Technical Support Facilities: Helping to build an efficient and sustainable AIDS response
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOREWORD</td>
<td>2</td>
</tr>
<tr>
<td>KEY ACHIEVEMENTS</td>
<td>3</td>
</tr>
<tr>
<td>EXECUTIVE SUMMARY</td>
<td>4</td>
</tr>
<tr>
<td><strong>CHAPTER 1</strong></td>
<td></td>
</tr>
<tr>
<td>Background</td>
<td>10</td>
</tr>
<tr>
<td><strong>CHAPTER 2</strong></td>
<td></td>
</tr>
<tr>
<td>What is special about the technical support facilities?</td>
<td>16</td>
</tr>
<tr>
<td><strong>CHAPTER 3</strong></td>
<td></td>
</tr>
<tr>
<td>Strengthening countries’ AIDS response: How do the technical</td>
<td>22</td>
</tr>
<tr>
<td>support facilities contribute?</td>
<td></td>
</tr>
<tr>
<td><strong>CHAPTER 4</strong></td>
<td></td>
</tr>
<tr>
<td>Supporting Global Fund grants</td>
<td>36</td>
</tr>
<tr>
<td><strong>CHAPTER 5</strong></td>
<td></td>
</tr>
<tr>
<td>Making technical support and capacity development work</td>
<td>42</td>
</tr>
<tr>
<td><strong>CHAPTER 6</strong></td>
<td></td>
</tr>
<tr>
<td>Building and safeguarding capacities</td>
<td>46</td>
</tr>
<tr>
<td><strong>CHAPTER 7</strong></td>
<td></td>
</tr>
<tr>
<td>Moving forward, doing better</td>
<td>52</td>
</tr>
<tr>
<td><strong>ACRONYMS</strong></td>
<td>56</td>
</tr>
</tbody>
</table>
Foreword

We are beginning to gain the upper hand against AIDS. Fewer people are being infected with HIV, more people are getting life-saving treatment, and fewer people are dying of AIDS.

These accomplishments are driven by the hard work and dedication of leaders and citizens all over the world – people who have crafted and implemented AIDS responses, frequently in very challenging and burdened circumstances.

Hidden in those achievements are the vital roles of timely and judicious technical assistance and capacity building. It helps countries overcome resource and technical gaps, mobilize and manage funding, and build the capacities to scale-up interventions that are effective and efficient enough to sustain the momentum against the global epidemic.

The Joint United Nations Programme on HIV/AIDS (UNAIDS) has played a critical role in facilitating the provision of that technical support. In 2005 it created the first of five Technical Support Facilities (TSFs), in Southern Africa, to strengthen countries’ capacities to fund, plan, manage and coordinate bigger and more effective AIDS responses. Additional TSFs were then established in Eastern Africa, West and Central Africa, Southeast Asia and the Pacific and finally in South Asia.

The facilities have proved to be an important innovation. Operating on the cutting edge of technical support, they have helped strengthen South-based capacities and systems in delivering effective programming against AIDS. The TSFs understand country realities, provide quick and flexible support, build local capacities, facilitate the sharing of resources, skills and lessons between countries, and forge South-South collaboration. They have become vital assets in countries’ efforts to step up and sharpen their HIV responses.

In the past three funding rounds of the Global Fund to Fight AIDS, Tuberculosis and Malaria, TSFs’ support has helped countries raise US$ 1.7 billion for their HIV programmes. And they are making that money work.

The facilities have helped 50 countries implement their Global Fund grants by unblocking stalled programmes, and strengthening their systems and capacities. They help strengthen key institutions, they support improvements in financial and operational management systems and capacities, and they help countries track and analyze the results of their programmes.

If we are going to get to zero new HIV infections, zero discrimination and zero AIDS deaths, we need strong institutions and capacities, and solid governance to manage and sustain HIV programmes.

This report documents the impressive impact these facilities have made in the past five years. We now have to build on these achievements, and place even more emphasis on strengthening country capacities as we move towards greater integration, efficiency and effectiveness in our AIDS responses.

Michel Sidibé
UNAIDS Executive Director
Key achievements

Since Technical Support Facilities have started operating, they have:

▶ delivered 50 000 days of technical assistance and support for developing capacity;

▶ provided technical support to over 70 countries in Eastern Africa, Southern Africa, West and Central Africa, Southeast Asia and the Pacific and South Asia

▶ supported dozens of countries in developing HIV proposals for grant Rounds 8–10 of the Global Fund to Fight AIDS, Tuberculosis and Malaria that resulted in US$ 1.7 billion being raised for the first two years of implementation;

▶ helped 59 countries to develop a national strategic plan or national operational plan;

▶ strengthened country coordinating mechanisms in 37 countries;

▶ provided support to 50 countries through 125 technical support assignments for implementing Global Fund grants;

▶ facilitated training and support for developing capacity of 2140 national and regional consultants and country partners in a range of technical areas;

▶ assisted in strengthening national monitoring and evaluation frameworks in 55 countries;

▶ used local and regional consultants in 85% of all assignments, building skills and lowering costs.
Commitment and funding for scaling up the AIDS response increased significantly in the 2000s, but they also encountered frustrating obstacles and delays. Gains were made, but in many places inadequate infrastructure and governance, and uneven skills and capacities were still hindering access to HIV prevention, treatment, care and support services.

Those experiences led to an upswing in demand for technical support, at first mostly to bridge “gaps”, but gradually also to strengthen longer-term capacities. Accordingly, the Joint United Nations Programme on HIV/AIDS (UNAIDS) first independent evaluation, in the mid-2000s, advised greater emphasis on the provision of technical support.

Starting in 2005, UNAIDS brokered and funded the establishment of technical support facilities (TSFs) in Southern Africa, then in West and Central Africa, Eastern Africa and Southeast Asia and the Pacific, and most recently in South Asia. The TSFs were set up to strengthen countries’ capacities to fund, plan, manage and coordinate effective, larger-scale HIV programs. The facilities soon distinguished themselves as vital assets in countries’ attempts to step up and sharpen their AIDS response.

Their work is aligned to the UNAIDS 2011-2015 “Getting to Zero” Strategy, which calls for a renewed push towards achieving universal access to HIV prevention, treatment, care and support, and advancing human rights and gender equality.

The TSFs’ core function is to meet requests for technical assistance and capacity development in ways that are tailor-made for the context, are of high quality, and that contribute to meaningful results and outcomes. They help countries bridge short-term technical and capacity gaps, and build the capacities (from skills to plans, systems and institutions) they need to achieve and sustain an effective AIDS response.

Each year, the TSFs provide competitively priced, regionally embedded, top quality and timely technical assistance and capacity development to a wide range of partners in more than 70 countries.

The rapid response, outsourcing model used with the TSFs enables UNAIDS to make profound contributions to national AIDS programmes and health systems in highly responsive, flexible and cost-effective ways. They represent one of several approaches the United Nations (UN) uses to fulfil its mandate as a provider of technical support, and they focus on demands which other UN agencies are not able to meet.

**WHAT MAKES THE TSFs SPECIAL?**

The TSFs have several special attributes that enhance their value and effectiveness:

- They provide **demand-driven** services at **reasonable cost**;
- Their streamlined administrative systems make them **quicker, more flexible and more responsive** than most other providers;
- The TSFs **build local capacities** and facilitate the **sharing of expertise** of government and civil society implementers across countries;
Their activities are aligned with the UNAIDS “Getting to Zero” Strategy, and with current UN knowledge and guidance. Collaboration between TSFs, UNAIDS country offices, regional support teams and cosponsors creates a powerful mix of capacities and resources for responding to country needs;

Regionally based, the TSFs are more adaptable to local conditions, more familiar with local networks, better positioned to marshal quick responses, and able to achieve continuity and follow-up support;

They predominantly use quality local and regional expertise. The consultants they deploy are more familiar with local contexts, and are more likely to command vital soft skills that are so important for effective technical assistance and capacity development;

They emphasize partnerships (especially within and between countries of the South), and strengthen country ownership;

They are adaptive enough to respond quickly to shifting needs – such as around Global Fund to Fight AIDS, Tuberculosis and Malaria grant proposal development and implementation support, governance systems, costing and budgeting, and monitoring and evaluation (M&E), as well as technical areas such as medical male circumcision and the mapping of key affected populations;

The diversity of the organizations hosting the TSFs, and the close collaboration between them, allows for blending private and public sector approaches in their work;

They have built strong linkages with key civil society organizations and networks, and are viewed as trustworthy, neutral players; and

They play vital roles in helping countries successfully access and manage Global Fund grants. Their support spans the entire Global Fund grant cycle, involves punctual short-term technical assistance and links that to capacity development activities that build systems, process and skills.

Strengthened capacities

The TSFs provide extensive and vital assistance to government ministries, national AIDS authorities, civil society organizations and networks, and other key structures (such as Country Coordinating Mechanisms, CCMs, and Principal Recipients, PRs). The support includes crafting strong strategic and operational plans, strengthening financial management and other governance systems, overhauling M&E systems, and mastering Global Fund processes.

Programme and capacity development is being integrated to leverage investments, and to enrich the learning and sharing of experiences. Capacity development support is being targeted at both consultants and country partners, including civil society, with twinning and mentoring an
increasingly common approach. In West and Central Africa, for example, more than 70% of clients and partners in 2010 reported that the skills and capacities of their staff had been strengthened. The skills and expertise of local consultants (including community-based ones) are constantly upgraded.

At the same time, many government and civil society structures still require technical assistance to get urgent tasks done and unplug blockages that stall programmes. Opportunities for blending such “short-term” technical assistance with longer-term capacity development are being used by the TSFs.

### Solid partnerships

Each of the TSFs works with a wide range of partners, in government, civil society, the UN community, multi- and bilateral donors and agencies, and other technical support initiatives. There is increasing emphasis on developing ongoing relationships with key clients – such as national AIDS authorities, CCMs and PRs – which allows for timely pre-scoping and planning of assignments. This also helps foster country ownership.

The TSFs identify and develop networks of different providers of technical support at national and regional levels, and strengthen their systems and capacities for delivering quality support.

There is also a special focus on coordinating work with UNAIDS and various inter-agency initiatives around prevention, M&E, and supporting civil society organizations. In Southern Africa, for instance, there is collaboration with the AIDS Strategy and Action Plan (ASAP) around strategic and operational planning, and with the Futures Group around costing and budgeting. These kinds of moves are creating stronger synergy between joint UN planning processes and capacity development.

### Greater cost-effectiveness

As funding becomes more tightly rationed, there is an even greater need to boost cost-effectiveness.
The TSFs support training and capacity development to help countries map key affected populations, enhance their HIV surveillance systems and methodologies. These interventions all help focus resources where they can have the most impact, reduce wastage and contribute to greater cost-effectiveness.

The TSFs work closely with a diverse range of partners, and are introducing processes for improved coordination of technical support activities. Strong coordination allows limited resources to be used more productively, and for the efforts of UN and other development partners, government systems and civil society groups to become mutually reinforcing.

More accurate costing processes also contribute to greater efficiency. Some TSFs are collaborating with the Global Fund and the World Health Organization (WHO) around Global Fund proposal costing tools, as well as antiretroviral treatment costing efforts in support of the Global Fund’s “value for money” initiative.

The facilities are also streamlining themselves. There is greater emphasis on reducing the direct costs of support and on co-funding TSF activities to supplement core resources. Some TSFs arrange cost sharing with international NGOs around capacity development work that supports Global Fund grant proposal development and implementation, for example. Trainers are being shared and training approaches are harmonized, duplication is being avoided, and economies of scale can now be achieved. Contracting mechanisms have also been made more efficient.

Assuring quality

Technical support is not a magic wand. Its success depends on a range of factors, not least reliable quality assurance, and clear and efficient management of the assistance.

TSFs’ quality assurance process spans the vetting of consultants, the conceptualization and design of assignments, clients’ and consultants’ reviews of completed assignments, and ongoing training and capacity development of consultants to keep them up-to-date with current thinking, methodologies and tools. The TSFs help clients strengthen terms of reference, do pre-scoping to clarify the needs of more complicated assignments, and provide guidelines for managing the assignments.

The monitoring and evaluation of TSF support is receiving increasing attention. This is vital for accountability and for ensuring consistently high quality and efficiency. A revised M&E framework will refine indicators and reporting so that they more accurately reflect progress in achieving project objectives.

