



Progress Reporting Matrix: 1 January – 31 December 2011

GOAL: IMPROVED HUMAN RIGHTS IN THE CONTEXT OF HIV/AIDS AND TUBERCULOSIS (TB) FOR REDUCED VULNERABILITY TO INFECTION AND UNIVERSAL ACCESS TO PREVENTION, TREATMENT, CARE AND SUPPORT IN THE SADC REGION

PROJECT PURPOSE: TO BUILD, STRENGTHEN AND SUPPORT THE CAPACITY OF CIVIL SOCIETY, WITH A PARTICULAR FOCUS ON PEOPLE LIVING WITH HIV (PLHIV) AND TB, TO EFFECTIVELY ADVOCATE FOR A HUMAN RIGHTS APPROACH TO HIV AND TB IN SOUTHERN AFRICA, UTILISING THE ARASA PARTNERSHIP

OUTCOME 1: INCREASED MOBILISATION OF CIVIL SOCIETY ADVOCACY ON HUMAN RIGHTS ISSUES IN THE CONTEXT OF HIV/AIDS AND TB IN SADC

| ACTIVITY | INPUTS | BUDGET | OUTPUT | OUTPUT INDICATOR | DATA SOURCES | RESP. PERSON | TIME FRAME | IMPLEMENTATION STATUS | WAY FORWARD |
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| 1.1 Improved civil society practical knowledge to conduct effective advocacy on human rights and HIV/AIDS in the SADC region | | | | | | | | | |
| 1.1.1 Conduct Module 1 of the ToT (Basic, face-to- face contact session) | 30 Participants; 3 external facilitators: Air travel, accommodation, meals, per diem, stationery etc | | Participants equipped with basic knowledge of HIV, TB and human rights to become trainers and advocates on these issues | # of participants, # of facilitators, # of presentations; # of information materials distributed; # of evaluation forms completed | Training reports, progress reports, media reports; workshop evaluation forms | Jacob, Boniswa, Alan; Maggie | 21-25 March | The module 1 training session was held from 21 to 25 March. 27 participants from all SADC countries attended. The training was facilitated by 2 ARASA staff. 8 presentations were delivered; 27 manuals in English, Portuguese and French distributed | - |

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| 1.1.2 Conduct Module 2 of the ToT (Online) - M&E | Staff time, consultancy fees (IT/Website support); TOT Web portal hosting subscription, external moderator's time | | Partners equipped with basic knowledge on M&E for human rights, HIV and TB to become trainers and advocates on these issues | # of participants, # of facilitators, # of presentations/information materials distributed; # of evaluation forms completed | Training reports, progress reports, media reports; workshop evaluation forms | Jacob, Boniswa, Alan | 1-31 May | The Module 2 training was piloted on the online site with 27participants; facilitated by 2 ARASA staff; 3 materials (Introduction to M&E concepts, Results based management and Logical framework model).distributed. Various teething problems related to the functionality of the site, including limited bandwidth and connection speed, were experienced. Because many trainees were not able to participate in the online training, module 2 was covered again during the face-to-face training from 26 to 30 September at Roodevallei in Pretoria. 25 workshop evaluation forms completed and confirmed that generally participants were happy with the training and felt their skills were enhanced. | - |
| 1.1.3 Conduct Module 3 of the ToT (Online) - Treatment Literacy | Staff time, consultancy fees (IT/Website support); external moderator's time | | Partners equipped with basic knowledge on Treatment literacy to become trainers and advocates on human rights, HIV and TB issues | # of participants, # of facilitators,# of presentations/; #information materials distributed; # of evaluation forms completed, # of | Training reports, progress reports;; workshop evaluation forms | Jacob, Boniswa, | 1 - 30 July | Module 3 of the ToT was conducted as a face-to-face training from 26 to 30 September at Roodevallei in Pretoria due to teething problems experienced with the online training portal | - |

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| | | | | evaluation forms completed | | | | (see activity 1.1.2); 3 ARASA staff facilitated; 25 participants attended; 9 presentations delivered | |
| 1.1.4 Conduct Module 4 of the ToT (Advanced, contact)-emerging issues incl. Equal Rights 4 All | 30 Participants; 3 external facilitators: Air travel, accommodation, meals, per diem, stationery | | Partners equipped with advanced knowledge of HIV, TB and human rights to become trainers and advocates on these issues | # of participants; # of facilitators; # of presentations; # of information materials distributed; # of evaluation forms complete | Training reports, progress reports, workshop evaluation forms | Jacob, Boniswa, Paula and Lynette, Maggie | 10-14 October | Due to the re-organising of modules 2 and 3 (planned to be online) to a face-to-face training in September, module 4, advanced training was conducted from 14 to 18 November in Johannesburg;); 3 ARASA staff facilitated; 27 participants attended; 8 presentations delivered; 25 evaluation forms completed and confirmed that generally participants were happy with the training and felt their skills were enhanced (see progress report for further details) | - |
| 1.1.5 Award 8 small grants to 2010 ToT graduates | Staff time, grants | | 8 ToT graduates have an opportunity to implement the new knowledge with financial support from ARASA | # of small grants disbursed; # of activities implemented | Small grant reports, progress reports; grant award letters | Jacob, Michaela, Felicita and Paula | Jan - ongoing | ARASA received additional funds from ITPC / Tides Centre to increase the grants from US\$10,000 to US\$ 20,000 per grant; the grants were revised to increase the funds requested. 10 small grants were awarded and funds disbursed for amount between 5,000 and 20,000 US\$ to partners in | - |

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| | | | | | | | | Zimbabwe, Zambia, Seychelles, Botswana, Angola, Lesotho, Malawi, Mozambique and Tanzania. | |
| 1.1.6 Provide technical support to small grant recipients | Staff time, travel and accommodation costs for 1 staff x 5 country trips | | Small grant recipients receive adequate technical support for effective project implementation | # of telephonic meetings, # of technical support visits to grantees , # of partners who report satisfaction with the support; # of emails to provide advice or input into grant implementation | Small grant reports, progress reports; e-mails; call / meeting notes | Jacob, Boniswa, Alan, Grants officer | Jan - ongoing | A grants officer was recruited and started on 1 July. Instead of country level technical support visits to partners, 1 pre-implementation workshop was conducted from 25 to 28 July in Johannesburg to provide support to grantees in the revision of their activities, budgets and M&E frameworks; 11 participants attended the workshop facilitated by 5 staff members from ARASA (4) and ITPC (1). The pre implementation workshop was well received by the participants who explained that the workshop assisted them with aligning and finalising their project proposals and providing background with regards to the science and socio-political environment of HIV/AIDS and TB that impact on their work. They also mentioned that the workshop gave them the confidence to resume and complete their projects. In | The pre implementer workshop was |

