

**SWAZILAND**



PD-ABJ-790

**GOVERNMENT**

SZ  
NS15  
N37  
91

**SWAZILAND**

**NATIONAL AIDS PREVENTION AND CONTROL**

**PROGRAMME**

**WORKPLAN AND BUDGET**

**APRIL 1991 - DECEMBER 1992**

S2  
MS15  
M37  
91

TABLE OF CONTENTS

	<u>Page</u>
Abbreviations	
1. INTRODUCTION.....	1
2. REVIEW RECOMMENDATIONS.....	1
2.1. Programme Management.....	1
2.2. Information, Education and Communication.....	2
2.3. Epidemiological Assessment, Surveillance, Control and Research.....	2
2.4. Laboratory Support/Blood Safety.....	3
3. REPROGRAMMING.....	3
3.1. Purpose.....	3
3.2. Team.....	4
3.3. Process.....	4
4. PROGRAMME AREA OVERVIEWS.....	4
4.1. Programme Management.....	5
4.1.1. Objectives and Strategies.....	5
4.1.2. Responsible Parties.....	5
4.2. Information, Education, and Communication.....	6
4.2.1. Objectives and Strategies.....	6
4.2.2. Responsible Parties.....	6
4.3. Epidemiological Assessment, Surveillance Control and Research.....	7
4.3.1. Objectives and Strategies.....	7
4.3.2. Responsible Parties.....	8
4.4. Laboratory Support/Blood Safety.....	8
4.4.1. Objectives and Strategies.....	8
4.4.2. Responsible Parties.....	9
4.5. Clinical Care.....	9
4.5.1. Objectives and Strategies.....	9
4.5.2. Responsible Parties.....	9
5. Master Workplan and Budget.....	10
5.1. Budget Summary.....	11
5.2. Activity Plan and Local Costs.....	12
5.3. International Personnel.....	37
5.4. Supplies.....	41
5.5. Equipment.....	45

ANNEXES

1. Organogram of the Ministry of Health .....	49
2. New Organogram of the NAPCP .....	50
3. Agencies Involved in STD/HIV/AIDS Activities in Swaziland.....	51
4. Description of SHAPE Project .....	52
5. Description of Project HOPE/FLAS .....	53
6. Conditions for NAPCP Support of NGO Activities.....	54
7. Terms of Reference for Short Term Technical Assistant for Condoms...	55

ABBREVIATIONS USED IN REPORT AND APPENDICES

AIDS	Acquired Immune Deficiency Syndrome
ARC	AIDS Related Complex
ANC	Ante-natal Clinic
ATF	AIDS Task Force
CIDA	Canadian International Development Agency.
CPHL	Central Public Health Laboratory
DDHS	Deputy Director of Health Services
DHS	Director of Health Services
EEC	European Economic Community
FLAS	Family Life Association of Swaziland
GOS	Government of Swaziland
GPA	Global Programme on AIDS
HEU	Health Education Unit
HIV	Human Immuno-deficiency Virus
IEC	Information, Education and Communication
IECAG	Information, Education and Communication Action Group
IPPF	International Planned Parenthood Federation
KABP	Knowledge, Attitudes, Belief and Practice
MCH/FP	Maternal and Child Health/Family Planning
MOE	Ministry of Education
MOH	Ministry of Health
MTP	Medium Term Plan
MSI	Marie Stopes International
NAC	National AIDS Committee
NAP	National AIDS Programme (Office and Secretariat)
NAPCP	National AIDS Prevention and Control Programme
NGO	Non-Governmental Organisation
OHS	Occupational Health Services
ODA	Overseas Development Programme
PHC	Primary Health Care
PHU	Public Health Unit
PWAs	People with AIDS
PM	Programme Manager
PS	Principal Secretary
RHM	Rural Health Motivator
RHE	Regional Health Educators
RHM Team	Regional Health Management Team
RSA	Republic of South Africa
SHAPE	Schools HIV/AIDS Pilot Education Project
SIHS	Swaziland Institute of Health Sciences
SNAT	Swaziland National Association of Teachers
STC	Short Term Consultant
STDs	Sexually Transmitted Diseases
STP	Short Term Plan
SEPI	Swaziland Expanded Programme on Immunization
UNDP	United Nations Development Agency
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WHO	World Health Organization
WR	WHO Representative

## 1. INTRODUCTION

The Government of the Kingdom of Swaziland, recognising that HIV infection and AIDS poses a serious threat to the welfare of the nation, requested the World Health Organisation (WHO), through the Global Programme on AIDS (GPA), to make a preliminary assessment of the AIDS situation and to assist the Ministry of Health (MOH) in the development of a national plan for the prevention and control of AIDS in Swaziland. A brief chronology of subsequent events leading to the development of the National AIDS Prevention and Control Programme (NAPCP) of Swaziland follows:

	1986	First case of HIV infection diagnosed
July	1987	Formulation of Short Term Plan (STP)
January	1988	Evaluation of STP and formulation of Medium Term Plan (MTP)
April	1989	First Resource Mobilisation Meeting
February	1990	Start of MTP implementation
March	1990	Project Document for 1990 signed by MOH
March	1991	Review of NAPCP
April	1991	Formulation of Reprogramming Document for Phase 2 of implementation

This document represents the plan for the Swaziland NAPCP for the second phase of implementation (April 1991 - December 1992).

## 2. REVIEW RECOMMENDATIONS

The NAPCP's first year of activity was reviewed in March, 1991 immediately prior to Reprogramming for the next phase of implementation. The Review team identified a number of specific areas of concern, and major Review recommendations are summarized below:

### 2.1. Programme Management

- A. NAPCP management objectives, strategies and activities should be clearly outlined during Reprogramming.
- B. An organogram clearly showing relationships and lines of authority between the various organs of the NAPCP should be developed and adopted.

- C. The full-time posts of Programme Manager and IEC Coordinator should be immediately established, advertised, and filled.
- D. The post of Programme Administrator should be established and filled as soon as possible.
- E. Office management systems should be immediately established.
- F. Policy statements and guidelines (as identified by technical components and including legal/ethical issues) should be developed and formalised.

## 2.2. Information, Education and Communication

- A. Clear, well-defined objectives, strategies and activities should be developed in the operational plan of action for the next phase of Programme implementation.
  - B. The three primary activity areas of the IEC Component (IEC, Counselling, and Condoms) each require full-time personnel to be effectively implemented. The full-time IEC Coordinator should be named immediately.
  - C. The roles, responsibilities and lines of authority between the various organs associated with the IEC Component (HEU, IECAG, IEC Component) should be clearly defined.
  - D. Regional IEC action groups should be formed.
  - E. Awareness among high-level government officials should be raised, and an influential and highly-visible personality should be identified as an NAPCP patron.
  - F. An operational plan of action for the promotion, coordination, procurement, storage, distribution, monitoring and evaluation of condoms should be developed.
  - G. Policy statements and guidelines should be formalised (including counselling, confidentiality, dissemination of information to the media).
  - H. An STD/HIV/AIDS Resource Centre should be created at the NAP.
- ## 2.3. Epidemiological Surveillance, Assessment, Control and Research
- A. Clear objectives, strategies and plan of action should be developed for the component.
  - B. Guidelines already developed for case reporting, as well as the case definition, should be printed and disseminated to health officials.

- C. Guidelines for STD/HIV/AIDS case diagnosis, treatment and management should be standardised and distributed to health workers throughout the country.
- D. The relationship of the NAP with researchers and research institutions needs to be established, and guidelines for AIDS-related research formulated and distributed.
- E. STD sentinel site roles and responsibilities need to be defined and HIV surveillance at these sites established.
- F. Policy guidelines on HIV sentinel site surveillance, collection of samples, informed consent, confidentiality, access to results, legal/ethical considerations, and contact tracing should be formalised.
- G. A database on HIV/AIDS should be developed and maintained.
- H. The categories of health workers authorised to request HIV tests should be reviewed and revised as appropriate.
- I. A Clinical Care Component to the NAPCP should be developed.

#### 2.4. Laboratory Support/Blood Safety

- A. The MTP and the Plan of Action for the next phase of implementation should be widely disseminated.
- B. Recruitment and training of staff, especially Lab Technologists and Blood Collection Team personnel, should be intensified.
- C. Continuing Education for health workers in HIV/AIDS and STDs should be provided.
- D. Aseptic technique in the handling of blood and body fluids should be stressed (including the consistent use of gloves, disposable needles and the judicious use of disinfectants).
- F. A protocol regarding accidental injury at the workplace should be designed and disseminated to all health workers.
- G. The use of sterile equipment should be encouraged among Traditional Healers and ear-piercing salons.

### 3. REPROGRAMMING

#### 3.1. Purpose

The Reprogramming exercise served four major purposes for the NAPCP:

- a) to plan for the period April 1991 - December 1992 (seven quarters);

- b) to prepare a funding request;
- c) to develop a monitoring tool for NAPCP management; and,
- d) to lay the groundwork for the preparation of the next Project Document.

Planning for the specified period was accomplished during the exercise, with strategies and supportive activities being developed. A time frame was established. A workplan with associated budget, targets and indicators was clearly outlined.

The Reprogramming document will be used to request financial and other resource support from donors and other interested parties. This document will serve as a guideline for discussions when interested parties meet to pledge resources to the NAPCP.

Finally, the Reprogramming exercise led to the development of a monitoring system to be used by the Programme Manager, which is incorporated into the workplan.

### 3.2. Team

The Programme Manager and component Coordinators (IEC, Epidemiological Assessment, Surveillance, Control and Research, Laboratory/Blood Safety) worked with a WHO/GPA Consultant, MOH personnel, NGOs and other interested parties to formulate the workplan and develop the Reprogramming document.

