS policy and programme strategy development is often required. This has further increased the need within countries for access to current technical information and expertise.

4.   Within those regions of the world where the current or potential impact of the HIV/AIDS epidemic is greatest, the UN system can potentially play a more significant role in responding to its need by promoting the sharing of knowledge, experience and expertise among countries.

5.   UNAIDS' strategy to help respond to this need is to support Technical Resource Networks. These should not only be primary mechanisms for technical cooperation in a given region, but should also contribute to strengthening institutional capacity in cooperating countries. Inter-Agency Working Groups, UNAIDS Collaborating Centres and Intercountry Teams (ICTs) are taking the lead in creating resource networks and catalysing efforts at the regional and subregional levels to strengthen the capacities of the UN system to respond to HIV/AIDS.

II NETWORKS AND TASK FORCES

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[1] UNAIDS. *Expanding the Global Response to HIV/AIDS through Focused Action: Reducing Risks and Vulnerability. Definitions, Rationale and Pathways*. UNAIDS, Geneva, 1998.

6.   In 1996-1997, UNAIDS established and strengthened existing networks in all regions of the world. Three types of structures come under this heading, each of which has specific mission though all are similar in most other ways. *Technical Resource Networks* mobilize and link specialists from the Cosponsors, other multilateral and bilateral agencies, national governments and NGOs within a specific area. *Information Exchange Networks* provide a forum for exchange of experience and knowledge among interested participants at the regional level and beyond. *Task Forces* develop
and promote subregional strategies, adopt and promote subregional best practices and assist in expanding activities.

7.   The following section describes the status of current Technical Resource Networks, Information Exchange Networks and Task Forces.

Africa

8.   The networks currently supported in Africa are as follows:

- The African Network on Ethics, Law and HIV and the Network for People Living with HIV/AIDS were created under the UNDP Regional Project on HIV and Development for Sub-Saharan Africa.

- The West African Initiative on HIV/AIDS initiated by the World Bank, supports action research projects on migration and sex work. The initiative also supports networks of people living with HIV/AIDS in Burkina Faso, Côte d'Ivoire, Mali, Niger and Senegal.

- The networks on Strategic Planning in Southern Africa, and in West Africa and Central Africa which aim to facilitate national strategic planning, epidemiological networks and evaluation of interventions.

Asia and the Pacific

9.   UNAIDS is supporting networks established by Cosponsors and other partners, as follows:

- The Asian Harm Reduction Network (AHRN) is the first regional group working to prevent HIV among injecting drug users. Established in 1995, the intercountry work of AHRN involves sharing of information, conducting needs assessments, developing locally relevant information, and advocacy and resource mobilization with UN agencies, governments and bilateral agencies. AHRN is building and recognizing the capacity for harm reduction in the region, thus diminishing the reliance on outside expertise.

- The Asia/Pacific Council of AIDS Service Organizations (APCASO), formed in 1992, is a network of community organizations that was supported in large part by Australia (AusAID). Its work on human rights has strengthened the capacity of countries such as

Malaysia, Philippines and Thailand to monitor and document human rights and to advocate for better policies and services particularly for people living with HIV/AIDS. The organization also enabled NGOs to work more effectively within subregions, an example being work with AusAID and the governments of South Pacific islands to identify community needs and to mobilize human and financial resources to help meet these needs.

- The Asia-Pacific Network of People Living with HIV/AIDS (APN+) was set up by people from eight Asia Pacific countries to prevent discrimination. In partnership with UNAIDS, APN+ has advocated for the rights of people living with HIV/AIDS within the UN system as well as among regional governments. While people living with HIV/AIDS continue to face discrimination and isolation in countries across the region, APN+ has begun to make significant inroads in breaking this isolation and eliciting the involvement of people living with HIV/AIDS in Cambodia, Thailand and Vietnam. With the support of UNAIDS, APN+ is setting up APN+ SHARE, an electronic mail facility to support people with HIV/AIDS in the region.

- SEA-AIDS, an electronic information exchange network established in 1995 and funded by the World Bank, has to date over 1000 subscribers on its mailing list. The project produces a bi-weekly update of HIV/AIDS-related developments relevant to the region and has established an indexed electronic archiving system which is available to all networks.

Europe

10.   A network of eastern European harm reduction projects, CEE-HRN, has been established along the lines of the Asian Harm Reduction Network. Its mission is to work with governmental bodies and NGOs to help develop and support activities in the field of prevention and reduction of all harm related to non-medical drug use, especially HIV prevention. CEE-HRN also aims to evaluate the efficiency of harm reduction programmes in the region, to publicize results of these activities and to inform communities, governments and the international community of the situation in these countries.

11.   Other networks under discussion or being created include the following:

- The Working Group on HIV Prevention among Sex Workers held an exploratory meeting with the main western European networks in September 1996. A concept paper delineating how best to expand their projects in Europe will be developed by UNAIDS.

