

Multi Donor Trust Fund - Iraq Trust Fund

ANNUAL PROGRAMME¹ NARRATIVE PROGRESS REPORT REPORTING PERIOD: 1 JANUARY - 31 DECEMBER 2010

Programme Title & Number

- Programme Title: Preparatory Phase: HIV/AIDS Policy Support and Capacity Building Programme
- Programme Number (if applicable): D2-26
- MDTF Office Atlas Number:

Country, Locality(s), Thematic Area(s) ²
Iraq
Thematic Area/Sector: Health and Nutrition

Participating Organization(s)

WHO

Programme/Project Cost (US\$)					
MDTF Fund Contribution:	\$1,000,000				
Agency Contribution					
Government Contribution	In kind support (Free ARVs, National Staff Salary and medico- social support to PLWHA (Persons living with HIV/AIDS)				
Other Contribution (UNAIDS)	\$75,000				
TOTAL:	\$1,075,000				

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Ministry of Health

Programme Duration (months)				
Overall Duration	12 months			
Start Date	02 March 2010			
Original End Date Revised End Date	02 March 2011 31 December 2011			
Operational Closure Date				
Expected Financial Closure Date				

Programme Assessments/Mid-Term Evaluation

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Assessm	ent Comp	oleted - if applicable please attach
☐ Yes	□ No	Date:
Mid-Eva	luation R	eport – if applicable please attach
☐ Yes	□ No	Date:

Submitted By

- o Name: Dr Yetmgeta Eyayou Abdella
 - Title: Medical Officer
- Participating Organization (Lead): WHO
- Email address: abdellay@irq.emro.who.int

¹ The term "programme" is used for programmes, joint programmes and projects.

² Priority Area for the Peacebuilding Fund; Sector for the UNDG ITF.

NARRATIVE REPORT FORMAT

I. Purpose

This joint project focuses on policy support and capacity building to set a strong foundation for a decentralized multi-sectoral HIV/AIDS response in Iraq. It will contribute directly towards MDG 6 (Combat HIV/AIDS, malaria and other diseases) and indirectly to the achievement of MDG 3 (Promote gender equality and empower women through support to targeted HIV prevention programs for women), MDG 4 (Reduce child mortality), and MDG 5 (Improve maternal health through the building the capacity of women organizations in primary prevention). The project will also directly contribute to national priorities detailed in the National Development Strategy (NDS) related to improved accessibility to health services, and the ICI goals to improve health and nutrition of all Iraqis as a cornerstone of welfare and economic development. In addition, the project will help the country to meet its commitments for the UNGASS political deceleration and other global initiatives such as Universal Access to HIV treatment, care and support services.

This project is the preparatory phase for a larger national HIV/AIDS program that would follow the development of the national strategic plan on HIV/AIDS. It addresses key gaps in information, policy and capacity facing the national partners and hindering the efforts for improved HIV/AIDS programming. The project is structured around three key areas corresponding to the three outputs of the project:

- (i) Advocacy and Policy Support
- (ii) Generation of Strategic Information
- (iii) Capacity Development & Training

The project is aligned to the UN Health and Nutrition Sector Outcome #1: "By 2010, Families and communities with specific emphasis on those affected by ongoing emergencies have improved access to and utilization of quality health and nutrition services.

Joint Programme Outputs:

- Output 1.1: Capacity of GOI and partners enhanced to develop HIV/AIDS related policies, plans and strategies in a participatory manner
- *Output 1.2*: HIV/AIDS Information generation system in place.
- *Output 1.3*: Enhanced capacity of the National AIDS Program, NGOs and Higher Committee on AIDS for better HIV/AIDS programming.
- Explain how the Programme relates to the Strategic (UN) Planning Framework guiding the operations of the Fund/JP.

The Joint programme relate to:

- **ICI benchmarks** (as per the Joint Monitoring Matrix 2008): 4.4.1.4 Improve health and nutrition of all Iraqis as a cornerstone of welfare and economic development.
- **Sector Team Outcome(s):** Health and nutrition policy makers and service providers at all levels have developed, reviewed and implemented policies, strategies, plans and programmes
- Iraq NDS: Goal 6, Target (8): Full access to water and health services for all people, establishing a more efficient information system, strengthening disease surveillance system and intensifying communicable disease control activities

• The Iraqi MDGs in the National Development Strategy 2007-2010: The joint programme directly relates to MDG 6 (Combat HIV/AIDS, malaria and other diseases) and indirectly to the achievement of MDG 3 (Promote gender equality and empower women through support to targeted HIV prevention programs for women), MDG 4 (Reduce child mortality), and MDG 5 (Improve maternal health through the building the capacity of women organizations in primary prevention).

