



Burnet Institute

Medical Research. Practical Action.



PACIFIC ISLANDS
HIV AND STI RESPONSE FUND
2009–2013



SPC
Secretariat
of the Pacific
Community

Process 7.
Describing results and how to
achieve them.

Resources for developing National Strategic Frameworks

1. Review the issues identified in the situation assessment in relevant priority areas (allow two hours for this)
 1. Describe and **draw the desired change/s** in this priority area by 2016
 2. Discuss what is shown in the pictures
 3. Then, agree what the objective should be
 4. What programs or interventions will bring about the desired change?

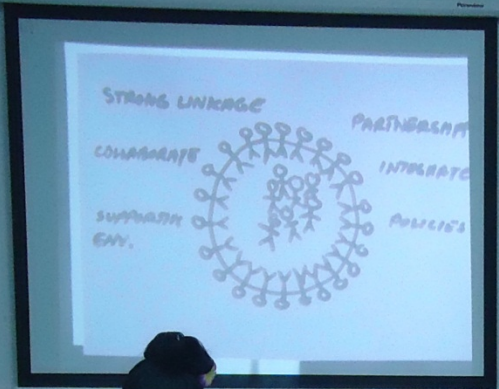
How will we achieve these results?

For each program, now answer these questions: (allow nearly a full day for this)

1. Who will benefit from the change? (target group?)
2. Who will be involved?
 - What collaborations or partnerships will work together to achieve this change?
 - What will be their roles?
 - Who will lead?
3. Where will the program take place?
 - Individual, family or community?
 - Bars nightclubs, ships or ?
 - Outer islands?
4. What resources will you need to achieve success?
 - What resources do you already have?
 - What will you achieve if you do not have the resources you need?
5. How much difference (change) will your program make to the issues?
 - what will change by the end of year 1, year 2, and year 3?
 - When will the program achieve success? (completed)
 - What will success look like?



A drawing of Governance and Coordination: FSM 2012



What?

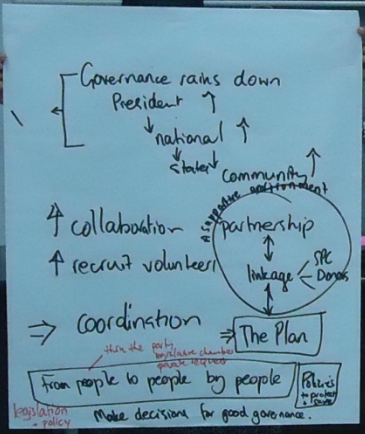
HIV + STI

Data processing established + standardized systems

Data flow from community (evidence) → state → national → donors

⇒ Healthy lifestyle as result of safe behaviors ∴ we have ↑ \$ ∴ ↑ condoms

⇒ Data IT @ people.



How?

Develop policy for ↑ safer sexual behavior

Enforce policy

People have a say - consultation

Advocacy strong linkage

collaboration support environment

How much difference?

😊 happy people

Enforcement ⇒ ↑ safer behaviors

↑ collaboration

↑ volunteer (participation)

Who benefits?

National ↑ \$ + ↑ data (evidence)

Donors ↑ data

⇒ Community: ↑ condoms

clients? policy enforced leaders

Who delivers?

Community

National govt

State

Donor

policy makes

clients of brothels

leadership

legislature

execution

Where?

Communities = people with skills operational systems

families/homes

informal settings eg "brothels"

What resources?

Small group answers to questions FSM, 2012

These participants and facilitators hold up the answers, while the small group reads them out