- A network on ethics, law, human rights and HIV is being developed. Potential partners include interested legal institutions in the region and UNDP.

- A regional network of social scientists is being established. It is planned that social science institutions will be recruited and trained to carry out behavioural studies necessary for strategic planning and to encourage more work with marginalized groups.

12. UNAIDS has also initiated and/or facilitated Regional Task Forces, as follows:

- The Task Force on HIV prevention among injecting drug users (IDUs) has produced an information leaflet and other materials in Russian targeted at the IDU in the former USSR. A training package on HIV prevention among IDUs is under preparation. Several new outreach projects have been supported and an information network of eastern European harm reduction projects has been initiated by UNAIDS and the Lindesmith Center. Further situation assessments, assistance in the design of more projects and programmes, and the development of other training materials are planned. Members include UNAIDS, the UNDP office in Warsaw, WHO, UNICEF, Médecins du Monde, Médecins sans Frontières (MSF), The Lindesmith Center and the Trimbos Institute. The Task Force Secretariat is with UNDP/Warsaw.

- Facilitated by UNAIDS, WHO's Regional Office for Europe (WHO/EURO) has drafted a regional strategy paper on the reorientation of sexually transmitted disease (STD) services in eastern Europe. This led to the establishment of a regional Task Force on STD care and prevention and a series of pilot projects have started. Founding members include UNAIDS, the World Bank, WHO/EURO, WHO Geneva, UNICEF, UNFPA, the Gesellschaft für Technische Zusammenarbeit (GTZ), the Department for International Development (DFID), the Universities of London, Antwerp and Heidelberg, Médecins sans Frontières (Belgium) and the Swedish and Finnish public health institutes. The Secretariat is with WHO/EURO.

- In collaboration with UNAIDS, WHO and a number of partner agencies and donors has established a regional Task Force on blood safety in eastern Europe. Members include WHO Geneva, the WHO Regional Office for Europe and the Council of Europe. The World Bank, the International Federation of Red Cross and Red Crescent Societies, DFID and MSF may participate in future activities.

- Joint UN system mechanisms are being developed to coordinate and mobilize international assistance in the areas of HIV prevention and care among sex workers, media legislation, HIV prevention among young people (with UNICEF taking the lead) and HIV prevention among men who have sex with men.

Latin America and the Caribbean

13. The Regional Initiative for AIDS Prevention and Control in Latin America and the Caribbean (SIDALAC) is a World Bank-initiated project focusing on mobilizing national and international efforts to develop new, systematic and cost-effective interventions on HIV/AIDS prevention and care in the region. Other collaborations include support for the Greater Involvement of People Living with HIV/AIDS (GIPA) principles in the region, and working with UNDP, the Pan American Health Organisation (PAHO) and the Latin

America /Caribbean Council of AIDS Service Organizations (LACCASO) to support the establishment of national human rights networks.

14.   The Horizontal Technical Collaboration Group (HTCG) was established by national AIDS control programme managers in Latin America and the Caribbean to facilitate national strategic planning, epidemiological network, evaluation of interventions, counselling and communications.

15.   In collaboration with national AIDS control programmes, NGOs, and the United Nations Drugs Control Programme (UNDCP), UNAIDS is developing a subregional project to address the IDU-related HIV epidemic in the southern Cone (Argentina, Chile, Paraguay and Uruguay).

Middle East

16.   A partnership has been established between the International Planned Parenthood Federation (IPPF) and UNAIDS within a project that emphasizes expansion of the capacity of the IPPF/Arab World Region and its partners by upgrading existing reproductive health training at both regional and country levels through the International Center for Training at the national office for family planning in Tunis.

17.   Other resource networks and task forces are addressed in the section on Intercountry Team activities.

III   INTER-AGENCY WORKING GROUPS

18.   Considerable progress in harmonizing approaches and integrating programme efforts has also been made over the past biennium through Inter-Agency Working Groups and related fora. These coordinating bodies provide important opportunities for strategic input and peer review among Cosponsors of the HIV/AIDS-related activities implemented through their own agencies and budgets, those that they undertake on behalf of UNAIDS, and those that UNAIDS implements through its core budget.

19.   Of the different coordinating entities, the Inter-Agency Working Groups are the most implementation-oriented and consequently have required the most intensive time commitment on the part of participants, particularly in the initial phase. Because of this, Cosponsor participation has generally been limited to those programme areas in which they are serving a major role on behalf of the UN system. It is anticipated that once the individual working groups have clarified their strategic approach and established their *modus operandi*, the need for face-to-face meetings will be substantially reduced. A number of Inter-Agency Working Groups have already been successful in harmonizing and accelerating efforts among partners, as follows:

- *Gender and HIV/AIDS*. Outputs include reviews of programme proposals from UNDP, the World Bank, UNICEF, UNESCO and UNIFEM; and recommended

evaluation mechanisms for projects funded through the Inter-Agency Working Groups during 1997-98.