II. Resources

Financial Resources:

• Other funding resources available to the project:

The financial contribution of UNAIDS for this joint programme is \$75,000. This resource will complement planned activities and technical assistance.

• Budget revisions approved by the ITF Steering Committee.

On 16 March 2011, UNDG ITF Steering Committee has approved budget revision to extend the project end date to 31 December 2011. In addition, joint programme activities initially assigned to UNODC are transferred to WHO as the former is not in a position to implement respective activities.

• Good practices and constraints in the mechanics of the financial process, times to get transfers, identification of potential bottlenecks, need for better coordination, etc.

The process of signing the Memorandum of Understanding among UN participating agencies took longer than expected and contributed to some delays in the implementation of the project. The process of transferring funds from the lead agency to other UN participating agencies also took longer than expected because of financial and administrative procedures that need to be observed.

Human Resources:

As mentioned above this project has been jointly implemented by WHO, UNESCO, WFP, UNFPA, UNDP and UNODC.

National Staff:

Two national staffs based in WHO Iraq office in Amman have been contributing to the implementation of the project activities in addition to their responsibilities to support other program areas. The inputs of these staff have been instrumental in the progress made to date by providing a regular follow up with the Ministry of Health. In addition, national consultants have been recruited by WFP and UNESCO to undertake specific activities related to the joint programme.

International Staff:

One international staff has been recruited as programme manager based in WHO Iraq office in Amman. In addition, one international consultant for development of the National AIDS Strategic plan has been recruited. Agreement has also been signed with the WHO Collaborating Center for HIV Surveillance in Kerman University, Iran to provide technical assistance for HIV surveillance activities in Iraq. Required support was given to the project by the senior management and relevant technical officers of WHO office for Iraq and other UN participating agencies.

III.Implementation and Monitoring Arrangements

• The implementation mechanisms primarily utilized and how they are adapted to achieve maximum impact given the operating context.

WHO is the lead agency responsible for overall management and coordination. Planned activities are implemented by all UN participating agencies. The Ministry of Health (MoH) is the primary government partner with the primary responsibility for coordination among government stakeholders, namely, Ministries of Health, Education, Interior, Women Affairs, Youth and Sports and Displacement and Migration implementation overall guidance and implementing this project. The project implementation progress has been regularly monitored by the technical staff of WHO currently based in Amman, the RC's office and the Joint UN Team on AIDS. The project also engaged a high level of technical backstopping from the WHO Regional Office for the Eastern Mediterranean (EMRO) and UNAIDS Regional Office.

Close coordination was maintained between Government and UN partners through respective UN offices based in Baghdad. Throughout the project implementation high emphasis has been placed on the principles of ownership and national solidarity. WHO has endeavored to apply these principles in every activity it has undertaken and every result achieved.

• The procurement procedures utilized.

WHO (lead agency) and other UN participating agencies have well established procurement procedures for procurement of goods and services to ensure quality, efficiency and cost effectiveness. These procedures are respected in procuring services and goods.

• The monitoring system

A major component of the program monitoring is regular updates between WHO and MOH, monthly meeting of Joint UN team on AIDS and quarterly reports from all UN participating agencies. WHO as the leading agency has the primary responsibility in coordinating program monitoring activities. Mid-term and final evaluations of the programme will take place to determine the effectiveness of the programme and level of progress against the set quantitative and qualitative targets.

• Assessments, evaluations or studies undertaken.

The assessment of HIV surveillance system in Iraq has been conducted by the National AIDS Program in collaboration with WHO and report is being finalized. The assessment of HIV epidemiology, situation and response has started and will be used as a basis for the development of the National AIDS Strategic Plan. Other assessments, formative assessment of HIV in prisoners, injecting drug users and female sex workers will be implemented in by August 2011.

