



# MODULE 1

## Programme Stewardship and Planning

## Preamble

For the first time in decades, the response to the global HIV epidemic is poised to achieve lasting progress in HIV prevention for young women and adolescent girls. This is buoyed by three key trends: 1) a renewed HIV prevention platform — driven by breakthroughs in the development of novel prevention tools; 2) political will at the highest levels of global development for intersectoral programming — as articulated in the aspirations of the Sustainable Development Goals (SDGs); 3) an increase in investments for advancing gender equality across all domains of health and well-being. In contrast to broader declines in HIV-specific funding, these trends have led to unprecedented growth in funding earmarked for holistic HIV prevention, treatment and care across the life cycle in women and adolescent girls, notably for younger populations. The renewed urgency and increased investment in HIV prevention for young women and adolescent girls present new opportunities on multiple fronts.

Across the most-affected regions, namely West and Central Africa and East and Southern Africa, national authorities are starting to see momentum in efforts to avert new HIV infections among young women and adolescent girls aged 15–24 years, the very demographic most central to the future sustainability of the entire HIV epidemic response. This progress is centred around the key epidemics of note, mainly in Southern Africa, which is encouraging. On a sobering note, although they were promising, recent documented declines in annual new HIV infections among young women and adolescent girls still fall far short of global commitments to reduce new HIV infections by over 75 per cent for the year 2020.

If recent history in the global HIV epidemic response is anything to go by, this opportunity will have a limited, if unknown, lifespan. Effective stewardship of both HIV-specific and broader health and development resources will be necessary to strengthen national systems and responses, with a clear eye towards a longer-term sustainable response once current funding levels recede. This will entail rational planning and decision-making, diligent resource management, savvy coordination of disparate actors and stakeholders across sectors, and disciplined use of data to drive programmatic decisions.

## Key Takeaways

- The SDGs, with their emphasis on the interlinkage, mutuality and indivisibility of outcomes, perfectly frame the strategic planning processes needed to drive affirming programming for adolescent girls. At the national level, planning for adolescent girl- and woman-centred prevention programmes benefits from a firm grounding in the national health and development frameworks.
- The national response to the unique vulnerabilities that adolescent girls and young women face must be firmly anchored within the key national processes, starting from the national strategic plan/framework for health and HIV, and from similar documents in other sectors, ideally driven by clear longer-term investment cases, with linkage to both programmatic and national budget development.
- Subnational-level planning processes are critical to the success of national initiatives, but even more so in decentralized systems, and should include attention to coordination across partners and alignment of the efforts of subnational actors.
- The agency, leadership and engagement of young women and adolescent girls as experts on their own lives is essential to the national planning and review processes and must receive dedicated resources.
- Given the extensive nature of vulnerability and deprivation in many contexts, and the political pressures to meet the expectations of numerous constituencies, tough decisions must be made on who and what to prioritize within the prevention programming framework.
- Effective programming will require strong, visionary and courageous leadership, with a defined stewardship function to coordinate both the national actors and global or regional development initiatives within a clear national framework.
- Programme managers should take a long view towards the attainment of sustainable results, informed by clear-eyed understanding of their system and policy constraints, with the objective of developing systems that enable local ownership of prevention programmes for young women and adolescent girls.

## Programming Considerations

### 1.1 Maximize the Entry Points for Integration Within the National Planning and Budgeting Cycles<sup>1</sup>

Galvanizing a sustainable and effective response to the HIV-related risks and vulnerabilities experienced by young women and adolescent girls will require an exceptional effort beyond the domain of a single sector. High-level political commitment to place the advancement of women and adolescent girls on the development agenda is needed at every level of national organization. The development processes supporting the national development plan (usually a 10-year development vision, where a plan exists), sectoral development plans (particularly health, education, gender and youth) and programme strategic documents provide the most effective entry points to place the well-being of young women and adolescent girls on the national agenda. Working together, girl and women activists, policymakers, civil society actors and communities can ensure, through effective advocacy and lobbying, the inclusion of HIV outcomes and relevant protection and well-being policies as a key result at this strategic level — or at least, work together to ensure HIV outcomes are not omitted for children and women.