- *Integrating HIV/STD Prevention in the School Setting*. The work of this group has been facilitated through the efforts of a UNAIDS school education adviser seconded to the Education Section of UNICEF Headquarters in New York.

- *Especially Vulnerable Young People.* This group on HIV and STD prevention among especially vulnerable young people has been established in order to facilitate collaboration among the Cosponsors and UNDCP, UNHCR and ILO.

- *Communications*. HIV/AIDS communications is an expanding area of programming for several of the Cosponsors. To help facilitate collaboration, an Inter-Agency Working Group on Communications was established to identify areas for integrating planning efforts, to develop a coordinated plan of action for 1997-1999, and to review proposals for the 1998-1999 coordinated appeal.

- *Global Surveillance of HIV/AIDS and STD*. This group has been established with WHO and the UNAIDS Secretariat to ensure timely and consistent flow of information at national, regional and global levels. Surveillance activities in WHO regional offices have been financially supported by UNAIDS and reinforced, in some cases, with additional staff resources.

20.   In those programme areas where such formal Inter-Agency Working Groups do not exist, other fora such as Inter-Agency Reference Groups, Task Forces or informal working groups have been identified. Examples of these are:

- *Human rights, ethics and law*. A reference Group on HIV, Human Rights, Ethics & Law is in the planning stages. This group should be operational during the second biennium. Representation is expected to include Cosponsors, other UN agencies, leading NGOs, and regional field representatives.

- *Children.* UNAIDS held an inter-agency consultation on children and AIDS which developed a framework of priorities identifying actions to be taken by the different Cosponsors.

- *Vaccine development*. A Vaccine Advisory Committee has been established to provide further technical guidance to the programme in this area.

- *Vaginal microbicides*: UNAIDS acts as the secretariat for the International Working Group on Vaginal Microbicides.[2] The working group has published *Recommendations for the Development of Vaginal Microbicides*.

- *Sexually transmitted diseases*. UNAIDS has served as the secretariat for the Sexually Transmitted Diseases Diagnostics Initiative (SDI). This will continue through the end of 1998. Major partners include the Rockefeller Foundation, NIAID, USAID and the EC. The goal of the SDI is to accelerate the identification of simple, reliable STD diagnostic technologies that are appropriate for developing countries. Several new research projects to identify such technologies have been funded directly by SDI; others have been funded bilaterally by one of the major partners.

- *Mother-to-child transmission*. An informal Working Group on Mother-to-Child Transmission of HIV has been established for which UNAIDS serves as the secretariat. The group includes the French Agence Nationale de Recherche sur le SIDA (ANRS), NIH, CDC, MRC, NGO representatives, and several university research groups working in this area. The objective of the working group is to help build consensus on research priorities and to harmonize the study designs of clinical trials to enable improved cross-trial comparability.

- *Inter-Agency Advisory Group on AIDS (IAAG)*. This serves as a regular forum for dialogue among UN system organizations on substantive programme and personnel policy issues.

IV   UNAIDS COLLABORATING CENTRES

21.   During 1996-1997, UNAIDS designated various institutions as UNAIDS Collaborating Centres. It is intended that these Collaborating Centres will:

- expand the response to HIV/AIDS by strengthening partnerships with institutions with their own perspective and areas of expertise;
- help create technical resource networks of excellence and expertise that will serve as a regional resource and improve the response at national and regional levels;
- facilitate creative dialogue and networking among Collaborating Centres and with other actors;
- assist UNAIDS and its Cosponsors in carrying out certain aspects of their workplan.

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[2] The group includes WHO, the U.S. National Institutes of Allergy and Infectious Diseases (NIAID), the U.S. National Institutes of Child Health and Human Development, the Contraceptive Research and Development Program (CONRAD), Family Health International (FHI), the Centers for Disease Control and Prevention (CDC), the Population Council, the U.S. Food and Drug Administration, Society for Women Against HIV/AIDS, Women's Health Advocates for Microbicides, the European Commission (EC), and the U.K. Medical Research Council (MRC).

22.   Approximately 40 potential UNAIDS Collaborating Centres were identified (Annex 1). These institutions were selected on the basis of the following criteria:

- the professional quality of the institution/organization in its particular area of expertise, as judged by its previous achievements and/or ongoing activities;
- a sound approach to the HIV/AIDS epidemic which accords with accepted technical and ethical principles, and with the core values and strategies of UNAIDS;
- the working relationships which the institution has established with other groups/institutions in the country, in the region and elsewhere in the world;
- the institution's stability and sustainability in terms of leadership, personnel, activities and funding;
- the institution's ability, capacity and readiness to contribute to the implementation of the workplan of UNAIDS and its Cosponsors, whether in support of country programmes or by participating in international or regional cooperative activities.

