Swaziland Country Assessment to Strengthen Adolescent Component of National HIV Programme

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#EndAdolescentAIDS
ALL-IN – What it means for Swaziland:

1. An agenda for action to accelerate HIV results with and for adolescents particularly excluded groups (Adolescent girls)

2. Swaziland has subscribed to the “Fast Track” agenda and “90/90/90” towards ending the AIDS epidemic as a public health threat by 2030

3. ALL – In platform will serve to strengthen partnerships and coordination across sectors and foster meaningful involvement of adolescents in all aspects of programming and advocacy for adolescents

4. An opportunity to support the country to improve data collection analysis and utilization for programme planning, M&E for adolescents as a group,

5. An opportunity to amplify and complement adolescent-focused initiatives, investments & resource mobilization efforts in the country, e.g. PEPFAR - DREAMS, and other national and GFATM funded initiatives for adolescents
OBJECTIVES

- To orient stakeholders on the Country Assessment tool for ALL IN

- Conduct a rapid assessment of programme performance on HIV and other related interventions among adolescents aged 10 – 19 years

- To facilitate evidence-informed priority setting on who, what and where to focus HIV programming among adolescents
PROCESS OF THE RAPID ASSESSMENT

- Government-led consultative process with participation of various stakeholders (aligned ministries; development partners; NGOs, FBOs, etc)
- Sought harmonization with existing Adolescent programs/initiatives;
- Review and validation of selected indicators from multiple data sources
- Consultation with adolescents and young people
- Synthesis of data into a dashboard
KEY FACTORS FOR SUCCESS
KEY SUCCESS FACTORS

- **Context savvy**
  - Building on national and regional commitments to ensure follow-up (King Mswati III call for an AIDS-free generation by 2022 & ESAR priorities)

- **In country leadership and Advocacy**
  - Senior staff from NERCHA participated at the global launch to ensure country ownership;
  - Broad based consultation and consensus building;
  - Establishment of a core team comprising UN and national stakeholders
  - A communication strategy was developed to ensure that relevant UN agencies are also involved;
  - Sensitization of relevant stakeholders from Government and civil society organisations;
  - Building on the existing ASRH TWG on adolescents, and the HIV/AIDS TWG on prevention.
KEY SUCCESS FACTORS

- Coordination
  - Coordination of the mission by the UN at regional & global levels

- Advocacy
  - Senior staff from NERCHA participated at the global launch to ensure country ownership;
  - A communication strategy was developed to ensure that relevant UN agencies are also involved;
  - Sensitization of relevant stakeholders from Government and civil society organisations;
  - Building on the existing ASRH TWG on adolescents, and the HIV/AIDS TWG on prevention.
KEY SUCCESS FACTORS CONT’D

Facilitation and Coordination
- UN/UNICEF Convening role;
- Anchorage into NERCHA which plays a leadership and coordination role;
- Engagement of several ministries dealing with youth issues, youth organisations and other relevant civil society organisations;
- Linkages with similar initiatives: DREAMS, GFATM, etc.

Convergence
- Multidisciplinary team from various background: programme designers and implementers, including M&E, social sciences, medicine and public health, community workers, adolescents/youth leaders, communication specialists, etc.
KEY SUCCESS FACTORS CONT’D

• Capacity Development, Partnership and Networking

  • Openness to learn, discover and share new experiences and ideas;
  • A range of facilitators and partners from different backgrounds and levels (country, region and global);
  • Participatory and interactive methodologies;
  • Consultation and consensus building.
  • Harmonisation and alignment with on-going efforts e.g. GFATM grant making process
KEY SUCCESS FACTORS

CONT’D

Knowledge Management and Documentation:
- UN Population Division demographic estimates,
- Adolescent profile & related studies,
- Further analysis of concluded surveys (MICS, DHS),
- Targeted surveys (BSS),
- Health Information Management System,
- Qualitative assessments
- Document reviews

South-South Cooperation
- UN regional offices,

Accountability:
- Roles and responsibilities
CHALLENGES AND LESSONS LEARNT

- Sustaining the momentum
- Resources – Financial and Human
- Tracking, Monitoring and Documenting progress;
- Managing Partners expectations;
- Ownership of data and monitoring of progress

Lessons Learnt

- Pre-mission to ensure that data requirement & sources are mapped out
- Establishment of national taskforce to coordinate the process
Complete Phase 1:

- Designate lead for All In assessment in NERCHA including custodian accountable for maintaining adolescent database (NERCHA M&E system)
- Establish a technical task team (within existing Adolescent TWG) including regional representation to support All In assessment process (to coordinate, advise, communicate)
- Finalize population of tool for phase 1
- Assess data gaps and consult with Central Statistics Office and other data sources regarding missing data
- Official dissemination of findings by NERCHA to stakeholders
Phase 2:

- Scan environment to map what assessments/interventions are underway
- Convene partners and discuss alignment between the ongoing processes to ensure complementarity and clarify added-value
- Meet with sector/institutional focal points and technical task team to timeline and plan implementation of phase 2