HIV STIGMA and DISCRIMINATION . GONE WITH THE WIND

2017	How	Resources/Mtd.
1. HIV/STI Awareness freely disseminated to the population of large, esp to the younger generations.	1.1. Continual gender to gender awareness and peer-peer support. 1.2. Parents' HIV awareness program.	1.1. Special training for HIV core group in Y2Y. - Visual aids, pamphlet videos - Prep for Y2Y drama presentation. 1.2. Training seminars on how to talk to their kids on safe sex practices and HIV awareness as well. - Tracks & inst. videos.
2. Acceptance of people living with HIV/STI just like normal individuals, w/o any discrimination, where they can freely interact with everyone in the society.	2.1. Media Participation 2.2. Increase health-workers' willingness to treat/care for HIV/STI patients. 2.3. HIV awareness in all the workplaces. 2.4. Church involvement and support for people living with HIV.	2.1. Partnership with TV & Radio Networks. 2.2. Seminars to "ALL" Health workers on discrimination/stigma against HIV. 2.3. Video presentations & pamphlets. 2.4. Seminars on Leaders on HIV awareness of emp. against discrimination's stigma. - Leaders can organize an HIV expo with booths = PEER - PEER Learning
2017	HOW	Resources / Mtd.
2.5. Continual support from the Government.	2.5. Traditional Leaders & local officials promote & attend HIV awareness program.	
2.6. School and community programs/activities that promote understanding of HIV.	2.6. School debates about discrimination. - WAD poster-making - WAD amazing race - Innovation of "more" topics that will encourage students to learn more.	

Marshall Islands small group reports back, 2012

2011 OUTPUT 2.2: Quality Diagnosis/Treatment

CHANGE

- ▶ All HIV(+) Patient Access to ART and Reduce MTCT to 0 Level.
- ▶ All HIV(+) PT well Complied to ART.
- ▶ HIV Care is strengthened not only in Hosp. Setting but also to Individual, family and Community.
- ▶ All Diagnostic Tools are well established at a national level and Rapid HIV Testing is Setup at Testing Sites outside the Hosp.
- ▶ Behavior Changes Like Cultural Taboos, Stigma and Discrimination are Evident
- ▶ HIV(+) pts. are supported by Family, Community, Church groups, Schools and work place.

How

- * Consistant ART Supplies all year round.
- * Education, Counselling, Supports and Care
- * Training at all Levels.
- * Health Talks and Campaigns eg: World AIDS Day.
* START WITH GRANDPARENTS, and ALAP (Land owners) ex-The CATHOLIC Women Club. KUMIT NEED MORE OVERSEAS TO TRAINING.
- * Consistant Supplies
- * Quality Control
- * Awareness (HIV), Workshop ongoing Outreach.
- * Survey
- * Reduce Death Rate related to AIDS.

RESOURCE

- Funds
 - Grants
 - Technical Assist. (Internal/External)
 - IEC materials (Local, English)
 - Role Models
 - Media
 - Training Materials
 - NAC/NGO
 - MOH/Others
- Resources listed in red:* Angonnes, WHO, SPC, Global Fund, CDC

People living w/ HIV & AIDS

My SON lives w/ HIV & AIDS
BUT, I am proud to be his mother!

- AGENCIES
- WASH
 - WATER
 - NTC
 - KUBET
 - MINOC
 - BJAAG
 - FLAP


On august 08, 2017, at Netyda session, the minister of Health, Mr. David Kaboa declared all HIV positive patients in RMI received ART (Anti-Retroviral Therapy) at appropriate level. He said that the achievement came up with the supports and collaboration of all sectors, NGOs and communities. The transmission of Mother to child HIV infection is zero as of FY 2016.

- ▶ All HIV+ PT well Compliant to ART
- ▶ HIV Care is strengthened not only in Hosp. Setting but also to individual, family and community.
- ▶ All Diagnostic Tools are well established at a national level and Rapid HIV Testing is setup at Testing Sites outside the Hosp.
- ▶ Behavior Changes Like Cultural Taboos, Stigma and Discrimination are Evolving
- ▶ HIV+ Pts. are supported by family, Community, church groups, Schools and work place.