23.   Designation as a UNAIDS Collaborating Centre lasts for a fixed period of three years and involves the following areas of collaboration:

- identifying, developing and disseminating best practices by producing and/or reviewing guidelines and other documents; by participating in UNAIDS-sponsored meetings and/or organizing meetings on behalf of UNAIDS, and by engaging in other advocacy-related activities;
- promoting, supporting and implementing relevant research, and disseminating and utilizing results of such research, including participating in collaborative research projects with UNAIDS;
- providing selected support targeted at strengthening national capacities for an expanded response to HIV/AIDS, especially in developing countries, by providing consultancies, reference services and training;
- coordinating activities among different countries and institutions involved in the response to HIV/AIDS;
- participating in technical resource networks established by UNAIDS for the identification, collection and dissemination of best practices and provision of technical support.

24.   In the coming years, UNAIDS will consolidate its activities with regard to collaboration with various institutions and will expand its list of Collaborating Centres so as to ensure broad geographical/cultural representation, as well as representation of different areas of expertise relevant to HIV/AIDS. These centres will form an integral part of the Technical Resource Networks that are being established in different regions.

V   UNAIDS INTERCOUNTRY TEAMS (ICTS)

25.   In spite of successful interventions at national level, many issues which influence the spread of the epidemic can be dealt with effectively only regionally or internationally since they involve mobile populations and issues that cross borders such as drug trafficking. In

addition, there is a clear value for countries in regional approaches and networking through which experiences are shared that are relevant for their own work. Finally, teams based in a region or subregion are in a better position to respond to countries' technical support needs and with Cosponsors' regional and intercountry entities, than is one central office.

26.   Before the establishment of the ICTs, regional needs assessments were undertaken by the UNAIDS secretariat and the UNAIDS' Cosponsors' representatives. Several missions were organized in order to:

- map available resources for technical collaboration within UNAIDS Cosponsors, bilateral agencies and international NGOs;
- assess needs in countries and at intercountry level;
- identify gaps between needs and available resources with a special emphasis on those gaps that might be covered by UNAIDS.

27.   The expressed needs were categorized as: (1) transborder issues, (2) programmatic issues, (3) programme management, and (4) advocacy. These findings were discussed in regional meetings of Cosponsors, where the terms of reference, the composition of the ICTs and the profiles of their members were finalized. Cosponsors, such as UNICEF and the World Bank committed resources.

A. Role of the ICTs

28.   The role of the ICTs is to ensure that, through the UN system, countries and UNAIDS and Cosponsor field staff have access to high quality and up-to-date technical advice and support by:

- developing regional technical resource networks;
- brokering and providing technical support through the UN system and country programme advisers (CPAs);
- identifying and promoting best practices at regional level;
- developing partnerships with regional entities of Cosponsors;
- information networking;
- programmes on selected cross-border issues relevant to the region.

29.   There are currently three ICTs in the UNAIDS secretariat. One team is based in Abidjan, Côte d'Ivoire, and covers western and central Africa. Another is based in Pretoria, South Africa, and covers southern and eastern Africa. A third ICT is based in Bangkok, Thailand, to cover Asian and Pacific countries. A new UNAIDS ICT will be placed in the Caribbean, bringing together three intercountry programme advisers (ICPAs) based in the region.

30.   During the first biennium, the ICTs were administratively located in the Department of Country Support. As of 1998, the ICTs have been transferred to the Department of Policy, Strategy and Research as most of their activities relate to that Department's mandate: development of networks, technical support, information systems and best practices.

31.   Activity Reports on the ICTs for the period 1996-1997 are summarized in Annex 2.

B. The Intercountry Team for Asia and the Pacific (APICT)

32.   Based in Bangkok at the United Nations building, the team is composed of two professional staff supported by short-term consultants and a staff member seconded by Japan. On a UNAIDS and UNICEF cost-sharing arrangement, APICT is also supported by one UNICEF professional staff member responsible for the Mekong Region HIV/AIDS Project. The activities of WHO and the World Bank, supported through the South-East Asia HIV/AIDS Project (SEAHAP), have been formally incorporated into APICT since its establishment in July 1996.

33.   The APICT workplan for 1998-1999 consists of four major areas:

- Support to national strategic review and planning on HIV/AIDS.
- Support to national and intercountry information system networks.
- Support to collaborative action on cross-border issues, including migrant labour and drug abuse.
- Development of regional technical resource networks, including issues such as media and communication, youth and education, community mobilization, workplace and institution settings, care and access to treatment, and HIV vaccine development.

34.   This workplan will be implemented through partnerships with the regional offices and teams of the Cosponsors and other UN organizations, as well as with the organizations mentioned earlier.