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| | | | | | | | | addition, the grants officer held 2 group conference calls with all grantees and bilateral calls with grantees to support the implementation of their activities. The grants officer also sent 15 group emails through the grantees@arasa.info email list to support these efforts | |
| 1.1.7 Recruit small grants proposals for 2012 and support the proposal development process | Staff time | | Call for proposals issued and trainees supported in the development of their proposals | #of proposals submitted; # of workshops to brief trainees on the small grants project | Workshop report; quarterly report; small grant proposals | Jacob, Lawrence, Boniswa | September - November | A call for proposals with new/revised application forms was issued during the face-to-face training in September. During this workshop, the Grants officer facilitated a session on the development of small grants proposals, budgets and M&E frameworks.; 12 small grants proposals were submitted; | Selection of the small grant recipients for 2012 will be done in January / February2012. |
| 1.1.8 Coordinate data collection assignments for ToT participants and provide on-going technical support during the exercise which feeds into the update of the Annual ARASA HIV, TB and Human Rights Report | Staff time | | ToT participants are provided with skills and technical support to document the existing legal framework, human rights challenges etc. for the Annual ARASA HIV, TB and human rights report | # of ToT participants who submit their assignments, # of HR violations documented, # of policies/ laws documented | Field reports, 2012 ARASA HIV, TB and human rights report | Jacob, Boniswa | 21 - 25 March | The data collection assignment was issued to all participants during the first Tot session in March. 17Assignments have been collected during the Advanced ToT training in November as some participants developed one joint country report. The assignments have been forwarded to the consultants who are working on the | The consultants will continue updating the report during the first quarter of 2012 for completion by June 2012. |

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| | | | | | | | | report. | |
| 1.2 Improved capacity to effectively advocate for improved access to HIV and TB prevention, treatment and care services | | | | | | | | | |
| 1.2.1 Support country training program in Swaziland (SWAPOL) | Country support grant | | Country partners provided with technical support to implement training and capacity building activities | Technical support provided; # of trips to Swaziland to provide technical support; # of emails; # of telephone calls | Quarterly reports from SWAPOL; ARASA progress reporting; | Jacob; Boniswa; Lynette; Paula | Jan - ongoing | There was no request for technical support for trainings from SWAPOL during this period as all national level trainings under the project were completed in 2010. In 2011 most of the training and mobilisation work was being conducted at a community level by community advocates/trainers with support from the SWAPOL. | - |

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| 1.2.2 Support country training program in Mozambique (MULEIDE) | Country support grant | | Country partners provided with technical support to implement training and capacity building activities | 25 civil community health advocates trained; interviews held and 20 Community Health Advocates selected. | Training report, attendance register and materials register | Jacob Boniswa Lynette Clotilde | Jan - ongoing | The contract with MULEIDE has been signed, a work plan and budget developed, and funds disbursed. The coordinator has been recruited and commenced on 1 March. The basic training for 25 participants was conducted from 5 – 9 September in Maputo; 20 participants were selected to be Community Health Advocates; the advanced training was held from 17 to 21 October and attended by 20 people. A regional training was conducted from 28 November to 2 December with 21 participants and 6 facilitators (2 from ARASA; four were trainees from the national trainings). ARASA co-facilitated all 3 trainings and worked with MULEIDE to ensure the successful completion of the activity. | The technical support will continue in 2012, the 2 nd year of the programme. |
| 1.3 ARASA Training programme improved through development and revision of training material | | | | | | | | | |
| 1.3.1 Develop and launch the online ToT portal | Staff time, IT/Website consultancy services, web hosting | | Increased access to ARASA ToT and cost cutting by facilitating 2 modules of the regional ToT online | # of training materials developed / uploaded, Online portal in place | Online ToT portal on the internet | Jacob, Boniswa | March | Online portal created and populated with 15 different materials including the ARASA Training and Advocacy Manual, presentations and quizzes. In addition, | Software for the online training portal will be updated in 2012 to address the teething problems that have been experienced during the piloting of the online training facility. |

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| | | | | | | | | the human rights training and advocacy documents library containing over 1 000 resources was also uploaded. Work on the online site focused on finalising content, piloting the site and ironing out teething problems in the system. The 2 nd ToT module was piloted on the site, but most participants were unable to participate due to various challenges with software and bandwidth. Participants were provided with reading materials and an assignment to complete and this module was repeated during the September ToT training. | |
| 1.3.2 Update the ARASA training and advocacy resource manual | Staff time, Translation consultancy services (Portuguese/ French) | | Up dated training materials available for participants and ARASA partners | Updated training manual | Copy of the updated manual | Jacob, Boniswa | 1st quarter | Various sections of the manual were updated and need to be reviewed by ARASA team members for finalisation. | Once the revised sections have been reviewed and finalised in 2012, they will be reprinted and distributed for insertion into existing manuals. |
| 1.3.3 Print 1000 updated training manuals (English, Portuguese and French) | Staff time, stationery, printing costs | | Up dated training materials available for participants | # of updated manuals printed, # distributed | Copies of manual, progress reports | Jacob, Boniswa | 1st quarter | 1000 Portuguese versions of the manual were printed.25 of these copies distributed to SCARJOV in Angola. | A reprint of the English version is awaited in 2012 once agreement is reached on the revised sections. (see activity 1.3.3) |

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| 1.3.4 Develop training materials for the online ToT (online quizzes, case studies and thematic forum discussions) | Staff time | | Updated training materials available for participants of the online training | # of training materials developed, # of training materials distributed/ downloaded | Copies of the materials, progress reports | Jacob, Boniswa | Jan - ongoing | Material developed, revised and uploaded. Online portal created and populated with 15 different materials including the ARASA Training and Advocacy Manual, presentations and quizzes. In addition, the human rights training and advocacy documents library containing over 1 000 resources was also uploaded. | The remaining teething problems experienced with the online training site will be addressed during the first quarter of 2012 to ensure the site is fully functional and can be used for the ToT in 2012. |
| 1.3.5 Develop baseline surveys & review evaluation tool for the ToT to include online component | Staff time | | ToT programme assessed for continuous improvement | # of tools developed; # of tools distributed and collected from participants | Baseline survey; Reviewed evaluation tool; | Jacob, Alan | Feb-ongoing | Baseline survey forms have been drafted, but need finalisation. The evaluation tool was developed and administered during the advanced training session in November. 25 completed evaluation forms were received. Feedback from the evaluation forms is captured in the narrative of the Annual Report. | A baseline questionnaire will be finalised in 2012 for distribution during the first face-to-face training of the 2012 ToT in March. |
| 1.3.6 Conduct annual baseline survey and assessment of the ToT programme | Staff time | | ToT programme assessed for continuous improvement | # of assessments conducted, # of participants who completed the baseline survey, # of participants who complete evaluation forms, # of decisions arising from assessments | Assessment reports, progress reports; evaluation forms; baseline survey | Jacob, Maggie | Feb - ongoing | Baseline survey forms have been drafted and need to be finalised. See activity 1.3.5. The evaluation tool was administered during the advanced training session in November. 25 completed evaluation forms were received. Feedback from the evaluation forms is captured in the narrative of the Annual Report. | A more comprehensive impact assessment of the ToT (since its inception in 2008) will be conducted early in 2012 as part of the external evaluation of the ARASA Strategic Plan, to assess the impact of the training at the national level. |