Redefining the technical support market

For decades, technical support was seen as a form of assistance that was dispensed from the North to the South. Typically, consultants from donor countries would be “parachuted in” to perform certain technical tasks, conduct training and provide other support – and then depart.
The TSFs have shifted that paradigm. The bulk of the technical support resources they deploy are locally or regionally based, and the TSFs are constantly investing to upgrade the skills of those consultants. Increasingly, the skills of community-based practitioners are also being harnessed and enhanced. Greater collaboration between the facilities (around capacity development programmes, and sharing of new tools and methodologies, etc.) also exemplifies the South-South linkages that have long been neglected in the technical support arena.

**Manifest gains**

Obstacles to effective action still hinder countries’ AID responses. No institution – private or public – ever reaches a point where technical support becomes redundant. This is partly because the terrain and context keeps shifting. Even when new systems and capacities take root, fresh challenges materialize. Accessing Global Fund funding, for example, has become more complicated, while reporting obligations have multiplied and grown in complexity. Improved HIV surveillance, diagnostic and treatment techniques bring new technical challenges. And the need to demonstrate results and outcomes has imposed new obligations.

It is against this background that the TSFs broker and facilitate the provision high quality, timely and cost-effective technical assistance and capacity development. They enable countries to raise the funding, meet the technical challenges, and build and manage the systems that make effective AIDS responses possible.

They do so in cost-effective and flexible ways, by cultivating and using local skills and capacities, and by being able to adapt quickly and assuredly to new circumstances. And they facilitate South-South collaboration and the exchange of resources, tools, and lessons, within and between countries.

The facilities are increasingly focussed on capacity development, are more closely aligning their provision of technical assistance with capacity development, and are strengthening their partnerships with key national and regional players.

In consultation with UNAIDS country offices, the TSFs now provide more targeted and sustained support to selected organizations. Financial management strengthening, strategic plan development, and resource mobilization are among the areas in which such ongoing support is being provided. This intensified approach will help create stronger, more sustainable organizations.

In doing all this, the TSFs bring to the AIDS response a rare, potent mix of attributes and potentials. The benefits are manifest. The facilities are helping maximize value for money – by increasing absorptive capacity and by enabling countries to do more with less, bolster their systems, and improve the quality and sustainability of their programming. In a short space of time, they have become vital elements in the AIDS responses of dozens of countries.
In the past decade, a surge of commitment and funding has enabled countries to boost their HIV responses. The global rate of new HIV infections is declining, treatment access is expanding, and AIDS responses are increasingly rights-based.

But the gains are fragile, and scale-up efforts have encountered frustrating obstacles and delays. Weak national infrastructures, and uneven skills and capacities are among the factors that continue to impede access to HIV prevention, treatment, care and support services. A slow-down in donor funding presents an additional obstacle.

Increased HIV funding in the mid-2000s (not least via the Global Fund to Fight AIDS, Tuberculosis and Malaria) highlighted a range of frailties and blockages that have marred effective HIV responses. Many countries have struggled to craft the proposals that would grant access to new funding. Strategic and operational planning was needed in many places, and monitoring and evaluation (M&E) systems were often inadequate. Weak and inconsistent implementation capacity emerged as a major handicap, alongside poor governance systems, human resource constraints, and uneven management capacities.

These difficulties triggered an upswing in demand for technical support, at first mostly to bridge “gaps”, but gradually also to strengthen longer-term capacities. Accordingly, the Joint United Nations Programme on HIV/AIDS's (UNAIDS) first independent evaluation, in the mid-2000s, recommended that it devote more attention to the provision of technical support.

In response, UNAIDS brokered and funded the establishment of technical support facilities (TSFs) in five regions of the world: first in Southern Africa, then in West and Central Africa, Eastern Africa and Southeast Asia and the Pacific, and most recently in South Asia.

The TSFs were set up to strengthen countries’ capacities to fund, plan, manage and coordinate an effective AIDS responses. Their core function is to meet requests for technical support and capacity development in ways that are tailor-made for the context, are judicious, of high quality and cost-effective, and contribute to meaningful results and outcomes.

The facilities help countries bridge short-term technical gaps, and build the skills, capacities, resource bases, systems and institutions they need to achieve and sustain their AIDS response. More recently, greater emphasis has been placed on capacity building support, especially in relation to Global Fund grant implementation, costing and budgeting, strategic and operational planning, financial governance, and monitoring and evaluation.

The TSFs have developed into vital assets as countries seek to step up, adapt and sharpen their AIDS response.

Each year, these facilities provide competitively priced, regionally embedded, top quality and timely technical support and capacity development to a wide range of partners in more than 70 countries world.

The TSFs’ close relationship with UNAIDS and its Cosponsors means that they align their work with the UNAIDS 2011-2015 “Getting to Zero” Strategy, which helps ensure that their technical assistance and capacity development support remains up-to-date and relevant. The TSFs have also become a vehicle for promoting UNAIDS technical leadership and policies.
The UNAIDS Strategy calls for a renewed push towards achieving universal access to HIV prevention, treatment, care and support, and advancing human rights and gender equality. Achieving those objectives requires prioritizing, planning and managing HIV programmes better, making them more cost effective and sustainable; and putting affected communities – and their rights – at the centre of the AIDS response. The TSFs are supporting efforts on all those fronts, not least the quest for cost efficiency, value for money, stronger governance, and the development of local capacities.

The outsourcing model used with the TSFs enables UNAIDS to make profound contributions to national HIV programmes and health systems in highly responsive, adaptive and cost-effective ways.

The model constitutes a rapid response mechanism that enables countries to access technical assistance in a timely, efficient manner. It reduces the burden on UNAIDS human and administrative resources, yet boosts the flexibility, the extent and the swiftness of technical and capacity building support that UNAIDS can facilitate.

The regional entities that host the various TSFs bring their experiences and networks (including with civil society and the private sector) to the TSFs, build local and regional capacities, and are able to share these among one another.

The facilities emphasize building and deepening partnerships (especially within and between countries of the South), strengthening country ownership, and achieving greater efficiency and impact. Sharper prioritizing, clearer planning, and stronger governance and accountability are among their main objectives.

This report reviews the performances, achievements and lessons of these innovating technical support facilities since 2005.
**Technical Support Facilities**

The first TSF to be set up by UNAIDS, **TSF Southern Africa** is operated by Health and Development Africa, a public health, development and AIDS consultancy group based in South Africa with access to a wide network of consultants and organizations in the rest of the continent. This TSF covers 14 countries and provides about 3800 technical support consultancy days per year. Over 80% of TSF assignments are performed by national or regional consultants.

*Southern Africa is the region most heavily affected by the epidemic. It is home to approximately one third of all people with HIV. The nine countries with the highest HIV* 

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**Where do the technical support facilities operate?**

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<tr>
<th>REGION</th>
<th>OPERATED BY</th>
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<tr>
<td>Southern Africa</td>
<td>Health and Development Africa, Johannesburg, South Africa (since June 2005)</td>
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<tr>
<td>Eastern Africa</td>
<td>Centre for African Family Studies, Nairobi, Kenya (since May 2010; previously operated by AMREF)</td>
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<tr>
<td>West and Central Africa</td>
<td>Bureau d’Appui en Santé Publique’96 (PASP96), Ouagadougou, Burkina Faso (since December 2005)</td>
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<tr>
<td>South East Asia and the Pacific</td>
<td>International Planned Parenthood, Kuala Lumpur, Malaysia (since December 2005)</td>
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<tr>
<td>South Asia</td>
<td>Action Aid, Kathmandu, Nepal (since October 2008)</td>
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**The five Technical Support Facilities**

[Map of Technical Support Facilities]
prevalence worldwide are all located in this region, with adult HIV prevalence exceeding 10% in each of them. In South Africa alone, over five million people are living with HIV. The epidemics are all generalized, and HIV transmission occurs mostly during unprotected heterosexual intercourse. HIV disproportionately affects women and girls in Southern Africa. There has been rapid scale-up of antiretroviral treatment provision, with coverage exceeding 50% in 2009. National systems and capacities are uneven and often overburdened, as they also are in the other TSF regions in Africa.

**TSF Eastern Africa** was set up in 2006 and was operated at first by the African Medical and Research Foundation (AMREF). Since May 2010, it has been operated by the Centre for African Family Studies based in Nairobi, Kenya, operating with the support of the International HIV/AIDS Alliance, the International Planned Parenthood Federation Africa Region. It covers six countries: Eritrea, Ethiopia, Kenya, Rwanda, Tanzania and Uganda. It provides close to 2000 days of technical support a year, and more than 80% of the consultants used are from Eastern Africa.

**TSF West and Central Africa** covers 25 French-, English-, Spanish and Portuguese-speaking countries. It began operating in 2006 and is managed by the Bureau d'Appui en Santé Publique’96, a private sector consultancy firm, along with the Consultancy Group of the Center for International Cooperation in Health and Development. The Futures Group International, which specializes in the design and implementation of public health and social programmes for developing countries, joined the consortium in April 2010. The facility operates from Ouagadougou, Burkina Faso, and is recognized as the prime provider of short-term, HIV-related technical support in the region. It provided over 3700 days of support in 2010, and close to 90% of the consultants it uses are from the region.

**Eastern Africa is one of the regions worst affected by AIDS, with national adult HIV prevalence at 6% or higher in Kenya, Tanzania and Uganda. Most new infections occur during unprotected heterosexual intercourse in the general population, but there is evidence of serious outbreaks among key affected populations, such as injecting drug users, sex workers and men who have sex with men in several of the countries. The epidemics appear to have stabilized overall, but there is evidence of increased risk behaviour in some countries, including Uganda.**

**TSF West and Central Africa** covers 25 French-, English-, Spanish and Portuguese-speaking countries. It began operating in 2006 and is managed by the Bureau d’Appui en Santé Publique’96, a private sector consultancy firm, along with the Consultancy Group of the Center for International Cooperation in Health and Development. The Futures Group International, which specializes in the design and implementation of public health and social programmes for developing countries, joined the consortium in April 2010. The facility operates from Ouagadougou, Burkina Faso, and is recognized as the prime provider of short-term, HIV-related technical support in the region. It provided over 3700 days of support in 2010, and close to 90% of the consultants it uses are from the region.

HIV prevalence in West and Central Africa is much lower than in southern Africa, but the region is home to several serious national epidemics, including in Côte d’Ivoire and Ghana (where generalized epidemics are...
The epidemics vary significantly in scale within and between countries. Adult HIV prevalence in Côte d’Ivoire (3.7%) is more than twice as high as in Liberia (1.7%) or Guinea (1.6%), even though these countries share national borders. Intense HIV transmission also occurs among key affected populations, notably sex workers and their clients, and men who have sex with men.

**TSF Southeast Asia and the Pacific** started operating in late 2006 and is based in Kuala Lumpur, Malaysia. Hosted by the regional office of the International Planned Parenthood Federation (IPPF), it serves 26 countries, eight of which are regarded as regional priority countries for strengthening AIDS responses. Key areas of focus include strengthening civil society engagement, and ensuring the key affected populations are adequately involved in and covered by interventions. It provided more than 5000 days of technical support in 2010, and more than 90% of its consultants are regionally based.

The epidemics in this region are well established in a few countries (Cambodia and Thailand, for instance), highly dynamic in some others (such as China and Vietnam), or very recent in several (most of the Pacific nations). In most places, the epidemics are concentrated among key affected populations that also contend with sometimes-severe harassment and stigmatization. The region has produced some of the world’s most noteworthy national prevention successes (such as in Cambodia and Thailand), but many national strategic plans fail to accord sufficient priority to HIV prevention. In many places, poor protection of the rights of highly vulnerable populations is undermining countries’ AIDS responses.

Set up in 2009 and operated by ActionAid International Asia (in partnership with the Tata Institute of Social Sciences, in India, and the International Centre for Diarrheal Disease Research, in Bangladesh), the **TSF South Asia** is the youngest of the TSFs. The facility services eight countries (Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka), and almost exclusively uses consultants who are based in the region. In 2010, the TSF provided more than 1500 days of technical support and capacity development.
HOW DO THE TECHNICAL SUPPORT FACILITIES WORK?

The five TSFs function along similar lines. The TSF Southeast Asia and Pacific can serve as an illustrative example.

The facility is operated by the International Planned Parenthood Federation (IPPF). Funding for the TSF’s core operation is supplied by UNAIDS, with the UNAIDS Regional Support Team (RST) managing the contract between UNAIDS and the IPPF. Oversight and guidance is provided by an Interagency Reference Group, which is chaired by UNAIDS’ Regional Director and comprises representatives from UNAIDS cosponsors, donors, civil society, and other country partners. Along with UNAIDS, the International HIV/AIDS Alliance is a key partner agency of the TSF.