C. West and Central African Intercountry Team (WCA/ICT)

35.   This team is composed of four professional staff who are based in Abidjan in premises provided by the Government of Côte d'Ivoire. In existence since the last quarter of 1996, the team has expertise in programme planning and evaluation, prevention, community mobilization, and blood safety and laboratory techniques[3]. In 1998-1999, expertise in the area of information management and assistance to programme development will be integrated into the team. The WCA/ICT is also responsible for facilitating the implementation of the West African HIV/AIDS Initiative (WAI), a regional project funded by the World Bank and UNAIDS, which promotes action-oriented research and programme

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[3] Expertise on blood safety and laboratory techniques is provided through a collaborative arrangement with the WHO Regional Office for Africa.

development in the areas of migration and sex work, and provides support to networks of people living with HIV/AIDS.

36.   On the basis of experience gained in 1997, the WCA/ICT 1998-1999 workplan will focus on the following areas:

- Support to national strategic planning on HIV/AIDS.
- Development and strengthening of intercountry technical resource networks in strategic planning, migration, refugees and displaced populations, persons living with HIV/AIDS, youth, and sex work.
- Strengthening of partnerships with Cosponsors and other regional programmes.
- Identification and dissemination of best practice in diverse programme areas.
- Development of a regional information management system on HIV.

D. Eastern and Southern African Intercountry Team (ESA/ICT)

37.   The team is based in Pretoria, South Africa, and began work in December 1996. The team presently includes two professionals, i.e. the team leader and a care adviser. It is foreseen that it will include five professionals with the addition of expertise in information systems, prevention, communication, community mobilization, and clinical management.

38.   The ESA/ICT workplan for 1998–1999 covers the following areas:

- Strategic planning.
- Identification and documentation of best practices in specific areas such as children in distress, mobilization of religious organizations, AIDS and the workplace.
- Community-based AIDS and tuberculosis care, access to comprehensive care, and female condom programming.
- Collaboration with regional and subregional programmes (SADC, Common Market for Eastern and Southern Africa/COMESA, WHO Regional Office for Africa, UNICEF/ESARO).
- Establishment and strengthening of intercountry technical resource networks in human rights, ethics and law, HIV and development, involvement of people living with HIV/AIDS, the response of CBOs/NGOs and community mobilization, care and support, and socioeconomic determinants and impact of the epidemic, including migration.

ANNEX 2

SUMMARY OF THE UNAIDS INTERCOUNTRY TEAMS
1996-1997 PROGRESS REPORT

A.   The Intercountry Team for Asia and Pacific (APICT)

Strategic focus and accomplishments

APICT's priority approach is intercountry partnership, with primary emphasis on promoting and supporting cross-cutting initiatives to strengthen intercountry collaboration on policies, best practices and technical information. Specifically, APICT focuses on facilitating joint action by countries and regional bodies to address transborder issues, such as migrant labour and drug abuse, that are widely recognized as major priorities by many countries of the region.

Information exchange and best practice

- "My Experience With....", a document describing peoples' experiences and perceptions about the HIV/AIDS epidemic from Philippines, Thailand, and Vietnam. The project was initiated by SEAHAP in 1995.
- Inventory of HIV/AIDS Information Sources in the Asia Pacific region.
- Compilation of intercountry HIV/AIDS projects of Cosponsors and key partners in the Asia Pacific Region during the period 1995-2000, and documentation of their experiences on priority issues.
- Compilation of intercountry modes of sharing of experiences of HIV/AIDS in the Asia Pacific region.
- SEA-AIDS, an electronic information exchange network established in 1995 and funded by the World Bank, has to date over 1000 subscribers on its mailing list. The project produces a bi-weekly update of HIV/AIDS-related developments relevant to the region and has established an indexed electronic archiving system which is available to all networks.
- InfoDev Project, a special project designed by SEAHAP in 1995 and supported by the World Bank, provides hardware, software and human resources training to link organizations electronically within 10 countries of the region.
- Information Support Centres (ISCs) facilitate and promote the availability of materials produced by UNAIDS and cosponsor organizations at the country level. To date, 10 ISCs have been established: Asian Institute for Health and Development (Thailand), Population and Community Development Association (Thailand), Health Action and Information Network (Philippines), AIDS Concern (Hong Kong Special Administrative Region of China), Yayasan Pakta (Indonesia), Albion Street Centre (Australia), Korean AntiAIDS (Korea), Ministry of Health (Mongolia), Ministry of Health (Malaysia), Action for AIDS (Singapore).

- Information system networks have been set up, such as: Gender AIDS for UNIFEM, ASEAN AIDS Information Network, and APN+Share Information Network.

Technical cooperation

- Technical support was provided to strengthen national capacity for effective national response through strategic planning in Mongolia.

- Joint action programmes were developed with the UNICEF Mekong HIV/AIDS Project through Task Forces on youth and education, and on media and communications, and through cluster countries on transborder issues.

- APICT collaborated with the Western Pacific and South-East Asia Regional Offices of WHO on ongoing cross-border programmes, on a national AIDS programme managers meeting, and on training in clinical, community and home-based care.

- They collaborated with the Government of Japan in organizing HIV/AIDS workshops in Asia, and facilitated intercountry collaboration in HIV vaccine development.