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| 1.3.7 Facilitate accreditation of the ARASA ToT programme by UNISA | Staff time | | ARASA Training programme accredited by UNISA for credibility and visibility | # of accreditation meetings; ToT Accreditation process completed | progress reports; minutes/ notes of meetings | Jacob, Michaela and Felicita | Jan - ongoing | 2 meetings were held with UNISA in 2011 to discuss the MoU. The revised MoU forwarded by UNISA was significantly different from the initial discussions. Thus, ARASA decided to not pursue the accreditation of the ToT further with UNISA at this time as it has proven to be a very lengthy and resource intensive exercise, which has not yielded the expected results. | - |
| 1.3.8 Conduct quarterly teleconference with the quality assurance committee for ToT accreditation | Staff time | | ARASA Training programme receiving stakeholder advisory input for continuous improvement. | # of meetings, No of participants | Progress reports | Jacob, Michaela and advisory committee members | March | Activity was dependent on the negotiation of the MoU with UNISA. | - |
| 1.3.9 Conduct 2 bi-annual meetings with the ARASA regional training and capacity building advisory committee | Staff time | | ARASA Training programme receives stakeholder advisory input for continuous improvement | # of meetings, # of participants | Progress reports; minutes / notes of meetings | Jacob, Boniswa | May/ October | No meeting has been conducted during the first half of the year as the committee could not reach a quorum due to competing work commitments of the members. | Meetings are scheduled to resume in 2012. |
| 1.4 ARASA Country partners receiving technical support for effective advocacy on human rights, HIV & TB | | | | | | | | | |
| 1.4.1 Placement of 2 interns from partner organisations with more established partner organisations for shared learning | Air travel, accommodation, per diem | | Shared learning and transfer of skills facilitated among partner organisations | # of internship placements, # of good practices incorporated into the work of the partner of origin | Progress reports, internship reports | Jacob, Maggie, Felicita, Alan | March - ongoing | The call for interns was issued in July and 6 applications were received. 3 interns from TALC, CHESO and Tonata were selected for placement with CMT, ZARAN and SWAPOL respectively | Interns will be hosted during the first quarter of 2012 as hosting partners were not able to accommodate them during the 4th quarter of 2012. |
| OUTCOME 2: STRENGTHENED CIVIL SOCIETY CAPACITY FOR EFFECTIVE HUMAN RIGHTS, HIV AND TB ADVOCACY IN SADC | | | | | | | | | |

| 2.1 Enhanced mobilisation of civil society to advocate for funding for health in the SADC region | | | | | | | | | |
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| ACTIVITY | INPUTS | BUDGET | OUTPUT | OUTPUT INDICATOR | DATA SOURCES | RESP. PERSON | TIME FRAME | IMPLEMENTATION STATUS | WAY FORWARD |
| 2.1.1 Conduct stakeholder mapping/ situation analysis on the <i>right to health</i> in SADC | Communication costs | | Strategic stakeholders are identified; gaps and barriers to the right to health are identified for an evidence-based strategy | # of stakeholders identified , # of advocacy issues identified, # of partners using the mapping report to inform their advocacy efforts | Meltwater, Situation analysis / Mapping report, Quarterly report | Lynette, Paula | Jan- May | A ' <i>Funding for Health</i> ' consultant was recruited in May to take this work forward. Mapping on the use of existing ' <i>funding for health</i> ' campaign materials; reasons for lack of traction in some settings and what opportunities may exist at the national level to use the materials, has been conducted with ARASA partners and other stakeholders. Mapping also focused on monitoring the socio-political and economic contexts of the countries in the region, which impacts greatly on ' <i>funding for health</i> ', realising the right to health as well as the most effective methods for advocacy. Mapping was completed in November and resulted in the development of a comprehensive set of materials focused on ' <i>the right to health</i> ' and a proposal for further work on funding for health in the context of the right to health. | This work will continue in 2012, when the ' <i>funding for health</i> ' campaign will be strengthened based on the findings of the mapping, and the ' <i>right to health</i> ' material will be integrated into the existing ARASA resources. |

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| <p>2.1.2 Mobilise stakeholders for the 'Right to Health' campaign</p> | <p>Communication costs</p> | | <p>Stakeholders mobilised to join the ARASA advocacy on the right to health</p> | <p># of partners participating in the campaign at country level, # of info. materials distributed, # of press statements produced; # of press conferences organised; # of mobilisations and other campaigning activities implemented</p> | <p>Meltwater, Country reports, Quarterly reports</p> | <p>Lynette, Paula, Gillian</p> | <p>Jan – ongoing</p> | <p>The <i>Funding for Health</i> Consultant engaged in discussions with ARASA partners on the <i>Right to Health</i> materials that she was developing in 2011. As mentioned above, this exploration has, amongst others, resulted in the development of <i>right to health</i> materials, based on the realisation that the socio-political and economic context in-country plays a strong role in the ability of this campaign to have traction or not. The case studies, newspaper articles and research collated contributed to the development of the 'Right to Health' material for use by ARASA partners in their advocacy and mobilisation around the <i>right to health</i>. See also activity 2.1.1</p> | <p>This work will continue in 2012, when the 'funding for health' campaign will be strengthened based on the findings of the mapping, and the 'right to health' material will be integrated into the existing ARASA resources.</p> |
| <p>2.1.3 Country visits to support partners to implement activities for the 'Right to Health' campaign, including student road shows in each country</p> | <p>Focus countries: Zambia, Mozambique, Lesotho, Malawi, Botswana, Swaziland</p> <p>For each visit: 1 staff members (air fare, 5 days accommodation, meals and per diem)</p> | | <p>Stakeholders/ partners have enhanced capacity for country level advocacy on 'right to health'</p> <p>Youth movements in schools and universities are mobilised to join</p> | <p># of country partners/ stakeholders visited; # of country partners implementing the campaign activities; # of activities implemented successfully; # of media articles and other</p> | <p>Meltwater, ARASA Website Quarterly reports</p> | <p>Lynette, Paula, Gillian, Focal point partners</p> | <p>April-August</p> | <p>The activity was not implemented as it was dependent on the outcomes of the mapping exercise, which was only completed in November (See activity 2.1.1).</p> | <p>This work will continue in 2012, when the 'funding for health' campaign will be strengthened based on the findings of the mapping, and the 'right to health' material will be integrated into the existing ARASA resources.</p> |