IV. Results

• Programme progress in relation to planned outcomes and outputs:

Output 1.1: Capacity of GOI and partners enhanced to develop HIV/AIDS related policies, plans and strategies in a participatory manner

 Ministry of Health in collaboration with World Health Organization and the Joint UN Team on AIDS has initiated the process of developing National AIDS Strategic plan for Iraq along with national operational plan, national monitoring and evaluation framework and plan. The Regional Offices for WHO and UNAIDS are also providing technical support for the strategic plan development. The planning meeting has already been conducted and work plan for the strategic plan development developed. The assessment of HIV epidemiology, situation and response analysis is planned in April 2011 and the strategic plan is expected to be finalized and endorsed by October 2011.

Output 1.2: HIV/AIDS Information generation system in place.

- WHO Iraq in collaboration with WHO Regional Office and the Regional Knowledge Hub for HIV surveillance (in Kerman University, Iraq) has started providing support to the Ministry of Health to strengthen its HIV surveillance system. Desk review of the HIV surveillance system in Iraq has already been conducted and the findings of the review presented and discussed in a workshop. Currently, draft national HIV surveillance plan is prepared. Training of national staff on HIV surveillance system will be conducted in June 2011.
- UNFPA is finalizing preparations to initiate formative assessment of HIV among female sex workers in Iraq. Moreover, WHO has taken responsibility of conducting formative assessment of HIV among prisoners and injecting drug users in Iraq. Findings of the assessments are expected to be available in July 2011.

Output 1.3: Enhanced capacity of the National AIDS Program, NGOs and Higher Committee on AIDS for better HIV/AIDS programming.

- UNESCO organized study tour and training on the Integration of HIV/AIDS into Education
 Programming for Youth in Amman, Jordan for 17 Iraqi participants. The focus was on approaches,
 information and tools for integrating HIV/AIDS into the education sector in Iraq. The participants
 were all quite motivated and at the end, had several recommendations for follow up related to
 HIV/AIDS and education.
- WFP conducted capacity building activities to humanitarian NGOs to enhance their capacity to integrate HIV/AIDS within their respective humanitarian programs.
- UNDP is coordinating with WHO in supporting the development of the national AIDS strategic plan.
- The key outputs achieved in the reporting period including # and nature of the activities (inputs), % of completion and beneficiaries.

Direct	Number of Beneficiaries	% of planned
Beneficiaries		(current status)
Men	The development of the national AIDS strategic plan will	100% after
	positively affect the lives of Iraq men.	completion of the
		project
Women	The development of the national AIDS strategic plan will	100% after
	positively affect the lives of Iraq women as gender issues in	completion of the
	HIV programming will be given emphasis.	project
Children	The development of the national AIDS strategic plan will	100% after
	positively affect the lives of Iraq children as HIV affected	completion of the
	children primarily through mother to child transmission.	project
IDPs	Some of the target groups to be addressed in the national	NA
	strategic plan and HIV surveillance plan are IDPs	
Others	The main beneficiary of the project will be the MOH, as it is	15%

	the key duty bearer for formulation, implementation and	
	monitoring of the HIV Control Program. Participants in the	
	various trainings will also be direct beneficiaries.	
Indirect	People living with HIV/AIDS, most at risk population, young	15%
beneficiaries	people and institutions that would benefit from the policy and	
	capacity building programs	
Employment	Employment generation is not one of the objectives of this	0
generation	joint programme.	
(men/women)		

Output	Achieved activities	Completion
		rate
Output 1.1: GoI and	International consultant recruited for developing the	30%
partners are able to	national AIDS strategic plan. The planning meeting has	
develop HIV/AIDS	already been conducted and work plan for the strategic	
related policies, plans	plan development developed. The assessment of HIV	
and strategies in a	epidemiology, situation and response analysis is planned in	
participatory manner	April 2011 and the strategic plan is expected to be	
	finalized and endorsed by October 2011.	
Output 1.2: HIV/AIDS	WHO Iraq in collaboration with MOH, WHO Regional	50%
Information generation	Office and the Regional Knowledge Hub for HIV	
system in place	surveillance (in Kerman University, Iraq) conducted desk	
	review of the HIV surveillance system in Iraq and the	
	findings of the review presented and discussed in a	
	workshop. Currently, draft national HIV surveillance plan	
	is prepared. Training of national staff on HIV surveillance	
	system will be conducted in June 2011.	
	Preparatory work has been conducted to conduct formative	
	assessment of HIV among female sex workers (by	
	UNFPA) and among prisoners and injecting drug users (by	
	WHO). Findings of the assessments are expected to be	
	available in July 2011.	
Output 1.3: Enhanced	UNESCO organized study tour and training on the	100%
capacity of the National	Integration of HIV/AIDS into Education Programming for	
AIDS Program, NGOs	Youth in Amman, Jordan for 17 Iraqi participants. The	
and Higher Committee	focus was on approaches, information and tools for	
on AIDS for better	integrating HIV/AIDS into the education sector in Iraq.	
HIV/AIDS	The participants were all quite motivated and at the end,	
programming.	had several recommendations for follow up related to	
	HIV/AIDS and education. WFP also conducted capacity	
	building activities to humanitarian NGOs to enhance their	
	capacity to integrate HIV/AIDS within their respective	
	humanitarian programs.	