- * Education, Counseling, Support on Case
- * Training at all Levels, + Health Talks and Campaigns eg. World AIDS Day.
- * Consistent Supplies + Quality Control
- * Awareness (HIV), Workshop, Outreach, + Survey
- * Referral

HC personnel visited all in the RMI in the past to conduct an evaluation. to the laboratories about that the blood banks requirements in providing for training and have managed voluntary contribution from the Laboratory Management, contributed to the cooperation laboratory, general wards, STI stakeholders. March 2017

23
STI Comprehensive Care (or Preventing + Controlling STIs)

2017:
"Inkareson pva mivivence eksp (vstaid) SIDA LHS" 

INCIDENCE OF STI's decreased by 50% ~~40%~~

HOW 😊

- INCREASED AWARENESS through Media, newspaper (local) CHANNELS, Text Msg, Email ECT
- IMPROVED CONTACT Tracing
- COUNSELLING + REFER
- TREATMENT / MONITOR + FUU
- PROMOTE AND DEMONSTRATE CONDOM USE
- EXTEND THE CLINICAL HOUR FOR Privacy Manner
- STRENGTHENING THE SYSTEM
 - Reporting
 - Referral

RESOURCES

- MONEY
- DEDICATED PERSON / MAN POWER
- TRANSPORTATION
- Adequate kits
- COMPUTERS, Cell phones, (Papers) Office Supplies
- Stationary
- IEC

Marshall Islands small group reports back, 2012

2017

↓ Discrimination
& Stigma

↑ Family support