Quality assurance of consultants centres on a regularly updated, online database that reflects a solid quality assurance process. The TSF provides support during the preparatory phase of the terms of reference (TOR), budget creation and risk assessment, and supplements this with logistical support during implementation. Both clients and consultants present feedback at the end.

The bulk of TSF assignments are focused at country and regional levels, and directly benefit country stakeholders. In Southeast Asia and Pacific, for example, about 85% of TSF support targets country partners. Almost all the consultants deployed are either from the beneficiary country or the wider region.

The clients pay for assignments. When they cannot afford to pay for the technical assistance, they can apply for support from the UNAIDS Technical Assistance Fund (TAF), which was set up for that purpose. Applications are considered on the basis of TAF criteria and the availability of funds. While the decision to award TAF support rests with the UNAIDS RST, the TSF manages disbursement and the assignment itself. The application process is undemanding and decision-making is rapid. The TAF has proved to be a very useful and widely appreciated mechanism.

The facilities all adhere to the Paris Declaration, and support the Code of Conduct for Technical Support to HIV Programmes.

Except for India, all the countries in this region are confronting relatively new epidemics that currently revolve largely around sex workers and their clients, injecting drug users, transgendered persons and men who have sex with men. Adult HIV prevalence is increasing in countries such as Bangladesh and Pakistan, where HIV infection levels are especially elevated among injecting drug users. In some southern Indian states, on the other hand, HIV prevalence appears to be declining among young people. But the proportion of women living with HIV in the region almost doubled in the past decade, as HIV spread further in the wider population. The AIDS response in some of the countries is relatively underdeveloped.

A sixth TSF for Eastern Europe and Central Asia was established in 2009, but closed due to operational issues. In addition to the TSFs, UNAIDS has supported the work of the International Centre for Technical Cooperation on HIV/AIDS in partnership with the Government of Brazil.
CHAPTER 2

What is special about the Technical Support Facilities?

The first TSFs were set up in 2005-2006, during a dynamic period in the struggle against HIV. Global Fund disbursements were growing, the antiretroviral treatment (ART) rollout was fast gaining momentum, national strategic planning and programme implementation were becoming more complicated, and tracking and reporting obligations were growing more onerous.

Although anxious to seize these new opportunities to curb their AIDS epidemics, many countries realized that they did not command the human and technical resources they needed to access, efficiently absorb and effectively deploy the increased funding. Short-term technical support was needed. So for example, in Southeast Asia and the Pacific, most of the more than 200 assignments facilitated by the TSF early on responded to needs for urgent, short-term assistance. The TSFs emerged in response to these new and increasing demands.

Technical support (from both the TSFs and other providers) quickly brought significant, demonstrable benefits. Delayed projects and programmes were implemented, plans and strategies were designed or improved, and further funding and support was leveraged.

The figure below illustrates the persistent need for assistance and the facilities’ capacity to service those needs while the figure overleaf depicts the range of partners benefiting from those services during 2010.

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Technical support delivered by the TSFs per year, from inception to end-2010, measured in assignment days

Number of TS Days provided by the TSFs per year

<table>
<thead>
<tr>
<th>Year</th>
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<tbody>
<tr>
<td>2006</td>
<td>2300</td>
</tr>
<tr>
<td>2007</td>
<td>7400</td>
</tr>
<tr>
<td>2008</td>
<td>10 000</td>
</tr>
<tr>
<td>2009</td>
<td>14 000</td>
</tr>
<tr>
<td>2010</td>
<td>15 000</td>
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But many obstacles to effective action still exist and they continue to hinder countries’ AIDS responses – highlighting the need for both targeted short-term technical assistance to bridge remaining gaps and for more, enduring capacity building.

Demand for short-term technical assistance persists partly because the terrain and context also keeps shifting. Even when new systems and capacities take root, fresh challenges materialize. Accessing Global Fund funding, for example, has become more complicated, while reporting obligations have multiplied and grown in complexity. Improved HIV surveillance, diagnostic and treatment techniques bring new technical challenges. And the need to demonstrate results and outcomes has imposed new obligations.

It is against this background that the TSFs broker and facilitate the provision quality, timely and cost-effective technical support and capacity development. In doing so, they draw on several unique features.
What distinguishes these facilities from other technical support providers?

In providing pragmatic, interim solutions along with longer-term capacity development, the TSFs command several advantages over other technical support initiatives.

▶ Regionally-based, the TSFs are more adaptable to local conditions, more familiar with local networks, and better positioned to marshal quick responses. They also forge ongoing partnerships and continuity in support;

▶ The TSFs are quicker, more flexible and more responsive than most other providers, partly due to the streamlined administrative systems they have developed;

▶ The services they provide are demand-driven. They are able to identify and prioritize previously overlooked countries or sectors for intensified support, and recruit or develop new locally based capacities to address those needs swiftly;

▶ TSF capacity and professional development programmes have built pools of top-quality, local consultants that constitute substantial capacity in their regions. While most other initiatives still “parachute” in technical expertise (sometimes at high expense), the TSFs predominantly use quality local and regional expertise. These consultants are more familiar with local contexts, and are more likely to command the soft skills that are so vital for effective technical assistance and capacity development;

▶ They provide support at a reasonable cost. Clients do not have to spend scarce professional time and resources seeking out suitable consultants, and they do not have to pay the costs of administering the assignments. In addition, national and regional consultants tend to be less expensive on average, and the TSF consultant pools allow for greater choice of candidates;

▶ Continuity and follow-up support are much more feasible and affordable within the TSF model, which builds on the previous work (rather than starting afresh each time with new partners and consultants);

▶ The TSFs help to circulate consultants with scarce skills and understandings of different settings and contexts within and between countries of a region. Increasingly, a strong community of practice has emerged among TSF consultants in the various regions. This allows them to share insights and skills (which is often difficult for consultants operating in small practices);

▶ The TSFs’ relationship with UNAIDS aligns their support with the UNAIDS “Getting to Zero” Strategy and with current UN knowledge and guidance. It also enables them to support United Nations (UN) Cosponsors, and to draw on technical expertise in the UN community;
UNAIDS’ vision of “Zero new HIV infections, zero discrimination, zero AIDS-related deaths” requires that countries effectively deliver on their own national plans and implement grants. The triangular collaboration between TSFs, UNAIDS country offices and RSTs creates a powerful mix of capacities and resources for responding flexibly and rapidly to country needs;
▶ The TSFs have built strong linkages with key civil society organizations and networks, and are viewed as trustworthy, neutral players;
▶ The diversity of the organizations hosting the TSFs, and the close collaboration between them, allows for blending different private and public sector approaches in their work;
▶ The TSFs are key assets in supporting and building countries’ capacities to successfully access and manage Global Fund grants. Changes in those processes make these grants moving targets that require constant support and adaptation; and
▶ The facilities have built a strong track record providing reliable, quality technical and capacity development support for Global Fund grants. They are extending their support across the entire Global Fund grant cycle (from proposal development to implementation and follow-up), using punctual short-term technical assistance and linking these to capacity development activities that build systems, process and skills.

REDEFINING TECHNICAL SUPPORT

Not only have the TSFs become yardsticks for the flexible and responsive provision of high-quality, short-term technical assistance and capacity development, they are redefining some of the traditional assumptions about technical support.

For decades, technical support was seen as a form of assistance that was dispensed from the North to the South. Typically, consultants from donor countries would be “parachuted in” to perform certain technical tasks, conduct training and provide other support – and then depart.

The TSFs have shifted from that paradigm. Regionally embedded, the TSFs and the consultants are also well positioned to provide follow-up and more continuous support. The bulk of the technical support resources they deploy are locally based. They command the soft skills and understand the contexts in ways that their northern counterparts often cannot match. The vast majority of consultants they use are from the region, and the TSFs are constantly investing in upgrading their skills and refining their capacities. Increasingly, the skills of community-based practitioners are also being harnessed and enhanced.

Growing collaboration between the TSFs (around training, developing and sharing new tools and methodologies, etc.) exemplifies the South-South collaboration that has long been absent from the technical support arena. In such ways, the facilities
are recasting the technical support “market”, and lodging it more firmly in the South.

All these advantages enable the TSFs to provide support of remarkable scope and quality, and to do so flexibly and quickly.

ASSURED QUALITY

Quality assurance is a cardinal attribute of the TSFs, and the methods and systems for achieving it have improved considerably. The TSFs use a process that includes the use of a consultant and technical support database, which serves as a tracking tool. Consultants are screened and added to the online database, which is regularly updated with new consultants and with information on performances in recent assignments.

Experience has shown that the results of technical support improve markedly with better conceptualization, planning and management of consultancies by recipients themselves. Thus the TSFs put considerable effort into assisting with pre-scoping of assignments, and careful review of terms of reference for assignments to clarify the needs, and identify the most appropriate forms of support and the best-suited consultants.

Clients also receive logistical assistance in managing the support. Once completed, both clients and consultants review the work, thus allowing for continuous quality improvement. The entire process is constantly being assessed and refined, and is described in more detail in Chapter 4.

“The process of obtaining support was very collaborative and with a quick turnaround time. The consultant was highly qualified, assessed our needs and developed a system that was established within two weeks … With the system in place, we were able to accomplish in six weeks what would have taken us a year. I have been approached by other regional CSOs expressing interest to adapt our financial system and borrow the manual.”

— Vince Crisostomo, Executive Director of Seven Sisters, on the networks’ experience of working with the TSF Southeast Asia and Pacific.
WHAT DO WE MEAN BY TECHNICAL SUPPORT AND CAPACITY DEVELOPMENT?

For UNAIDS, technical support refers to activities that contribute to a systematic, timely and demand-driven response to capacity needs at country level. Technical support assists in strengthening individuals in their specific areas of expertise, makes organizations more effective and helps to improve the implementation of the national AIDS response. Technical support includes both technical assistance and capacity development. More specifically, capacity development refers to processes that enable countries to make better use of existing capacities and to further develop the capacities of people, organizations and institutions to perform functions, solve problems, and set and achieve certain objectives.

The paradox of technical support

The kinds of activities that fit under the mantle of technical support have changed in the past half-century. Technical support can be defined in ways that span a wide range of activities and roles – from short-term technical assistance, workshops or training courses, to intermittent but ongoing support, to longer-term secondments, mentoring, twinning and various other forms of capacity strengthening. The emphasis on the latter forms of support has grown stronger. But that change has accompanied two other, significant shifts.

Firstly, there has been a move away from hosting all internal human capacity inside large (including state) institutions. Internal, “full-time” capacity has weakened, and there is a greater tendency to contract-in consultant or seconded capacity, where specialized skills or rapid responses to non-routine needs are required. Secondly, donor and other development aid (including technical support) increasingly carry a requirement for quick, demonstrable evidence of effectiveness: “results” and “impact”.

Technical support is entangled in these paradoxical trends: a demand for swift, tangible “deliverables” and “results”, in the context of weakened internal capacities. Technical support therefore has had to adapt in a number of respects:

- Technical support had to fit with national strategies and it had to be better coordinated,
- Country ownership had to be strengthened,
- Country capacities had to be strengthened to implement national programmes,
- Capacities to effectively plan and manage technical support had to be strengthened,
- Local and regional expertise had to be consolidated and used more,
- Reliable access to funding for technical support – including for civil society – was needed, and
- The cost-effectiveness of technical support had to be increased.

Those objectives – especially the emphasis on capacity development – have come to define the approach and operation of the technical support facilities.
The TSFs’ activities are aligned with UNAIDS’ “Getting to Zero” strategy, which aims to revolutionize HIV prevention, catalyze the next generation of treatment, care and support, and advance human rights and gender equality for the HIV response. The facilities contribute by providing quality technical assistance and capacity development support that boosts both the mobilization of resources and the effective implementation of projects and programmes.

Depending on the region, the priorities in the AIDS response shift. The TSFs have proved their ability to develop consultant pools and technical expertise to serve new, emerging priorities. Prominent examples have been their effective gearing up to service the increasing focus on Global Fund grant implementation support, costing and budgeting, as well as technical areas such as medical male circumcision. In settings with concentrated epidemics there may be greater need to improve HIV surveillance, map most-at-risk populations, forge links with civil society groupings, and build systems and capacities to manage technical support and capacity development efficiently.

