

1. Small Investments, Big Results: Building the capacity of community based organizations for improved provision of HIV and AIDS services in low income settings

Background

Community based organizations (CBOs) play a critical role in the provision of essential health services in Nigeria. However, most of these organizations lack the capacity to carry out their roles and responsibilities effectively. Management Sciences for Health (MSH), through Nigeria's USAID-funded PLAN-Health Project, has developed an intervention to systematically build the capacity of these organizations to ensure strategic improvement in service delivery.

Methods

The PLAN-Health strategy is a three stage process: 1) capacity gap assessment, 2) intervention design, and 3) capacity building. Essential capacity gaps are identified using the organizational system assessment tool OSSAT. Assessment findings are used to design tailored interventions based on organizations' unique needs. Knowledge and skills for performance improvement are built through continuous capacity building using a variety of approaches including technical assistance, coaching and mentoring, workshops, embedded consultants, short internships, and study tours. Using this strategy over a one year period, PLAN-Health systemically built the capacity of Jumorota and Lawanti Community Development Foundations, two CBOs that provide comprehensive HIV and AIDS services in northern Nigeria.

Results

A pre- and post-evaluation using the organizational system assessment tool showed improvements in seven key organizational systems: Planning, M&E, governance, financial management, revenue generation, quality assurance, and information management. Utilizing these improved systems, Lawanti increased by 110% the number of women attending ANC increased by 15% the number of women who deliver in the health facility. In Jumorota there was a 2000% increase in the number of orphans and vulnerable children reached and enrolled into care; as well as an 11% increase in the number of out of school youths provided with basic skills for economic empowerment. Jumorota also recorded a 45% increase in the number of care givers economically empowered.

Conclusions

Capacity-building of CBOs is a critical step in health systems strengthening. More focus should be placed on hands on, client driven capacity building to ensure improved provision of HIV and AIDS services in resource poor settings like Nigeria.

2. Overcoming challenges of coordinating the National HIV response; lessons from the development of coordination framework for the health sector response to HIV and AIDS in Nigeria.

Background

Implementation landscape in Nigeria is rapidly expanding on the background of heavy burden of HIV and AIDS. More indigenous and development partners are getting involved thus posing severe threats to effective coordination and partnerships. PLAN Health supported the National AIDS and STD Control Program in Nigeria to develop a coordination framework that will articulate and unify existing structures and practices, as well as define mechanisms of engagement with all stakeholders including roles and responsibilities in the health sector response to HIV/AIDS in Nigeria.

Methods

The National AIDS and STD Control Program is an arm of the Department of Public Health in Nigeria responsible for health sector response to HIV in Nigeria. A gap analysis of the effective and efficient implementation for the HSSP (2010-2015) was organized by NASCP in July 2011, involving diverse stakeholders in the health sector response in Nigeria. The results of this gap analysis led to the development of a coordination framework for the health sector response to HIV. It involved desk review, wide stakeholder consultations and technical meetings to build consensus and to develop the framework.

Results

Our gap analysis revealed that health sector response is faced with severe challenges of duplication; unclear leadership; cross purposes; massive loss of scale; missed opportunities; waste of resources; and heavy administrative burden. Eight (8) coordination platforms and nine (9) Task Teams/Technical Working Groups were formed towards strengthening stewardship, information sharing and partner coordination at all levels of governance. The framework also aligned all health sector responses with the health sector strategic plan to ensure consistency in government policies and standards, by which the health sector response is managed.

Conclusions

The National Coordination Framework for the health sector response to HIV in Nigeria was developed based on need through wide stakeholder participation. It contains coordination platforms that have great potential to overcoming major impediments to progress in HIV and AIDS service provision in Nigeria if effective mechanisms to monitor and review their implementation are properly managed.