+ media awareness

HHH Awareness

+ youth (10-25)
activities

legislation to
protect PLWHIV

How

Church sermons
Community meeting
*School curriculum
Employer support for
PLWHIV

Family Counseling

↳ - educate families
↳ Traditional Leaders

Songs (musicians campaign),

Commercials, theater,

Radio program/spots

Sports activities

- volleyball/basketball

- Baseball/fastpitch

- fishing

- Handicrafts

Resources

MONEY!

- Awareness
- Equipment
- Venue cost
- Writers
- People
- Counselors
- Respected TL.
- Consultations

AGENCIES

- WAM
- WUTMI
- NTC
- Kumit
- MINOC

Marshall Islands small group reports back, 2012

A process to help write the objective

- After the drawings, then the discussion and answers to the questions...
- Ask each participant to look at the board, and write down ONE WORD that captures the essence of what this priority is about
- This leads into the next exercise, which is writing the objectives



Marshall Islands small group works on results matrix, 2012

FSM: M&E component of the Results Matrix, 2012



Some further examples appear below.
All of these are from the Marshall Islands in
2012.

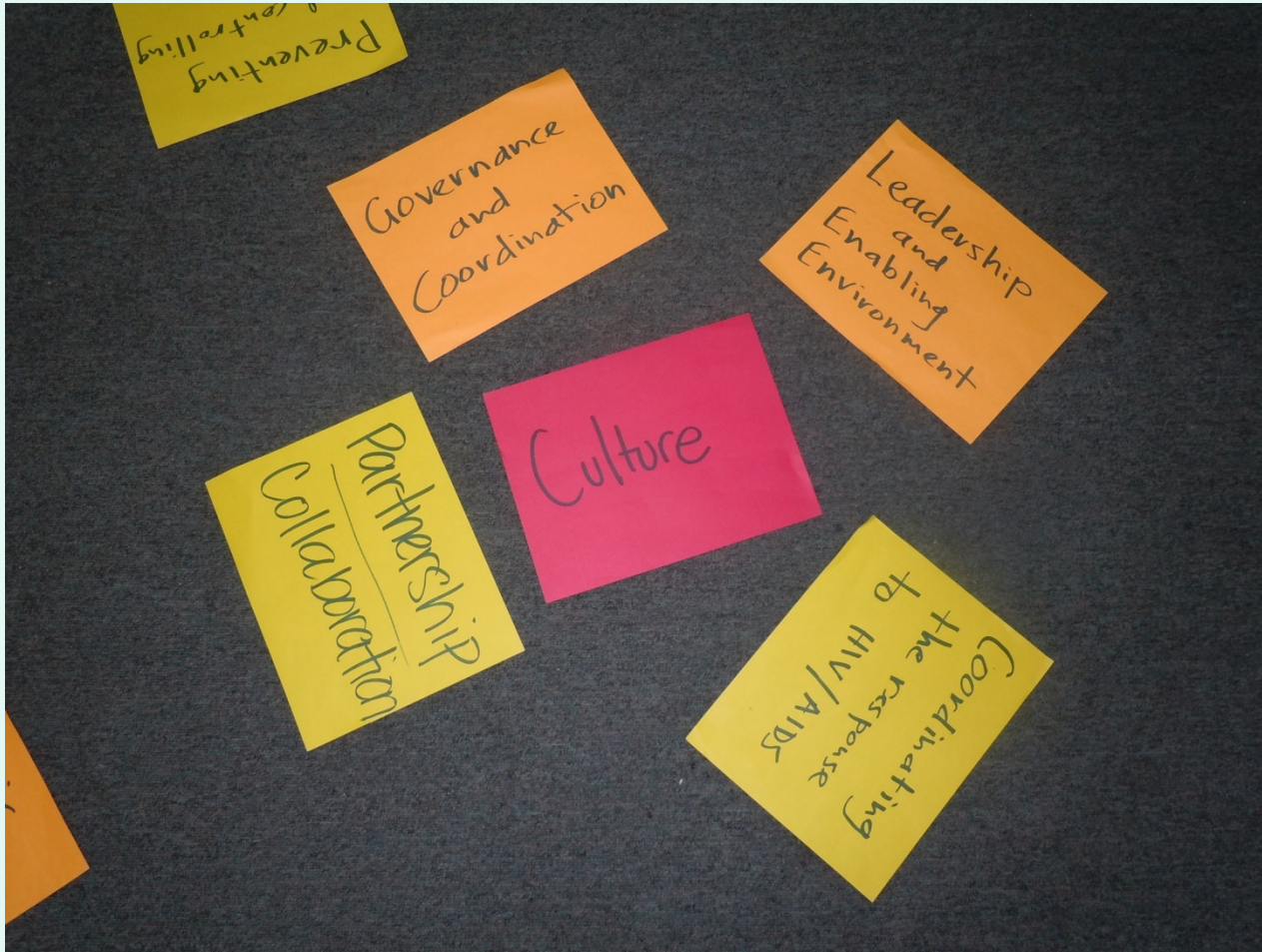
They show move from drawing, to identifying
some words, to preparing a results chain.