Beyond these key strategic watershed points, concept note development for key funded initiatives (such as Global Fund grant allocations and reprogramming) and the mid-term review of the national strategic plan are major opportunities for technical engagement; programmes need to invest in quality technical assistance to make available sound technical analysis for these processes.

Finally, more routine programme management interfaces, including annual budgeting and programming cycles, as well as annual programme reviews and reporting, may offer modest opportunities to improve the technical approach to implementation, and should encompass key implementers and decision makers as is feasible. Programmes should choose the appropriate entry points for engagement based on a mix of pragmatism and strategic concern.

### 1.2 Convene a Strategic Dialogue on Holistic Prevention and Well-being for Adolescent Girls and Young Women

Given the need to achieve a catalytic improvement in prevention results for young women and adolescent girls, the national prevention effort for this cohort would benefit from high-

level dialogue to address the positioning of and investment in their futures firmly within the strategic realm. Such dialogues have been a powerful instrument for leveraging cross-sectoral coordination, building a sustainable movement and elevating the depth of dialogue for tangible actions.

Where apex offices (the office of the prime minister or office of the presidency) have been engaged, their influence and leadership has been effective at engendering a response across sectors, beyond the sectors typically engaged in the HIV response (health and information/data).

Wherever the strategic dialogue is placed, planning would benefit from having a dedicated group or committee with clear criteria for selection and clear terms of reference, and with the influence to engage and secure commitment from key principals across government. The objectives and deliverables for the dialogues should likewise be carefully crafted, with critical inputs (i.e. data and evidence packaged for an informed lay audience) aligned to support the deliberations.

To be successful, it is critical that the dialogues identify the appropriate stakeholders to include; ministries or sectors such as justice and finance are often included as an afterthought or consulted after the fact, leading to missed opportunities to steer meaningful conversations. National dialogues should also include local government staff where possible, particularly for localities/geographies that play a key role in terms of their burden of HIV.

### 1.3 Develop an Investment Case

A compelling investment case for young women and adolescent girls' advancement presents a formidable advocacy and influence tool and should be considered a worthwhile investment by the prevention programme (see *'Deliver for Good: Investments in girls & women power progress for all'*).

While there is no standardized format for developing one, the investment case articulates the desired state or change that the national programme wants to see and identifies or prioritizes the key investments required to achieve this. An ideal investment case should be rigorous, informed by empirical evidence, and should be realistically costed. However, the goal should be a document that is well narrated, easy to comprehend, and accessible to a range of audiences. Either an independent consultant or academic institution/research

body would be well suited to undertake this work, working under a clear terms of reference document. For credibility, the development should be consultative, with young women and adolescent girls engaged beyond tokenistic representation.

The investment case could include a strategic framework or may have a strategic framework as a supplement. With or without a strategic framework, the investment case should be informed by a thorough **situational analysis**, which in itself may be informed by various sub-analyses, including an analysis of the development context, an epidemic analysis (see 'Module 2'), a gender analysis<sup>2</sup> (see 'Module 4'), an analysis of the legal and rights context (see 'Module 9'), the programme response analysis, a stakeholder analysis, a gap analysis and a risk assessment.

## 1.4 Articulate the Young Women and Adolescent Girls Component of the HIV Strategic Framework

The national HIV strategic framework should go beyond prioritizing adolescent girls and young women aged 10–24 or 15–24 years as a priority population and should clearly elaborate a rigorous strategy for young women and adolescent girls' HIV prevention. In many cases (where the opportunity for incorporation into the HIV strategic framework is already foregone, or if the national dialogues have positioned the work on prevention among young women and adolescent girls beyond the line management of the HIV programme), a stand-alone strategy may be required.

A **theory of change** or **causal chain** should be the foundation of the framework. Programmes should avoid generic or opportunistic theories of change. The theory of change development should be grounded in empirical evidence regarding factors and determinants that are known to heighten risk or protect young women and adolescent girls against HIV acquisition in the local context. Where local evidence or data are unavailable, evidence from similar contexts may help to clarify the inter-relationships and influences across determinants and key outcomes.

For sound decision-making, critical parameters such as incidence and prevalence by age/sex disaggregation, incidence and prevalence by locality, and predictive and protective factors highly correlated with HIV acquisition should be made available. Established **mathematical models** (Avenir Health's SPECTRUM software is most widely adopted) may be supplemented with more sensitive estimation approaches and geospatial analysis to provide a rich analysis where the underlying data systems can supply the required inputs (see 'Module 2').

