



# **Training of multi-sectoral AIDS committees in Tanzania**

*Project: „Supporting TACAIDS in `Strengthening Capacity of the Council Multisectoral AIDS Committees`*

*to*

*Implement Multisectoral Strategies on HIV/AIDS through Effective Use of GFATM and Other Funds“*

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am Universitätsklinikum Heidelberg



# GTZ **BACKUP** Initiative



Building Alliances – Creating Knowledge – Updating Partners in the Fight against HIV/AIDS, Tb and Malaria

**Purpose:** to support partner countries to progressively exploit the opportunities provided by the GFATM and other related initiatives

## **Results:**

1. Country Co-ordinating Mechanisms strengthened
2. National and international partnerships strengthened
3. Skills and knowledge of involved stakeholders improved
4. M&E tools developed and applied

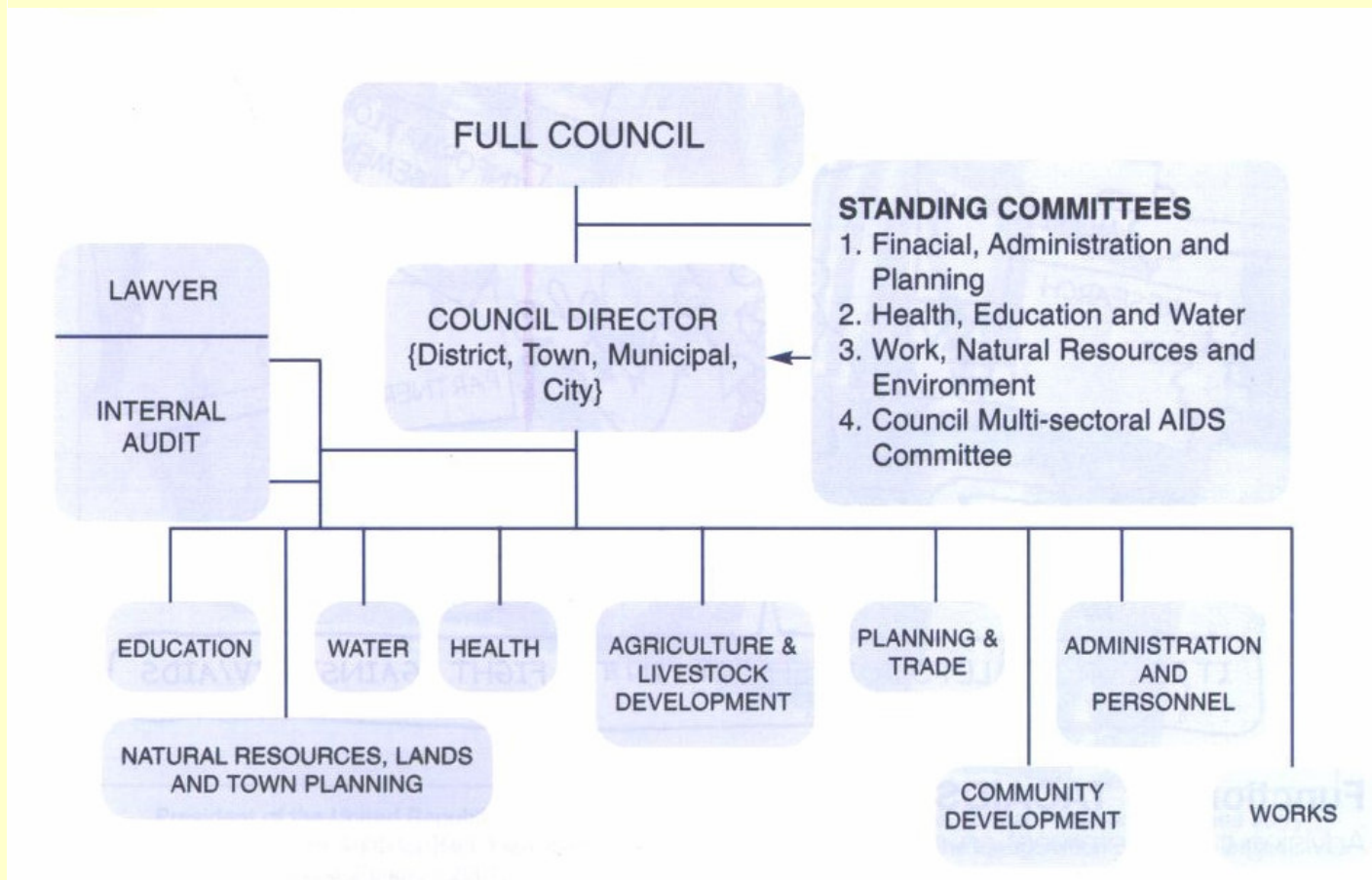
## GTZ financed measure: 25 Mio Euro

**Multilateral Component:** partnerships with UNAIDS-WHO-ILO  
...and others (Financial support and secondments (5))

**Bilateral Component:** Country driven support to partner organisations



## Local Government Administration



# CMAC Participants

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## *Members*

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District Deputy Chairperson	1
District Executive Director	1
Elected Member of Parliament	1
Ward Councilors (1m, 1w)	2

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## *Invitees*

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AIDS Coordinator	1
Religious Representatives (1 Muslim, 1 Christian)	2
Youth Representatives	2
PLHA (1w, 1m)	2
Representative from a Network of NGOs	1
Representative from other Relevant Sectors	1

# Responsibilities of CMACs

- To supervise formation of AIDS committees (at ward and village level)
- To evaluate the real AIDS situation
- To evaluate different stakeholders
- To involve the community and other stakeholders
- To coordinate, monitor and evaluate AIDS plans and their implementation

# Our Specific Objectives

- To strengthen capacity of CMACs: Curriculum development -training manual- quality assurance of training
- To strengthen partnership to make better use of GFATM resources and initiatives
