

# 2016 Independent evaluation of the International HIV/AIDS Alliance Strategy: *HIV, Health and Human Rights: Sustaining Community Action* 2013-2020 Management response

## 1. Introduction

The International HIV/AIDS Alliance (Alliance) strategy was developed in 2013 (and updated in 2016) through wide consultation with Alliance Linking Organisations (LOs) and partners, and was approved by our international board of trustees. It provides direction and sets goals for the whole Alliance. LOs use it – together with their own national plans – to shape their strategies, and the international Secretariat uses it to develop an operational plan. The strategy covers the period 2013-2020, with medium term targets set for 2015. In 2015 we updated our strategy and results framework for 2016-2020 to reflect changes in the external environment and learning from the first three years of strategy implementation.

In 2016, the Alliance commissioned [IOD PARC](#) to undertake an independent evaluation of its updated global strategy: [HIV, Health and Human Rights: Sustaining Community Action, 2013-2020](#).

This evaluation was both an end-line review of the 2013-2015 results framework, and to inform the next three years of our strategy and the 2016-2020 framework. The objectives of the evaluation were to:

- Review progress against selected outcome indicators:
- Review progress on priority cross-cutting thematic areas (relevance, effectiveness, learning and accountability, gender, shared leadership and partnership, value for money and sustainability)
- Provide pragmatic recommendations to help us achieve our strategy by 2020.

This document is the Alliance's management response to the evaluation. A summary of the evaluation report is on the Alliance website and the full report is available on request.

## 2. Quality of the evaluation

The Alliance conducted an internal assessment of the evaluation using the BOND checklist for assessing the quality of evidence<sup>1</sup>. The evaluation scored highly, especially in terms of the appropriateness of the approach, triangulation of the data and the transparency of the process and analysis. This gives us confidence in the validity of the evaluation findings.

Some of the limitations of the quality of evidence were due to the timing and context of the process and the type of evaluation (of a global strategy rather than a specific intervention). We recognise that we only selected a specific range of outcomes and cross-cutting themes associated with the strategy to be evaluated. This means the evaluation is not necessarily representative of all priorities contained in the Alliance's global strategy.

Due to the budget available for the evaluation extensive primary data collection was not possible. However focus groups of beneficiaries were conducted in Uganda and Cambodia and a review of research and

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<sup>1</sup> [https://www.bond.org.uk/effectiveness/monitoring-and-evaluation#evidence\\_principles](https://www.bond.org.uk/effectiveness/monitoring-and-evaluation#evidence_principles)

evaluation reports featuring primary data was undertaken. The evaluators were only able to visit two countries where the Alliance works. This might mean that findings from those countries are not necessarily representative of work across the Alliance. However the evaluation team made considerable efforts to interview staff from other LOs across the world to balance this.

Ideally beneficiaries and staff from Alliance LOs would have been involved in the design of the evaluation process however budget and time constraints meant this was not possible. We appreciated the commitment of the evaluation team in presenting back the preliminary findings at the end of the country visits, and sending a country specific report to the LOs in the two focus countries. The draft findings of the evaluation were presented to the Secretariat for validation and discussion before the report was written and there were opportunities for two rounds of feedback on the draft report.

The Alliance Secretariat was undergoing a restructure at the time of the evaluation data collection which limited the ability of some key staff in the evaluation process, and may have missed valuable perspectives. Small workshops were held instead of interviews, and some ex-staff volunteered to be interviewed by the team to try mitigate this.

### 3. Our response to the evaluation

The Alliance welcomes the evaluation and its recommendations. The analysis, conclusions and recommendations are well argued and provide a useful basis for action. It has given us confidence that we are progressing well in some areas, and highlighted / affirmed other areas of strategy implementation that still require more effort and time. The evaluation process itself was very useful in providing the space for open reflection and discussion amongst staff.

We are delighted that the evaluation team felt the Alliance has achieved:

- A successful approach to capacity building: with capacity building activities that have impacted on LOs who in turn invest in building the capacity of community based organisations (CBOs) and networks. These organisations become able to take on projects and other activities. The model is effective and has demonstrated positive results.
- Programme documentation and research that strongly indicates that the Alliance's work has contributed to significant positive changes in people's lives.
- A strong focus on key populations with clear evidence that interventions are targeted towards key populations
- Working at multiple levels of engagement- with community based organisations and with people living with HIV as leaders at global level to influence international organisations and the SDGs
- Genuine commitment to Southern leadership and a high degree of ownership of the strategy across Linking Organisations

We also agree with the analysis of challenges the Alliance's faces, such as changing donor priorities and the decline in HIV specific funding. This is a challenge we are taking very seriously as we develop new ways to diversify our income.

The evaluation also noted the huge challenges faced by key populations in many parts of the world where they are criminalised, marginalised and face high levels of stigma. We appreciate that the evaluation concluded that this is a challenge that the Alliance deals with particularly well through innovative and effective approaches.