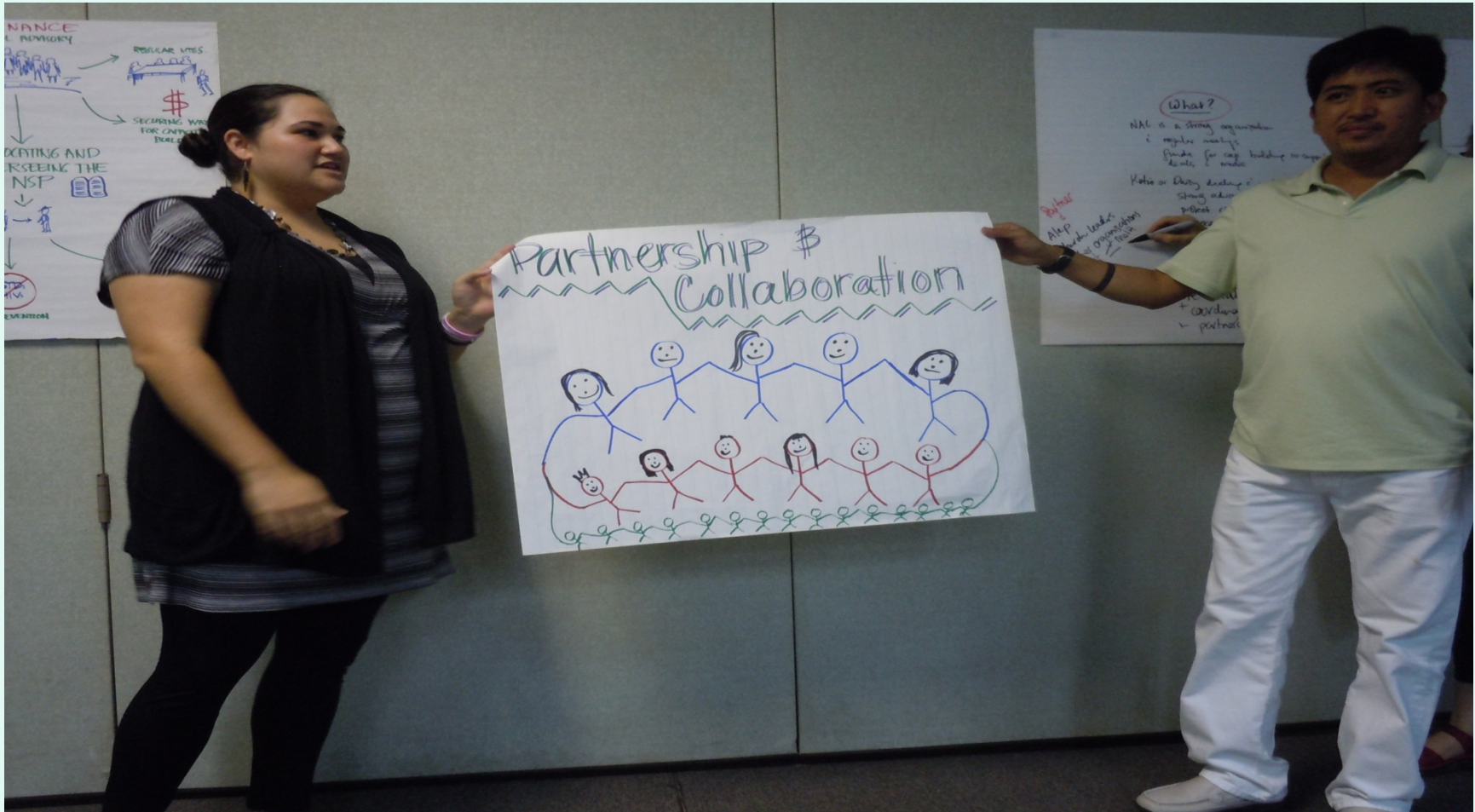
Writing our strategic objectives

Steps:

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Governance & Coordination





Partnership \$ Collaboration



FINANCE & INVESTORS

REGULAR UPDATES

SECURING WIN FOR CONTRACT DEALS

IDENTIFYING AND PURSUING THE NSF

What?

NAL is a strong organization

- regular meeting
- focus for cap building strategy
- leaders
- model

Policy or strategy development

Strong admin

Partnership

Support

Attop

board leaders

organization

trust

coordination

partnership

Governance and Coordination

Working draft:

We will lead a strong, well-governed and collaborative response to HIV & STIs that is accepted at the national, local and grassroots levels.

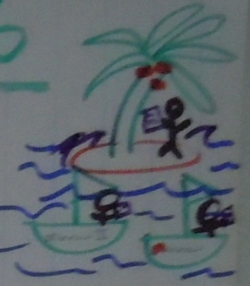
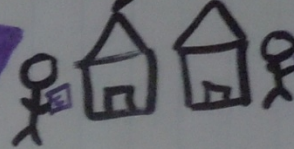
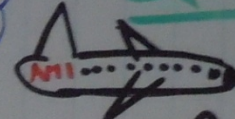
This is a central priority which brings all others together: it puts Culture and Stigma & Discrimination at the heart of the Strategy.

2011



Strategic Communication

2016

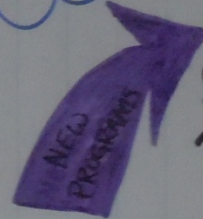
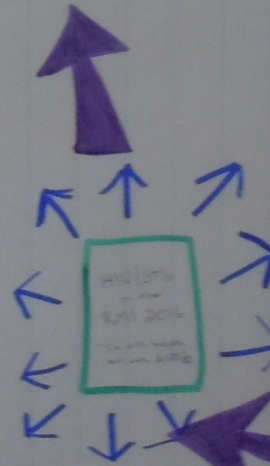
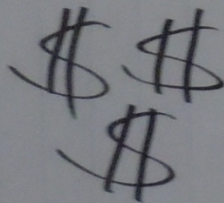
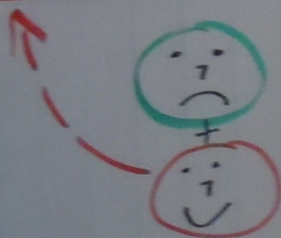