### 3.3. Process

The Reprogramming exercise immediately followed the NAPCP Review. The official Review Report was used during Reprogramming as a basis for discussion and formulation of the workplan. Component Coordinators worked on their respective component workplans in small groups, and plenary meetings were held to discuss areas of overlap and collaboration between components.

## 4. PROGRAMME AREA OVERVIEWS

Objectives and strategies for each Programme component are discussed below. In addition, responsible parties for each Programme area are identified. Details of planned activities in support of Programme area objectives are outlined in Section 5 of this document.

#### 4.1. Programme Management

##### 4.1.1. Objectives and Strategies

There is no clearly-stated objective for Programme Management in the MIP. A specific Programme Management objective has therefore been developed during the Reprogramming exercise:

to establish and strengthen management of AIDS prevention and control activities, including the facilitation of coordination and the encouragement of decentralisation.

Specific strategies developed to support this objective have also been formulated. During the next phase of Programme activity, the NAPCP will:

- a) establish an appropriate organisational structure within the overall PHC structure of the MOH, with clearly-defined lines of authority between all organs associated with the NAPCP;
- b) develop and formalise HIV/AIDS-related policies and guidelines concerning legal/ethical and human rights issues, as well as issues identified by the technical components of the NAPCP;
- c) increase efficiency and effectiveness of the NAPCP through the establishment and strengthening of management systems;
- d) coordinate all HIV/AIDS prevention and control activities of both governmental and non-governmental organisations and agencies;
- e) decentralise the NAPCP to the regional level, including the planning, implementation, monitoring and evaluation of HIV/AIDS prevention and control activities; and,
- f) ensure NAPCP efficiency and effectiveness and monitor its progress.

##### 4.1.2. Responsible Parties

All established components of the NAPCP have management responsibilities in support of the overall Programme Management objective, and all Coordinators are responsible for the management of their respective Programme components. It should be noted, however, that the Programme Manager is the final authority within the structure of the NAPCP itself, and is ultimately responsible for all components of the Programme; she, in turn, reports directly to the Senior Medical Officer of the Primary Health Care Unit of the MOH.

## 4.2. Information Education and Communication

### 4.2.1. Objectives and Strategies

The MTP does not include a clearly stated objective for the IEC component. Therefore, during the Reprogramming exercise, the following objective has been adopted:

to support efforts to reduce the spread of STDs and HIV infections through promoting the modification of behavior patterns and sexual practices by providing correct information about STDs/HIV/AIDS and making counselling services available.

Strategies in support of this objective have also been developed. During the next phase of Programme implementation, the NAPCP will:

- a) strengthen the structure of the IEC component of the NAPCP by clearly defining roles, responsibilities and lines of authority of the IEC Coordinator, IECAG, and HEU; this includes the coordination and collaboration of the aforementioned as well as with other governmental and non-governmental organisations and agencies, and the decentralisation of activities;
- b) target specific groups who are considered to be at risk of HIV infection for IEC activities;
- c) establish a system of coordination and collaboration among governmental and non-governmental organisations involved in the promotion, procurement, storage, distribution, monitoring and evaluation of condoms; and,
- d) fortify the counselling structure already established by ensuring that appropriate, sensitive and well-informed counselling be promoted and made available to all needing the service.

### 4.2.2. Responsible Parties

The IEC Coordinator of the NAPCP is responsible for the following:

- a) implementation and follow-up of the production of STD/HIV/AIDS-related IEC material and messages coming out of the NAP and the HEU (in collaboration with the Chief of the HEU);

- b) the coordination and collaboration of STD/HIV/AIDS-related IEC activities with other governmental and non-governmental organizations and agencies;
- c) quarterly planning, monitoring and reporting of STD/HIV/AIDS IEC activities, including quarterly reports of the IECAG activities; and,
- d) the integration of STD/HIV/AIDS IEC activities in the decentralisation process of the Health Educators at both the central level (with Chief, HEU) and regional (with RHMTs) levels.

The IECAG is responsible for the development of guidelines for policy concerning issues related to IEC and Counselling, including: referrals to Counsellors, confidentiality, education, and dissemination of information to and use of the media. In addition, the IECAG is responsible for offering and/or identifying technical assistance for the implementation of IEC activities.

Project HOPE is responsible for the training and the coordination of counselling activities until the full-time Counselling Coordinator is in place. Project HOPE will prepare quarterly reports on these activities and work in close coordination with the NAP. Roles and responsibilities for Counselling will be redefined when the Counselling Coordinator is in place. Project HOPE and the Counselling Coordinator will take a lead role in the development of the guidelines and policy concerning Counselling.

The coordination and distribution of condoms is the responsibility of the MOH until an operational plan of action indicates otherwise.

The WHO IEC Advisor will provide technical assistance to the NAPCP, work directly with her full-time counterpart (IEC Coordinator), and assist in the coordination of IEC activities of NGOs.

NGOs currently involved in STD/HIV/AIDS IEC activities are noted in the workplan. These NGOs report to the NAP through either the IECAG and/or directly to the IEC Coordinator.

#### 4.3. Epidemiological Assessment, Surveillance, Control and Research

##### 4.3.1. Objectives and Strategies

The objective for this component was not clearly stated in the

MTP; therefore, during the Reprogramming exercise the following objective was formulated:

to monitor the trends of STD/HIV/AIDS among the population through the development of a comprehensive national STD Control Programme, the strengthening the STD/HIV/AIDS surveillance system, and the development and coordination of STD/HIV/AIDS-related research.

Strategies developed to support this objective are:

- a) further establish and implement sentinel surveillance in order to strengthen the monitoring of STD/HIV/AIDS trends;
- b) facilitate and coordinate AIDS-related research; and,
- c) strengthen epidemiological surveillance capacity within the overall PHC structure of the MOH.

#### 4.3.2. Responsible Parties

The Epidemiology Coordinator (who is the MOH Epidemiologist) will be responsible for all of the activities outlined in the workplan, and will work in close collaboration with all other Programme Coordinators. Sentinel site nurses are responsible for surveillance and reporting to the Epidemiologist, who will provide supervision and guidance to the sentinel sites throughout the next phase of Programme implementation.

#### 4.4. Laboratory Support/Blood Safety

##### 4.4.1. Objectives and Strategies

The primary objective of the Laboratory Support/Blood Safety component of the NAPCP is:

to prevent the transmission of HIV-infection through exposure to infected blood and blood products.

Specific Programme strategies for the Laboratory Support/Blood Safety component are as follow:

- a) educate the public on transmission of HIV infection through blood and its products, and encourage blood donation;
- b) prevent HIV transmission by transfusion with infected blood;
- c) ensure the safety of health workers, specifically laboratory and blood transfusion workers; and,
- d) improve skills of laboratory staff and other health workers.

#### 4.5.2. Responsible Parties

The Laboratory Support/Blood Safety component is coordinated by the Chief Pathologist of the Central Public Health Laboratory in Manzini. He is responsible for all facets of this component of the Programme, and will work in close coordination with other component Coordinators and with the various organs of the NAPCP.

### 4.5. Clinical Care

#### 4.5.1. Objectives and Strategies

The MTP did not include a Clinical Care component for the NAPCP. During the Review exercise, it became apparent that such a component should be established in anticipation of an increase in HIV infection. The objective for this new Programme component is:

to minimise the clinical, social and economic consequences suffered by HIV-infected individuals and their families.

Strategies designed to support this objective are:

- a) to strengthen the NAPCP capacity to improve the clinical care of HIV-infected individuals and people with AIDS;
- b) to improve clinician skills in HIV-infection and AIDS case management, and to strengthen the standardisation of diagnosis and management of STDs; and,
- c) to develop strategies and capacity for the provision of community-based care.

#### 4.5.2. Responsible Parties

There is not yet a Clinical Care Coordinator for the NAPCP, and thus the responsibilities for this component will be shared by a variety of individuals until one is officially named. The Chair of the ATF will have overall responsibility for the provision of guidance and technical support to the NAP and will work in close coordination with the Programme Manager and the Counselling Coordinator in the implementation of Clinical Care activities.

## 5. MASTER WORKPLAN AND BUDGET

The Master Workplan and Budget which follows includes five major sections:

- A. Budget Summary: a summary of all costs for each Programme component, broken down as follow:

- AAA. Salaries
- 040. Consultants
- 230. Duty Travel
- 550. Supplies
- 670. Equipment
- 834. Local Costs

- B. The Master Activity Plan and Monitoring Flow Chart includes the detailed plan of action of the NAPCP for the period April 1991 - December 1992. Activities for each of the five major Programme areas are included. Activities have been costed in local currency (Emalangen) and the total cost for activities has been converted to USD for inclusion in the Local Costs lines (834) of the Budget Summary.

The Chart has been developed to guide the Programme Manager in both planning and monitoring of activities. It lists all planned activities for the specified period, and can be used for periodic review of activities as well as for monitoring the progress of Programme implementation. The LOTUS 1-2-3 file upon which it has been developed includes additional columns for monitoring (columns for noting activity status in terms of the progress indicators as well as for additional explanatory comments); these monitoring columns can be easily accessed by the Programme Manager with a minimal amount of training in the application of LOTUS 1-2-3.

- C. International Personnel for each Programme area are identified and costed in USD for inclusion in the Salaries (AAA, WHO Personnel) and Consultants (040, International Consultants) lines of the Budget Summary.
- D. Supplies for each Programme area are identified and costed in USD for inclusion in the Supplies (550) lines of the Budget Summary.
- E. Equipment requirements for each Programme area are identified and costed in USD for inclusion in the Equipment (670) lines of the Budget Summary.