We note that the evaluation raised concerns about how the Alliance will maintain a focus on HIV as LOs increasingly adapt and diversify due to the changing funding environment and their national contexts. The Alliance has always recognised the diversity of LOs and the work they do beyond HIV; we do not see this necessarily as a new trend. We see this as a strength that brings a diverse experience to the Alliance: helping us to remain focused on a people centred approach and relevant to national contexts, whilst uniting in our efforts to end AIDS. HIV is the lens through which other health, development and rights issues are addressed within the context of the Alliance. While we have to continuously re-think and be alert to changes in the external environment and within the changed global framework of the Sustainable Development Goals, we see our value is in keeping HIV on the agenda and to leverage HIV to address the structural issues that create obstacles to equitable development.

In terms of the sustainability of our programmes we acknowledge that in the specific example given in the report there may have been some lost opportunities in collaborating with partners to jointly fundraise for follow-on funding to a programme. Sustainability is very important to us and we have been able to secure funding for the African LOs funded through Link Up to continue some of the work on sexual and reproductive health and rights (SRHR) and adolescents. We have also been actively lobbying with donors to recognise the need to continue funding integrated HIV and SRHR interventions, although the reinstatement of the Global Gag rule is going to make this harder.

## 4. Response to the evaluation recommendations

### 4.1 Develop a tool to consider the intended results in the Strategy

Whilst our results framework has been very useful for the Alliance's strategic donors, we agree that our results framework needs to better align with our theory of change and strategy.

As a 'second tier' organisation where both the Secretariat and LOs are supporting implementing partners and are not necessarily directly implementing programmes themselves it can be difficult to capture and measure our impact- especially qualitatively. At such a high level the Alliance strategy results framework is only a partial gauge of progress in pursuing our mission. A minimal number of indicators are used to decrease the burden and costs of data collection. As the evaluation identified, the challenge of translating complex processes into a core set of indicators carries the risk of not fully capturing the Alliance's achievements and progress. In many cases proxy indicators need to be used when direct measures are difficult to articulate or expensive to collect at a global level.

We recognise that the results framework in its current format does not provide the Alliance with as much useful data from which to learn and improve as we would like. Whilst much of the data we collect is used internally and externally, we would like to further improve the use of data for decision-making. This partly requires changing what data we collect.

- Action: We will review our results framework and evaluation activities in 2017 so that it better captures:
  - The Alliance's contribution to outcomes – particularly more qualitative and narrative evidence of changes in people's lives
  - The impact on the SDGs of strengthening community based organisations
  - The contribution of the Secretariat to the global strategy
  - The effectiveness of the Alliance as a network organisation

- Action: We will review the indicators used in the results framework to ensure they are in line with the latest global guidance to improve alignment with national reporting for LOs.
- Action: As suggested we will review and incorporate some of the evaluation questions used in this evaluation into our annual data reporting

#### **4.2 Clarify for LOs that the Alliance’s HIV focus remains relevant and inclusive for both HIV-focused LOs and those with wider remits**

It is important to continue these discussions as the Alliance partnership within a rapidly changing external global environment. Much work has been done in 2016 to ensure the partnership operates in an agile and flexible manner, ensuring that LOs and other partners find adequate entry points to connect within the global partnership even if their mission is linked more broadly to human rights, LGBTI, TB or Hepatitis C. As part of the discussions that took place as part of the updating of the Alliance’s strategy, the partnership agreed that our core mission needs to remain on HIV but with an understanding that HIV provides an excellent entry point to address broader human rights and development issues. This is a live discussion which will be continuously revisited in order for the partnership to remain relevant and to ensure that we are able to leverage individual work by LOs for the broader work on HIV within the context of the Sustainable Development Goals.

#### **4.3 Increase the visibility of the Alliance’s policy and advocacy among LOs and increase the channels for LOs to influence the policy agenda**

The revised Alliance strategy introduced a key focus on supporting and building Southern leadership in the Alliance. We now have a number of initiatives underway to build and support Southern leadership in policy and advocacy for change.

The Alliance Centres in Cape Town and Dakar (hosted by LOs) have been pulling together regional agendas on key populations and harm reduction, which will help inform our regional and global advocacy work. Similarly, the [PITCH](#) programme aims to support the development and implementation of national advocacy agendas. PITCH will strengthen the national level advocacy capacity of LOs and this will contribute directly to regional and global level advocacy.

We have also recently launched a new project to build advocacy capacity among LOs, implementing partners and networks, as well as create spaces for community voices to be present at regional and global platforms.

We hope this will lead to a more effective, co-ordinated and integrated Alliance approach to policy and advocacy which will draw strategically on the relative strengths, capacities, networks and voices of the whole partnership.

#### **4.4 Address the need to either re-define the Technical Support Hub model or decommission it**

Following an evaluation of the model, the Secretariat has decided to stop investment in the Technical Support Hub structures (overheads and salaries) by June 2017. Discussions on the way forward for technical support provision will take place with the Alliance LO Directors in February 2017. LO Hub hosts are evaluating if they will continue hosting hubs without Secretariat core costs.

- Action: Develop a new strategy for technical support provision.