- APICT collaborated with AusAID in Mekong subregional strategic planning by facilitating meetings of UNAIDS Cosponsors and key partners, donors and implementers.

- Two Task Forces were established for South-East Asia and two Working Groups for South Asia (on Migrant Labour and HIV, and on Drug Use and HIV), involving Cosponsors, key donors and implementers. The aim was to identify priority areas, conduct situation assessments and rapid applied research, and to develop joint action programmes.

Regional partnerships

- Following the success of the two Task Forces mentioned above, UNICEF East Asia Pacific Regional Office established two HIV/AIDS Task Forces (on Youth and Education, and on Media and Communication) under the umbrella of UNAIDS.

- Technical assistance (a 3-month consultancy) was provided to the ASEAN Task Force on HIV/AIDS (ATFOA) to review the strategic plan and design projects for implementation by ASEAN members. The projects were endorsed by ATFOA in December 1997.

- There was collaboration with regional networks such AHRN, People Living with APN+ and the Asia Pacific Council of AIDS Service Organizations (APCASO). The nature of partnership varies. It includes groundwork on assessment and policy advocacy on issues related to drug-abuse, needs assessment for people living with HIV/AIDS and the community, and strengthening of peer capacity to address human rights issues.

- APICT collaborated with the Economic and Social Commission in Asia and Pacific (ESCAP) through the Social Development Division and the Regional Interagency Committee for Asia and the Pacific (RICAP) Sub-commitee on HIV/AIDS. The aim is to share information, to develop and implement joint actions, and to carry out advocacy. In 1997, RICAP and APICT worked together for World AIDS Day, sending out cassette tapes prepared by a joint working group to 350 radio stations in 56 countries in the region.

B.   The West and Central Africa Intercountry Team (WCA/ICT)

From October 1996 to December 1997, the WCA/ICT focused on: (1) building and reinforcing regional partnerships with diverse actors involved in the response to HIV/AIDS; (2) providing support to countries in strategic planning; (3) facilitating the implementation of cross-border initiatives, such as the WAI; (4) developing regional networks and technical resources; (5) supporting the development of information exchange in the region, and (6) contributing to the implementation of WHO's Regional Office for Africa workplan in the area of blood safety and STD prevention and control .

Building and reinforcing regional partnerships

- *Development of collaboration and partnership with cosponsor regional offices.* This has included the implementation of a common workplan with WHO's Regional Office for Africa's joint activities with and evaluation of UNDP's regional project on HIV/AIDS in Africa, and regular coordination with UNFPA's regional team in Abidjan, Côte d'Ivoire[4]. In addition, a common plan has been elaborated for 1998 with the UNICEF West and Central Africa Regional Office in priority areas, including strengthening district-level response, youth programming, health promotion, and the operationalization of STD programmes. Follow-up to the WAI is coordinated in collaboration with the World Bank.

- *Development of partnerships and mobilization of regional bodies.* While continue with several organizations such as the African Development Bank (ADB), the WCA/ICT participated in a joint Organization of African Unity (OAU) and World Bank evaluation mission in Sierra Leone on the implementation of the African Heads of State Declaration on HIV/AIDS.

- *Reinforcement of partnerships with multi and bilateral agencies.* Examples of these partnerships exist with the GTZ regional programme on HIV/AIDS based in Accra,

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[4] The areas of collaboration with WHO are blood safety, STD strategies, strengthening of technical resources in diverse programmatic areas, and harmonization of training courses in STDs and HIV/AIDS. With UNDP, this has supported networks and associations of people living with HIV/AIDS, regional research and ethical-legal networks, and has facilitated "HIV and development" workshops. Collaboration with UNFPA, has included information management and the development of training guidelines for youth.

Ghana, the Canadian International Development Agency's (CIDA) regional HIV/AIDS project based in Ouagadougou, Burkina Faso, and the USAID-supported regional project on family health and AIDS in West and Central Africa based in Abidjan, Côte d'Ivoire. These partnerships cover diverse areas, the most important of which are cross-border issues, working with vulnerable populations such as sex workers, STD strategies, information exchange and the integration of HIV/AIDS into reproductive health.

- *Facilitating and supporting the work of NGOs and regional networks.* According to their focus and their institutional and human resources, the WCA/ICT has sought to reinforce and draw upon the services of NGOs in the region. This has included the conclusion of a large-scale project with IPPF to integrate HIV/AIDS into reproductive health services in francophone African countries, which will be monitored by the WCA/ICT. The WCA/ICT has also provided support to specific activities such as a regional symposium on women and HIV/AIDS and action research on gender issues through the African AIDS Research Network (AARN). The team also collaborates with other NGOs[5], such as Enda-Santé, Dakar, Senegal, which has specific capacities in translation, documentation and mobilization of human resources in the region[6].