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 BUDGET SUMMARY

CODE/DESCRIPTION	BUDGET ESTIMATE U.S. DOLLARS	PERCENT OF TOTAL
------------------	---------------------------------	---------------------

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 BUDGET SUMMARY

CODE/DESCRIPTION	BUDGET ESTIMATE U.S. DOLLARS	PERCENT OF TOTAL
------------------	---------------------------------	---------------------

210 PROGRAMME MANAGEMENT

AAA Salaries	0	
040 Consultants	20,200	
230 Duty Travel	0	
550 Supplies	870	
670 Equipment	18,271	
834 Local costs	186,134	
<b>TOTAL</b>	<b>225,475</b>	<b>21%</b>

220 IEC AND COUNSELLING

AAA Salaries	175,000	
040 Consultants	13,429	
230 Duty Travel	0	
550 Supplies	679	
670 Equipment	1,018	
834 Local costs	293,871	
<b>TOTAL</b>	<b>483,987</b>	<b>45%</b>

LOCAL COSTS (834)

Includes all planned activities by Programme component, with cost breakdown in Emlangeni

1/16

BRAZILIAN NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 BUDGET SUMMARY

CODE/DESCRIPTION	BUDGET ESTIMATE U.S. DOLLARS	PERCENT OF TOTAL
<b>230 EPIDEMIOLOGY AND SURVEILLANCE</b>		
AAA Salaries	0	
340 Consultants	9,400	
230 Duty Travel	0	
550 Supplies	9,510	
670 Equipment	3,196	
334 Local costs	48,088	
<b>TOTAL</b>	<b>70,194</b>	<b>6%</b>
<b>240 LABORATORY SUPPORT</b>		
AAA Salaries	0	
340 Consultants	0	
230 Duty Travel	0	
550 Supplies	186,412	
670 Equipment	624	
334 Local costs	24,185	
<b>TOTAL</b>	<b>209,221</b>	<b>19%</b>
<b>CLINICAL CARE</b>		
AAA Salaries	0	
340 Consultants	18,800	
230 Duty Travel	0	
550 Supplies	0	
670 Equipment	0	
334 Local costs	73,371	
<b>TOTAL</b>	<b>92,171</b>	<b>9%</b>
<b>GRAND TOTAL</b>	<b>1,081,058</b>	<b>100%</b>

PROGRAMME MANAGEMENT (210)

1/12 -

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: PROGRAMME MANAGEMENT (210), LOCAL COSTS (834)

LS = 2.7 LesiLangeni

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested	
					1	2	3	4	5	6	7						
4.1.1.A. Establish an appropriate organisational structure within the overall PHC structure of the MOH, with clearly defined lines of authority between all organs associated with the NACP	*	1. Dissemination of STP, and Plan of Action with new organogram as appropriate (300 people x 2 documents x R3.5) (Annexes 1&2)	Appropriate health sector personnel, NGOs, and interested parties	National	x	x							Copies distributed	PH			2,130
	*	2. Revise MAC membership to include Undersecretaries or Technical Directors (rather than PS) of appropriate Ministries	MAC	Central	x								Revised MAC membership	PH/MAC			
	*	3. Review & revise ATF membership to include equal representation of clinical and non-clinical sectors, all NAP component coordinators and WHO/GPA advisers; In addition, review Chairmanship and revise as appropriate	ATF	Central	x								Revised ATF membership, possible revised Chairmanship	PH/ATF			
4.1.1.B. Develop and formalise HIV/AIDS-related policies and guidelines concerning	*	1. Perform review of all policies and guidelines formalised to date and identify issues/areas which	General	Central	x	x							Review performed and issues/areas identified	NAP/ATF			

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING PLAN CHART (APRIL 1991-DECEMBER 1992)

Programme Area: PROGRAMME MANAGEMENT (210), LOCAL COSTS (334)

18 = 2.7 kwakwazi

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested	
					1	2	3	4	5	6	7						
Legal/ethical and human rights issues, as well as issues identified by the technical components of the NACP		need to be addressed in policies/guidelines															
	x	2. Develop and formalise new policies/guidelines	General	Central	x	x	x	x	x	x	Policies & guidelines formalised	NAP/AST/NAC					
	x	3. Printing & dissemination of policies & guidelines as appropriate	As appropriate	National		x	x	x	x	x	x	Statements printed and disseminated	NAP				2,300
4.1.1.C. Increase efficiency & effectiveness of the NACP through the establishment & strengthening of management systems		A. STAFFING:															
	x	1. Establish, advertise & fill the posts of: a. Programme Manager b. ITC Coordinator c. Administrator	NAP	Central	x						Posts filled	NOR/NAP					
		2. Hire 2 drivers	NAP	Central	x	x					Drivers hired	NOR/NAP					
	x	3. Salaries: a. PM b. Administrator c. Secretary d. Drivers (3) e. Cleaner	NAP Personnel	Central	x	x	x	x	x	x	Salaries paid						22,050 33,600 7,917 23,751 5,166
	x	4. Three non GPA STTA in programme administration for induction training of administrator & establishment of mgmt systems (see 040)	NAP	Central	x	x	x				STTA provided	NAP/NOR					
		5. Review & adjust as appropriate all	NAP support staff	Central		x					Salaries reviewed &	NAP/NOR					

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: PROGRAMME MANAGEMENT (210), LOCAL COSTS (334)

18 = 2.7 Inaiangeni

ACTIVITIES AND TARGETS																
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6	7					
		NAP senior & support staff salaries										adjusted				
		<b>B. STAFF TRAINING</b>														
		1. Support staff:	Support staff	Central								Training provided	NAP			
	*	a. induction (in-service)														
	*	b. AIDS awareness (in-service)														
		c. reception (in-service)														
	*	d. computer (wordprocessing for Secretary)														250
		2. Senior staff	Senior staff	Central								Senior staff trained	PH			
	*	a. computer (wordprocessing, 1-2-3) for 3 staff														750
		3. Liaison staff (HEHTs, HHEs)	Liaison staff	Regions												
	*	a. induction (4 regions x 3 people x R7.5)														90
		<b>C. SYSTEMS</b>														
		1. Establish &/or strengthen management systems:	NAP	Central								Systems established				
	*	a. financial											PH/Admin/NDM			
		b. supply logistics & distribution											PH/Admin			
	*	c. reporting (NDM, HHS, donors)											PH/Admin			
	*	d. vehicle											PH/Admin			

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: PROGRAMME MANAGEMENT (210), LOCAL COSTS (334)

18 = 2.7 (unadjusted)

ACTIVITIES AND TARGETS																	
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested	
					1	2	3	4	5	6	7						
		control															
	*	e. equipment control											PH/Admin				
		f. documentation & filing											PH/Admin				
		g. support staff evaluation											PH				
		10. FACILITIES															
		1. Construct toilet facilities in the MAP	MAP	MAP		x						Toilet constructed	PH/Admin				100,000
	*	2. Add phone lines	MAP	MAP		x						Lines installed	PH/Admin/GOS				3,530
	*	3. Security (bars on windows)	MAP			x							PH/Admin				2,300
	*	8. OFFICE OPERATIONS:	MAP	Central		x	x	x	x	x	x						
		1. Electricity (R100/month)				x	x	x	x	x	x		PH/Admin				2,100
		2. Communications (R2000/month)				x	x	x	x	x	x		PH/Admin				42,000
		3. Consumables (R3000/month)				x	x	x	x	x	x		PH/Admin				63,000
		4. Vehicle running costs				x	x	x	x	x	x		GOS				32,400
		5. Clearing, storage, distribution (R1500/month)				x	x	x	x	x	x		PH/Admin				31,500
		6. Equipment maintenance (R800/month)				x	x	x	x	x	x		PH/Admin				16,800
		7. Sundry (R800/month)				x	x	x	x	x	x		PH/Admin				16,800
4.1.1.B. Coordinate all HIV/AIDS prevention and control activities of both governmental &	*	1. Meetings of coordination: a. Monthly PNC Programme Managers	MAP	Central		x	x	x	x	x	x	Meetings attended	PH				

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-OCTOBER 1992)

Programme Area: PROGRAMME MANAGEMENT (210), LOCAL COSTS (834)

18 = 2.7 Kwaiangeni

ACTIVITIES AND TARGETS																	
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested	
					1	2	3	4	5	6	7						
Non-governmental organisations & agencies		b. Monthly ATY											PM				
		c. Monthly IICAG											PM/IIC				
		d. Weekly NAP											PM				
		e. Quarterly Donor											PM				
		f. Quarterly SAC											PM/ATY CHAIR				
		2. Reporting:															
		a. quarterly progress reports (written)	PPC Unit, ATY, IICAG, WHO	Central	x	x	x	x	x	x	x	x	Reports provided	PM			
		b. monthly progress reports (verbal)	ATY	Central	x	x	x	x	x	x	x	Reports provided	PM				
4.1.1.f. Decentralise the NAPCP to the regional level, including the planning, implementation, monitoring and evaluation of HIV/AIDS prevention & control activities		1. Quarterly meetings on a rotating basis with RHTs (3 people x 7 visits x E7.5)	RHTs	Regions	x	x	x	x	x	x	x	Meetings attended	PM			150	
		2. Provide technical resources on request	RHTs	Regions	x	x	x	x	x	x	x	Meetings, seminars, etc attended	PM				
		3. Review & provide feedback to RHT	RHTs	Regions	x	x	x	x	x	x	x	Reports reviewed	PM				
4.1.1.f. To ensure NAPCP efficiency & effectiveness & to monitor its progress		1. Perform review of NAPCP activities & reprogramme for the next phase	NAPCP	National							x	Review & reprogramming performed	PM			94,500	
TOTAL KWAIANGENI											Total Agreed Funding:		0	Requested: 507,542			
TOTAL USD													0	186,134			