**Standardized intervention packages** should be spelled out in the strategic framework and differentiated to HIV incidence thresholds and the burden of new infections among young women and adolescent girls. For instance, localities with very high HIV incidence (defined as incidence rates above 2.99 new infections per 100-person year) require a different prevention approach and different intervention packages as compared with localities with low incidence. An approach to intervention bundling has been suggested based on epidemic thresholds.

Defining the programme package depends on:

- What the strategic information reveals about the trends, locations and population groups most affected (know your epidemic)
- What approaches have shown strong evidence for success or promise
- What is already happening on the ground and can be built on (or stopped)
- The characteristics and context of the populations the package aims to reach (vulnerabilities, risk factors, needs and preferences)

Also, selection requires consideration of what is feasible and scalable with fidelity given available resources and an assessment of what resources can be mobilized from where. The end product must be a costed operational plan that reflects scalability. Criteria for scale-up are addressed in Module 3.

Most importantly, the young women and adolescent girls' component of the HIV strategic framework should contain a **costed results framework** with **ambitious targets** that takes into account:

- Alignment with the national HIV prevention strategy and priorities, national and subnational prevalence data, and budgets
- Disaggregating targets by age, sex and sites
- Ensuring that programme activities and budgets will result in targets being reached
- Programme costs and necessary trade-offs based on priorities
- Recognition that achieving targets in one technical area will have an impact on funding available to achieve targets in another technical area
- Considering both medium-term targets and the incremental (annual) results needed to achieve these

## 1.5 Establish the Budget and Financing Framework for Prevention

Resources for HIV programming overall are lower than those estimated as necessary to achieve goals by 2030.<sup>3</sup> To reach the international 2020 HIV prevention targets, the Joint United Nations Programme on HIV/AIDS (UNAIDS) recommends that, as a global benchmark, 25 per cent of all AIDS programming expenditures should go to HIV prevention. This benchmark is rarely met<sup>4</sup> — programme teams can triangulate and track HIV expenditures for young women and adolescent girls' HIV prevention programming through the national AIDS spending assessments, which provide rich data for these purposes. Given the limited availability of prevention funding and the pressures on flat or even declining overall HIV budget lines, it is prudent that national programmes identify the core set of interventions that the HIV programme has a unique mandate to advance. Budget-line items for these activities may then be leveraged against other investments from development finance institutions and development initiatives or from domestic allocations, in negotiation with other sectors and the ministries of planning and finance, to provide a more robust package. Gender-responsive budgeting may present a useful tool for advancing the attainment of gender-related commitments in national budgets (see 'A Guide to Gender-responsive Budgeting').

Over time, countries will need to increasingly contribute **domestic resources** from public and private sources to reduce dependency on external funding. The ongoing work to define or refine **universal health coverage** packages and **national social protection safety nets** provides important opportunities to leverage broader development assistance funding for important facets of HIV prevention. There is some urgency for middle- and high-income countries to define these pathways for leveraging. The US Agency for International Development (USAID)-led US President's Emergency Plan for AIDS Relief (PEPFAR) Sustainable Financing Initiative worked with nine governments in Africa, Asia and Latin America to assist them to mobilize their own resources for the country-led HIV response to prevention, care and treatment, through the following interventions: advocacy and analytics, public financial management, optimizing technical efficiency, and leveraging the private sector.<sup>5</sup>

Increasingly, **innovative financing mechanisms** between public sector, private sector, academia and/or civil society will play a central role in assuring financing for young women and adolescent girls' HIV prevention. Services such as family planning, sexual and reproductive health, prevention in antenatal care, and girls' education, among others, are



well suited for financing through an array of development credits, impact bonds, social investment vehicles, debt swaps and much more. While this arena requires innovation and learning, prevention programmes should remain open and flexible to capitalize on potential gains.