NEEDS ASSESSMENT



Needs Assessment

DEAD REPORTS VAULT



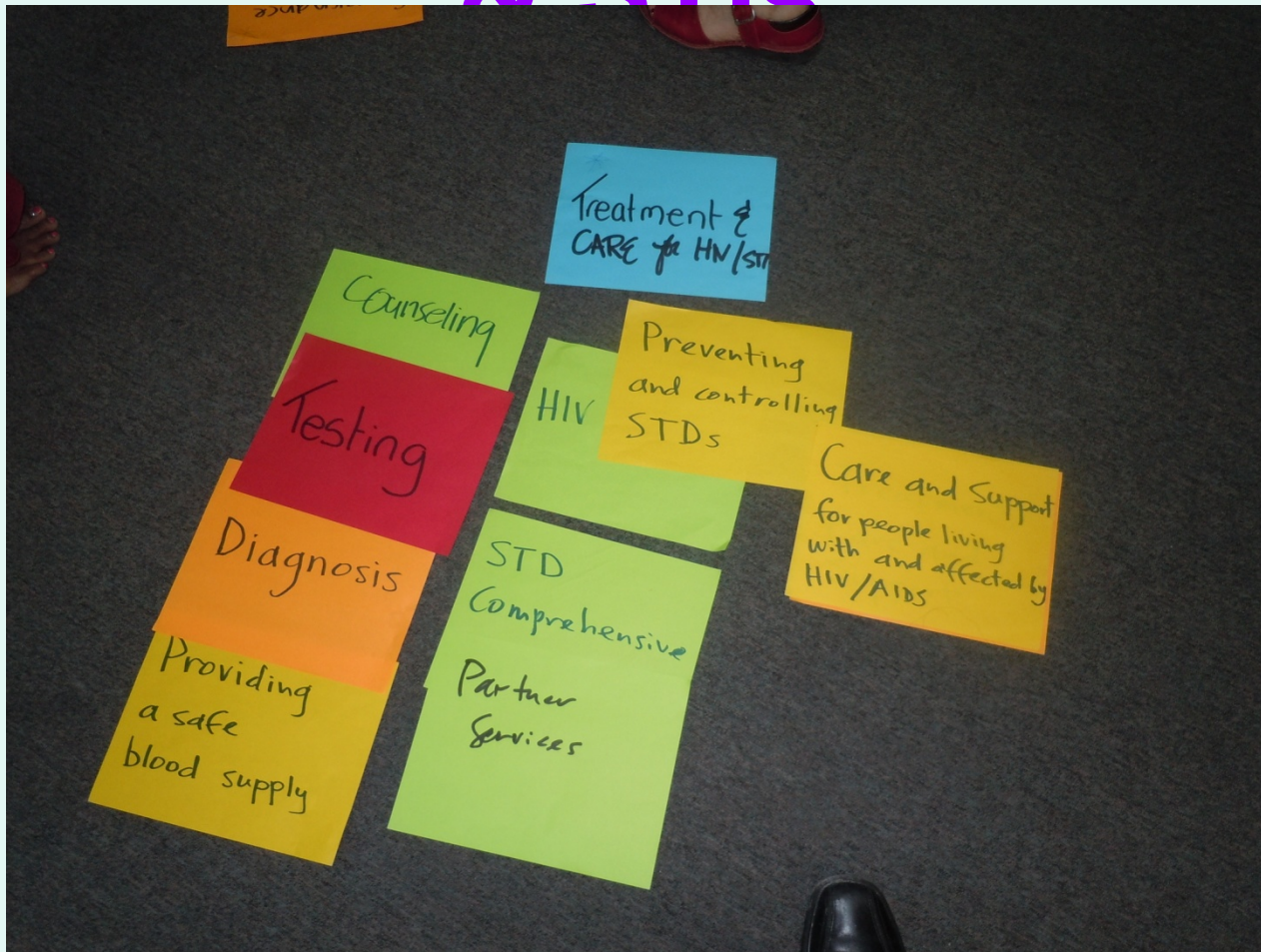
Strategic Information and Communication

Working Draft:

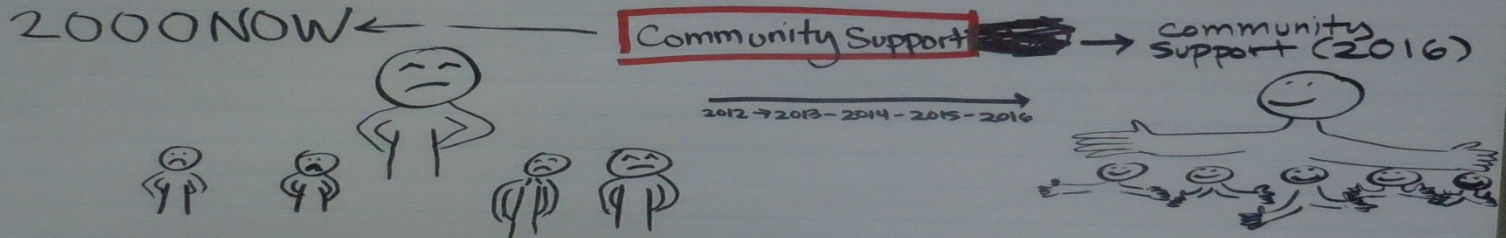
We will strengthen existing systems for surveillance, monitoring and evaluation for strategic dissemination and use of information for program improvement

(and the good of the world 😊)

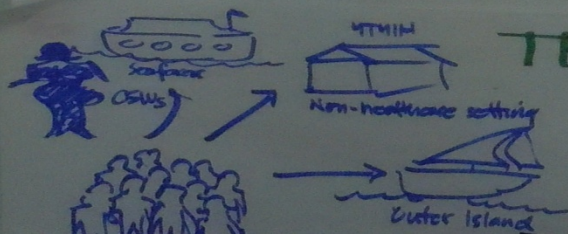
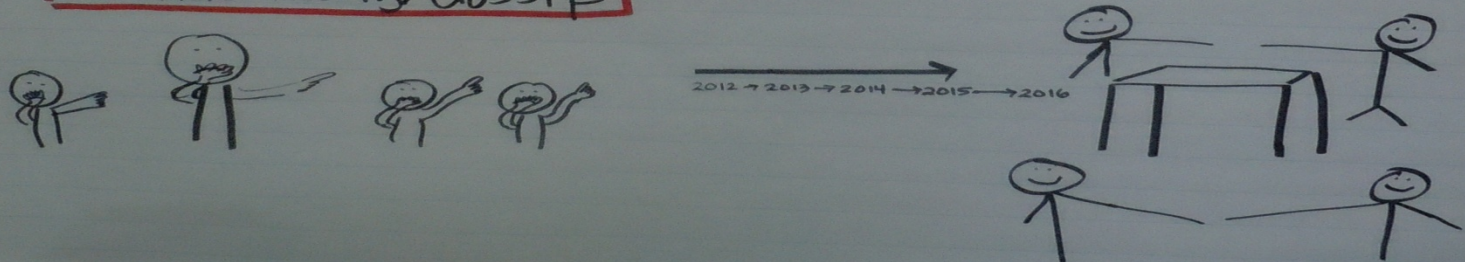
Treatment and Care for HIV & STIs