INFORMATION, EDUCATION AND COMMUNICATION  
(220)

16a

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (229), SOCIAL COSTS (334)

13 = 2.7 Usalungen

ACTIVITIES AND TARGETS																		
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested		
					1	2	3	4	5	6	7							
4.2.1.A. To strengthen the structure of the IIC component of the NAFCP by clearly defining roles, responsibilities & lines of authority of the IIC Coordinator, IICAG, and HEU; this includes the coordination & collaboration of the aforementioned as well as with other governmental & non-governmental organisations & agencies, & the decentralisation of activities.	*	4. IICAG																
		1. Review & revise IICAG membership to include IGOs, representatives of other MOB programmes & other Ministries (official invitations to participate should be sent)	IICAG	Central	x							Revised membership & invitations sent	IIC/IICAG					
		2. Review & revise chairmanship of IICAG as necessary	IICAG	Central	x							Chair reviewed & revised	IIC/IICAG					
		3. Develop & circulate monthly reporting form for IICAG members	IICAG	Central	x							Form developed & circulated	IIC/IICAG					
		4. Monthly meetings of IICAG, & distribute minutes	IICAG	Central	x	x	x	x	x	x	x	Meetings held, minutes distributed	IICAG Chair & Secretary					
	5. IICAG quarterly reports to MAP	NAP	Central	x	x	x	x	x	x	x	Reports submitted	IICAG Chair						
	*	8. HEU																
		1. Review & define the role of the HEU in relation to MAP	HEU/NAP	Central	x							HEU role reviewed & defined	HEU/NAP/IICAG					
		2. Clarify role, lines of authority.	HEU/NAP	Central	x							Written clarification	HEU/NAP					

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (220), LOCAL COSTS (834)

18 = 2.7 Inalienable

ACTIVITIES AND TARGETS																
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6	7					
		& relationship to NAP of ERAs										new rec'd				
		3. Develop regional IICAGs for the purposes of coordination, feedback & approval	Regions	Central	x	x	x	x	x	x		Regional IICAGs established	IICAG/REMTS/NAP			
		C. SALARIES														
		1. IIC Coordinator (21 Mos)	NAP	Central	x	x	x	x	x	x		Salary received	NON			25,200
		2. Condom Specialist (18 Mos)	NON (NAP, NCR/TP, etc)	Central	x	x	x	x	x	x		Salary received	NON			21,500
		D. TRAINING														
		1. Workshops (2) for Health Educators to improve skills in basic Health Education	HIV	Forrester Arms	x	x						Workshops conducted	HIV/IIC			20,400
		(2 workshops x 6 days each x 10 people x \$170)														
		E. MATERIALS														
		1. Review distribution system for IEC materials & AV equipment, and make recommendations for appropriate changes	General	Regions	x							Review performed, recommendations made	HIV/IIC			113
		(5 days x 3 people x \$7.5)														
		2. Create HIV/AIDS/STD Resource Centre at NAP office	General	NAP												
		a. construction of shives				x						Shives constructed	Idnia			3,500

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (220), SOCIAL COSTS (834)

1\$ = 2.7 Malagani

ACTIVITIES AND TARGETS																
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6	7					
		b. purchasing of books & subscribing to journals				x	x	x	x	x	x		ICC/Admin			5,970
		c. production of quarterly newsletter for information networking (3500 copies x 6 quarters x R1.2)				x	x	x	x	x	x		ICC/Reg. Rep. of IGO Networking System			25,200
		<b>G. DECENTRALISATION</b>														
		1. Support regional STD/HIV/AIDS activities	General	Regions		x	x	x	x	x	x	Projects supported	ICC/REIs			27,300
		2. Support to NGO STD/HIV/AIDS activities (Annexes 3-6)	General	National		x	x	x	x	x	x	Activities supported	ICC/NGOs			50,000
4.2.1.3. Target specific groups who are considered to be at risk of HIV infection for IIC activities		1. Review recent IICP for identification of specific target groups & messages	Target groups	Central		x	x					Groups & messages identified	ICC			
		2. Specific target group activity:														
		<b>A. WOMEN</b>														
		1. Women (general)														
		a. integrate into IIC/TP Programme STD/AIDS activities (talks, pre- & post-natal consultations)		Central		x	x	x	x	x	x	Activities participated in:	ICC & IIC/TP			
		b. train IIC/TP staff in STD/HIV/AIDS (incl. preventative counselling)		Central		x	x	x	x	x	x	Seminars provided, people trained	ICC & IIC/TP			20,400

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (229), LOCAL COSTS (834)

1:1 = 2.7 Exchange

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded by	Amount Requested	
					1	2	3	4	5	6	7						
		(1 day x 20 people x R170 x 6 seminars)															
		c. supervision & follow-up of NCH/FP AIDS activities		National	x	x	x	x	x	x	x	Clinic visits	IEC & NCH/FP				155
		(3 people x R7.5 x 6 visits)															
		d. Sensitize women's groups (Lutsango & church groups)		Central & region	x	x						Seminars provided	IEC				71,100
		(4 seminars x 3 days x 35 people x R170)															
		e. Produce 5 radio messages		Central	x	x						Radio spots produced & aired	IEC & HED				1,500
		(5 messages x R200)															
		f. Produce tee-shirts (1500 shirts x R13.5)		Central	x							Shirts produced & distributed to EMB, Lutsango, CSOs	IEC	7,645	608		12,505
		II. Women with Migrant Worker Partners Pilot Project															
		a. Develop project description		Central		x						Description produced	IEC/IEPI/CONU				
		b. Identify areas & women		Central		x						Areas & women identified	IEC/TBAA & Lutsango				
		c. six focus group discussions		Regions		x						FGDs held	IEC				150
		(4 facilitators x R7.5 x 4, plus R300 for refreshments)															





SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (220), LOCAL COSTS (834)

19 = 2.7 Isalangi

ACTIVITIES AND TARGETS																
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	funded By	Amount Requested
					1	2	3	4	5	6	7					
		- pre-testing				x										208
		- printing & distribution (3500 copies x R4.5)				x	x						4,000	SOS		3,750
		iii. RHM & CHNs														
		a. Workshop for RHM trainers to develop messages		Swazi (an)		x										20,000
		(30 people x 4 days x 170)														
		b. Produce RHM pamphlet		Central												
		- pre-test				x										208
		- printing & distribution (2000 copies x R.50)				x	x									1,000
		c. YOUTH														
		i. SHAPS Project (Secondary Schools)											CARE Int'l			
		a. operations, materials, workshops		Ebabane & Manzini		x	x						170,000	CARE/WHO		
		b. material production		Ebabane & Manzini		x	x									12,489
		c. training workshops		Ebabane & Manzini		x	x									24,120
		d. Primary School activities		Ebabane & Manzini			x	x								73,218
		ii. Out of School Youth														
		a. Project design workshop w/Youth Brigade, Boy Scouts, etc.		Central		x								IRC/WHO		3,400

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-SEPTEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (220), LOCAL COSTS (834)

18 = 2.7 Malisgeni

ACTIVITIES AND TARGETS																
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6	7					
		(10 people x 2 days x R170)														
		b. Youth Leader TOT		Central			x				Workshop held	IEC/REH				15,300
		(30 people x 3 days x R170)														
		D. TRADITIONAL HEALERS														
		i. Awareness creation project (workshops & materials)		Regions		x	x	x	x	x	x	Project 30RH: IEC/REHs				71,300
		K. GENERAL PUBLIC														
		i. Workshop for directors & editors-in-chief of radio, TV & newspapers		Foresters Arms		x					Workshop held	PM/IEC				450
		(15 people x R30)														
		ii. Plan/negotiate w/TV producer for spots on News & Swazi View		Central		x					Plans complete	IEC				
		iii. Needs assessment & workshop for journalists		Forester Arms		x					Workshop held	IEC				10,200
		(20 people x 3 days x R170)														
		iv. Identification of a high-profile & influential person to be NACP patron & spokesperson		Central		x					Person identified	IEC/NAC IECAG				
		v. Mass media campaign		Central		x	x	x	x	x	Spots aired, columns printed	IEC				

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING PLAN CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (230), LOCAL COSTS (834)

IS = 2.7 Inaiangeni

ACTIVITIES AND TARGETS																
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Incras Requested
					1	2	3	4	5	6	7					
		-10 radio spots -10 radio programmes -quarterly TV spot -weekly Q&A in newspapers														
		V. WORLD AIDS DAY	General	National	x	x					Successful WAD	PH, IEC, IECAG				
	*	i. Competitions (poster, song, poem) Prizes: -radios (24 x R250) -watches (24 x R100) -Libhiya (24 x R20) -notebooks (3000 x R30)														9,780
		ii. Parades	General	Regional												12,300
		iii. Additional activities														10,440
4.2.1.C. To establish a system of coordination & collaboration among governmental & non-governmental organisations involved in the promotion, procurement, storage, distribution, monitoring & evaluation of condoms	*	1. Review nationwide condom activities, taking into consideration issues not yet addressed by other consultancies, and develop proposal for action including distribution issues & a monitoring component. (Annex 7) (Local consultant, 4 weeks x R333 fee plus 5 days field x R7.4)	Condom situation	National	x	x					Consultant engaged, review complete, final report	IEC				1,370
		2. Workshop of coordination for concerned parties (NAP, IEC/FP, NGOs, etc.)	Interested parties	Foresters Arms	x						Workshop held	Condom Specialist				13,600