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| | | | the 'Right to Health' campaign | coverage # of youth movements participating, # of 'road shows' conducted, | | | | | |
| 2.1.4 Conduct country- level campaign activities on the right to health | Staff time | | Stakeholders/ partners implement mobilisation activities to advocate for the right to health at the country level | # of partners that have conducted advocacy activities, # of campaign activities conducted, # of press statements released; # of media articles and other coverage | Meltwater, ARASA website, Stakeholders/ partners reports, Quarterly reports | Lynette, Paula, Gillian, consultant | May | The activity is was not implemented as it was dependent on the outcomes of the mapping exercise, which was only completed in November (See activity 2.1.1) | See activities 2.1.1, 2.1.2 and 2.1.3. In 2012, ARASA will continue to discuss potential country-level activities with the focal point partners in Zambia, Mozambique, Lesotho, Malawi, Botswana and Swaziland for in-country advocacy on ' <i>Funding for health</i> ' and the ' <i>Right to Health</i> '. |
| 2.1.5 Produce & distribute ' <i>Right to Health</i> ' marketing materials based on a mass and social media strategy | Focus countries: Zambia, Mozambique, Lesotho, Malawi, Botswana, Swaziland Material production: Consultant designer @ ZAR500 x 5 dollar bills Printing: 500 dollar bills x 6 countries | | ARASA and partners able to strategically engage mass and social media to mobilise stakeholders on the 'Right to Health' campaign | # of country level partners / members of the public engaging with the campaign, # of partners who received the strategy , # of stakeholders/ partners using the strategy to mobilise the media at the country level; # of media articles and other coverage | Meltwater, Quarterly reports | Lynette, Paula, Gillian, (Focal point partner) | Feb – ongoing | The mapping exercise referred to in activity 2.1.1 has enabled ARASA to revisit the current campaign materials produced in 2010, to gauge market perceptions. The findings have helped shape the ' <i>Right to health</i> ' materials developed in November 2011. See activities 2.1.1, 2.1.2, 2.1.3 and 2.1.4. | This work will continue in 2012, when the ' <i>funding for health</i> ' campaign will be strengthened based on the findings of the mapping, and the ' <i>right to health</i> ' material will be integrated into the existing ARASA resources. |
| 2.1.6 Conduct media outreach activities (including distribution of 'I have a dream letters to the media') | Staff time | | Information on the right to health disseminated to the public and stakeholders through the media | # of op eds released, # of media statements released, # of press conferences conducted, # of 'letters' released | Meltwater, ARASA Website, Copies of 'I have a dream' letters, Quarterly reports | Lynette, Paula, Gillian, (Focal point partners) | July- Nov | A press release entitled: 'How old should Africa be to be healthy?' was issued on 25 May, Africa Day. Media outreach on ' <i>funding for health</i> ' and the ' <i>right to health</i> ' has been on- | Media outreach activities on ' <i>funding for health</i> ' and ' <i>right to health</i> ' will continue in 2012. |

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| | | | | | | | | going with 3 of articles featuring ARASA published during the year. The focal point partners in Zambia, Mozambique, Lesotho, Malawi, Botswana and Swaziland engaged the media in-country on <i>'the right to health'</i> . These articles were featured in the <i>'Right to health'</i> materials referred to in activity 2.1.1. Work on the 'I have a dream letters' was halted pending the outcomes of the mapping exercise referred to in activity 2.1.1. | |
| 2.1.7 Produce <i>'Lords of the Bling'</i> Vol III Video & <i>'Make it Count'</i> song | 2,000 blank CDs, Studio editing consultancy costs | | Creative multi-media tools available for stakeholders/ partners to use during advocacy activities | # of copies produced & distributed, # of stakeholders using the creative tools | Copy of video & song, Meltwater, ARASA website | Lynette, Paula, Gillian | Jan- March | Activity halted pending outcomes of mapping exercise. See activity 2.1.1. Feedback on the song has not been very positive as listeners found it to be too lengthy, repetitive and not written in colloquial Swahili. ARASA consulted with various artists and producers across the continent on how to improve the song. The production of the <i>Lords of the Bling</i> Vol. III video also did not take place as it awaited the outcomes of the mapping exercise, finalised in November. | This work will continue in 2012, when the <i>'funding for health'</i> campaign will be strengthened based on the findings of the mapping, and the <i>'right to health'</i> material will be integrated into the existing ARASA resources. |

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| 2.1.8 Develop country- specific information materials for the 'Right to Health' campaign | 5000 t-shirts, 10,000 A5 flyers, 10,000 eyeball stickers, 20,000 dollar bills | | Country stakeholders/ partners mobilised to develop country-specific info materials for enhanced awareness | # of country partners/ stakeholders involved, # of materials developed & distributed | Meltwater, Copy of the info materials, Quarterly reports | Lynette, Paula | Jan- March | Activity halted pending outcomes of mapping exercise and country visits. The initial findings of the mapping show that some of the materials did not work well in some contexts. ARASA developed 'Right to Health' materials based on stories and case studies collected from various partners, This material will guide the development of country-specific materials, which are better suited to the various contexts. | This work will continue in 2012, when the 'funding for health' campaign will be strengthened based on the findings of the mapping, and the 'right to health' material will be integrated into the existing ARASA resources. |
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2.2 Enhanced mobilisation of civil society advocacy campaigning on TB, HIV and Human Rights

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| 2.2.1 Develop & pilot the TB/HIV Three I's advocacy toolkit | Focus countries: Zambia, Botswana, Lesotho, Swaziland Staff time, communication costs. Hire of venue , meals (4 focus group discussions) | | Partners/ stakeholders have technical resources for effective TB/HIV advocacy | Toolkit produced, # of partners/ stakeholders using the toolkit; # of toolkits distributed | Quarterly reports | Paula, Lynette, Donela (consultant) | Jan- Feb | Activity was completed during the first half of 2011. The draft TB/HIV Three I's Toolkit was piloted in four focal countries by 4 ARASA partners. 140 copies of the draft Toolkit were printed for the piloting. Of these, 40 were distributed in Zambia (TALC), 25 in Lesotho (ADRA), 25 in Botswana (BONELA) and 50 in Swaziland (SWAPOL). Changes suggested during piloting were incorporated into the finalisation of the toolkit. A critical review of the toolkit was conducted in November 2011 by | A final edit of the toolkit to correct the errors identified by Khairunisa and Juliet as well as to update the data provided by WHO will be conducted during the first quarter of 2012. The amended toolkit will then be shared with partners for adaptation, printing and implementation. |
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| | | | | | | | | Khairunisa Suleiman and Juliet Nanfuka. The review identified some data errors that need to be addressed. In addition, WHO also provided factsheets to update data in the toolkit. | |
| 2.2.2 Print and disseminate the TB/HIV Three I's toolkit | Staff time, consultancy costs, communications costs, design costs - covered by WHO budget | | Partners/ stakeholders have resources for effective TB/HIV advocacy | Toolkit produced, # of partners/ stakeholders using the toolkit; # of toolkits distributed | Quarterly reports | Paula, Lynette, Donela (consultant), country partners | Feb- March | ARASA decided not to print the toolkit at this stage, as partners will adapt and translate it into local languages at the national level. The initial version of the toolkit was disseminated to interested partners through Dropbox to save on costs of printing. ARASA also loaded the document on its website for easier access by a wider audience. | Once the final edits have been inserted in the toolkit (during the first quarter of 2012), the document will be disseminated widely to partners for printing and dissemination at the national level. See activity 2.2.1. The different linguistic and contextual versions of the Toolkit – adapted through the Small Grants projects of partners in Zambia, Mozambique and Botswana - will be uploaded on the website once there has been WHO clearance. |
| 2.2.3 Conduct HIV, TB and Human Rights training for country programme officers/ traditional community health practitioners | 1 training in Johannesburg/ 30 participants/ 5 days: (Hire of venue, air travel, accommodation, meals, per diem) - | | Country programme officers/ community health practitioners are trained on HIV, TB & human rights | # of participants trained, # of training materials distributed | Training reports, quarterly reports | Jacob, Boniswa, Paula, Lynette | Jan- Feb | In March, ARASA co-convoked a workshop with WHO for 30 TB/HIV programme managers from 8 countries in the SADC region, to introduce the toolkit and solicit additional information on the status of national TB/HIV programmes in the region. A meeting with traditional healers did not materialise in 2011 as the head of the traditional healers association in southern Africa had competing | - |