Provision of technical assistance to countries through the UN Theme Group

The WCA/ICT has provided support to strategic national planning, evaluation and specific programmatic issues. In response to requests channeled through the Theme Group mechanism, technical support missions were undertaken by the WCA/ICT to eight countries in the region[7]. In addition, the WCA/ICT organized missions by national AIDS programme (NAP) coordinators to Cape Verde, Gabon and Guinea to advocate or reinforce efforts at adopting a more comprehensive and multisectoral approach.

Support to cross-border initiatives: West African HIV/AIDS Initiative

WAI is the outcome of regional consultations, initially between 11 but later 17 countries of West Africa. It involves NAP coordinators as well as the regional network of NGOs (AFRICASO) and of the Network of People Living with HIV/AIDS (NAP+). This has enabled priority areas of action to be identified. On the basis of this, a regional workplan was elaborated for the WAI and regularly monitored by the intercountry coordinating committee that was set up for this purpose. Since October 1996, the WCA/ICT has provided technical and administrative assistance to ensure the implementation of the WAI workplan. Activities carried out include:

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[5] On the participation of people living with HIV/AIDS, see the section on the WAI.

[6] Other NGOs of importance are: AFRICASO representing NGOs working on HIV/AIDS in the region, the Society on AIDS in Africa, the African Union against Sexually Transmitted Diseases, and the Society of Women against AIDS (SWAA).

[7] Burkina Faso, Chad, Democratic Republic of Congo, Mali, Mauritania, Niger, Rwanda (joint WHO/UNAIDS mission) and Togo.

- *Cross-border issues, migration and mobility.* Participating institutions include national AIDS programmes and university departments in each country. Other partners include ACTIONAID, GTZ, CIDA and Family Health and AIDS in West and Central Africa. Five action research projects on the main transportation routes in the region and frontier zones have been initiated. The study sites are in Burkina Faso, Côte d'Ivoire, Mali, Niger and Senegal. The objective of these projects is to increase understanding of migration and mobility and to propose strategies to reduce vulnerability and risks associated with these factors.

- *Vulnerability in the context of sex work.* Within a comprehensive strategy to reinforce knowledge and innovative actions in the context of sex work, a situational analysis guide on sex work has been elaborated for field-level educators and pretested in Bobo-Dioulasso, Burkina Faso, in collaboration with the Muraz Centre of the Organization for Coordination and Cooperation against Endemic Diseases. With the GTZ regional programme in Accra, Ghana, an evaluation of community-based approaches in sex work has been conducted in four countries: (Côte d'Ivoire, Mali, Senegal and Togo).

- *Support to networks and associations of PLHAs.* The WAI has contributed to the development of projects by persons living with HIV/AIDS in Benin and Togo. In an effort to reinforce associations of persons living with HIV/AIDS, 'ambassador' missions have also been conducted by such persons Benin, Burkina Faso, Mali, Mauritania, and Togo. Support was also given to the organization of the second regional workshop of persons living with HIV/AIDS in Yamoussoukro, in October 1997, in collaboration with other regional partners. Finally, the WAI is providing financial support to the secretariat of the regional network of persons living with HIV/AIDS for a greater dissemination of information and sharing of experiences between countries.

- *Community mobilization and advocacy towards various sectors.* Support has been provided by the WAI to regional meetings between opinion formers and community leaders to encourage wider involvement in the expanded response. An example of this support was that given to the First International Symposium on AIDS and Religion, in Dakar, Senegal, in November 1997, in collaboration with the Government of Senegal, the European Union and other partners.

Development of regional networks and resources

In an effort to enhance and ensure the sustainability of resources in the region, groups of experts, task forces and networks have been developed in selected programme areas. These include the following:

- *A regional group of experts on strategic planning.* Following identification of expertise at the level of Cosponsors, institutions and regional networks, the WCA/ICT has enhanced the creation of a regional group of experts to provide technical support for strategic planning at country level.

- *A regional group of experts on migration.* Composed of the five WAI country research teams on migration, as well as other resource persons, a regional group of experts was formed to provide technical support in this domain.

- *A regional group of experts on sex work.* Following identification of existing expertise on sex work in the region and in collaboration with partners involved in this domain, such as GTZ, a regional group of experts on sex work was formed.

- *A regional West African network on the genetic variability of HIV strains* was established.

An effort has also been made to develop methodology tools and situational analysis guidelines adapted to the region. A methodological guide on migration has been drawn up. A tool for the situational analysis of sex work based on field experience was developed after being pretested[8].

Development of an information management system

In collaboration with UNFPA, the GTZ regional programme in Ghana, CIDA, UNDP, the UNICEF Regional Office for West Africa, the World Bank, Enda-Santé in Senegal, and local partners, the WCA/ICT is developing an information management system for HIV issues in the region. The first step in this collaboration was a situational analysis in four countries of the subregion including, Burkina Faso, Côte d'Ivoire, Ghana and Senegal. On the basis of the results of this study and the experience of other regions, a project will start during the first half of 1998.