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (220), LOCAL COSTS (834)

18 = 2.7 Inalngeni

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6	7					
		(10 participants x R170 x 3 days)														
		3. Training of health professionals in condom promotion (included in 4.2.1.B, targeting of health professionals and MCH/FP workshops)	Health professional								x/x/x/x/x					
		4. Develop & produce 4 posters based on IARP findings (pre-test (10 people x R28 x 2 days) - printing (2000 x R5 x 4 + R1000 artwork)	Men (single & married), Women (single & married)	Central							x/x/x/x	Posters produced & distributed	Condom Specialist, IEC			520
		5. Review & revise condom instructions insert (pre-test (10 people x R28 x 1 day) - printing (10000 x R.20)	General	Central							x	Insert revised & distributed	Condom Specialist, IEC			41,300
		6. Workshop with Ministry of Interior (Customs) to review & revise import/export act in reference to condoms as necessary (15 participants x R170 x 3 days)	Customs act	Foresters; Arno							x	Workshop held, revisions made	PH, Condom Specialist, AYE Chairman			260
																2,300
																7,650

- 26 -

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (220), LOCAL COSTS (334)

18 = 2.7 Exchange

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested		
					1	2	3	4	5	6	7							
4.2.1.D. To fortify the counselling structure already established by ensuring that appropriate, sensitive & well-informed counselling be promoted & made available to all needing the service	*	1. Develop draft of counselling guidelines & policy (for presentation to AITP & SAC for	General	Central	x	x							Guidelines & policy formalised	Counselling Coord., Project HOPE, AITP, SAC				
		2. Print & disseminate guidelines & policy (budgetted in PH)	Counsellors, Health workers	National	x	x	x	x	x	x				Printed & disseminated	Counselling Coord/NAP			
		3. Establish, advertise, & fill full-time Counselling Coordinator position (R1200 x 18 mos)	NAP	Central	x									Position filled	NAP/Project HOPE			21,500
		4. Reassess roles & responsibilities of Project HOPE vs. NAP regarding counselling coordination activities after Counselling Coordinator is in place		Central	x	x								Roles & responsibilities clearly defined	NAP/Project HOPE			
		5. Presentation of trained Counsellors to RMTs	RMTs	Siteki, Mlangane	x									Presentations made	PH/Project HOPE			
		6. HELPLINE installed & promoted	General	NAP	x	x	x	x	x	x				Line installed & promoted	Admin/COV			
		7. Study tour to Uganda (3 people x 14 days x R446 per dien. x 3100 return)		Uganda	x									Trip made & report produced	NAP/Admin			28,032
		8. Supervision of Regional Counsellors	Counsellors	Regions	x	x	x	x	x	x				Supervision visits	COV			24,480

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: INFORMATION, EDUCATION & COMMUNICATION (220), LOCAL COSTS (334)

1\$ = 2.7 malanzani

ACTIVITIES AND TARGETS																
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6	7					
		(3 people x 2 days x R170 x 6 quarters x 4 regions)										made				
		9. Follow-up workshops for trained counsellors	Counsellors	Regions								Workshops held	COUW/Project: HOPE			51,300
		(25 people x 3 days x R170 x 4 workshops)														
		10. Produce leaflets	General	Central								Leaflets produced & distributed	COUW/Project: HOPE			7,300
		(4000 leaflets x 3 designs x R.50 plus R1000 artwork)														
TOTAL MALANZANI					Total Agreed funding:							183,545	Requested: 793,453			
TOTAL USD												68,027	293,871			

EPIDEMIOLOGICAL ASSESSMENT, SURVEILLANCE,  
CONTROL AND RESEARCH  
(230)

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: EPIDEMIOLOGICAL SURVEILLANCE, CONTROL and RESEARCH (230), LOCAL COSTS (834)

18 = 2.7 (MALANGNI)

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested	
					1	2	3	4	5	6	7						
4.3.1.A. To further establish & implement sentinel surveillance in order to strengthen the monitoring of STD/HIV/AIDS trends	*	1. Establish 6 HIV/AIDS sentinel surveillance sites and implement sentinel surveillance quarterly  (budgetted in 550 & 670)	Risk groups & general public	National	x	x	x	x	x	x	x	x	Sentinel sites established	EPI			
	*	2. Printing & dissemination of data collection forms  (1500 copies x R2.5)	Sentinel sites & clinicians	National	x	x	x	x	x	x	x	x	Forms distributed	EPI/ATY			8,750
		3. Zimbabwe study tour  (1 person x R1652 return trip x R324 per diem x 10 days)				x							Trip taken, report provided	EPI			4,392
		4. - Training - supervision at sentinel sites  (12 sites x 4 visits annually x 2 people x R7.5)	Sentinel sites	Sentinel sites		x	x	x	x	x	x	x	Supervision provided  Guidelines developed	EPI			1,440
	*	5. Workshops to develop guidelines on:															

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: EPIDEMIOLOGICAL SURVEILLANCE, CONTROL and RESEARCH (230), LOCAL COSTS (834)

18 = 2.7 MALANGWI

ACTIVITIES AND TARGETS															
Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding 3y	Amount Requested
					1	2	3	4	5	6	7				
		a. STD/HIV/AIDS sentinel site surveillance (20 people x E30)		Central	x								EPI/ATY		500
		b. STD/HIV/AIDS case reporting (10 people x E30)			x								EPI/ATY		300
		c. collection & delivery of specimens & results respectively (30 people x E30)			x								EPI/LAB/ATY		900
	a	6. Entry, processing & analysis of data from sentinel surveillance & regular reporting	General public	Central	x	x	x	x	x	x	x	Data sets analyzed	EPI		
		7. Produce & distribute quarterly newsletter containing epi information, research findings, etc. (500 copies x E2.5)	Health professional & other interested parties in the country	Central	x	x	x	x	x	x		Newsletter produced & distributed	EPI		1,250
	a	8. Internal evaluation of sentinel surveillance system		National						x		System evaluated, report produced	EPI		2,700
4.3.1.B. To facilitate & coordinate	a	1. Workshop on the development of guidelines for	National Researchers (25)	Central	x							Workshop held	EPI		750

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: EPIDEMIOLOGICAL SURVEILLANCE, CONTROL and RESEARCH (230), LOCAL COSTS (934)

19 = 2.7 EMALANGINI

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6	7					
AIDS-related research		STD/HIV/AIDS research & the identification of priority research areas  (25 people x R30)														
	*	2. Support 5 research projects designed to address priority areas identified in workshop	National Researchers	National		x	x	x				Research projects supported & performed	EPI			54,000
4.3.1.C. To strengthen epidemiological surveillance capacity within the overall PBC structure of the NHC	*	1. Second a full-time statistical clerk or data manager with clear TOR to the Epi Unit in Public Health Unit to be responsible for STD/HIV surveillance & data management	NHC/NAP	Central		x						Secondment made	NHC			
		2. One NHC staff member, preferably the seconded statistical clerk, to be trained at the 3-month NHC Epidemiology course in Louisa	NHC/NAP	Louisa		x						Course attended	NAP/NHC/NHO			16,200
		3. Request 1-month NHO STTA in the area of general STD/HIV/AIDS surveillance & data mgnt  (budgetted in 048)	NHC/NAP	Central		x						STTA provided	NAP/GPA			
	*	4. Provide 4 workshops on	New entrant	Regions		x	x	x				Workshops provided	EPI			3,600

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: EPIDEMIOLOGICAL SURVEILLANCE, CONTROL and RESEARCH (230), LOCAL COSTS (834)

18 = 2.7 EMALANGINI

ACTIVITIES AND TARGETS															
Strategy	Priority	Activity	Target	Place	Quarter						Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6					
		diagnosis & surveillance, & introduction to reporting forms & guidelines	site personnel, govt physicians, private physicians												
		(4 regions x 30 participants x 1 day x 130)													
	a	5. Provide salaries:	Personnel	Central	x	x	x	x	x	x	Salaries paid	GOS			
		a. Epidemiologist (50%)													14,400
		b. Statistical clerk (100%)													20,055
TOTAL EMALANGINI					Total Agreed Funding:						0	Requested:	129,837		
TOTAL USD					Total Agreed Funding:						0	Requested:	48,088		

LABORATORY SUPPORT/BLOOD SAFETY  
(240)

32A

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: LABORATORY SUPPORT/BLOOD SAFETY (240), LOCAL COSTS (834)

18 - 2.7 EMALANGINI

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Account Requested
					1	2	3	4	5	6	7					
4.4.1.A. Educate the public on transmission of HIV infection through blood & its products, and encourage blood donation		1. Weekly radio spots  (budgetted in IKC)	General	National	x	x	x	x	x	x	x	Radio spots aired	CPHL/IKC			
4.4.1.B. Prevent HIV transmission by transfusion with infected blood	*	1. Screen all blood donations (equipment & supplies budgetted in 550 & 670)	General	Central	x	x	x	x	x	x	x	Units screened	CPHL			
	*	2. Develop guidelines for blood transfusion	General	Central	x							Guidelines developed	CPHL/ATF			
	*	3. Workshops to introduce blood transfusion guidelines to clinicians & lab personnel  (4 seminars x 20 participants x 1 day x IK30)	Clinicians & Lab Personnel	Regions	x							Workshops held	CPHL			2,400
4.4.1.C. Ensure the safety of health workers, specifically laboratory & blood transfusion workers	*	1. Provide protective materials & supplies (budgetted in 550)	Lab & blood transfusion personnel		x	x	x	x	x	x	x	Protective materials supplied & utilised	CPHL			

...AGLAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: LABORATORY SUPPORT/BLOOD SAFETY (240), LOCAL COSTS (834)

18 = 2.7 THALANGENT

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested
					1	2	3	4	5	6	7					
4.4.1.D. Improve skills of laboratory staff & other health workers		1. Workshops in lab etiquette & safety for:										Workshops held, people trained				
		a. lab staff		Regions	x	x	x	x	x				CPHL			25,500
		(4 workshops x 15 participants each x 1 day x E30)														
		b. at training institutions		Central		x						Workshop held	CPHL/IEC			5,100
		(30 participants x 1 day x E170)														
		c. Physicians, Matrons, Head Sisters		Regions	x	x	x					Workshops held	CPHL/IEC			27,200
		(8 seminars x 20 participants x 1 day x E170)														
		d. EBIs, CHIs, CHW trainers		Central				x				Workshop held	CPHL/IEC			5,100
		(30 participants x 1 day x E170)														
<b>TOTAL THALANGENT</b>											Total Agreed Funding:		0	Requested:	65,300	
<b>TOTAL USD</b>											Total Agreed Funding:		0	Requested:	24,185	

CLINICAL CARE

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: CLINICAL CARE, LOCAL COSTS (834)

18 = 2.7 EMALANGINI

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded By	Amount Requested	
					1	2	3	4	5	6	7						
4.5.1.A. To strengthen the MAPCP capacity to improve the clinical care of HIV-infected individuals and PMAs		1. Develop case management guidelines and clinician training module  (External consultant budgeted in 040)	Clinicians	Central		x							Consultant engaged, guidelines developed	NAP/ATV/WAC			
		2. Study tour to Uganda or Kenya for Programme Manager, Counselling/Clinical Care Coordinator, & a NGH Clinician  (3 people x 7 days x R302 per diem x R2320 return ticket)	NAPCP	Kenya or Uganda		x							Study tour taken, report provided	PM/Admin			13,302
		3. Provide drugs for STDs and HIV infection	General	National	x	x	x	x	x	x			Drugs provided	ATV/PM/Clinicians			135,000
4.5.1.B. To improve clinician skills in HIV infection and AIDS case management; and to strengthen the standardisation of diagnosis and management of STDs		1. Workshops to introduce case management guidelines to clinicians:  a. at nurse training		Central		x							Workshop held	CLIN/IBC/LAB			900

SWAZILAND NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
 MASTER ACTIVITY PLAN and MONITORING FLOW CHART (APRIL 1991-DECEMBER 1992)

Programme Area: CLINICAL CARE, LOCAL COSTS (834)

18 = 2.7 SWAZILINGINI

ACTIVITIES AND TARGETS

Strategy	Priority	Activity	Target	Place	Quarter							Progress Indicators	Responsible Authority	Agreed Funding	Funded 3y	Amount Requested
					1	2	3	4	5	6	7					
		Institutions (30 participants x 1 day x R30)														
		b. Physicians, Matrons, Head Sisters  (8 seminars x 20 participants x 1 day x R30)		Regions		x	x	x			Workshops held	CLIN/HC/LAB				4,800
	*	2. Workshops to introduce standard- ised diagnosis & mgmt of STDs  (4 workshops x 30 participants x R30)	Physicians & Clinic Nurses	Regions		x	x				Workshops held	CLIN/ATP				3,600
6.1.C. To develop strategies and capacity for the provision of community-based care	*	1. Identify the existing resources, develop NACP strategies and develop a supervisory structure for community-based care activities  (External consultant budgeted in 040)	General	National		x					Consultant engaged, report w/recommenda- tions provided	PH/CLIN/ATP				
		2. To provide seed money for the development of community-care models appropriate to Swaziland	General	National		x	x	x	x		Support provided	PH/CLIN/ATP				40,500

TOTAL CHALLENGE Total Agreed Funding: 0 Requested: 190,102

TOTAL USD Total Agreed Funding: 0 Requested: 73,371

INTERNATIONAL PERSONNEL (AAA & 040)

Includes long-term & short-term advisors  
by Programme component, with cost  
breakdown in USD







INTERNATIONAL PERSONNEL

PROGRAMME AREA: CLINICAL CARE  
in : SWAZILAND

For: April 1991 - December 1992

B U D G E T

```

oooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooo
oItem !Refer- !Description !! Rate !! Units !! Total o
o !ence ! !! !! !! !! o
o !to ! !! !! !! !! o
o !strategy! !! !! !! US $ o
=====
o 040 !4.5.1.A.!Consultant to develop case mgmt guidelines !! !! !! !! o
o ! ! a. fee per month !! 3,150 !! 1 !! 3,150 o
o ! ! b. per diem !! 75 !! 30 !! 2,250 o
o ! ! c. travel !! 2,000 !! 2 !! 4,000 o
o ! ! !! !! !! !! o
o !4.5.1.C.!Consultant for community-based care planning !! !! !! !! o
o ! ! a. fee per month !! 3,150 !! 1 !! 3,150 o
o ! ! b. per diem !! 75 !! 30 !! 2,250 o
o ! ! c. travel !! 2,000 !! 2 !! 4,000 o
=====
o TOTAL: 18,800 o
oooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooo

```

SUPPLIES (550)

Includes all required supplies  
for each Programme component, with cost  
breakdown in USD

SUPPLIES LIST (550)

PROGRAMME AREA: PROGRAMME MANAGEMENT (210)  
 in : SWAZILAND

For: April 1991 - December 1992

B U D G E T

Item	Reference	Description of items	Unit/ Packing	Number of units	Unit cost US \$	Total US \$
1	A.I.L.C.	Epson Printer Ribbon for Model FX 1050		25	\$15.00	\$375
2		Diskettes, 3.5" DS		10	\$20.00	\$200
3		Diskettes, 5.25"		5	\$30.00	\$150
Packing, freight & insurance					20%	\$145
<b>TOTAL</b>						<b>\$870</b>



SUPPLIES LIST (550)

PROGRAMME AREA: EPIDEMIOLOGICAL ASSESSMENT,  
SURVEILLANCE, CONTROL AND RESEARCH (230)  
in : SWAZILAND

BUDGET

For: April 1991 - December 1992

Item	Reference	Description of items	Unit/ Packing	Number of units	Unit cost US \$	Total US \$
1	4.3.1.A	Pasteur pipettes, disposable plastic, w/integral bulb graduated, non-sterile, 3 ml	1000/box	8	44.88	359
2		Cryotubes, 1.8 ml	1800/box	8	349.82	2,098
3		Vacutainer tubes, 10 ml	100/box	30	15.64	469
4		Vacutainer needles	100/box	30	20.83	625
5		Vacutainer holders	10/box	300	2.47	741
6		Gloves, examination, latex, non-sterile, disposable (S,M,L)	100/box	60	8.05	483
7		Consumables (cotton, methylated spirit, tissues, etc.)		6	400.00	2,400
8		Sodium hypochlorite (1)	liter	300	2.50	750
Packing, Freight & Insurance					20%	1,585
<b>TOTAL</b>						<b>9,510</b>

SUPPLIES LIST (550)

PROGRAMME AREA: LABORATORY SUPPORT/BLOOD SAFETY (240)  
in : SWAZILAND

For: April 1991 - December 1992

BUDGET

Item	Reference	Description of items	Unit/ packing	Number of units	Unit cost	Total
					US \$	US \$
0 1	4.4.1.C	WILLCOZYME HIV 1+2 RIA	480/kit	60	\$457.34	\$27,476
0 2		O.D.S. HIVCHECK 1 + 2, Rapid Test	100/kit	10	\$365.00	\$3,650
0 3		DIAGNOSTIC HIV-1 IgG Western Blot	27/kit	100	\$528.50	\$52,850
0 4		Vacutainer tubes, 10 ml	100/box	1125	15.64	\$17,595
0 5		Vacutainer needles 20G x 1 1/2"	100/box	1125	20.83	\$23,434
0 6		Cryotubes, 1.8ml	1800/pack	50	\$349.62	\$17,481
0 7	4.4.1.E	Gloves, latex, non-sterile disposable (S,M,& L)	100/pack	1200	8.05	\$9,660
0 8		Plastic aprons, reusable	1	150	9.04	\$1,356
0 9		Goggles, plastic	1	25	15	\$375
Packing, Freight & Insurance					20%	\$30,735
TOTAL						\$184,412

EQUIPMENT (670)

Includes all required equipment  
for each Programme component, with cost  
breakdown in USD

EQUIPMENT LIST (670)

PROGRAMME AREA: PROGRAMME MANAGEMENT (210)  
in : SWAZILAND

For: April 1991 - December 1992

B U D G E T

Item	Reference	Description of items	Unit/ Packing	Number of units	Unit cost US \$	Total US \$
1	14.1.1.C.1	IBM PS/2 Microcomputer model 30h31/2PC # 61391401 1 x 1.44MB 3.5" floppy drive 1 x 30MB hard disk complete for operation on 220v/50c/ac	1	1	\$4,188.46	\$4,188.46
2		IBM PS/2 Enhanced Keyboard, English	1	1	\$425.38	\$425.38
3		Monochrome Display 8503 # 66134350	1	1	\$433.85	\$433.85
4		External Floppy Diskette Drive 360KB 5.25"	1	1	\$764.62	\$764.62
5		External Floppy Diskette Adapter	1	1	\$91.54	\$91.54
6		Epson Dot Matrix Printer Model FX 1050	1	1	1300	\$1,300.00
7		Epson Printer Cable Centronics Parallel	1	1	30.77	\$30.77
8		Uninterruptible Power Supply Unit	1	2	1953.27	\$3,906.54
9		Portable generator	1	1	500	\$500.00
10		LOTUS 1-2-3 (2.2)	1	1	969.23	\$969.23
11		dBase IV (English)	1	1	1500	\$1,500.00
12		Multimate Advantage II (English)	1	1	1115.38	\$1,115.38
Packing, freight & insurance					20%	\$3,045.28
<b>TOTAL</b>						<b>\$18,271.00</b>