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| | | | | | | | | commitments and was not available to finalise the arrangements for the training. 10 copies of the toolkit were disseminated to SADC PF at the TB Partnership meeting in Feb 2011. | |
| 2.2.4 Provide technical support to HIV and TB advocacy campaigns by partners in Lesotho in preparation for the launch of the Three I's infection control toolkit | Staff time, communications costs, travel to Lesotho for 1 staff x 3 days (flights, accommodation. , meals) | | Lesotho partners receive technical support for effective HIV TB and advocacy | # of partners receiving capacity support, # of campaign activities supported by ARASA; # of media articles on advocacy activities by ADRA | Meltwater, Partner reports, quarterly reports | Lynette, Paula | Jan- March | Activity not completed due to changes in the priorities of the local partner (ADRA). However, technical support was provided to partners on an ad hoc basis to implement the 3 I's toolkit. | - |
| 2.2.5 Conduct media campaign on compensation cases against mines in South Africa | Staff time, communications costs | | Enhanced public awareness on TB in the mines and the compensation cases against mines in South Africa | # of media statements produced, # of press conferences conducted; # of articles and other coverage in the media | Meltwater, ARASA Website, quarterly reports | Paula, Lynette, Gillian | Jan - ongoing | ARASA has supported litigation on the TB and Mines cases through media outreach, including mobilising the media for a press conference held on the 20th of April 2011 in Johannesburg, ahead of the Anglo American Annual General Meeting (AGM) in the UK and co-authoring a letter that was delivered to the shareholders of Anglo American during the AGM. Another press conference was convened in August in Johannesburg. 2 press statements, as well as a statement from the CEO of Anglo | - |

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| | | | | | | | | American PLC were released. ARASA was mentioned in 7 articles related to the issue of TB and the Mines and the test cases. | |
| 2.2.6 Conduct public awareness and mobilisation campaigns on issues of mines and TB in southern Africa | Focus countries: Mozambique, South Africa, Lesotho, Swaziland | | Enhanced public awareness on issues of mines and TB in southern Africa | # of media statements released, # of campaign activities conducted; # of articles and other coverage in the media | Meltwater, ARASA Website, quarterly reports | Paula, Lynette, Gillian | Jan – ongoing | See activity 2.2.5 | - |
| 2.2.7 Develop compensation brief/ media statement on World TB Day | Staff time, communications costs | | Enhanced public awareness on issues of mines and TB in southern Africa | # of copies produced, # of media articles and other coverage | Meltwater, ARASA Website, quarterly reports | Paula, Gillian | March | Activity was halted pending a review of the Mining Industry compensation system by the South African Parliament. This process has been further delayed by the ANC Youth League's discussions around nationalisation of Mines. Activity has been postponed until 2012. | In 2012, ARASA will follow up on the progress of legal reform for the compensation system. Also see Activity 2.2.5 |
| 2.2.8 Appointment of TB/human rights policy and programme analysis consultant | Consultant fees (11 months) | | Co-ordinator in place to run project to compile a report reviewing existing status quo of TB/HIV programmes with a focus on human rights gaps | Co-ordinator in place | Quarterly report | Michaela, Paula | Feb / March | Consultant (Khairunisa Suleiman) appointed and commenced work on 15 March. | - |

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| 2.2.9 Appointment of programme officers (1 each in Swaziland and Botswana) | 2 programme officers consultant fees (Botswana and Swaziland) | | Programme officers in place to assist with compilation of TB and human rights policy and programme analysis report | Programme officers in place | Quarterly report | Paula and Khairunisa | | Project officers in Swaziland and Botswana recruited; MoU with host organisations finalised. | - |
| 2.2.10 Training workshop on documentation | Staff time, travel, accommodation | | Coordinator, officers and data collectors trained on formal research; questionnaire and work plans developed | Country plans, workshop report | Workshop Report, correspondence | Coordinator and country officers | April | 2 Project Officers and other staff from both partner organisations (3 from Botswana and 2 from Swaziland) convened at a training workshop on TB and human rights as well as formal documentation skills from 12 – 15 July 2011 in Johannesburg. The workshop was successful and lessons learnt have aided the identification of two research sites per country. Work plans were also developed and/or finalised during this workshop. | - |
| 2.2.11 TB/human rights policy and programme analysis documentation phase | Staff time, travel to Botswana and Swaziland for coordinator (2 trips of 5 days per country): flights, accommodation; in-country accommodation for officers (2 trips of 5 days each) | | Interviews at facilities conducted; case studies compiled; key gaps identified | Interview reports form facilities, case studies | Correspondence | | May- November | Activity not completed as documentation was delayed while awaiting approval of research permits in both countries. | During the first quarter of 2012, the Coordinator will undertake the research in the respective countries. |

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| 2.2.12 Report writing, launch to share findings and advocacy recommendations | Communication, staff time, design and printing (incl. pamphlets) and launch | | Findings shared with key stakeholders and the broader public, partners supported to develop long-term recommendations | Report, media articles, advocacy plans for moving ahead | Website, media, correspondence | | December-March2012 | Activity depends on the outcomes of activity 2.2.11, which will be completed during the first quarter of 2012. | The report writing will commence once the research has been conducted, early in 2012. The launch of the report is scheduled for June 2012. |
| 2.2.13 Support country advocacy program- Swaziland (SWAPOL) | Country support grant | | Country partners supported with technical guidance to implement advocacy activities | SWAPOL able to identify advocacy issues; develop advocacy plans; and implement advocacy activities | Progress reports; Meltwater news; media clippings | Lynette, Paula, Jacob, Boniswa | Jan - Dec | ARASA provided technical support to SWAPOL during the implementation of activities in 2011. SWAPOL has formed coalitions within the country to collaborate on advocacy efforts around human rights, funding for health and access to medicines. They conducted 60 community dialogues in the four regions of the country, reaching 1109 people (827 women and 282 men). They also facilitated treatment literacy and advocacy trainings for 638 people. The Treatment Literacy Practitioners continued to mobilise their communities for treatment access through visits to schools, clinics, community gatherings and other community meetings, reaching 8,567 people (5,652 women and 2,854 men) across the country. SWAPOL co- | - |