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[8] Initiative Ouest Africaine. *Methodologie de recherche action project migration et SIDA.* UNAIDS, Abidjan, 1997.
Initiative Ouest Africaine. *Guide d'Analyse de la situation de la prostitution en Afrique de l'Ouest.* UNAIDS, Abidjan, 1997.

Reinforcing blood safety and control of sexually transmitted diseases

- Within the framework of providing support for the WHO Regional Office for Africa efforts on blood safety and laboratory techniques, regional training workshops were organized. These covered strategies of blood donor recruitment (Lome, November 1996) for 13 francophone countries; distance training for blood safety measures (Abidjan, July 1997) for 16 francophone countries; and strategies of recruiting blood donors (Harare, November 1997) for 10 anglophone countries.

- In addition to its priority areas of work, the WCA/ICT collaborates with the WHO Regional Office for Africa and other partners in the area of STD prevention and control, as well as care and support for persons living with HIV/AIDS.

C.   The Eastern and Southern Africa Intercountry Team (ESA/ICT)

In 1997, the focus of the ESA/ICT was on: (1) collaborating with regional initiatives of Cosponsors and other partners; (2) supporting the development of regional networks; (3) facilitating information and experience sharing; and (4) providing technical support to countries through the UN Theme Group.

Collaboration with and support to regional initiatives of Cosponsors and partners

- *UNICEF Regional Office for Eastern and Southern Africa (ESARO):* Network meetings were jointly organized with ESARO. Information was shared and the participation of country-level implementers was supported.

- *Southern Africa Tuberculosis Control Initiative (SATCI).* With this joint WHO/Southern African Development Council (SADC) subregional tuberculosis control project, a programme has been developed for the integration of counselling and other support into the care of people coinfected with HIV/AIDS.

- *WHO, UNFPA, IPPF, Population Services International (PSI).* A regional consultation on promoting the female condom in Eastern and Southern Africa was jointly planned.

- *Medical Assistance Programme (MAP).* This Kenya-based organization is expanding its successful initiative in working with churches to mobilize their members for prevention and care in Angola and Tanzania.

- *SADC*, *Organization of African Trade Union Unity (OUATUU)*, *Family Heath International (FHI), International Labor Organization(ILO).* ESA/ICT supported the adoption of the SADC Code on AIDS and Employment. Case studies on implementation of the Code are now being commissioned and a regional meeting is planned along with the partners mentioned above.

- *Regional Aids Training Network (RATN).* ESA/ICT was active on the expert committee and facilitated dissemination of information and sharing of experiences on community-based care.

- *Network of African People Living with HIV/AIDS (NAP+/ESA).* In collaboration with UNDP and United Nations Volunteers (UNV), the implementation of Greater Involvement of People Affected by HIV/AIDS (GIPA) pilot projects has been started in Malawi and Zambia. Support has been provided to other countries in the region to promote activities that give a human face to the epidemic and combat discrimination of people living with HIV/AIDS.

- *DFID.* Thre was collaboration to strengthen the coverage and quality of syndromic management of STDs in SADC countries, and with the Regional Office of WHO for the implementation of the regional STD strategy. Networking, including collaboration with the Nairobi-based AIDS/STD Training Network, will be a main feature of the subregional strategy.

Support to network development

This included provision of technical assistance (strategic planning) and financial support, in partnership with the regional programme of the Swedish International Development Agency (SIDA), *to the Southern Africa Network of AIDS Service Organisations (SANASO)*, and assistance in the organization of their regional meeting in Swaziland.

Facilitation of information exchange

In order to increase access to the best practice collection and other UNAIDS publications, ESA/ICT collaborated with *the Southern Africa AIDS Information Dissemination Service (SAFAIDS)* to include a UNAIDS page in the quarterly newsletter. The newsletter was distributed to all CPAs in the region for further distribution to UN and other partners, thereby supporting networking.

Provision of technical assistance to countries though the UN Theme Group.

ESA/ICT provided technical assistance to countries in the region in the following areas:

- Zambia: assistance in the preparation (methodology, logistics) of the strategic planning process as well as in the analysis and planning exercise, and in the elaboration of an interim plan.

- Malawi: participation with UNDP in a series of training workshops to reinforce the capacity of Malawian researchers and decision-makers to analyse areas of disfunctionalities due to HIV/AIDS. That process resulted in the elaboration of research projects now being carried out and in the establishment of a strategic planning unit which is now facilitating strategic planning, including the elaboration of an interim plan for the National AIDS Programme. ESA/ICT carried out a follow-up mission to monitor the process.

- South Africa: participation in the review and planning of the national response, and provision of further technical assistance for sectoral strategic planning (military, business sector).

- Botswana, Lesotho, Malawi, South Africa, Swaziland, Zambia: assistance in the development of national AIDS policy, organization of UN support to the national response, elaboration of strategies to promote the expanded response and advocacy with national decision-makers.

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