EQUIPMENT LIST (670)

PROGRAMME AREA: INFORMATION, EDUCATION AND COMMUNICATION (220)  
in : SWAZILAND

For: April 1991 - December 1992

B U D G E T

Item	Refer-	Description of items	Unit/ packing	Number of units	Unit cost	Total
					US \$	US \$
1	4.2.1.A	Overhead projector, portable, FARVLOS MOBILE		1	\$592.31	\$592
		#6530				
2		Slide projector, Diafocus AV150, portable w/daylight		1	\$256.41	\$256
		screen, accessories				
Packing, freight & insurance					20%	\$170
TOTAL						\$1,018

EQUIPMENT LIST (570)

PROGRAMME AREA: EPIDEMIOLOGICAL ASSESSMENT,  
SURVEILLANCE, CONTROL & RESEARCH (230)

in: SWAZILAND

For: April 1991 - December 1992

BUDGET

Item	Reference	Description of items	Unit/ packing	Number of units	Unit cost	Total
					US \$	US \$
1	14.3.1.A.	Refrigerator/Freezers, double door, lockable, 190/40 litres		6	\$383.88	\$2,303
		STR 821T Electrolux				
2		Cold boxes		12	\$30.00	\$360
Packing, freight & insurance					20%	\$533
TOTAL						\$3,196

EQUIPMENT LIST (670)

PROGRAMME AREA: LABORATORY SUPPORT/BLOOD SAFETY (240)  
in : SWAZILAND

For: April 1991 - December 1992

B U D G E T

```

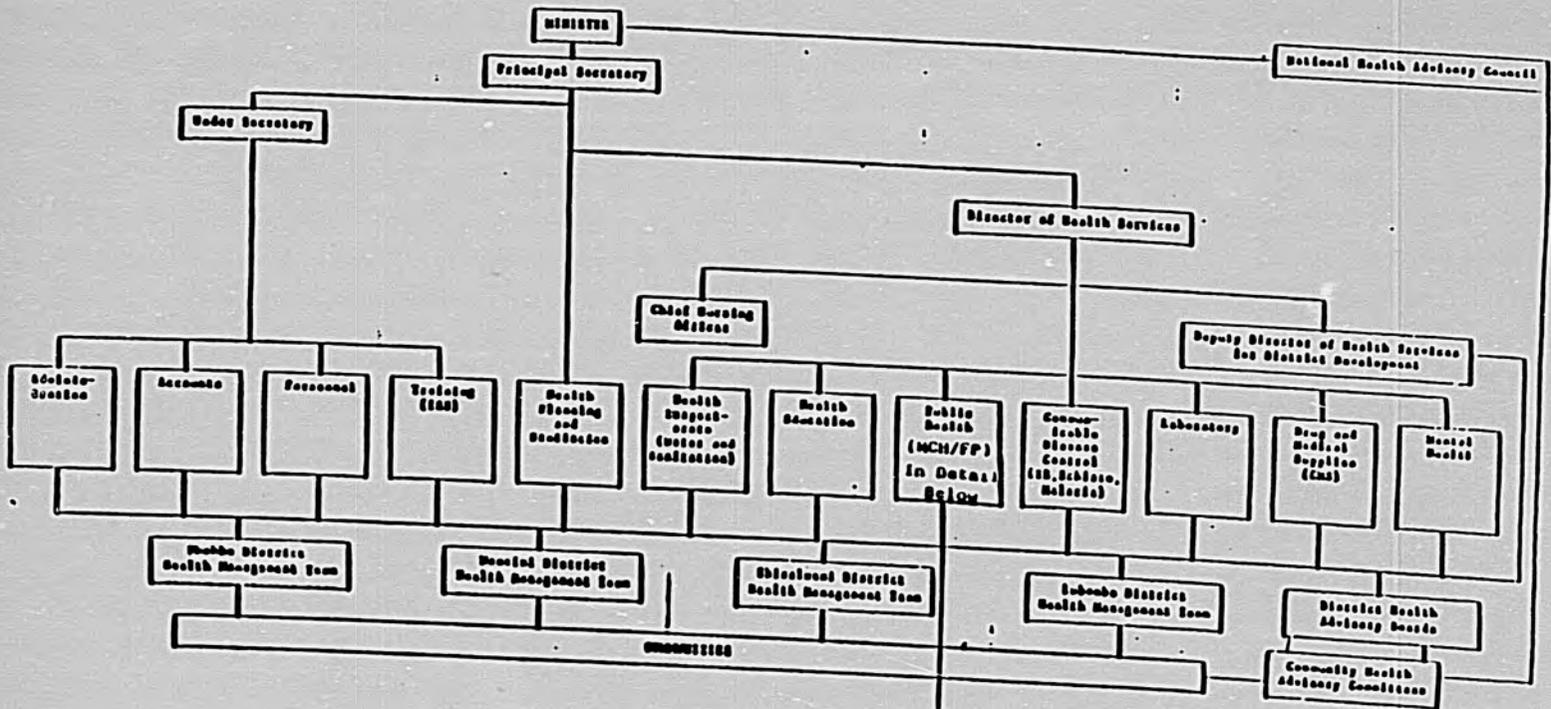
oooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooooo
o Item !Refer- !Description of items !Unit/ !Number of Unit cost !Total o
o !ence ! !packing !units o ! o
o !to ! ! ! ! o ! o
o !strategy! ! ! o US $ ! US $ o
o-----!-----o
o 1 !4.4.1.C !freezer, chest-type, volume 525 l., -15-20C ! 1 ! 1 o $519.93 ! $520 o
o-----o
o Packing, freight & insurance : 20% ! $104 o
o-----o
o TOTAL ! $624 o
o-----o

```

## **ANNEXES**

ORGANOGRAM OF MINISTRY OF HEALTH

ANNEX 1



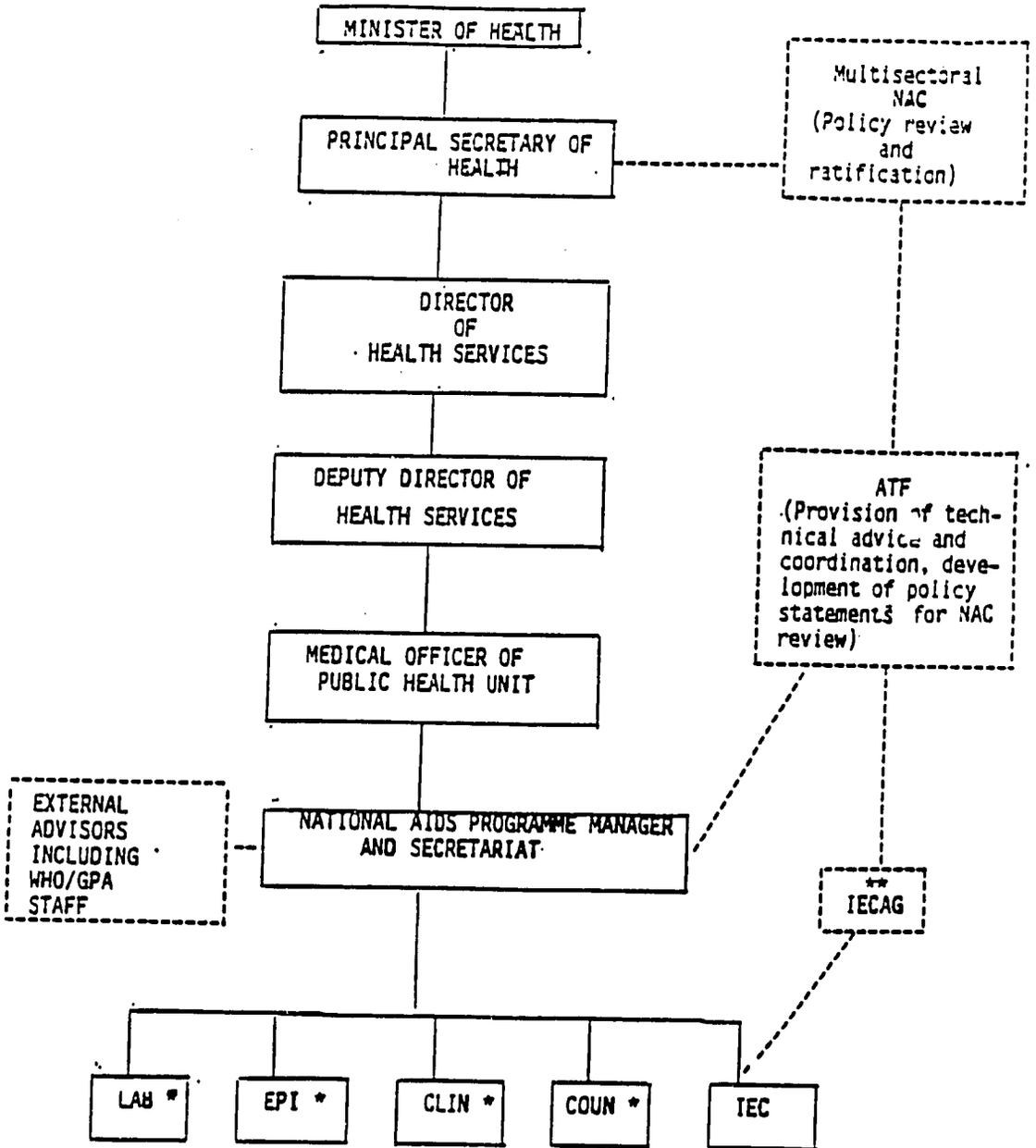
**Public Health Unit (PHU)**

Acute Respiratory Infection  
 AIDS Prevention and Control Programme  
 Control of Diarrhoeal Diseases  
 Expanded Programme on Immunisation  
 Maternal Health/Family Planning  
 Rural Health Motivator Programme

The PHU is responsible for six major programmes, each of which has a seconded programme coordinator/manager.