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| | | | | | | | | hosted a stakeholder meeting to discuss the funding crisis faced by the HIV response and many NGOs in the country. SWAPOL, in collaboration with the treatment coalition, conducted a fact finding study to assess the impact of the economic crisis on treatment access in public health facilities in Swaziland and to document evidence in order to further the <i>'funding for health'</i> advocacy agenda. Interviewed 143 patients and 27 health care workers in 31 health care facilities across the country. SWAPOL convened a dialogue attended by 40 participants to share the findings and to forge a way forward with the treatment and <i>'funding for health'</i> agenda. In commemoration of World AIDS Day, SWAPOL and partners held a mass mobilisation event, including a march. See narrative report for further detail. | |
| 2.2.14 Support country advocacy program- Mozambique (Muleide) | Country support grant | | Country partners supported with technical guidance to implement training and | MULEIDE able to facilitate trainings at national and regional levels; identify | Progress reports; Meltwater news; media clippings | Lynette, Paula, Jacob, Boniswa | Jan - Dec | The contract with MULEIDE has been signed, a work plan and budget developed, and funds disbursed. The | - |

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| | | | advocacy activities | advocacy issues; develop advocacy plans; and implement advocacy activities | | | | | coordinator has been recruited and commenced on 1 March. ARASA provided on-going technical support for the implementation of activities in Mozambique. The first training for 25 participants was conducted from 5 – 9 September in Maputo; 20 participants were selected to be Community Health Advocates in Mozambique. The advanced training was held from 17 to 21 October and attended by 20 people from the initial 25. A regional training was also held from 28 November to 2 December 2011 with 21 participants. |
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2.3 Enhanced civil society mobilisation to advocate for human rights for most at risk populations in the context of HIV/TB in SADC

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| 2.3.1 Develop & print the ARASA 'Equal Rights for All' Manifesto | Staff time, 500 copies | | Partners/ stakeholders have common manifesto for effective LGBTI rights advocacy; Partners sensitised to mainstream LGBTI rights in their HIV & human rights advocacy work | # of partners/ stakeholders consulted, # of manifesto copies distributed, # of partners adopting the manifesto | Meltwater, quarterly reports | Lynette, Gillian | March – ongoing | In 2010, ARASA consulted with 10 partners and 40 stakeholders during the development of the Manifesto. In 2011, consultations were held with 'mainstream' HIV and human rights organisations and LGBTI-led organisations on best ways to form partnerships. 6 ARASA partners were chosen as focal point partners | A workshop will be held in January 2012 for LGBTI and 'mainstream' HIV and human rights organisations to discuss ways in which they can support one another in-country, while receiving technical support from the ARASA team. |
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| | | | | | | | | (BONELA, DPE, Friends of RAINKA, CEDEP, CHRR, and ZLHR). The 'Equal Rights for All' manifesto remains online on the ARASA website for download by partners. No hard copies were printed due to the extensive research and partnership building that was required in order to strengthen national level partnerships between mainstream HIV/TB and LGBTI-led organisations for joined activities. | |
| 2.3.2 Facilitate community dialogues on 'Equal Rights for All' | <p>Staff time, communications costs</p> <p>Focus countries: Botswana, Zimbabwe, Swaziland, Malawi, Lesotho</p> <p>2 community dialogues in each country/ 50 participants per dialogue</p> <p>Material production: 1500 double sided A4 page flyer</p> <p>Hire of venue, meals (day-long dialogues)</p> | | Communities sensitised on the rights of LGBTI as well as human rights challenges affecting these groups | # of community dialogue meetings held, # of partners participating in the dialogue meetings; # of community members participating in dialogues | Meltwater, quarterly reports | Lynette, Gillian, Paula | March | <p>Following consultation with various partners, it was agreed that community dialogues would not be possible or effective in many countries and that focus should be placed rather on building strong partnerships between mainstream and LGBTI-led organisations and also on sensitising parliamentarians on this issue and on the impact of punitive laws on public health. The Advocacy Team has been working with mainstream and LGBTI organisations in countries such as Botswana, Lesotho,</p> | A workshop will be held in January 2012 for LGBTI and 'mainstream' HIV and human rights organisations to discuss ways in which they can support one another in-country, while receiving technical support from the ARASA team. |

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| | | | | | | | | Zambia and Mozambique in an effort to strengthen their in-country partnerships. SADC PF has also been approached with a view to working with them on convening a workshop for parliamentarians in 2012. See also activity 2.3.1 | |
| 2.3.3 Develop LGBTI organisations/ networks database | Staff time, Database development consultancy cost | | Detailed information about organisations/ networks involved in LGBTI advocacy readily available in the region | # of organisations/ networks in the database, # of organisations using the database; # of downloads of the database | ARASA Website | Lynette | Jan- June | Consultations have been held with national partners to identify existing LGBTI groups in the various SADC countries. ARASA has also been consulting with 'mainstream' HIV and human rights organisations and LGBTI-led organisations on best ways to form and strengthen partnership between the two groups at the national level. | In 2012, a database will be developed based on the outcomes of the partnership building exercise. |
| 2.3.4 Develop online capacity building library on LGBTI rights advocacy | Staff time, communications | | Public resource available for partners to sensitise the public on LGBTI rights in the context of HIV | # of resources in the library, # of downloads of the online resource, # of organisations using the online resource for programming, training and advocacy | Meltwater, ARASA website, quarterly reports | Lynette, Paula | March – ongoing | Activity is on-going with country specific best practices being gathered, especially around community-based interventions. The information, as well as best practice case studies collected from partners, will form part of the on-line capacity building portal for advocates around the region. 4 resources have already been | The online library will be further populated in 2012 with information that is relevant to partners working on LGBTI rights issues. |

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| | | | | | | | | uploaded on the website. The main focus will be to build the capacity of mainstream civil society organisations on LGBTI rights in order to support the building of sustained partnerships with LGBTI-led organisations at the national level. | |
| 2.3.5 Launch the 'Equal Rights for All' campaign on the international Day Against Homophobia | Staff time, communications, venue and refreshment costs for 50 pax and travel to Johannesburg and 3 days per diem for 2 ARASA staff | | Partners mobilised to mainstream LGBTI rights in the HIV response; media sensitised on human rights abuses against LGBTI, public debate on LGBTI rights catalysed. | # of media statements released, # of media articles and other coverage, launch of the 'Equal Rights for All' manifesto | Meltwater, ARASA website, quarterly reports | Lynette, Paula, Gillian | May | See activities 2.3.1 and 2.3.2. Launch halted as research and consultations on how to improve advocacy materials and to integrate this issue with the broader 'Right to Health' focus were being conducted. (See activity 2.1.1). In addition, some of the focus countries chosen for the launch (Malawi; Swaziland etc) experienced civil unrest, with some countries, such as Malawi, attributing a demand for protection of LGBTI rights as a contributing factor for the civil unrest. | A workshop will be held in January 2012 for LGBTI and 'mainstream' HIV and human rights organisations to discuss best ways in which they can support one another in-country, while receiving technical support from the ARASA team. |
| 2.4 Strengthen CSO networking for human rights and TB/HIV advocacy in SADC | | | | | | | | | |
| 2.4.1 Develop and print country posters for the APF | 15 Posters Poster design x 15, Poster printing x 15, communication, staff time | | ARASA partners are able to more effectively share information on the status of human rights and HIV in their country for | # of posters produced by partners | Meltwater, ARASA website, APF Report | Paula, Lynette, Gillian, Michaela, Felicita | September – November | The development of the country posters was revisited and a decision was taken to produce a Partner and Country report booklet, distributed during the | The booklet will be available on the ARASA website in early 2012. |