Most of the technical support assignments undertaken by the TSFs advance several UNAIDS strategic priorities at once. For example, supporting top-quality national strategic planning lays a vital foundation for ensuring a range of effective outcomes, and supports the strategy in a number of respects. The same holds for strengthening operational planning, or establishing and operating M&E systems that inform improvements to programmes and aid resource mobilization. For instance, the TSF South Asia’s support for Nepal’s Ministry of Health and Population’s assessment of the 2006-2011 national strategic plan, and development of a costed 2011-2016 National Strategic Plan (NSP) constitutes potentially invaluable support to the bulk of the strategy’s areas.

National strategic and operational planning

AIDS strategic plans are fundamentally important for directing and monitoring national responses to the epidemic, as tools for resource mobilization and as guides to resource allocation. Beyond the plans themselves, the processes for developing them are also important. They can help empower and mobilize stakeholders (especially in civil society), and can help forge more wide-ranging commitment to AIDS responses.

The TSFs experience an unremitting demand for support for reviewing and revising national strategic plans. Servicing those
requests forms an increasingly substantial part of their activities – and it is leading to considerable gains.

The three TSFs in Africa report demonstrable improvements in several countries in the quality of national planning, which now tends to be more evidence- and results-based than before, and is oriented around clearer priorities.

Technical support facilitated by the TSF Eastern Africa has improved the basic design of national strategic plans in Eritrea, Kenya and Rwanda, and in planning around the Great Lakes Initiative on HIV/AIDS. In 2010, the East African Community’s Education Sector AIDS strategic plan and operational plans, along with its resource mobilization strategy, were also developed with TSF support. Uganda’s National HIV Prevention Strategy and Action Plan was costed, while Kenya’s strategy was revised and a costed operational plan was developed. The TSF West and Central Africa in 2010 supported the evaluation of the 2006-2010 national plans in Burkina Faso and Togo, and the redrafting of the 2011-2015 plans in Cameroon, Cote d’Ivoire, Ghana and Sierra Leone.

In South Asia, the TSF supported a situation and response analysis and the development of working papers as a prelude to designing Bangladesh’s new NSP. It also supported the mapping of key affected populations in Nepal, and the mid-term review of HIV prevention and care programmes in mid-eastern states of India, focusing on protecting drug users against HIV. In Bhutan, the TSF and UNAIDS are assisting the National AIDS/STI Control Programme in analyzing sample data, and are training national staff in data analysis and HIV estimation processes.
Strong National Strategy Applications (NSAs) can also enable countries to access funding via the Global Fund’s NSAs. A recent innovation, these NSAs are meant to support countries’ strategic plans. Already the TSF Eastern Africa has supported Rwanda (one of three countries where the NSA was first piloted) in preparing and revising its NSP, and in providing technical assistance to Country Coordinating Mechanisms (CCMs) and Principal Recipients (PRs). Lessons drawn from that experience are now feeding into a second wave of NSAs, which the TSFs are also supporting.

These forms of support potentially address a variety of UNAIDS strategic priorities. The same applies to institutional strengthening.

Supporting key institutions and building systems

Stronger CCMs, PRs and Sub-Recipients (SRs) are vital for the effective governance and implementation of Global Fund grants (and wider country responses). As discussed in the section detailing support for Global Fund grants (above), the TSFs provide extensive and vital assistance to these institutions – as well as to government ministries and national AIDS authorities.

For example, more than 20% of the technical assistance and capacity building support provided by the TSF West and Central Africa in 2010 went to CCMs, while government ministries and National AIDS Councils (NACs) accounted for a further 44% of assignments. In Southern Africa, the corresponding percentages were 10% and 22% In Eastern Africa half, and in South Asia two thirds of the technical support assignments provided in 2010 benefited government partners and national AIDS authorities.

The support includes strengthening financial management and accountability systems, overcoming implementation bottlenecks, and restructuring CCMs. A mix of technical assistance and capacity development interventions are being used to strengthen these (and other) institutions and, via them, improve the effectiveness of grant implementation and achieve programming objectives.

Crucial restructuring of Kenya’s CCM was achieved with support from the TSF Eastern Africa. In Uganda, the support delivered to the Ministry of Gender, Labour and Social Development has enabled it to cost its annual work plans, and deploy resource-tracking tools as part of its grant management system. In recent months, Namibia’s CCM has been strengthened, as have the CCMs in Malaysia and North Korea, and the PR in Indonesia. Training provided by the TSF West and Central Africa has strengthened the supervisory capacity of Senegal’s CCM, and has enabled it to deploy and use the “Dashboard” and improve governance. The TSF also supported the programmatic and financial gap analysis of Burkina Faso’s CCM.

In South Asia, the TSF supported the pre-PR assessment of the National AIDS Programme in Pakistan, focusing on financial and
programme management for the Global Fund Round 9 negotiations. In Nepal, the focus was on building the capacity of the PR in Nepal (National Center for AIDS and STD Control) to manage the Global Fund Round 7 Phase 2 grant and other multilateral funding. Communication and sharing of information between the CCM, and the PR and SRs were also enhanced, and a performance framework and work plan was developed to streamline the CCM’s functioning.

STRENGTHENING SYSTEMS

Coordinating the use of resources in ways that strengthen overall health, public sector and community systems and institutions is a key priority for UNAIDS, and for the TSFs. Development of key systems and supporting programme-based approaches are areas where short-term technical assistance can lead to substantial improvements in institutional and programme capacity and efficiency. Numerous such activities are underway.

In Kenya, the TSF Eastern Africa is supporting the development and harmonization of resource tracking tools and systems in the Kenyan National AIDS Strategic Plan (III) with changes in the country’s Health Management Information System. This will boost the capacities and linkages of management information systems among the National AIDS Control Commission, the Joint UN Team on AIDS and other entities that serve as important sources for HIV financing and other data.

The TSF Southern Africa is working with the Global Fund Secretariat, the Southern African AIDS Trust, the Regional Association of nongovernmental organizations (NGOs) and other civil society role players to develop a strategic approach to community systems strengthening in Southern and East Africa. In West and Central Africa, Togo’s financial and administrative systems for managing its Global Fund Round 8 grant and the operating systems of Equatorial Guinea’s CCM have been improved.

MONITORING AND EVALUATION

Weak M&E undermines the effectiveness of programmes, hinders accountability, and makes it difficult to demonstrate results and impact. Consequently, it also hinders the mobilization of new resources. For all those reasons, M&E has become an increasingly important aspect of technical assistance and capacity development provided by the TSFs.
Swaziland has the world’s most severe AIDS epidemic. But its limited capacity and resources underscore the need for careful planning and solid systems and processes. Much of that duty rests with the National Emergency Response Council on HIV and AIDS (NERCHA), which has to coordinate the planning and implementation of the national multisectoral response, as well as manage Global Fund grants – all with limited in-house capacity. The TSF Southern Africa has been helping it meet the challenge.

TSF support enabled NERCHA to develop a new National Multisectoral Strategic Framework for HIV and AIDS (2009-2014), which now features a more evidence- and results-based planning approach. The facility also assisted NERCHA in resource tracking (using NASA), developing Global Fund proposals and implementing grants.

This was achieved through close collaboration with NERCHA. The TSF facilitated pre-scoping of the National Strategic Framework process, and introduced consultant candidates to NERCHA before finalizing their terms of reference and selection. TSF technical staff then engaged with NERCHA counterparts and the consultant throughout the rest of the process. Longer-term follow-up was then built into the process. Swaziland’s Framework became the first of a new generation of prioritized, evidence- and results-based NSPs in the region, and is widely regarded as a significant improvement over the previous plan.

The ability to show progress more clearly against realistic targets in areas such as HIV incidence, prevention of mother-to-child transmission (PMTCT) and ART coverage has helped motivate stakeholders. There is improved use of resource tracking information to guide resource prioritization and mobilization, and partnerships are more focused on results and on meeting priority national targets and gaps, rather than on discrete activities. Early engagement of powerful stakeholders, such as the Ministry of Finance, is expected to lead to more sustained support for Swaziland’s AIDS response. Swaziland has also initiated a wider technical support plan to address priority needs in a more systematic manner.

The approach taken in Swaziland is informing NSP processes in other countries, while the skills developed by consultants have been used subsequently to lead projects elsewhere in specialized areas of costing and planning. The case study was commended as best practice at the Global South-South Development Expo in 2010.
The TSF West and Central Africa has been servicing steady demand for technical support around M&E. In 2010, this area accounted for over 20% of the supported it provided. The TSF helped strengthen the M&E system of the PR in the Gambia, supported the development of an M&E plan and manual in Burkina Faso, Cameroon and Ghana, and assisted in the design of a national M&E plan in Sierra Leone. In Ethiopia, civil society organizations (such as the Ethiopian Interfaith Forum for Development Dialogue and Action and NEP+) were able to design and implement M&E frameworks for their Round 7 proposals, thanks to TSF support. The facility also helped enhance M&E capacity at service delivery and facility levels in Tanzania, while national M&E systems were reviewed and/or strengthened in Ethiopia, Kenya and Tanzania.

In South Asia, about 12% of the TSF’s assignments in 2010 targeted M&E improvements. National M&E guidelines have been drafted in Nepal, in a twinning assignment supported by the TSF. Heeding recommendations made by the technical review panel after approval of Sri Lanka’s Round 9 HIV proposal, the TSF ensured that an M&E operational plan was drafted and the Monitoring and Evaluation Systems Strengthening Tool was applied.

In Southeast Asia and the Pacific, Malaysia exemplifies the kind of support being offered. The Malaysian AIDS Council (which also coordinates the HIV work of 40 nongovernmental partners) approached the TSF to help develop and apply strategic and programmatic guidance for the country’s AIDS response. The TSF arranged three phases of support. It helped the Council develop:

- A strategic and costed operational plan that is aligned with the National Strategic Plan;
- An M&E framework that would feed into the Ministry of Health’s M&E framework; and
- Human resource capacity around M&E in the Council’s partner organizations.

The monitoring and evaluation of TSF support is receiving increasing attention, as well. This is vital for accountability and for ensuring consistently high quality and efficiency. A revised M&E framework is being explored with a view to refining indicators and reporting so that they more accurately reflect progress in achieving project objectives. Definitions and systems are also being standardized to make it easier to generate management and reporting information, and to make it easier to capture successes and good practice lessons.

“We had an excellent engagement with the TSF throughout the assignment. The TSF contributed significantly to making this exercise a success. The support is appreciated and we are looking forward to a strong working relationship.”

— NERCHA official on TSF assistance in the development of Swaziland’s National Strategic Framework on HIV and AIDS, 2009-2014.
Operational and financial management

Countries face the combined challenges of effectively implementing programmes, and of demonstrating their effectiveness and cost-efficiency. This places heavy emphasis on operational and financial management skills and acumen, which often are inconsistently present. TSFs step into that breach by fortifying the management skills and systems of country partners.

Tools for managing, utilizing and reporting on Global Fund grants were developed for Ethiopia’s NEP+, a network of people living with HIV. The TSF Eastern Africa also facilitated training in finance and programme management in Ethiopia, Kenya and Tanzania. The TSF West and Central Africa has supported, among others, the PRs in the Central African Republic and Togo in developing financial management procedures to improve grant governance (a condition for grant disbursement). It also helped Senegal’s CCM utilize the “Dashboard”, and introduced consultants to the use of the World Health Organization (WHO) costing and budgeting tool for Global Fund Round 10 proposals.

The TSF South Asia, meanwhile, enabled Pakistan’s national AIDS authority to strengthen its budgeting, planning and reporting capacities in 2010 (see box below). Its support for capacity development of Nepal’s National Centre for AIDS and STD Control enabled that structure to manage the Global Fund Round 7 Phase 2 grant as PR (see the box, above) and handle multi-agency pooled funds. Global Fund grant recipients (for Rounds 2, 6, 7 and 9) have benefited from programme management capacity building (focusing on M&E, procurement, financial management and governance).

The collection, analysis and use of information for strategic planning are crucial

IMPROVED MANAGEMENT AND M&E PLANNING IN PAKISTAN

In order to enable Pakistan’s National AIDS Control Programme to sign its Global Fund Round 9 grant agreement, the TSF South Asia supported the strengthening of the procurement and supply management and M&E plans, the finalization of the work plan and SR management plans, and the assessment of existing financial policies and systems to ensure compliance with Global Fund requirements. After grant signing, the TSF provided a consultancy report for an external assessment of the SRs.