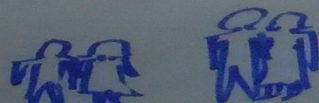
Treatment & Care for HIV - 2016



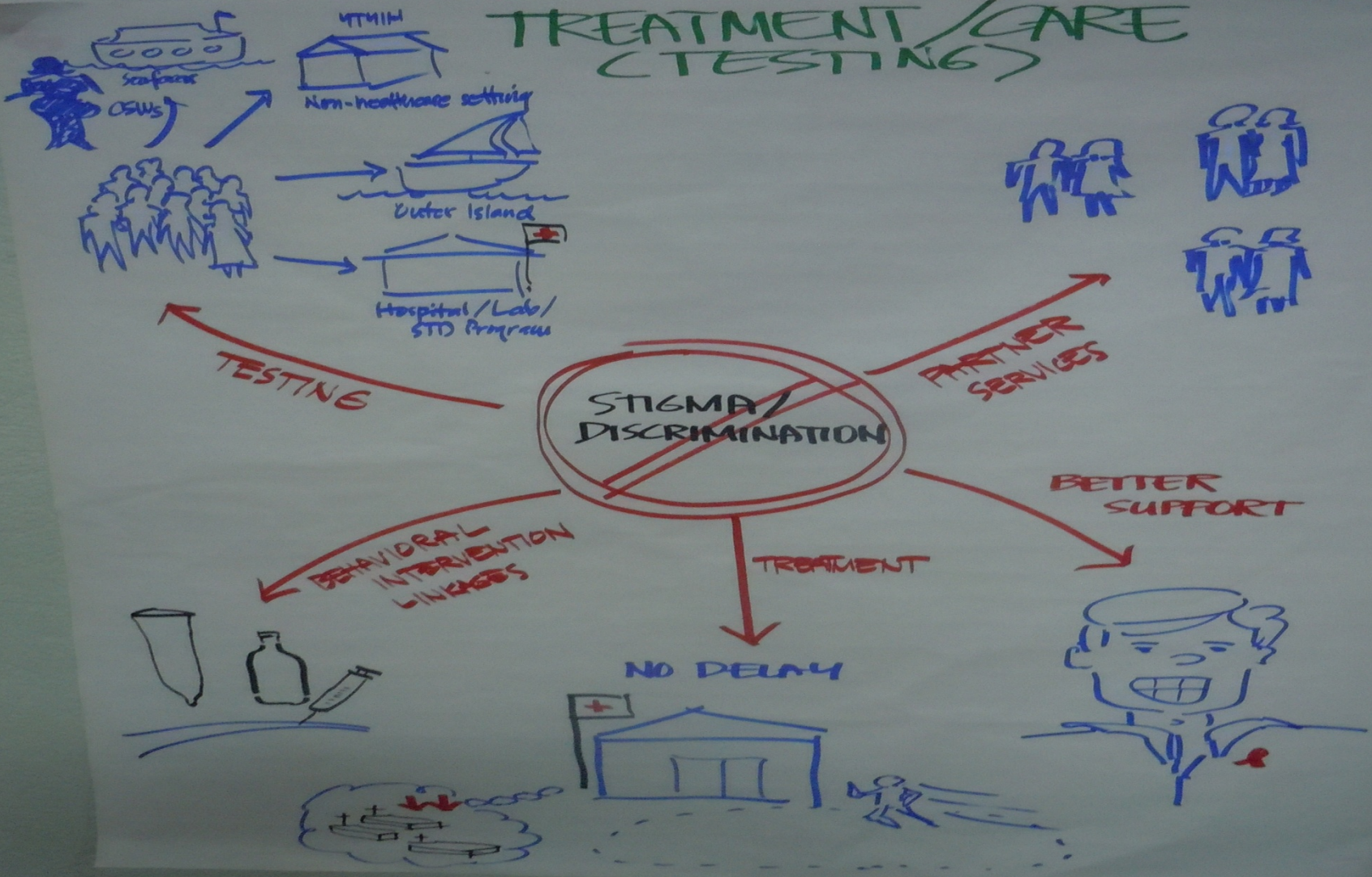
Confidentiality/Gossip



TREATMENT/CARE (TESTING)



TREATMENT/CARE (TESTING)



Treatment Care and Support for HIV & STIs

Working draft:

We will strengthen HIV & STI services to provide comprehensive treatment and care and foster a supportive environment for all individuals, partners, families and the community (regardless of HIV status).

Developing the Objectives tree

Using your **problem tree** as a guide

1. Develop a positive or 'Outcome' statement to match each level of your problem tree
2. Your 'outcome statements' should reflect a causal relationship hierarchy of 'interventions' to address the problem at each level....
3. Consider:
 - Does it identify who is affected at each level?
 - Does it reflect priorities amongst your outcomes ?
 - Does the program's logic grow out of your assessment of the situation – the problem, context & stakeholders?
 - Does it reflect your organisation's theory of how change happens?