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| | | | improved advocacy and knowledge sharing | | | | | APF. Partners worked in 7 country-based groups to submit updated information on the legal and policy environment in their countries and to highlight the advocacy interventions they are engaging in to address human rights challenges at the national level. | |
| 2.4.2 ARASA Human Rights Award Prize | Communications, staff time, award purchase | | Champions in advocacy for human rights & HIV are acknowledged and supported | Award winner identified, # of nominees | Meltwater, ARASA website, APF Report | Paula, Lynette, Gillian, Michaela, Felicita | June- Nov | A call for nominations was issued in October. Four nominations were received. On 24 November, Swaziland Positive Living (SWAPOL) was awarded the 2011 ARASA HIV, TB and Human Rights Award. | The US\$ 10 000 grant, which accompanied the award, will be processed in 2012, following the submission of a work plan and budget by SWAPOL. |
| 2.4.3 Convene the ARASA APF | Communications, Staff time, Participant costs (flight, accommodation); venue costs; | | ARASA partners are able to share knowledge for improved advocacy, capacity building and networking | # of participants, # of info materials distributed, # of donors attending APF | Meltwater, ARASA website, APF Report, quarterly reports | Paula, Lynette, Gillian, Michaela, Felicita | November | The 2011 APF was held from 23 to 24 November in Johannesburg, South Africa. The APF was attended by all 53 ARASA partners. 2 donors attended the meeting. Amongst others, CDs with materials, presentations and pictures of the APF were distributed to the 62 participants. | In 2012, the ARASA team will focus on the following advocacy priorities identified by the partners: (i) working with the Working Group on the Rights of People Living with and Vulnerable to HIV and AIDS that has been established by the African Commission for Human and People's Rights; (ii) expanded access to prevention services including pre-exposure prophylaxis and treatment as prevention (iii) Criminalisation of HIV transmission and exposure; promoting the SADC model law and ensuring that a more countries adopt the good provisions in the model law; and (iv) funding for health as the overarching |

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| 2.5 Enhanced civil society awareness of human rights abuses in the context of HIV/AIDS in SADC through information dissemination | | | | | | | | | |
| 2.5.1 Develop and distribute 3 fact sheets on HIV and rights (right to health, sexual orientation, condoms in prisons) | 3 Fact sheets (3000 copies total): design costs, colour printing x 3000 (1,000 copies of each), | | ARASA partners have reference information for effective advocacy on HIV and human rights | # of fact sheets produced/ distributed, # of partners using the fact sheets in their advocacy activities | ARASA website, quarterly reports | Lynette, Gillian | March-May | Activity is on-going as the team consults on the various issues, target audiences and messaging techniques that will have the most impact as part of the broader 'right to health' campaign. See also activity 2.1.1.1. | In 2012, innovative 'right to health' materials, covering themes such as sexual orientation, condoms in prisons etc will be integrated into existing ARASA resources to guide the development of fact sheets and other materials on these themes. |
| 2.5.2 Develop and distribute a regional report on access to condoms in prisons | 1000 copies : Staff time, design, printing (20 page A5 booklet), | | Enhanced regional awareness on the need for HIV prevention (through access to condoms) in prisons | Report produced, # of copies distributed; # of articles and other media coverage on report; # of partners using / quoting report in their advocacy | Meltwater, ARASA website, quarterly reports | Lynette, Gillian | Oct- Nov | Activity not completed as consultations were ongoing on how to integrate this issue into the broader 'right to health' campaign. | See activity 2.5.1 |
| 2.5.3 Develop, manage and update the ARASA website | Staff time, communications, 12 months Website hosting subscription, website technical support consultancy costs | | Enhanced knowledge and information sharing on human rights, HIV and TB issues and ARASA activities among ARASA partners and stakeholders | # of updates posted, # of website visitors, | Quarterly reports, ARASA website | Lynette, Gillian | Jan – ongoing | The activity was challenged by the non-renewal of the contract of the Communications Coordinator due to performance-related issues. However, the 'Funding for Health' Consultant updated the website on an ad hoc basis. There were 66014 visitors to the arasa.info website during 2011. | ARASA will recruit a Communication Officer early in 2012 to undertake this work. |

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| 2.5.4 Produce and distribute the Annual ARASA HIV, TB and Human Rights report | Staff time, (consultant costs), communication, printing | | Enhanced regional awareness on the status of HIV and human rights TB | Final report produced, # of copies distributed; # of media articles or other coverage on issues raised | Meltwater, ARASA website, quarterly reports | Paula, Lynette, Consultants | March - ongoing | Consultants were commissioned in November to undertake this work. The TOT assignments from 2010 and 2011 have been forwarded to the consultants. The delay in the appointment of consultants to update the report was caused by a shortage of funds which was only remedied in October. | The activity will be completed by June 2012. |
| 2.5.5 Produce/ distribute 4 ARASA quarterly newsletters | Staff time | | Enhanced knowledge and information sharing on human rights, HIV and TB issues and ARASA activities among ARASA partners and stakeholders | # of quarterly newsletters produced annually, # of recipients of the newsletter, # of partners contributing to the newsletter articles | copy of the newsletter, ARASA Website, quarterly reports | Lynette, Gillian | March – ongoing | One newsletter was developed. However its finalisation and distribution were challenged by the non-renewal of the contract of the Communications Coordinator due to performance-related challenges. | ARASA will recruit a Communication Officer early in 2012 to undertake this work. |
| 2.5.6 Develop, manage and update social networking pages on the internet | Staff time | | Enhanced knowledge and information sharing on human rights, HIV and TB issues and ARASA activities among ARASA partners and stakeholders | # of social networking pages created, # of site visitors, # of advocacy issues discussed on the sites | Quarterly reports, ARASA website | Lynette, Gillian | Jan - ongoing | This activity was challenged by the non-renewal of the contract of the Communications Coordinator due to performance-related issues. However, the 'Funding for Health' Consultant updated the social networking pages on an ad hoc basis. ARASA has 299 friends on the Facebook page and 104 followers on Twitter. | ARASA will recruit a Communication Officer early in 2012 to undertake this work |
| 2.5.7 Produce/ distribute media | Staff time | | Enhanced regional | # of media briefs produced, # of | Meltwater, ARASA website, | Lynette, Paula, Gillian | Jan – ongoing | This activity was challenged by the | ARASA will recruit a Communication Officer early |