“TSF support has enabled successful LFA (local funding agent) assessment and we are grateful to the TSF for the timely support, which helped Pakistan in signing the Global Fund Round 9 grant,” was the verdict of Dr. Muhammed Imran, epidemiologist and M&E specialist with Pakistan’s National AIDS Control Programme.
for long-term effectiveness and sustainability. The TSFs in Southern and Eastern Africa, in collaboration with the USAID Health Policy Initiative and the Global Fund, in 2009 held capacity building workshops in costing HIV strategies, using cost data related to HIV interventions, and presenting the findings of costing analyses to decision makers. The initial workshops proved so popular that they were later extended to include more government staff and TSF consultants.

**Universal access**

Devising and applying more effective prevention and treatment strategies is of ongoing, paramount importance – all the more so in the context of economic constraints, when there is even greater pressure to achieve maximum for money.

In southern Africa, especially, HIV prevention has assumed increasing prominence in national responses, as countries confront ongoing high levels of new HIV infections and the difficulties in sustaining treatment programmes. Since HIV prevention was added to its mandate, the TSF Southern Africa has been providing increasing support to develop the evidence base for more focussed prevention through Know Your Epidemic reviews, prevention strategies and other HIV prevention interventions. The facility is now centrally involved in supporting the design and rollout of male circumcision strategies as a supplement to other, ongoing interventions. By the second half of 2010, around 30% of the TSF Southern Africa assignments were HIV prevention-related.

The two TSFs in Asia and the Pacific not only support initiatives to map key affected populations, they are closely involved in bolstering the resources and capacities of civil society groups that provide essential HIV services to sex workers, people who inject drugs, men who have sex with men, and transgendered persons. Key affected populations are in line to benefit from TSF support for their sub-component in Cambodia’s Round 10 Global Fund grant proposal, for example. In Indonesia, three phases of support during 2007-2009 trained members of key affected populations and people living with HIV communities in basic consultancy skills, enlisted them in assignments, and provided mentoring to strengthen their networking skills.

The TSF South Asia has helped increase the involvement of key affected populations in mapping exercises at district level in Nepal, and in developing proposals for projects that pertain to key affected populations (such as drug policy reviews, improvement of national surveillance systems) in other South Asia countries. In collaboration with the regional civil society network, Seven Sisters, it also helped build the institutional capacity of Companions on a Journey, a men who have sex with men (MSM) organization, which enabled it to be selected as a Sub-sub Recipient for the Global Fund Round 9 multi-country MSM and HIV grant, and as SR for Sri Lanka’s national Global Fund grant.

The TSF West and Central Africa, meanwhile, is supporting situation analyses of key affected populations in Burkina Faso, and is assisting in the implementation of an action plan to protect women and girls
Technical Support Facilities: Helping to build an efficient and sustainable AIDS response

In the Democratic Republic of Congo, the mapping of sex workers has been done in three regions, with the possibility of extension to the rest of the country. In Togo, a strategic plan for HIV prevention among sex workers has been developed – all with TSF support.

In Kenya, the TSF Eastern Africa helped the national AIDS authority develop a targeted action plan that can integrate commercial sex workers more effectively into the HIV response. It also helped Kenya mainstream gender and human rights in its NSP, and assisted in integrating gender issues into the regional HIV and AIDS Partnership Programme of the Intergovernmental Authority on Development.

Other TSFs are supporting interventions that address gender and other rights-based issues, as well as the enduring problems of stigma and discrimination. In some regions (Eastern Africa, for instance), that work has acquired a special, topical urgency in combating new attempts to pass discriminatory legislation.

Much of the support on this front is channelled through civil society organizations and networks (see below). The work includes activities that enhance the capacities of legal and human rights projects, of organizations of people living with HIV and of groups that are at high risk of HIV infection (such as sex workers, people who inject drugs, and men who have sex with men).

Support from the TSF West and Central Africa is enabling Burkina Faso to design a plan to expand the testing and treatment of HIV infection in children, and to evaluate its national PMTCT strategy. There, as well as in Cameroon and Chad, the TSF also supported the documenting good practices and assessment of gaps around orphan and vulnerable children programmes. In Benin, the scale-up of PMTC interventions has been supported with capacity building training interventions.

**Strengthening civil society**

Civil society organizations are critical elements of countries’ AIDS responses, and their importance for effective Global Fund grant implementation is increasingly being recognized. Unfortunately, the skills, capacities and resources at the disposal of these organizations do not always do justice to the commitment and enthusiasm of their members.

Despite their often-manifest need for technical assistance and capacity building, civil society organizations have tended not to access such support as often as government entities. Access to funding has been one important hurdle, which UNAIDS and the TSFs are helping them overcome by using mechanisms such as the targeted use of Technical Assistance Funds (TAFs).

The support provided to civil society (measured by the number of days of technical support, for example) has increased in West and Central Africa [from about 180 days in 2007 to 365 days in 2010], and has soared in Southeast Asia and Pacific
STRENGTHENING FINANCIAL SYSTEMS IN TIMOR-LESTE

Before receiving support from the TSF Southeast Asia and Pacific, Timor-Leste’s National AIDS Council lacked a financial system. Now a system is in place, along with trained staff capable of operating it. The accounting software and generic finance manual that were developed are being used by other organizations – an example of how the benefits of targeted support can cascade more widely. Supported with Technical Assistance Funds and TSF consultants, the PR, Fundasaun Timor Hari’i (FTH), is now able to better manage current grants and it is better equipped to compete for new funding.

“The technical support from the TSF [led to] a lot of improvement in FTH’s financial management, which enabled it to effectively report to the Ministry of Health as PR for the Global Fund grant,” reports Aguia Ximines, the director of FTH in Timor-Leste. “Our financial system is now stronger and more organized if we compare it with before we got support from the TSF.”

(from about 280 days worth in 2006 to 1315 in 2010). There and elsewhere a rich variety of support is being provided, including:

- The TSF Southeast Asia and Pacific supports numerous national and regional entities. In Thailand, for example, this support enabled the regional network, Seven Sisters, to register as a foundation, opening new opportunities for fundraising (and financial sustainability) and putting it on a firmer footing in its engagements with government entities. In the Pacific, technical support to the Pacific Island AIDS Foundation helped it strengthen its financial management systems, redefine its vision, and devise a new five-year strategic plan and a resource mobilization strategy. Given that the Foundation’s core funding had expired in 2010, the support was crucial and enabled it to continue functioning;

- In India, pre-contracting support for the NAZ Foundation contributed to the success of its Global Fund multi-country proposal;

- The TSF Eastern Africa has facilitated much-improved civil society engagement in government-led programmes in Kenya and Rwanda. In Kenya’s case, the TSF assisted the PR for Global Fund Round 7 (CARE Kenya) in conducting a successful institutional review of 58 civil society SRs, as a prelude to grant implementation;

- In Niger, the TSF West and Central Africa helped develop a Global Fund Round 10 proposal that focused on building capacity in nongovernmental
organizations, while it helped develop strategic work plans for the national network of people living with HIV in Chad (which has increased its involvement guiding the national AIDS response in the Democratic Republic of Congo, networking among groups of people living with HIV was improved, and links with government, development partners and other civil society organizations were brokered. In Cameroon, a situational analysis was done of civil society involvement in the HIV response, which was mapped and collated in a computerized database.

Two important lessons have emerged from these kinds of activities:

▶ Follow-up support is vital after the core part of a technical support intervention has been completed. This kind of support has become an increasingly common feature of TSF activities; and

▶ Activities tailored for umbrella networks and organizations have proved to be especially efficient, since it has multiplier effects across many smaller organizations and groupings. Accordingly, almost all the TSFs have intensified their support for civil society networks and regional groupings.

Greater efficiency

As funding becomes more tightly rationed, there is an even greater need to boost the cost-effectiveness of HIV activities as much as possible. One way of doing this is by supporting improvements in the evidence base, and by helping ensure that planning and programming reflect that evidence.

In all five TSF regions, support goes to training and building capacities to enhance HIV surveillance systems and to use improved HIV estimates methodologies. In Asia and the Pacific, especially, the TSFs are supporting the mapping of most-at-risk populations, while in Eritrea the TSF Eastern Africa is helping country partners conduct an HIV incidence and modes of transmission modelling exercise. These interventions all help focus resources where they can have the most impact, reduce wastage and contribute to greater cost-effectiveness.

An additional route toward greater efficiency is by harmonizing activities so that limited resources are used more productively, and so that the efforts of UN and other development partners, government systems and other country actors become mutually reinforcing. In Kenya, for instance, linkages between management information systems in the National AIDS Control Council, the Joint UN Team on AIDS and other key stakeholders are being built to help avoid duplication. In neighbouring Uganda, support for the mid-term review of the UN Joint Programme is feeding into the harmonization of that programmes with other, new joint initiatives in the UN system. In several Southern
and Eastern African countries, the TSFs are supporting NASA training and consultant support to clarify resource allocation patterns.

Efforts to map key affected populations in Nepal illustrate such a harmonizing approach. A mapping study there involved collaboration between UNAIDS, the UN Development Programme (UNDP), the UN Office on Drugs and Crime (UNODC) and the World Bank, working under the guidance of the HIV/AIDS and STI Control Board of Nepal. A steering committee comprising major stakeholders oversaw the work. UNAIDS, UNDP and UNODC pooled their funds (which came to little over half of the total, with the World Bank contributing the remainder). The TSF developed the terms of reference (TOR) and the “request for proposal” for the study, which involved almost 6000 people drawn from key affected population communities in 41 districts. The study has the prospect of helping to focus Nepal’s AIDS programme where it can have the biggest impact.

More accurate costing processes also contribute to greater efficiency. In Southern Africa, for example, the TSF collaborates with the Global Fund and WHO around Global Fund proposal costing tools, as well as ART unit costing efforts in support of the Global Fund’s “value for money” initiative.

The TSFs in Southern and Eastern Africa have also collaborated with the United States Agency for International Developments’ (USAID) Health Policy Initiative to build capacity among consultants and country partners in costing and budgeting. The innovative mix of training linked to practical application has significantly improved the abilities of national programmes to undertake costing and budgeting and to cope with surges in demand, such as Global Fund proposal rounds. The TSF Eastern Africa has made vital contributions to costing processes in Eritrea, for example, while the TSF Southeast Asia and Pacific has worked with partners to train leaders from 12 countries to design costed, prioritized action plans to implement NSPs.

TSFs are also streamlining themselves. Contracting mechanisms have been made more efficient, and the facilities are able to provide quicker and more flexible staff support to the UNAIDS Secretariat and RST around urgent activities.

UNAIDS has put in place a draw-down contract mechanism for regional offices, which boosts the response time and efficiency of technical assistance. This useful model can be adopted by other agencies to achieve greater efficiency.

Other recent adaptations include cost sharing on TAF assignments, collaboration to manage consultant fee rates, and cost sharing around capacity development work. Generally, there is greater emphasis on cost sharing around the funding of technical support assignments, reducing the direct costs of support, and on co-funding TSF capacity development activities to supplement core capacity development resources and spread country and development partner commitment to technical support assignments and their outcomes.
MORE AND STRONGER PARTNERSHIPS

Poorly coordinated technical support initiatives carry the risk of duplication, and can claim a heavy cost in time, supervision and organizational resources. In places with low skills and capacity, poor coordination can even render those activities counter-productive.

One way to avoid those pitfalls is by prioritizing needs and support, which is easier to achieve when activities are properly coordinated. Cultivating and then servicing partnerships and communication between partners lays the basis for better coordination – and it improves cost-effectiveness.

The TSFs try to function in precisely that manner. Each of them works with a wide range of partners, in government, civil society, the UN community, and among multi- and bilateral donors and agencies.

There is a special focus on coordinating work with UNAIDS and various inter-agency initiatives around prevention (including male circumcision, in Southern Africa), monitoring and evaluation, supporting civil society organizations, and costing and budgeting (with WHO and the USAID Health Policy Initiative, for example). Country Technical Panel members ensure that relevant agencies and projects are consulted around assignments and capacity development initiatives. They also ensure that requests for support are harmonized with the initiatives of other partners (via liaison with the Global AIDS Monitoring and Evaluation Team, (GAMET), and the AIDS Strategy and Action Plan (ASAP) programme, for example).

Partnerships also involve the WHO at regional and global levels (particularly around Global Fund proposal preparation, consultant sourcing and peer review processes), ASAP and the Global Fund, as well as with the Prevention Working Group.