## 1.6 Clarify the Operational Framework for Implementation

Operationalization of the strategy and results framework remains the weak point of prevention efforts, with key implementation failures abounding even after rigorous and detailed frameworks have been finalized. The success of implementation will hinge on critical success factors such as:

- **Alignment across key development partners.** The investments made by key development funders and their initiatives need to be visible to national and subnational authorities to address duplication, fragmentation and suboptimal programme models.
- **Implementation planning.** Beyond basic parameters such as results and timelines, the service modalities, implementers, entry points and delivery channels selected should be informed by knowledge of practical realities for the programme context.
- **Procurement and contracting.** Reproductive health supplies and commodities should be clearly costed, with clear plans to manage waste, stock interruptions, expiration and potential service disruptions. Procurement plans should be informed by centralized demand forecasting and quantification efforts. Where relevant, social contracting to make available high-quality services for niche populations (for instance, key populations and higher wealth quintiles) should be explicated. Women's networks and associations should be prioritized for roles in strategic contracting.
- **Cross-sectoral coordination.** Joint planning and budgeting, joint reviews and co-located service delivery should all be actively and consultatively planned during the key planning cycles, rather than included as an afterthought.
- **Programme stewardship and accountabilities.** Clarity of the lines oversight for the young women and adolescent girls' HIV prevention programming is required. This might be through a technical working group, intersectoral committee or special taskforce. However, there should be a designated focal point or manager responsible for the planning, reporting and coordination function. There are clear advantages in identifying a key sectoral custodian for this work, including non-traditional/non-health ministries such as gender and youth.
- **Transition and sustainability planning.** National responses will be poorly positioned if they assume perpetual funding. There are tremendous lessons to be gleaned from

the experience of transitioning key populations,<sup>6</sup> global family planning and immunization programmes<sup>7</sup> across entire regions and, more recently, from the Global Fund's transitioning of middle- and high-income countries.<sup>8</sup> Prevention programmes would be well positioned to define and monitor transition benchmarks, to develop a vision for an ideal end state, identify a custodian to manage readiness, ensure alignment to national policies and develop alternative financing plans.

- **System strengthening.** To provide a seamless, client-centred programme interface, systems will need to bring together different interventions and interfaces in novel ways. Operational plans should be explicit in articulating the linkages, integration models, referral systems and care pathways to be installed or refined for responsive prevention. Capacity strengthening and institutionalization strategies should be costed as part of this articulation.

## 1.7 Establish a Culture of Improvement

Prevention programmes need to establish a culture that continuously works towards quality care by including a component of improvement science from strategic planning and analytics through management and operations. Improvement science aims to ensure that programming is safe, effective, efficient, equitable, timely and client centred<sup>9</sup>. Basic principles of quality improvement include working in multidisciplinary teams, making decisions based on data, a focus on systems and processes, and shared learning. Continuous quality improvement seeks ever higher levels of performance, identifying and addressing the gap between those services that are known to be possible and those that are actually achieved.

Implementation of a quality improvement component results in a range of benefits:

- **Improved client process outcomes and health outcomes:** such as young women enrolled in a social protection programme and reduced HIV acquisition
- **Improved managerial and clinical efficiencies:** reduced waste and costs associated with redundancies and system failures
- **Avoided costs associated with process failures, errors and poor outcomes:** inefficient systems increase errors and cause rework
- **Processes in place to ensure that problems are solved before they occur:** keeping systems of care reliable and predictable
- **Improved communication and learning among all stakeholders**

## Promising Directions

**Strategic contracting to strengthen stewardship and coordination.** Strategic contracting of civil society and academic partners has been utilized to address gaps in national authorities' capacity, monitor and track prevention investments, align prevention partners and operate accountability structures for planning and management of resources. This approach has tremendous promise, particularly in contexts where the local epidemic is mixed, where broad expanses of territory or large networks of service providers must be coordinated, and where private sector service provision is a mainstay of the health and social system.

**Co-financing across sectors.** Joint investment across sectors allows for an intersectoral approach when taking a programme to scale and is more reflective of the realities within communities where various sectors, including education, health, development, poverty reduction and technology, naturally merge. Co-financing enables various HIV, health and development objectives to be achieved simultaneously, but demands effective cross-sectoral coordination mechanisms for planning, implementation and financing.<sup>10</sup> Governments and funders or investors should consider co-financing across sectors within their budget allocations, as it represents a cost-effective measure. This option could also represent a new funding pathway for high-impact interventions to be implemented and even scaled up. South Africa and Tanzania have identified co-financing as an innovative modality for implementation of national strategic plans for HIV and social protection. South Africa has incorporated co-financing in its HIV and tuberculosis investment case and subsequently in its national strategic plan for HIV/tuberculosis and sexually transmitted infections (2017–2022).