119

NATIONAL AIDS PREVENTION AND CONTROL PROGRAMME  
NEW ORGANIGRAM



**SPECIALIZED TECHNICAL COORDINATORS AND WORKING GROUPS**

**DIRECT LINE OF AUTHORITY**

**ADVISORY RELATIONSHIP**

**PLANNED BUT NOT YET FORMALISED**

**THIS IS A CONSORTIUM OF INTERESTED PARTIES ACTIVE IN STD/HIV PREVENTION AND CONTROL. ITS ACTS IN AN ADVISORY CAPACITY (INCL. POLICY) TO THE NAP, AS WELL AS PROVIDING COORDINATION AND TECHNICAL RESOURCE PEOPLE TO NAP ACTIVITIES.**

ANNEX 3

AGENCIES INVOLVED IN STD/HIV/AIDS

ACTIVITIES IN SWAZILAND

- CARE International
- Conference of Churches
- Council of Swaziland Churches
- Family Life association of Swaziland (FLAS)
- Lutheran World Federation
- Lutsango
- Man Talk
- Project Hope
- Red Cross Baphalali
- Save the Children Fund
- St John Ambulance
- Youth Brigade

Missions - Health Service Providers  
Involved in STD/HIV/AIDS Activities

- Catholic
- Lutheran
- Nazarene
- Salvation Army

Industry Involved in STD/HIV/AIDS Activities

- Occupational Health Services
- Simunye Clinic
- Mhlume
- Usuthu Pulp Company
- Uboombo Ranches

## ANNEX 4

### SHAPE PROJECT

The SHAPE Project (School's STD, HIV/AIDS Pilot Education) is being implemented by CARE International in Swaziland. The pilot project, which was initiated in June 1990, has an 18 month time allotment, and plans to touch 26 high/secondary schools in the Mbabane/Manzini corridor.

Overall objective: To prevent and control the spread of sexually transmitted diseases and HIV infection among the school age population in Swaziland.

#### Specific objectives:

1. Train teachers in Secondary/High schools about sexually transmitted diseases and HIV infection, and AIDS counselling.
2. Initiate children to children, STD HIV/AIDS education (health clubs) in schools.
3. Identify educational materials and teaching communication methods which are effective in helping pupils learn about the disease so that these may be replicated in other schools throughout Swaziland.

#### Activities:

1. Identification of target schools to be included in the pilot project.
2. Solicit full support from all the Heads of the pilot schools.
3. Conduct a baseline survey of knowledge, attitudes, beliefs and practices (KABP) of both teachers and children. Information gathered from this survey is used in the development of curriculum, and to measure changes at the end of the 18 month period.
4. Identification of teachers in the target schools to undergo training on HIV/AIDS and STDs.
5. Design of teacher training programme which focuses both on facts about HIV/AIDS and STDs as well as appropriate methodology.
6. Identification and adaptation of educational materials which can be used with teachers, students and parents.
7. Conduct workshops for teachers.
8. Other activities: form health clubs for students, initiate child-to-child, teacher-to-teacher and teacher-to-parent activities.
9. Continuous monitoring and evaluation of the project.
10. Final evaluation at the end of 18 months, which includes recommendations for expanding the project into all secondary/high schools and primary schools.

ANNEX 5

PROJECT HOPE/FLAS HIV/AIDS PREVENTION PROJECT

Project HOPE along with Family Life Association of Swaziland (FLAS), a local NGO, have been implementing HIV/AIDS/STD related activities since September 1989. The project has a 2 year life span, and will be ending in September 1991.

Project HOPE was asked to conduct the national KABP survey, for the MOH. This was accomplished in conjunction with the Social Science Research Department of the University of Swaziland.

The initial counselling activities were begun by Project HOPE. This includes training of counsellors and national counsellor coordination. Other counselling related activities include:

- establishment of a computerized database management system for monitoring and evaluating counselling activities;
- STD/AIDS Helpline piloted at National Trade Fair 1990;
- follow-up workshop for trained counsellors;
- decentralization and integration of regional counsellors;
- presentation of regional counsellors to Regional Health Management Teams;

Project HOPE is also involved in educational activities. The project has targetted specific groups:

- Traditional Healers Organization: focus groups and training
- Sebenta Adult Literacy Program: training and assistance in material production
- Youth Groups: training of youth leaders and the distribution of IEC material

Educational talks are also given in schools, the university, to church groups and in industry when the project is invited.

## ANNEX 6

### CONDITIONS FOR NAPCP SUPPORT OF NGO ACTIVITIES

The NAPCP, Swaziland wishes to collaborate with and offer support to relevant NGOs involved in AIDS and HIV prevention activities. The established mechanism for providing this support includes collaboration, consultation and planning between the NAPCP and such NGOs. WHO/GPA arranges for resource mobilization meetings at the national level, at which time donor representatives pledge resources for support fund from the government via this mechanism, after an exchange of letters between WHO/GPA, the NAP and the designated NGO. NGOs may also seek direct bilateral support for AIDS Prevention and Control activities, after first receiving approval for the proposal(s) from the NAPCP.

In order to ensure that the NAPCP and NGOs establish a workable relationship, NGOs are required to meet the following criteria before they can receive financial support from the NAPCP through the WHO/GPA trust fund:

1. NGOs submitting proposals for consideration of funding/approval must be registered as a recognized NGO with the GOS and the NGO Assembly.
2. Activities must be consistent with national objectives, strategies and policies, for PHC and AIDS Prevention and Control.
3. Relationships for coordination with other relevant organizations must be clearly specified.
4. Budget line-items must be explicitly justified.
5. The organizational structure of the requesting NGO and its capacity to implement the proposed activities must be detailed.
6. The budget should clearly differentiate new costs directly attributable to the project from expected contributions to on-going core operations. The NAPCP will not solicit funds on behalf of NGOs for these core operational costs.

At such time as these criteria are met by the proposing NGO, a contract may be awarded by the NAPCP to the NGO which will detail financial support, expected outcomes and reporting requirements.

In this Workplan, seed monies are sought in order to ensure that funds will be available when NGO proposals which meet these criteria are identified.

Additionally, the GOS had demonstrated its support by earmarking funds for NGOs with a history in AIDS activities.

ANNEX 7

TERMS OF REFERENCE FOR  
SHORT TERM TECHNICAL ASSISTANT FOR CONDOMS

The Short Term Technical Assistant for Condoms will be expected to:

- Review the following areas in relation to condoms:
  1. Coordination, collaboration, communication and government support amongst agencies, institutes or programme implicated in the promotion, education, procurement, quality assurance and distribution of condoms. (e.g. NAP, MHFP, USAID, UNFPA, NGO's, Private Sector, etc.)
  2. Capacity of governmental structure to handle condom services, includes:
    - coordination of governmental and non-governmental condom activities in country.
    - managing condom supplies (logistics, inventory, determining condom needs - present and future, quality assurance etc.)
    - promotional and educational activities.
    - management information systems (MIS) - (stock keeping records, transaction records, consumption records, etc.).
    - training.
    - financial and personnel administration.
    - research/evaluation.
    - importation and port clearance (legal aspects).
  3. Logistic systems:
    - A. identify suppliers and donors (e.g. USAID, UNFPA, NAP, NGO's, WHO, IPPF, UNICEF, Private sector).
    - B. storage facilities, includes:
      - number of warehouses - storage/environmental practices
      - location - inventory and record keeping
      - capacity - procedures
    - C. distribution channels/outlets and condom prices, and distribution system needs.

<u>Channels</u>	<u>Outlet</u>	<u>Pricing</u>
MHFP	MCH/FP	
Clinics	Clinics	
Hospitals	Hospitals	
NGO	Hotels, Bars, Discos, Industry	
Private Sector	Pharmacies	

4. Promotional and educational activities by GOS, NGO's and others should look at present and upcoming activities, including:

- social marketing programmes.
- condom needs of different target groups.
- acceptability, availability and accessibility.
- messages and materials produced or under production.

Methodology which should be used in this review is as follows:

- review and summarize existing relevant information, such as:
  - . recent consultant reports (e.g. MHFP, PHC, etc.)
  - . KAPP, FLAS, Man Talk surveys, etc.
  - . epidemiological data.
  - . studies conducted by students.
- interview key players at the central and regional levels, as appropriate.

A final report should include areas of weakness with recommendations on how to strengthen them, and a proposal for action including distribution issues and a monitoring component, as well as eventual staffing needs with job descriptions as appropriate to the proposal. Also, a draft budget for condom programming to be finalized by NAP should be included in the report.