In Southern Africa, for instance, collaboration is being forged with ASAP around strategic and operational planning, and with the Futures Group around costing and budgeting. Collaboration has also increased with the RST, WHO and various inter-agency initiatives around prevention, M&E, supporting civil society organizations, costing tools and developing value for money approaches. These moves are helping create much stronger synergy between joint UN planning processes and capacity development in the region.

There are also strong links also with the Male Circumcision Working Group (which brings together WHO, UNAIDS, the US President’s Emergency Plan for AIDS Relief, and others), which includes the provision of technical support. Collaboration with Eastern African actors has been strengthened, including with

“The TSF helped us identify gaps in our 11 country networks’ capacity to programme and to build our capacity to address CCM endorsement challenges. The TSF Southeast Asia and Pacific understood the limitations and challenges faced by APN+ and offered flexible and tailored technical support that not only resulted in a successful Round 10 proposal, but also increased the capacity and confidence of the country networks.”

— Shiba Phurailatpam, Asia Pacific Network of People Living with HIV/AIDS (APN+) Regional Coordinator, commenting on the TSF support that enabled the network to gain approval for its multi-country Global Fund Round 10 proposal.
UNAIDS Country Offices, other country partners and consultants (partly to service the Joint UN Team orientations on the Global Fund).

Much the same applies to other regions. The TSF West and Central Africa works closely with UNAIDS Cosponsors, notably WHO, UNDP, the UN Populations Fund (UNFPA) and the UN Children’s Fund (UNICEF). As a member of the Joint UN Regional Team against AIDS (JURTA), the TSF West and Central Africa is supporting the harmonization of technical support around Global Fund proposal development and grant implementation follow-up in several countries.

The TSF Southeast Asia and Pacific has built important partnerships within the UN community (including with the WHO Western Pacific Region) and with civil society networks and groups, including the International HIV/AIDS Alliance, International Planned Parenthood Federation regional member associations, and the Seven Sisters network. The Asia Pacific Interagency Reference Group (which includes cosponsors, country partners, civil society and donors) provides oversight to the TSFs, and also advises on ways to harmonize the provision of technical support in the region.

The Maldives offers an example of these kinds of collaboration. Responding to a request from the Ministry of Health for support to develop a Global Fund proposal, the Joint UN Team outlined a programme of support involving UNAIDS, UNDP, UNODC and WHO. Drawing on TAF funding, the TSF then facilitated deployment of a local consultant who teamed with a peer from Sri Lanka to draft the proposal.

The TSFs provided significant support to help the UN support country partners. About one quarter of the assignments brokered by the TSF West and Central Africa in 2010 serviced UNAIDS and its cosponsors, as did over one fifth of those facilitated by the TSF Eastern Africa, and about 40% of them in Southern Africa. Examples in West and Central Africa included the training of consultants (in collaboration with WHO and UNAIDS) in scaling up TB/HIV activities, training country partners in the use of a WHO budgeting tool, and the TSF’s participation in the information platform set up by the Joint UN Regional Team against AIDS to support implementation of Global Fund Round 10.

A little over one quarter of TSF support serviced UNAIDS and its cosponsors in 2010 in Southeast Asia and the Pacific. Examples included capacity development support via the UN CARES 2011 training programmes in Myanmar, and assistance in developing the Joint UN Team priority areas and activities in Indonesia.

In South Asia, TSF collaboration with the National Centres and National AIDS Control Programmes has matured quickly in Pakistan and Sri Lanka (where it focused on support for the Global Fund Round 9 grants signings), Bangladesh (around developing the CCM), and Bhutan and Nepal (support for Round 10 proposal development). The TSF has also linked with the International Development Law Organization to improve legislative and human rights policy development. Similar collaboration with academic and research institutions around social change research and strengthening the evidence base for HIV programmes is underway in other TSF regions.
Supporting Global Fund grants

The Global Fund is the leading source of AIDS funding in many countries. Improving their capacities to acquire, implement and manage Global Fund grants is therefore a top priority, and is vital for scaling up and enhancing AIDS responses.

Reliable support for Global Fund grant implementation

A great deal of the technical assistance and capacity development needs of countries and other partners revolve around developing Global Fund proposals, and implementing the grants when the funds arrive.

This is partly because the requirements associated with those processes have changed and become more complicated. (Round 11, for example, now requires mandatory grant consolidation.) As countries get to grips with new Global Fund architecture, systems and processes, and pressures for stronger governance and control of the grants grow, the demand for technical assistance and capacity development is increasing. The TSFs are a crucial source of support on this front. The table below highlights the countries that received technical support in 2010 from the facilities.

The emphasis is on strengthening the management and governance capacities of CCMs, PRs and SRs – by helping them build solid systems and processes, and by training and supporting the people tasked with managing them.

Countries that received technical assistance from TSFs in 2010 for Global Fund grant implementation support

<table>
<thead>
<tr>
<th>REGION</th>
<th>Number of Assignments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Southern Africa</td>
<td>Botswana (2), Mozambique, Namibia, South Africa (7), Zambia, Regional</td>
</tr>
<tr>
<td>Eastern Africa</td>
<td>Kenya, Rwanda, Tanzania (2)</td>
</tr>
<tr>
<td>West and Central Africa</td>
<td>Benin (2), Central African Republic, Chad, Equatorial Guinea, Gabon, Gambia, Mauritania, Niger (3), Senegal, Togo (2)</td>
</tr>
<tr>
<td>South East Asia and the Pacific</td>
<td>Indonesia (7), Malaysia (3), Myanmar, North Korea</td>
</tr>
<tr>
<td>South Asia</td>
<td>Bangladesh, Nepal, Pakistan, Sri Lanka, Regional</td>
</tr>
</tbody>
</table>
In places that have benefited from such support, the governance of Global Fund grants and processes has sharpened, and the grants are being used more effectively.

This is evident in Eastern Africa, for example, where support provided to Kenya’s Ministry of Finance, a PR for the Round 7 HIV grant, enabled it to collate and examine lessons from Phase 1 implementation and incorporate them into the next phase. In Rwanda, the TSF supported a review and analysis of the process and systems that were used to make the approved National Strategy Application (NSA) operational. The aim was to draw lessons about NSA processes for other countries, as well as for UNAIDS and other partners. In Tanzania, the TSF supported orientation efforts to enable Global Fund stakeholders to implement various options of single stream funding (NSA, grant consolidation and reprogramming) on existing or pending grants. An action plan for single stream funding was developed.

In South Africa, TSF consultants developed financial management and M&E systems, and met conditions precedent ahead of the appointment of full-time national PR staff. The same consultants then provided intermittent short-term support and mentoring to enhance the ability of PR and SR staff to implement the systems more efficiently.

In West and Central Africa, the support focused on M&E, continuity services, programme management, the development of financial and administrative manuals, capacity building of CCMs and PRs, and training in the use of “Dashboards”. The TSF’s support for the Abidjan Lagos Corridor Organization PR, based in Benin, led to the Global Fund in 2010 lifting its “no-go” verdict for Phase 2 of the HIV grant. The support had targeted M&E, administrative and financial management and harmonization.

Smother implementation of Gabon’s Round 8 HIV grant became possible due to
support provided to the PR, specifically to its M&E unit (*Cellule de Gestion du Projet*). Similar improvement was achieved in the Gambia, where support for the CCM’s capacity to provide adequate programme oversight and for the PR and SR’s M&E capacities bolstered implementation of the Round 8 HIV grant. In Senegal, CCM members were trained in using the “Dashboard” and improving governance, while in Togo procedures for budgetary, procurement and supply management, as well as financial accounting, were developed for the PR.

In Southeast Asia and the Pacific, the TSF has supported 60 Global Fund-related assignments in 22 countries since 2006, and they have proved vital for the approval and implementation of Global Fund grants in the region. In Indonesia, for example, technical support has targeted the financial and programme management, and the M&E capacities of the national PR (*Nahdlatul Uluama*), which was able to implement all planned activities in Global Fund Round 9. The TSF’s support also helped finalize the “Dashboard” for AIDS, tuberculosis (TB) and malaria for the CCM, and enabled the country’s UNAIDS country office to provide effective coordinating support to the CCM Secretariat. In Malaysia, the TSF helped improve coordination between the CCM Secretariat, the PR, and the UNAIDS focal point.

Scarcely a year after being created, the TSF South Asia was supporting Global Fund implementation in Bangladesh, Nepal, Pakistan and Sri Lanka. This took the form of CCM strengthening in Bangladesh and Nepal, supporting the pre-PR assessment of the National AIDS Control Programme and assessment of SRs in Pakistan, and preparing performance frameworks for Global Fund projects of the Ministry of Health and refining national M&E plans in Sri Lanka.

The benefits are tangible. In Bangladesh, the CCM has been reconstituted; in Nepal, the CCM’s new performance framework and work plans are now being used; in Pakistan, the PR has been approved and the grant signed with the SR is pending; and in Sri Lanka, the performance framework and M&E plan are in use.

A good deal of this work occurs in challenging settings.

In North Korea, the TSF is strengthening the governance and oversight skills of CCM members, in Timor-Leste it is helping build the skills and systems of SRs, and in Myanmar the PR has received financing and budgeting support. In West and Central Africa, support provided to Mauritania’s *Comite National de Lutte contre le SIDA* in 2010 enabled the country to receive essential drugs via a disbursement made to the *Croix Rouge Francaise* (as a procurement agent) in spite of the suspension of the Global Fund grant.

The Joint UN Teams on AIDS are potential linchpins in helping country partners

“The support from TSF South Asia to the CCM Nepal has been crucial ... It has been important for building important systems within the CCM, which have been useful for the better performance of the CCM, as well as of Global Fund initiatives overall.”

— Gokarna Bhatta, CCM Nepal Coordinator
mobilize and effectively deploy Global Fund and other resources. In order to help realize that potential, the TSF Southern Africa, working together with UNAIDS, staged a series of workshops for Joint UN Teams on AIDS in 10 countries in 2010. Development partners and CCM members also attended. In nearly all the targeted countries, the Joint Teams have now developed actionable plans for grant implementation support.

In summary, TSF support for Global Fund grant implementation is:

▶ Helping unblock stalled programmes and enabling grants to proceed to Phase 2,
▶ Contributing to better understandings of Global Fund processes,
▶ Bolstering partners’ implementing capacities, and
▶ Strengthening key players (notably CCMs and PRs).

For the foreseeable future, however, a mix of technical assistance and capacity development interventions will be needed to keep unblocking the implementation challenges many grants still encounter from time to time. Inadequate grant oversight continues to threaten implementation in some places. CCMs and PRs need to be motivated and supported to use new tools (such as “Dashboards”).

### Accessing Global Fund support

In the meantime, accessing Global Fund grants remains a major challenge for many countries. The processes and obligations are increasingly complex, and are not sufficiently understood everywhere. The performance-based funding approach, in particular, is taxing country systems.

The TSFs provide invaluable support in this area:

▶ The TSFs provided orientation to country partners and consultants to new Global Fund proposals guidelines;
▶ Support from the TSFs helped countries mobilize an estimated US$ 1.7 billion from Round 8 to Round 10 for the first two-year funding period.

#### Number of countries receiving support for Global Fund Grant Implementation

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of countries</th>
</tr>
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<tbody>
<tr>
<td>2007</td>
<td>4</td>
</tr>
<tr>
<td>2008</td>
<td>14</td>
</tr>
<tr>
<td>2009</td>
<td>22</td>
</tr>
<tr>
<td>2010</td>
<td>27</td>
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</table>
The TSF Southern Africa has assisted 13 countries in developing Global Fund proposals during Rounds 6 to 10. The success rate has been impressive: 67% of the proposals supported for Round 8 were approved (13 proposals), as were 68% of those in Round 9 (7 proposals). It made significant contributions to the success of Angola and South Africa’s Round 10 proposals in 2010. In Eastern Africa, the TSF has supported the development of 15 Global Fund proposals in Rounds 7 to 10.

Requests for support in preparing Global Fund proposals have increased in West and Central Africa, where the TSF is recognized as a leading provider of technical support to Global Fund grant applicants in that region. The support ranges from proposal development to grant implementation, CCM strengthening, case study development, and more. A total of 1431 days worth of technical support was provided to support the development of grant proposals for Global Fund Rounds 8, 9 and 10. In 2010, proposal development was supported in Benin, Burkina Faso, Cameroon, Chad, Congo, Côte d’Ivoire, Democratic Republic of Congo, Ghana, Guinea, Guinea-Bissau, Niger, Nigeria, Sao Tome and Principe, and Togo. Support has been also given to Tunisia, even though it lies beyond the TSF’s coverage area.