## HIGHLIGHTED IMPLEMENTER RESOURCES

### 1.1 Maximize the Entry Points for Integration Within the National Planning and Budgeting Cycles

#### **Strategic Investments for Adolescents: Maximising impact by addressing adolescents' needs in Global Fund concept notes**

The Global Fund; 2016; English

<https://www.theglobalfund.org/en/search/?q=Strategic+Investments+for+Adolescents> (available upon request)

This document highlights opportunities and requirements for addressing and involving adolescents in developing the concept note as part of the funding cycle. It also addresses issues related to adolescents in the context of resilient and sustainable health systems for three diseases: tuberculosis/HIV, tuberculosis and malaria, while emphasizing this population's unique needs and challenges. The document provides: practical solutions for a range of adolescent-specific challenges; guiding questions for countries to use as they develop the funding model (through country dialogue, including review of national plans and concept note development); and key resources for designing and planning adolescent-focused interventions. Regarding HIV prevention, the note covers biomedical, behavioural and structural issues.

#### **Making the Money Work for Young People: A participation tool for the Global Fund to Fight AIDS, Tuberculosis and Malaria — For young activists and youth organizations**

UNAIDS; 2014; English

[https://www.unaids.org/sites/default/files/media\\_asset/JC2661\\_part1\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/JC2661_part1_en.pdf)

This tool aims to increase young people's effective and meaningful participation in the Global Fund, with a specific emphasis on opportunities to participate at the national level. It has the following objectives: 1) provide practical guidance to youth activists at the country level on how they can participate in the Global Fund and ensure Global Fund grants are invested strategically to ensure programmes for young people have maximum impact; 2) provide guidance to Country Coordinating Mechanisms — the entities that coordinate the development and submission of funding requests to the Global Fund and that oversee the implementation of grants — so that they effectively and meaningfully engage young people.

#### **Making the Money Work for Young People: A participation tool for the Global Fund to Fight AIDS, Tuberculosis and Malaria — For country coordinating mechanism members and other Global Fund actors**

UNAIDS; 2014; English

[https://www.unaids.org/sites/default/files/media\\_asset/JC2661\\_part2\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/JC2661_part2_en.pdf)

This tool offers guidance to Country Coordinating Mechanism members and other Global Fund actors on how to involve young people in all Global Fund processes, including the development or review of national strategic plans (and/or investment cases), the management of the ongoing country dialogue, the creation of the concept note, the composition of Country Coordinating Mechanisms and the implementation of Global Fund-supported programmes.

### 1.2 Convene a Strategic Dialogue on Holistic Prevention and Well-being for Adolescent Girls and Young Women

## 1.3 Develop an Investment Case

### Guidance Note: Investment cases

Global Financing Facility; 2016; English

<https://www.globalfinancingfacility.org/guidance-note-investment-cases>

This note aims to provide guidance to countries developing a reproductive, maternal, newborn, child and adolescent health (RMNCAH) investment case. The investment case is a description of the changes that a country wants to see with regard to RMNCAH, and a prioritized set of investments required achieve these results. It is not a comprehensive description of all of the activities underway on RMNCAH in the country. Instead, it presents a compelling case for how a limited number of priorities will put the country on the path to improving the health of women, children and adolescents over the long term and thereby contribute to the achievement of the SDGs.

### Deliver for Good: Investments in girls & women power progress for all — The investment case for girls and women

The Lancet, Women Deliver; 2017; English

<https://womendeliver.org/wp-content/uploads/2017/03/Deliver-for-Good-Booklet.pdf>

Deliver for Good is a new global push that considers gender in the context of the SDGs and promotes 12 critical investments — political, financial and programmatic — in girls and women which will bring high returns for women and for societies in decades to come. Deliver for Good will mobilize allies across sectors and issues, change the global narrative around girls and women, and help to fuel concrete action and SDG implementation at the global and country level. Deliver for Good will focus on solutions, action and the links between gender equality, health, education, economic empowerment, environment and access to resources.