#### **4.5 Define what the Alliance's particular added value is for operating in fragile states, and how it can best achieve this, in recognition of very practical limitations**

We acknowledge that our experience suggests that replicating the Alliance model might not always be appropriate in many fragile states, although we also note that the Alliance has been working through its model of independent LOs successfully in a number of fragile and conflict affected contexts for a number of years- such as in Burundi, Haiti and DRC. We recognise that there are opportunities for the Alliance to add value to the HIV response in fragile states and we continue to work with LOs who work in countries which are in increasingly fragile contexts. We plan to continue to support existing LOs who work in fragile and conflict affected states and use tools and strategies to ensure the safety, security and contingency plans are in place to support LOs who are operating in such contexts. We do not plan to expand our programming to work in other fragile and conflict affected states and settings.

- Action: Provide ongoing support for the management and mitigation of risks for LOs in fragile and conflict affected contexts.

#### **4.6 Increase the focus on climate change and resilience issues facing LOs**

Our strategy allows for LOs to embed the diverse economic, social, political and environmental contextual differences across countries, in the type of epidemic and the widening scope of the focus of some LOs, whilst also ensuring some common goals, strategic responses and values are shared. This would allow for LOs to develop areas of response to issues such as climate change.

Alliance person-centred programming approaches and our key strengths in building strong and resilient community systems, also create structures which can be used to respond to other emerging issues that people and communities affected by HIV can respond to.

- Action: Describe more clearly the links between building strong and resilient community systems and how they can contribute to the priorities set by communities themselves in other areas such as the effects of climate change.

#### **4.7 To enact the principles of community participation, LOs need to engage more proactively with IPs to support community engagement in decision making**

Our accreditation standards clearly set out the importance of community participation. However we accept that the evaluation found examples where this was not happening as well as it could.

- Action: Review accreditation standards to include more assessment of how LOs involve communities in decision-making.
- Action: Share examples of good practice (and tools used) to support community led organisations in decision-making spaces such as engagement in the development of National AIDS Plans and concept note development for the Global Fund.

## 5. Response to other suggestions in the evaluation

### 5.1 Improve the design of programmes based on a strong gender analysis, and better respond to gender inequality especially in the context of general populations

We note that there were concerns reported in the evaluation from stakeholders that gender is less visible in the new Secretariat structure, although we are not clear how widespread that view is. We have ensured that there is clear and visible leadership in the new Secretariat structure by making a dedicated post to further our work on gender equality across the Alliance. This post has recently been vacated and we are currently taking stock of the work done in this area (including the establishment of a Gender Delivery Network for LO staff, several policy and practice documents and some representation externally). Equally we continue to build up our SRHR and adolescent programming in particular with clear gender analysis. There remains strong commitment in both human and financial resources to continually improve our performance on gender. This will build on and complement our intersectional understanding of identities, key populations and human rights based approaches.

- Action: Update and improve gender sensitivity requirements in our accreditation standards and to ensure this is rolled out in the next cycle of accreditation.
- Action: Put in place a tool for assessing gender sensitivity at the design stage of all new programmes which come through the Secretariat.
- Action: Finalise, and ensure high levels of awareness of, our Gender Framework within the Secretariat and LOs.

### 5.2 Improve sustainability planning for service delivery interventions

Sustainability for service delivery interventions is a hugely challenging area, and we feel traditional donors could do more to help civil society organisations think through how this can be achieved. We are, however, committed to building sustainability into programme design. One of our sustainability strategies is for service delivery programmes to work closely with health systems, with a view to embedding interventions and securing government funding for these interventions. We agree with the evaluator's findings that this strategy has not been systematically applied in all programmes, and we commit to better incorporating this into programme management, for example in annual review and work planning meetings.

We also identify follow-on funding for programme interventions that will not be taken up and funded within health systems. Proactive identification of opportunities usually takes place in the final year of programmes. However, we agree with the evaluators that this approach has been at the macro level, for example targeting global and regional donors. There is scope to further engage with programme partners and other stakeholders at the local and national level to identify follow-on funding for programme interventions. This could be for the whole programme or for specific interventions. In the case of multi-country programmes, funding options for single-country or alternative country groupings should be explored.

In addition to this we have engaged in a number of activities to strengthen the resource mobilisation capacity of particular LOs

Our sustainability approach does not stop at simply ensuring that the flow of international aid money is maintained. We also work from the community outwards to ensure that the models developed are locally owned and delivered, that there is adequate local government buy in and that wider systems are strengthened through our interventions.

In order to reduce our reliance on donor funding cycles, the Alliance is investing in diversifying its funding base. Revenue from individual giving, service income and corporate ventures we hope will enable us to fundraise for programmes and interventions we have identified as priorities, including for programme exit strategies. Finally, we are advocating for an effective and equitable transition to domestic financing of the HIV response and will continue to work at national, regional and global level for this.

- Action: Ensure that clear transition, exit and legacy planning is in place for all major restricted contracts funded through the Secretariat.
- Action: Further improve our work in community systems strengthening for health.
- Action: Continue to provide targeted support to LOs in their own resource mobilisation capacities.