- To assist in the development and application of M&E tools for training and in quality assurance
- Creation of a network of national and international training institutions

# Partners & Stakeholders

(selection)

- PORALG
- TACAIDS
- MoH
- LGA
- CMACs
- Zonal Training Centres
- Muhimbili University
- Mzumbe University
- GTZ
- WB
- UNAIDS
- AMREF
- WHO
- CARE
- TANESA
- Irish Aid



# Methods & Process

Phase I: 3/2003- 5/2004

1. Stakeholder & (good practice analysis)
2. Training needs assesement
3. Participatory workshops („advocacy“)
4. Curriculum and module development  
→ training handbook & training concept
5. Fund raising activities (e.g.WB)
6. Creation of a team of National Trainers (50)-ToT
7. Training of 121 CMACs country-wide
8. Quality assurance

# Methods & Process

Phase II: 3/2004-8/2005

- Quality assurance
  - baseline assessment
  - evaluation of CMAC training
  - ToT, Coaching of CMACs
  - revision of CMAC training manual
  - training handbook for ward level
- Lessons learned: methodology, procedure, results
- Regional conference - Network

# Training Handbook - 10 Modules

- Advocacy
- Basic Facts, Prevention and Control of HIV/AIDS
- Sociocultural Factors and Concepts
- Team Building, Leadership and Partnership
- Resource Management
- Participatory HIV/AIDS Planning
- Participatory Monitoring and Evaluation
- Proposal Writing and Assessment
- Report Writing
- Communication and Facilitation

# Challenges I

- Mapping of different interests
- Competitive setting
- Clarification of roles, tasks and duties
- Participation *versus* efficiency
- „Ownership“ → steering → product quality
- Copyright

# Challenges II

- Network of national trainers/institutions
- Inclusive vs exclusive (stakeholders)
- Cooperation - Co-funding (WB, Irish Aid)
- „Intellectual ownership“
- Scope of the training (>2400 trainees)
- Sharing the experience

# Added Value for the University

- Development and implementation of training courses
- Operational research: e.g. quality assurance
- „Best practice“ → model for training approaches in different subject areas and other countries
- Update and vitalize our international postgraduate courses and graduate teaching at the medical school
- Strengthen partnerships with academic institutions and development agencies