## 1.4 Articulate the Young Women and Adolescent Girls Component of the HIV Strategic Framework

### National Accelerated Investment Agenda for Adolescent Health & Wellbeing: Updates to NAIA\_AHW

Tanzania Ministry of Health, Community Development, Gender, Elderly and Children; 2019; English

[http://www.tzdpd.or.tz/fileadmin/documents/dpg\\_internal/dpg\\_working\\_groups\\_clusters/cluster\\_2/health/DPG\\_H\\_Meeting\\_Documents\\_2019/NAIA\\_AHW\\_Presentation.pdf](http://www.tzdpd.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2019/NAIA_AHW_Presentation.pdf)

The National Accelerated Investment Agenda for Adolescent Health and Wellbeing (NAIA\_AHW) was developed with the objective of focusing the country on gaps in adolescent health and well-being that need to be addressed in the immediate term. This framework will enable key stakeholders to: 1) define the highest priority issues and key enablers; 2) set specific, measurable, assignable, realistic and time manageable (SMART) programme objectives; 3) determine the minimal (achievable) package of interventions required for each pillar; 4) describe the current landscape of activities by funder, implementer and geography; and 5) define the highest-priority actionable gaps and the funding required.

### National Multi-Sectoral Coordination Framework for Adolescent Girls 2017/2018 – 2021/2022

Government of the Republic of Uganda; 2018; English

<https://www.unicef.org/uganda/media/3911/file>

This multi-sectoral framework for adolescent girls in Uganda outlines the Government of Uganda's commitments and efforts to invest in adolescence in the second decade of life. It outlines how government ministries will coordinate to deliver a package of services in order to achieve sustainable results for adolescent girls.

### Zimbabwe Girls' and Young Women's Empowerment Framework

Zimbabwe Ministry of Women Affairs, Gender and Community Development; 2014; English

[https://www.togetherforgirls.org/wp-content/uploads/2017/10/Final\\_Girls-and-Young-Womens-Empowerment-Framework-Oct-2014-Zimbabwe.pdf](https://www.togetherforgirls.org/wp-content/uploads/2017/10/Final_Girls-and-Young-Womens-Empowerment-Framework-Oct-2014-Zimbabwe.pdf)

This framework articulates a national commitment to protecting and empowering girls and young women in Zimbabwe. It recognises that by empowering girls and young women it contributes to the transformation of the country's economic future as well as the development of its peoples. The framework is anchored in the realisation that the most straightforward intervention to empower girls and young women is ensuring that they realise their rights as provided for by several international and regional human rights instruments.

## Health Finance and Governance project: Technical efficiency guide

**Publisher:** USAID; **Year:** 2018; **Language:** English

**Website:** <https://youtu.be/8w9-E8wwDto>

<https://rise.articulate.com/share/-xWeCMdb3GNTRuj-NI8AaQUsvMx6J6b4#/>

As demand for health care rises, health system stakeholders in low- and middle-income countries are exploring ways to increase domestic resources for health. Using health resources more efficiently is one of the most promising strategies. Health system stakeholders in low- and middle-income countries are exploring ways to achieve more with available resources and realize savings that can be used to fill the gap in resources needed to expand effective health coverage to all. Where other guides and tools focus on improving allocative efficiency ('doing the right things'), this guide focuses on technical efficiency ('doing things right'). An interactive web-based guide, it is intended to help diagnose and address technical inefficiencies across health systems, as well as to help ministries of health look across the health system and prioritize areas of technical inefficiency that are likely to produce the greatest efficiency gains in the short term.

## 1.5 Establish the Budget and Financing Framework for Prevention

### HIV Resource Allocation Using the Goals Model

Stover, John, et al.; 2016 English

<http://pubdocs.worldbank.org/en/519811454537584578/7-John-Stover-HIV-allocations-using-Goals.pdf>

This presentation introduces the Goals model, with particular attention on how it can be used to inform resource allocation in programme planning and optimization. Included throughout the document are examples from different countries that use Goals to develop an investment case. It also addresses the indicators and cost-effectiveness of various HIV preventions, as well as other considerations to assist countries in developing efficient and effective policy and programming.