• The delays in programme implementation, the nature of the constraints, actions taken to mitigate future delays and lessons learned in the process.

The project started in March 2010 – a period during which the WHO Regional Office for the Eastern Mediterranean had just launched a new Global Management System (GSM) that was replacing the old system Country Assistance Management System (CAMS). The transition had contributed to some delays in the project implementation. Currently, the project is being implemented according to the revised timeline agreed during the budget revision process.

Actions taken to mitigate future delays:

In order to avoid future delays agreement has been reached among UN participating agencies to strengthen communication and coordination. A monthly meeting of the Joint UN Team on AIDS has resumed and regular e-mail, telephone and video conference communication with MOH has been put in place to follow progress of implementation of planned activities.

• The key partnerships and collaborations, and their impact on the achievement of results.

WHO as a lead agency in this joint project is working with the UN participating agencies and the Joint UN Team on AIDS to achieve project objectives. WHO is also working closely with MoH representatives, key managers and health professionals in Iraq, which fosters national capacity building and long term sustainability.

V. Future Work Plan (if applicable)

• The projected activities and expenditures for the following reporting period (1 January-31 December 2011), using the lessons learned during the previous reporting period.

The project has been extended to 31 December 2011. Between 1 January and 31 December 2011, various capacity building activities will be conducted, formative assessment on HIV among most at risk populations will be conducted and the national AIDS strategic plan will be finalized and endorsed.

VIII. INDICATOR BASED PERFORMANCE ASSESSMENT

	Performance Indicators	Indicator Baselines	Planned Indicator Targets	Achieved Indicator Targets	Reasons for Variance (if any)	Source of Verification	Comments (if any)
	s the Institutional and poli	icy framewo	rk for an enl	anced Multi-	-sectoral and Decentralized Na	tional HIV/AID	S response in
Iraq			.	.			
Output 1.1: GoI and partners are able to develop HIV/AIDS related policies, plans and strategies in a participatory manner	1.1.1 Draft National AIDS Strategic Plan submitted to GOI	No	Yes	In progress	Development of the strategic plan is in progress and will be finalized by October 201	progress	
Output 1.2: HIV/AIDS Information generation system in place	Indicator 1.2.1: M&E plan for HIV/AIDS produced	No	Yes	In progress	National M&E strategic framework and plan are part of the National AIDS Strategic plan development process and will be finalized by October 2011	report	
	Indicator 1.2.2: Number of National Officers who received Training in M & E and SGS	0	25	11	11 staff of the National AIDS Program attended a 2 day workshop on HIV surveillance system planning. Additional trainings scheduled in June 2011	Workshop report	
	Bio-behavioral Study for HIV/AIDS among prisoners and IDUs is conducted and findings are disseminated	No	Yes	In progress	Development of study protocol started in collaboration with WHO Collaborating center for HIV surveillance in Zagreb, Croatia	Program progress report	

	Qualitative and formative research among FSWs are conducted and findings are disseminated	No	Yes	In progress	Preparatory work is being done to initiate the planned formative research among FSWs	Program progress report
Output 1.3: Enhanced capacity of the National AIDS Program, NGOs and Higher Committee on AIDS for better HIV/AIDS programming	Indicator 1.3.1: Number of NGO representatives trained on HIV leadership, programme management, working with MARPs mainstreaming and multi-sectorality	0	10		Training conducted in Baghdad	Workshop report