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| briefs (Op eds, blogs, media articles, statements etc) | | | awareness on HIV , TB and human rights issues and ARASA activities | media houses covering the briefs, # of partners contributing to the media briefs; # of media articles and other coverage on issues in the brief | quarterly reports | | | non-renewal of the contract of the Communications Coordinator due to performance-related issues. However, 7 Press statements on criminalisation of same sex relations in Malawi (issued in February); intimidation of Malawian civil society (signed by more than 70 CSOs) issued in March; African CSO position on the universal access review (covered by 3 newspapers and 2 radio stations) issued in April; 2 statements on TB and mines; and 1 on APF and award; and 'Right to Health' on Africa Day, 25 May, Africa Day; Also in May, ARASA drafted a position paper, highlighting various human rights challenges in Malawi. ARASA was featured in 45 media articles during 2011. | in 2012 to undertake this work. |
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| 2.6 Strengthen advocacy representation of the ARASA partnership at regional and international forums | | | | | | | | | |
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| 2.6.1 Represent the ARASA / Conduct advocacy campaigns at strategic regional/ international platforms | Staff time, travel and accommodation costs | | Decision makers are lobbied on health rights issues during key meetings | # of presentations delivered, # of decision makers at meetings, # of regional/ international meetings attended | Meltwater, ARASA Website, Quarterly reports | Lynette, Paula, Gillian, (Focal point partner), Michaela (UN Reference groups), Felicitia (PCB) | Jan-ongoing | ARASA was represented on at least 20 different regional and international forums during 2011. Amongst others, ARASA was represented during 3 civil society pre-meetings and the Africa wide | - |

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| | | | | | | | <p>consultation in preparation for the UN General Assembly High Level Meeting (HLM) on AIDS; the HLM itself; the South African AIDS Conference; 16th International Conference on AIDS and STI's in Africa (ICASA); Africa Regional Consultation on Treatment 2.0; the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria (Global Fund) and Human Rights Meeting and Global Commission on HIV and the Law Dialogue for Africa. In addition, ARASA was represented on the UNAIDS Human Rights Reference Group; advisory board of the International HIV/AIDS Alliance Africa Regional Programme; UNAIDS Programme Coordinating Board; and Regional African AIDS NGO's Forum (RAANGO). Further detail on the representation of ARASA at different platforms is available in the narrative report.</p> |
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OUTCOME 3: ARASA PROGRAMME MANAGEMENT ENHANCED FOR EFFECTIVE IMPLEMENTATION OF ACTIVITIES (PROGRAMME MANAGEMENT/ OPERATIONS)

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| 3.1 Develop 2011 M&E Plan for ARASA programmes (incl. country support guidelines) | Staff time, consultancy services | | ARASA staff, country partners and small grantees have guidance on planning, implementation reporting and evaluation of activities | # of guidelines developed, # distributed, # of coordinators, country partners and grantees using the guidelines | Copy of the guideline document | Alan, Maggie, Felicita | February | 2011 M&E plan including work plan and reporting framework / guide were developed and shared with staff and partners. Both partners implementing ARASA country programmes as well as the 11 grantees consistently used the guidelines for the reporting | - |
| 3.2 Develop programme monitoring and evaluation database | Staff time, consultancy IT & Website services | | Database available for live updating and ease of coordination for report development | Database in place, # of coordinators updating the database, # of reports based on the database | Copy of the database, progress reports | Alan, Maggie, Felicita | March - ongoing | Starting January, data and reports on the implementation of activities were captured electronically in a folder by M&E officer. | - |
| 3.3 Develop ToR and commission consultant(s) for Mid-term review of ARASA activities based on current Strategic Plan (including impact evaluation of completed country programmes) | Staff time, consultant fees | | ARASA activities (inc. Country programmes) assessed for continuous improvement | # ToR developed; Consultant(s) commissioned | ToR, Consultant contract, evaluation report | Alan, Felicita Michaela | Feb-ongoing | The TOR has been developed and a call for expressions of interest issued. The delay in the call for expressions of interest was caused by a shortage of funds, which was only remedied in October. Initial expressions of interest received were not satisfactory and the call was re-advertised in October. 5 Proposals were received in November. In December, Singize Consulting was appointed to conduct the external evaluation. | The evaluation will be conducted during the first quarter of 2012. |
| 3.4 Coordinate continuous monitoring of the | Staff time | | Programme activities tracked to facilitate timely | # of monitoring updates, # of follow up emails | Copies of Progress reports; emails | Alan, Maggie, Felicita, Paula, Jacob | Jan - ongoing | Coordinators have been receiving support to monitor | - |

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| implementation of activities | | | and effective implementation | with coordinators | | | | the progress of their activities through weekly staff calls (about 30 total for the year). The monthly universal activity calendar that was developed in January and activity completion forms were updated by the M&E officer. | |
| 3.5 Coordinate development of 4 quarterly progress reports | Staff time | | 4 Quarterly progress reports produced and distributed to staff, donors and trustees in a timely manner for decision making and continuous improvement | # of reports produced and distributed | Copies of the reports | Alan, Felicita | Jan Ongoing | 4 quarterly reports were developed between January and January 2012. | - |
| 3.6 Conduct a mid-year work plan review | Staff time | | ARASA staff review activities implemented in the 1 st half of the year to plan more effectively for the 2 nd half | # of meetings / calls, # of participants 1 work plan review meeting with all staff | Meeting minutes, Progress reports | Alan, Michaela, Felicita | July | A review meeting with all staff was held in August and attended by 10 staff and 2 consultants. | - |
| 3.7 Provide M&E related technical support to ARASA staff, grant recipients and partner | Staff time | | ARASA staff, grant recipients and partners receiving technical support for effective planning, implementation of activities | No of technical support phone calls/ emails | Progress reports | Alan, Maggie | Jan - ongoing | M& E related technical support was provided to staff and partners (at least 3 phone calls/ 6 emails) on an on-going basis. Amongst others the Training programme was support during the development of baseline tools for the ToT. Support was also provided for the development of the small grants score cards, refining small grants M&E | - |

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| | | | | | | | | framework and reporting tools as well as developing M&E presentation for the PIW workshop and TOT. | |
| 3.8 Coordinate end of year work plan review and planning meeting | Staff time | | ARASA staff are able to share experiences and plan for the following year | # of meetings, # of participants | Meeting minutes/ action points, Progress reports | Michaela, Felicita, Maggie | November | The work plan review and annual planning meeting was held from 21 to 22 November in Johannesburg, South Africa. The meeting was attended by 11 staff and 2 consultants. | The 2012 work plan will be finalised in January / February. A face-to-face staff meeting is scheduled in January to finalise the work plan. |
| 3.9 Finalise operational procedures manuals (Financial Management Policy) | Staff time | | ARASA staff, country partners and small grantees have guidance on financial management and operational aspects of ARASA financial support | Operational policy in place | Copy of the operational policies | Rudolf, Michaela, Felicita | June | The Policy Manuals were discussed during the August work plan review meeting. Staff provided written comments on the policies in October. This input was discussed during the planning meeting in November. | During the first quarter of 2012, the policies will be revised to reflect staff comments and input where this comment and input is in line with Namibian and South African labour law. |
| 3.10 Conduct weekly programme management meetings | Staff time | | ARASA staff are able to share experiences and coordinate implementation of activities | # of meetings, # of participants 34 programme management weekly meetings were held during the period of January to October 2011 | Meeting minutes, Progress reports | Michaela, Felicita, Maggie, Jacob, Boniswa, Paula, Lynette, Gillian, , Rudolf, Loide, Lisias) | Jan Ongoing | About 30 weekly staff calls were facilitated during the year to support programme management. The weekly meetings have been well received by staff and have greatly enhanced internal communication. | - |