### A Guide to Gender-responsive Budgeting

Stephenson, Mary-Ann; Oxfam; 2018; English, French, Spanish

<https://oxfamilibrary.openrepository.com/bitstream/10546/620429/13/gt-guide-gender-responsive-budgeting-280218-en.pdf>

Gender-responsive budgeting is essential both for gender justice and fiscal justice. It involves analysing government budgets for their effect on genders and the norms and roles associated with them. It also involves transforming these budgets to ensure that gender equality commitments are realized. These resources are designed to show how different actors can influence the budget cycle to promote gender-responsive budgeting at its different stages. It is intended to help groups developing strategies to think through the actions to take at each stage of the government budget process.

### Detailed Cost Estimator

EVMS Network Center; English

<https://www.dropbox.com/s/n0zyopp8wwoxmm/Detailed%20cost%20estimator.xlsx?dl=0>

This set of spreadsheets provide key considerations for cost estimation, explained through an example using pre-exposure prophylaxis (PrEP) based on a South African implementation model. Although the estimator addresses PrEP, the calculator can be adapted by planners and programmers towards developing a costed operational plan across different sectors of programming.

## 1.6 Clarify the Operational Framework for Implementation

### Capacity Development Assessment and Planning Tool — Implementing adolescent girls and young women's programmes

UNDP; 2018; English

<https://www.undp-capacitydevelopment-health.org/files/capacities/cd-process/CD-Assessment-Tool-Template-AGYW-07.03.18.xlsx>

This tool assesses the capacity of organizations to develop and implement HIV prevention programmes focusing on adolescent girls and young women.

### Inclusive multi-stakeholder country platforms in support of Every Woman Every Child

World Bank/Global Financing Facility; 2017; English

[https://www.globalfinancingfacility.org/sites/gff\\_new/files/Country%20Platform%20Guidance%20Note\\_English.pdf](https://www.globalfinancingfacility.org/sites/gff_new/files/Country%20Platform%20Guidance%20Note_English.pdf)

This paper aims to: 1) highlight how multi-stakeholder country platforms, built on development effectiveness principles; and, 2) lay out key considerations for new multi-stakeholder country platforms, along with the relevant mechanisms and a minimum set of standards to support the process of national coordination among actors engaged in RMNCAH. This guidance note is intended to serve as a resource for countries committed to implementing the Global Strategy.

## 1.7 Establish a Culture of Improvement

### Partnering for Success: A step-by-step guide to addressing your most common partnership challenges

Girls Not Brides; 2019; English, French

<https://www.girlsnotbrides.org/resource-centre/national-partnerships-toolkit>

This resource is designed to help set up partnerships effectively by identifying the challenges most partnerships face and solutions to those problems. This resource also helps partnerships identify where they are in the partnering cycle, map out where they may want to go, and assess whether they have all the necessary resources to advance the collective work.

### Framing Strategies to Build Understanding of Improvement Science: Framing brief

FrameWorks Institute; 2017; English

<http://www.frameworksinstitute.org/assets/files/PDF/inbrief-framing-improvement-science-final.pdf>

This brief lays out an evidence-based approach to explaining improvement science and networked improvement communities so that more policymakers and practitioners understand and support these approaches. It touches on existing attitudes and conceptions that shape interpretations of these topics, a set of key concepts to advance across communications, specific communication techniques that have been shown to expand people's thinking about improvement science and networked improvement communities, and communications themes that proponents of improvement science should avoid.

### “Just Do It”: Communicating implementation science and practice - A FrameWorks strategic report

Lindland, Eric, et al.; 2015; English

[http://www.frameworksinstitute.org/assets/files/evidence\\_implementation/NIRNreport\\_justdoit\\_2015.pdf](http://www.frameworksinstitute.org/assets/files/evidence_implementation/NIRNreport_justdoit_2015.pdf)

This report provides a set of key strategies for communicating implementation science and practice, grounded in a detailed understanding of how implementation is variously understood by experts, human service professionals and the public. The report outlines how to navigate the complex set of understandings and assumptions that arise when people think about topics such as the use of evidence, improving practice, effective implementation, and institutional change. This document is intended to help increase support for policies and programmes that promote investment of resources (such as time, funding, staff, infrastructure) in the science and practice of implementation. These recommendations can be used to effectively engage public officials, community leaders, practitioners and members of the public to understand and value the science and practice of implementation.



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