In West and Central Africa, the TSF supported the development of Round 10 proposals in 15 countries. Proposals totalling more than US$ 156 million from Burkina Faso, Guinea and São Tomé and Principe were approved. In addition, TSF support led to Guinea and Niger successfully signing Phase 2 of their grants.

In Southeast Asia and the Pacific, the TSF has supported the Global Fund proposals of 18 countries and 2 regional civil society groupings (including that of the Southeast Asia Network of MSM and Transgendered Persons, and the Asia Pacific Network of People Living with HIV) during Rounds 7-10. In 2010, all but 1 of the 6 TSF-supported country and regional Global Fund Round 10 proposals were successful; they amounted to a preliminary total of US$ 78 million. Further west, the TSF South Asia, the youngest of the facilities, has already successfully supported the Global Fund Round 10 proposal of Nepal, which triggered the recommendation of a US$ 57 million HIV grant for that country.

The TSFs are also helping ensure that priority interventions are funded adequately. Strengthening and expanding prevention of mother-to-child HIV transmission (PMTCT) services have been singled out as priorities in high-burden countries, for example. Of the 20 high-burden countries, 17 submitted a Round 10 proposal with a PMTCT component. Financial tracking done by UNAIDS shows that PMTCT budgets in approved Global Fund HIV proposals increased from 3.5% in Round 9 to 8.1% in Round 10. In the Asia Pacific region the focus has been on ensuring that proposals meet the demands and needs of key affected populations.

Due to the groundwork laid by the TSFs, there is now more advanced planning around Global Fund grant proposal development in some countries. The process starts earlier and increasingly is based on analysis of previous experiences. The Malaysian AIDS Council,
for example, prepared its Global Fund Round 10 proposal by first analyzing lessons learned from technical support provided for the Round 9 proposal. Then it evaluated the 2005-2010 National Strategic Plan, staged a CCM-strengthening workshop, and held a mock technical review panel assessment – before tackling its Global Fund proposal. More generally, collaboration between UNAIDS regional and country teams, and WHO is facilitating pro-active capacity building workshops for country partners to help them to plan more effectively for Global Fund proposal Rounds.

The demand for technical support around Global Fund proposal development is not abating as quickly as some observers had anticipated. The process remains complicated and demanding. Support for Global Fund proposal development now requires very special skills mixes, and familiarity with new tools and methodologies is increasingly a necessity.

Number of Global Fund proposals developed with support from the TSFs, Rounds 8 to 10

<table>
<thead>
<tr>
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<th>Number of counties</th>
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<tbody>
<tr>
<td>Round 8</td>
<td>41</td>
</tr>
<tr>
<td>Round 9</td>
<td>37</td>
</tr>
<tr>
<td>Round 10</td>
<td>30</td>
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</table>
Technical support is not a magic wand. Its success depends on a range of factors, not least clear and efficient management of the assistance. Sometimes it’s the countries with the most need for technical support that are the least capable of planning and managing consultancies firmly and professionally.

**Strengthening quality assurance**

The most basic requirement for successful technical support is quality assurance. The TSFs have been able to refine their quality assurance procedures, which now constitute a phased process, as depicted below.

Assignment management and quality assurance process used by technical support facilities

Beyond the steps shown, there is the fundamental element of prioritizing support – to avoid becoming over-extended and compromising the quality of services. Prioritization with UNAIDS, and discussion of those priorities with stakeholders (such as UN Country Teams) is part and parcel of TSFs’ operating procedures.

In Southern Africa and in Southeast Asia and the Pacific, client satisfaction levels have stayed close to the 90% target, despite rapid increases in the volumes of technical support being delivered. More than 90% of clients report that the technical and capacity development support delivered was of the anticipated quality and that they would use the consultant(s) again.

Improving partners’ capacities to plan and manage technical support is an important facet of the TSFs’ contributions.

Preparing accurate TORs and budgets for assignments is an elementary but vital step in improving the management of technical
assistance and capacity development. The results are evident in the improved quality of TORs partners nowadays submit when requesting technical assistance.

TSFs have produced guidelines for developing TORs and managing assignments, and these have been supplemented with training and mentoring to ensure that TORs and assignment management are of high quality and draw on the experiences of similar assignments elsewhere. The TSFs have also produced publications for consultants on assignment planning and management to align the expectations and plans of clients and consultants.

During assignments, TSFs also help partners and consultants address unexpected problems and ensure the required quality and relevance of outputs. Particularly in complex assignments, the facilities help partners and consultants work together to develop suitable work plans, roadmaps, inception reports and reporting milestones to streamline expectations and work processes. When required, TSFs can also assist consultants to receive the information and support they need to complete assignments effectively.

“We struggle with the management of technical assistance. We expect that with minimal input the consultant will go off and do what you want them to do. It hardly ever registers that technical assistance management is a day-to-day issue.”

— Technical support beneficiary in East Africa
Planning ahead

Ideally, thorough technical assistance and capacity development planning by country partners would streamline the support and boost its quality even further. There is increasing emphasis on developing ongoing relationships with key clients – such as national AIDS authorities, CCMs and PRs – which allows for timely pre-scoping and planning of assignments. This also helps foster country ownership.

Benin is one of the first countries in West and Central Africa with a technical support plan in operation. Developed with the assistance of the regional TSF and the UNAIDS Regional Team in Dakar, the plan targets key hindrances, which the national government, bilateral and multilateral partners and civil society identified in the country’s AIDS response. Burkina Faso and Ghana have now also developed technical support plans with TSF assistance, as has Cambodia in Southeast Asia and the Pacific.

Comprehensive technical support planning can be difficult, though, especially in countries with complex national responses that make it hard to anticipate the timing and nature of needs (such as in Southern and Eastern Africa), and in countries with low-level epidemics such as in Asia and the Pacific region. The TSFs in Southern and Eastern Africa have supported selected countries to develop more comprehensive technical support plans. But sustained engagement with country partners, along with mentoring support, is needed to promote and entrench the adoption of appropriate planning systems and practices. In Southern Africa, specific processes (around needs such as Global Fund proposals and national strategic planning processes) are proving helpful for strengthening technical support planning.

Following principles developed by the Global Implementation Support Team (GIST), and in collaboration with the TSF South Asia, the TSF Southeast Asia and Pacific now trains targeted country partners in developing technical support plans that fit the national strategic and operations plans, and stages in-country training courses to improve technical support management skills.

Effectively managing technical support

Even the most “straightforward” technical support assignments falter when they are not properly managed. Vague or inaccurate TORs are a frequent problem, as is the lack of active, consistent guidance and supervision. Management support is therefore an increasingly important part of TSF activities.

Some of the facilities provide facilitators who can support organizations in conceptualizing or pre-scoping and preparing TORs. The TSF Southern Africa has gone further and has developed a publication for staff who manage consultants or technical assistance. The publication features checklists to guide an
assignment manager through the various responsibilities, and it has been adapted for use by other TSFs. The facility has also developed a facilitated learning programme that includes support from TSF facilitators in managing all stages of assignments. Skills training for writing TORs and for managing consultants have also been provided.

Other TSFs have opted to provide longer-term support where needed. The TSF West and Central Africa, for instance, provided Burkina Faso’s *Conseil National de Lutte contre le Sida et les IST* (the country’s National Aids Commission) with full-time consultant support to guide it through implementation of its new technical support plan and to help lay a solid foundation for managing future support.
The global AIDS response has matured to the point where demonstrable progress is being achieved. Compared with a decade ago, the advances have been remarkable. But they are not evenly evident, and they are on unsteady footing in some places. A major task now is to extend those achievements by consolidating and enhancing the systems, capacities and skills they rely on.

A great deal of lessons and experiences have accumulated, and these are being shared more widely than before. But the funding that fuelled the accomplishments appears to be dwindling. The global economic crisis has led to much tighter rationing of international and national funding for public health and development, including AIDS responses. This places even heavier emphasis on the need to mobilize funding and other support from diverse sources, track the use of those resources and enhance their effectiveness.

It’s not only sustainable capacity building that becomes evermore important in this context, but also the provision of high quality short-term technical assistance, in order to overcome immediate bottlenecks and build the skills and systems that are needed for sustainable AIDS responses. Indeed, practitioners are discovering that considerable overlap can exist between “short-term” technical assistance and “long-term” capacity development. The trends in technical support requests made to TSFs illustrate that point.

Combining technical support and capacity development

In Southern Africa, for example, the kinds of support being requested have shifted since 2006. This reflects not only changes in the context (for instance, more complicated Global Fund-related procedures), but also the extent to which in-country capacity has been built in certain areas.

Results-based management needs featured strongly in the support the TSF Southern Africa provided in its early years. As skills and capacities accumulated on that front, those
requests decreased. A similar trend occurred around M&E, as shown below. The share of M&E-related support the TSF provided initially increased quite rapidly, then decreased as the new capacities took hold and the overhauled systems settled. A fair deal of that support ostensibly constituted “short-term” assistance – but it also left deeper benefits that have spared a lot of clients the need to repeatedly seek support for the same kinds of tasks. Meanwhile, though, requests for support in preparing Global Fund proposals have increased steadily in Southern Africa (and in other regions, including in West and Central Africa).

It is not possible to overcome all the capacity gaps that hinder institutional performance. But it is vital to identify the priority issues and to address them where feasible. Some of those interventions would bridge gaps, while others seek to remove the gaps. Ideally, these two kinds of interventions are mutually reinforcing. So for example, active mentoring around specific assignments, and deploying and training in new tools can merge ostensibly “short-term” technical assistance with more enduring capacity development. Another method involves, for example, repeated visits to, and engagements with, projects to position and adapt the support to broader, ongoing processes – which some TSFs are now doing.

On the other hand, some partners experience such high rates of staff attrition and turnover (especially in mid- and high-level management) that the enhanced skills and capacities do not always take root in the designated organization. (The individuals, though, retain the skills and knowledge, apply them in other organizations, and thus can still benefit the overall country response.) It is not unusual for budget constraints and lengthy internal procedures to leave posts vacant for many months. Those gaps have to be filled, and newcomers have to be trained or oriented afresh (even when systems and processes have already been introduced).
These disruptive realities mean that technical assistance and capacity development does not operate along a neat, linear narrative of progress. Partners can be prone to reversals and unexpected hitches, and the TSFs are vital tools for helping them overcome those setbacks.

Overall, the TSFs capacity development programmes focus on:

▶ Strengthening the capacities of country partners to manage technical support effectively;
▶ Strengthening the skills of country partners in specific technical areas, especially Global Fund processes;
▶ Developing the skills and expertise of local and regional consultants, and training community consultants; and
▶ Pursuing collaborative approaches to technical support provision in ways that bolster country ownership.

Investing in country capacities and ownership

There is an evident need for greater country ownership. Such “ownership” presupposes a set of core capacities – not least strong plans, financial and operational management skills, solid and predictable governance systems, etc. Often, though, it is those sorts of assets that are missing or weak in countries that most need technical support.

Fiscal constraints – in both public health and donor budgets – are further cramping countries’ abilities to afford acquiring and retaining some of the capacities and skills they need inside key institutions. There is an unhappy irony in this: it is happening at precisely the time when the prospect of shifting the emphasis from short-term technical assistance to building systems and capacities seems greatest. Among other things, this is having three effects:

▶ It has become even more important to get the most out of limited resources – by being more efficient, prioritizing better, and collaborating more;
▶ Countries’ needs for “short-term” technical assistance are not receding as quickly as anticipated. Unable to lodge or retain in-house capacities to the extent desired, both government and civil society structures still rely on technical assistance to get urgent tasks done and to unplug blockages that stall action; and
▶ The practical need and possibilities for blending such “short-term” assistance with longer-term capacity development are becoming clearer to many practitioners.

The TSFs are making gains on all these fronts. For example, programme and capacity development is being integrated in order to leverage investments, and to enrich the learning and sharing of experiences. Benefits are also growing in relation to costing and budgeting. Inputs from the Health Policy Initiative (of USAID) are being harnessed to service the increase in demands for support. Some TSFs now arrange cost sharing with international NGOs (such as Population Services International, in South Asia, and with the HIV/AIDS Alliance, in Southeast Asia and the Pacific) around capacity development work that supports Global Fund SRs. And training programmes and processes
developed by the TSF Southern Africa are being adapted and used by other TSFs in Africa and Asia.

