



APMG's team-based approach to support for Global Fund projects

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Maximising the quality and effectiveness of technical assistance to Global Fund projects requires a complex mix of design, drafting, negotiation, implementation, training and mentoring skills that rarely reside in a single person. APMG has developed a team-based model that has proven effective in supporting the design, implementation and evaluation of Global Fund HIV projects, and capacity building of Country Coordinating Mechanisms (CCMs) Principal Recipients (PRs) and Sub-Recipients (SRs).

Elements of the model:

Design: To support CCMs in the design and proposal drafting process, APMG puts together a small team of people with complementary skills to work closely with incountry specialists (usually a subcommittee of the CCM). Field work is generally carried out by our consultants with specific skills in programme design and preferably with local language skills. The focus of this part of the work is to determine, in consultation with country-level stakeholders, the most appropriate set of HIV prevention and care interventions for the setting within the parameters of Global Fund funding guidelines. The design team is backed up by a consultant with specific skills in fitting this design into the Global Fund's proposal format, and a Director with experience as a HIV Expert on the Technical Review Panel (Rounds 4-6), as well as a version of the Global Fund budget and indicators documents, developed by APMG consultants in Excel to make data entry and changes easier and accurate during the proposal development process. Our use of a range of communication and file-sharing technologies means that these personnel are in daily contact with the design team so that new data collected by the design team can be swiftly entered into proposal and indicators forms, budgets and workplan.

This team-based approach makes best use of the range of the skills available in the APMG group, allowing us to work with several countries at the same time. APMG has assisted in the development of HIV proposals for Belarus (Rd 8), Bosnia and Herzegovina (Rds 8 and 9), Azerbaijan and Malaysia (Rd 9). APMG has applied this model to the Rolling Continuation Channel proposal process, assisting countries (such as Armenia and Belarus) to continue the effective work that they have commenced under Global Fund projects.

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Implementation support: APMG has provided start-up and ongoing support to several Principal Recipients - including UNDP in Tajikistan, the Ministries of Health in Egypt and Macedonia, Russian Harm Reduction Network in RF and both the International HIV/AIDS Alliance and the All-Ukraine Network of PLHIV in Ukraine - to assist them to successfully implement and report on their projects. Tasks have included design of SR contracting procedures, design and assistance with implementation of M&E systems, population size estimation, assistance with general and financial management, governance and technical aspects of HIV prevention and care.

APMG's approach involves working alongside the PR(s) and/or SR(s) in a long-term capacity development role. Again, APMG puts together a small team of people with complementary technical assistance (TA) skills to carry out this support, with at least some of the team members with local language skills. The focus of the initial work is on a systems review that identifies strengths and weaknesses in the internal management systems of the implementing agency and assists the PR/SR to prioritise which areas require immediate attention, assign tasks, responsibilities and deadlines in a clear TA workplan. This requires a range of skills in the APMG team – financial management, procurement and supply, governance, grant-making and supervision of implementing partners, monitoring and evaluation, quality management and so on. APMG works with the PR/SR to develop a flexible annual plan for this capacity development. The primary aim of this longitudinal support is to assist the incountry organisations to reach a point where they no longer require intensive assistance and where they have the skills and systems to manage the project effectively.

This process has also been used in several cases where Global Fund projects have, for a range of reasons, failed to meet expectations and targets. Obviously, APMG prefers to be brought in as early as possible in this process to avoid the stalling of projects.

In addition, APMG is working on developing training programs on managing HIV programs among most-at-risk populations (MARPs) for delivery to PR/SR managers, UN staff, AIDS program managers and coordinators of large HIV organisations. The curriculum for our **Program Management training curriculum for HIV prevention, treatment, care and support among men who have sex with men and transgender people** has recently been completed and will be piloted in April in the Middle East/North Africa region together with WHO EMRO and UNAIDS MENA. This five-day training curriculum, with facilitators' notes and resources, developed in collaboration with RTI International, covers key aspects of program management focused on evidence-based design, models of intervention, partnership management, monitoring and evaluation.

The first of our programs in this group, **Program Management training curriculum for HIV prevention, treatment, care and support among drug users**, was developed in 2004 and has been delivered to more than 120 participants in Bangkok, Chiang Mai, Bali, Almaty and Istanbul. Development of the **Program Management training curriculum for HIV prevention, treatment, care and support among sex workers** is well under way and we are in discussions with the Asia/Pacific Network of Sex Workers to working in partnership with them on piloting this training.

Another important, recent addition to APMG's products and services is the ARV forecasting software developed by AMA-tech of Armenia and marketed by APMG to GF PRs and SRs. The software is available in English and Russian languages and is backed up with installation, training and online/ telephone technical support.

Evaluation: APMG has also applied this model to the review of Global Fund projects in several countries (including both Principal Recipients in Ukraine – International HIV/AIDS Alliance Ukraine and All-Ukraine Network of PLHIV, UNDP in Belarus and MoH in Macedonia). APMG works with Principal Recipients and other stakeholders to design a review process, then fields regional consultants (with local language skills preferably) to carry out the desk review, stakeholder interviews and site visits.

These consultants are backed up the APMG team, which also provides input to the desk review and assists regional consultants in an appreciative inquiry-based evaluation process that focuses on successes, significant changes and opportunities for expansion of successful approaches.

Contracting Mechanism:

It is APMG's view that the current system of contracting individual consultants for fly-in/fly-out visits is not sufficient for this complex environment. It is rare that a single consultant has all the skills required for these tasks and the short-term nature of their involvement leaves little room for skills transfer and strengthening of local responses. It also restricts the pool of available talent to those willing or able to travel for considerable periods.

APMG prefers a team-based approach and a single contract, so that we can mobilize the most appropriate people for the task and guarantee the quality of the final product. We also prefer the development of long-term supportive relationships that allow the APMG team to work with the PR over time. This promotes attention to the many problems that emerge in the implementation process as and when they emerge.

If you are interested in more information on APMG's approach to supporting Global Fund projects, please contact Dave Burrows (dave@aidspromjcts.com) or Lou McCallum (lou@aidspromjcts.com).