The capacity development programme of the TSF Eastern Africa has been merged with that of its Southern Africa counterpart, which has led to improved efficiency, better coordination across the two regions, stronger sharing of experiences and skills, and lower costs. There is also close collaboration between TSF South Asia and the TSF Southeast Asia and the Pacific on their capacity development activities. Trainers are shared and training approaches are harmonized, duplication is being avoided, and economies of scale can now be achieved. In addition, professional development activities for consultants in key areas are being provided for both consultants and country partners. This spreads the benefits of programmes to country partners. It also helps to harmonize expectations and boost the ability of country partners to use consultant expertise in more efficient, targeted ways (including follow-up mentorship of country counterparts by consultants to consolidate their learning).

### Building local consultancy capacities

Existing technical and consulting experience varies from TSF region to region, but even in places with relatively strong capacities, concerted effort goes toward the professional development of local consultants. Broadening and deepening pools of local consultants that are capable of providing top-quality support and are well-acquainted with the settings in which they work is a top priority for all the TSFs:

- In Southern Africa, the percentage of regional consultants used in TSF assignments was 80% in 2010, while in West and Central Africa, Eastern Africa, South Asia and Southeast Asia and the Pacific, it approached or exceeded 90%.
- By partnering with WHO, UNFPA and UNICEF, the TSF West and Central Africa trained 472 staff members of country partners and local consultants between late 2006 and early 2010. The TSF Southeast Asia and Pacific has trained 175 local and regional consultants, while in southern Africa, almost 400 consultants from 14 countries had received training by the end of 2010.

The TSF Southern Africa Professional Development programme focuses on meeting needs that countries identify. It uses a pedagogy based on adult and self-directed learning, and the main target group has been mid-upper level consultants whose skills and capacities can be most easily boosted to the quality demanded by clients.

Several TSFs link the training of consultants to work on actual assignments. Increasingly, twinning and mentoring is being used to consolidate and share practical learning – another example of how capacity development interventions can be made to overlap with short-term technical assistance. In West and Central Africa, a mentoring programme has been integrated into support for Global Fund proposal development; by early 2010, 11 consultants had been mentored in this manner, and more than a third of them have been used subsequently at senior level.
Helping develop community-based consultants and assuring their quality is also a growing priority, including in Asia and the Pacific, where the attributes and value of consultants who belong to key affected populations are increasingly being recognized. Progress on this front requires astute coordination, since a number of stakeholders are trying to move this aspect of capacity development forward. The TSF Southeast Asia and Pacific is engaging with Seven Sisters, the Global Fund, the International HIV/AIDS Alliance and the UNAIDS RST to develop an action plan to address this.

These activities are gaining pace:

- More than 280 consultants and almost 300 staff of country partners have participated in capacity development activities in West and Central Africa, more than one third of them in 2010 alone. Almost 350 consultants and country partner staff have been trained in Global Fund processes in that region. In their assignment evaluations, more than 70% of clients and partners in 2010 reported that the skills and capacities of their staff had been strengthened;
- In Eastern Africa, more than 235 consultants and more than 800 staff of country partners have participated in capacity development activities, and more than 200 consultants and country partner staff have been trained in Global Fund processes;
- More than 800 consultants and country partner staff have participated in capacity development activities in Southern Africa, the majority of which occurred in 2010. A little fewer than 400 consultants and country partner staff have been trained in Global Fund processes;
- In Southeast Asia and the Pacific, 140 consultants and 170 staff of country partners have taken part in capacity development activities, and over 70 have been trained in Global Fund processes, while in South Asia almost 180 consultants and staff of country partners have participated in similar activities, and over 70 were trained in Global Fund processes.

### Percentage of National/Regional Consultants Used by TSFs

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<tr>
<th>Region</th>
<th>Percent</th>
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<tbody>
<tr>
<td>South Asia</td>
<td>94</td>
</tr>
<tr>
<td>Southeast Asia and Pacific</td>
<td>93</td>
</tr>
<tr>
<td>Southern Africa</td>
<td>80</td>
</tr>
<tr>
<td>Eastern Africa</td>
<td>86</td>
</tr>
<tr>
<td>West and Central Africa</td>
<td>89</td>
</tr>
</tbody>
</table>
In only five years, the TSFs have delivered 50,000 days of technical support and capacity development in more than 70 countries, many of which are struggling with severe HIV epidemics. The benefits are manifest, and include:

- Consensus-based plans for securing funding and implementing grants;
- Strategic plans that have been improved or refined;
- Overhauled governance systems;
- Sharpened financial and operational management capacities;
- Repairs to dysfunctional M&E systems;
- Enhanced strategic information systems;
- Strengthened capacities of client staff and local consultants; and
- Grants that have been secured and unblocked HIV programmes.

No institution – private or public – ever reaches a point where technical support becomes entirely redundant. Constantly changing internal and external conditions generate a chronic demand for some or other forms of technical support. The objective, though, is to minimize and anticipate those needs, and to meet them on the institutions’ own terms.

There remains considerable need for technical assistance, along with capacity development, but the challenge now is to deliver it in ways that more durably transfer skills and capacity – that help make the support “stick” better.

### Clearing hurdles

In order for the technical support facilities to further improve the technical and capacity development support they provide, some challenges need to be met.

- There is considerable pressure to reduce the cost of technical support and capacity development activities while maintaining high quality.
  - Options include cost sharing around capacity development activities, and more active management of consultant fee rates and expenses.
  - More use of part-time technical staff or consultants by TSFs can also help ensure the availability of the required range of expertise to manage diverse assignments while avoiding having under-utilized staff in certain areas.
  - Working with partners to reinforce trends towards increased use of TSF services by UN and other agencies can create economies of scale, as well as diversify the funding base for TSF services.
- Properly planning technical assistance and capacity development magnifies the impact of interventions. Better planning also boosts country ownership. When countries are able to anticipate their needs, they can align them to longer-term strategies, and ensure the best-possible support is enlisted. But such planning remains a challenge for many national AIDS authorities and programmes. As a result, technical support demands are still sometimes last minute and urgent, often
come with poorly developed TORs, and lack proper guidance and management. TSFs are working hard to help make technical assistance and capacity development planning more routine and efficient.

- The usefulness of pre-scoping, regular country visits to update needs, and technical support planning for Global Fund implementation have been demonstrated, and the Global Fund now includes it in grant proposal forms.

- Cumbersome and unpredictable procurements systems of some client institutions are a recurring problem. This delays the provision and compromises the quality of the eventual technical support (since the top consultants are in high demand and move on to other work when undue delays occur). Partly as a result, countries’ own technical support budgets tend to go under-spent, and there is a tendency to resort to external funding for technical support, which may reduce countries’ control or ownership of the support.

- Waiver approvals can reduce this problem.

- TSFs could promote and deliver reviews of procurement and supply management in key institutions to help overcome this obstacle and to assist countries in speeding up programme delivery.

- Stronger, targeted partnerships (especially with cosponsors) can improve coordination and help limited resources go even further.

- There is scope in some regions for even closer partnerships around specific areas: for example, with WHO for HIV/TB-related activities, with UNICEF for technical support related to children and PMTCT, with UNFPA for technical support related to young people, or drawing on GTZ back-up for Global Fund-related support.

- Better coordination can be achieved with the elementary step of ensuring that the roles of TSFs are properly understood, and that communication
Technical Support Facilities: Helping to build an efficient and sustainable AIDS response

Channels are established and kept open. TSFs also ensure that relevant agencies are consulted around assignments, and that requests for support are harmonized with the initiatives of other partners (liaisons with GAMET and ASAP are existing examples of this).

▶ Attempts to boost civil society’s role in the AIDS response are multiplying, and community system strengthening is gaining more attention. Unfortunately, these efforts are sometimes held back by a lack of clarity about what community system strengthening entails and how it is best pursued.

• This challenge is probably best addressed in the course of implementation. Linked is the increasing demand for technical support that (also) takes the form of mentoring and coaching, especially but not only from civil society organizations.

• Grassroots-oriented technical support requires additional, and sometimes different, skill sets and approaches – and the TSFs will need to cultivate and add these to their repertoires.

• The TSFs should continue working closely with the HIV/AIDS Alliance Hubs and the Civil Society Action Teams.

▶ A special focus is needed on shortcomings and other factors that hinder effective Global Fund grant implementation, especially in progressing to Phase 2 of grants. These differ from place to place, but in addition to the “standard” governance issues, many countries still struggle with project cycle management, M&E and financial governance, as well as with achieving increased and more meaningful involvement of civil society groups, and gender-focused and rights-based programming.

▶ A realistic understanding is needed of the particular roles and contributions of short-term technical assistance and capacity building programmes in AIDS responses, so that expectations are neither exaggerated nor too modest.

▶ Clearer measurement of the efficacy and impact of TSF interventions can assist in further improving and refining the facilities’ work. Also needed is a systematic approach for measuring capacity development and moving towards results-based management of programmes, where capacity development forms part of an overall strategy for improving organizational performance (rather than the responsibility of one, discrete project). Such a framework would integrate programme planning and M&E, for example.

Taking the AIDS response to the next level

The TSFs enable countries to raise the funding, meet the technical challenges, and build and manage the systems that make effective responses possible.

They do so in cost-effective and flexible ways, by cultivating and using local skills and capacities, and by being able to adapt quickly and assuredly to new circumstances. And they facilitate South-South collaboration and the exchange of resources, tools, and lessons, within and between countries.
The TSFs are increasingly focused on capacity development work, are more closely aligning their provision of technical support with capacity development, and are increasing partnerships with other key national and regional players.

In consultation with UNAIDS country offices, the facilities are now providing more targeted and sustained support to selected organizations. Financial management strengthening, strategic plan development, and resource mobilization are among the areas where such ongoing support is being provided. This intensified approach will help create stronger, more sustainable organizations.

In doing all this, the TSFs bring to the AIDS responses a rare, invaluable mix of attributes and potentials.

- They provide more holistic support, since they have the flexibility for combining technical assistance with capacity development, and for adapting the support when necessary.
- The TSF model builds and embeds regional technical support capacities. Very few other technical support providers can match the facilities’ contributions to building the capacities and skills of local consultants and community-based practitioners, and in circulating those consultants within and between countries.
- The TSFs are shifting the technical assistance arena away from the old North-South model, and enhancing the ways in which support is provided. Longer term, follow-up support is now more feasible (and affordable) than before.
- The TSFs help to strengthen accountability mechanism capacities at country level.
- The facilities have helped overcome the stigma associated with seeking technical support in many countries.
- They have demonstrated and underscored the need for technical support planning, so much so that the Global Fund now includes it in its formal proposal requirements.
- They are vital assets for introducing and supporting the use of important new tools and methods, such as “Dashboards”, the Global Fund consolidation package, etc.
- They collaborate with institutions and the private sector to draw on their capacities and tools for building financial management capacities.
- The TSFs continuously review their work on the basis of feedback from clients and consultants, as well as external quality checks and assessments. This helps ensure that the support provided by the TSFs is of high quality, relevant, up-to-date and responds to country needs.

As this report documents, the TSFs are helping maximize value for money – by increasing absorptive capacity and by enabling countries to do more with less, bolster their systems, and improve the quality and sustainability of their programming. In a short space of time, they have become vital elements in the AIDS responses of dozens of countries.
ACRONYMS

ART  Antiretroviral Treatment
ASAP  AIDS Strategy and Action Plan
CCM  Country Coordinating Mechanism
FTH  Fundasaun Timor Hari’l (Timor-Leste)
GAMET  Global AIDS Monitoring and Evaluation Team
GIST  Global Implementation Support Team
IPPF  International Planned Parenthood Federation
KAP  Key Affected Population
LFA  Local Funding Agent
M&E  Monitoring and Evaluation
MSM  Men who have sex with men
NASA  National AIDS Spending Assessments
NERCHA  National Emergency Response Council on HIV and AIDS
NGO  Nongovernmental organization
NSA  National Strategy Application
NSP  National Strategic Plan
PMTCT  Prevention of Mother-to-Child Transmission
PR  Principal Recipient (of Global Fund grants)
RST  Regional Support Team (UNAIDS)
SR  Sub-Recipient (of Global Fund grants)
TAF  Technical Assistance Fund (UNAIDS)
TOR  Terms of reference
TSF  Technical Support Facility
UN  United Nations
UNAIDS  Joint United Nations Programme on HIV/AIDS
UNDP  United Nations Development Programme
UNFPA  United Nations Population Fund
UNICEF  United Nations Children’s Fund
UNODC  United Nations Office on Drugs and Crime
USAID  United States Agency for International Development
US$  United States Dollar
WHO  World Health Organization
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